



PROJECT CHARTER

Behavioral Health Integration Workgroup

Version 3.0 – August 2015

Workgroup Summary

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| Chair/Co-Chair | Ross Edmunds, Dr. Charles Novak |
| Mercer Lead | Katie Falls, Maija Welton |
| SHIP Staff | Casey Moyer |
| IHC Charge | <ul style="list-style-type: none"> Lead the development of an integrated and coordinated behavioral healthcare (BH) patient-centered medical home system. The workgroup aims to support the Regional Collaboratives in helping patient-centered medical homes (PCMHs) move toward or enhance BH integration and to evaluate the current system regarding level of BH integration. |
| SHIP Goals | <ul style="list-style-type: none"> Goal 1: Transform primary care practices across the state into patient-centered medical homes. Goal 2: Improve care coordination through the use of electronic health records and health data connections among PCMHs and across the medical neighborhood. Goal 4: Improve rural patient access to PCMHs by developing virtual PCMHs. Goal 6: Align payment mechanisms across payers to transform payment methodology from volume to value. Goal 7: Reduce overall healthcare costs. |

Business Alignment

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| Business Need | <ul style="list-style-type: none"> Integration of BH and primary health is important to provide coordinated care in the PCMH model and establish appropriate linkages with the medical neighborhood. |
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| Success Measures | SHIP Desired Outcomes | Measurement | Workgroup's Role |
|------------------|--|--|--|
| | <ul style="list-style-type: none"> Improved patient access to PCMH-based care in geographically remote areas of Idaho. | <ul style="list-style-type: none"> Cumulative # (%) of Virtual PCMHs established in rural communities following assessment of need. Model Test Target – 50. | <ul style="list-style-type: none"> Collaborate with other workgroups to incorporate BH services in PCMH practices. |
| | <ul style="list-style-type: none"> Increase overall integration of the behavioral health care system through improved telehealth usage. | <ul style="list-style-type: none"> Cumulative # (%) of designated or recognized Virtual PCMH practices that routinely use Telehealth tools to provide specialty and behavioral health services to rural patients. Model Test Target – 50. | <ul style="list-style-type: none"> Support the Telehealth Council in expanding telehealth technology to enhance access to behavioral health and other specialty services. |

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| Success Measures | SHIP Desired Outcomes | Measurement | Workgroup's Role |
|------------------|--|---|--|
| | <ul style="list-style-type: none"> Increase connectivity of PCMH electronic health records systems with the statewide exchange. | <ul style="list-style-type: none"> Cumulative # (%) of designated PCMHs with an active connection to the Idaho Health Data Exchange (IHDE) and utilizing the clinical portal to obtain patient summaries, etc. | <ul style="list-style-type: none"> Collaborate and advise PCMH contractor to ensure practices are utilizing EHR systems fully to document data elements used for analytics reporting. |

Planned Scope

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| Deliverable 1 | Result, Product or Service | Description |
| | <ul style="list-style-type: none"> Evaluation of current levels of BH integration in Idaho within PCMH. | <ul style="list-style-type: none"> Conduct survey to gain an understanding of the current levels of BH/PH integration in the healthcare system. |
| Est. Timeframe | Start: 07/01/2015 | End: 02/28/2015 |
| Milestones | Event | Target Date |
| | <ul style="list-style-type: none"> Administer provider surveys. Review collaboration/integration models in Idaho and nationally. Choose or develop a BH Integration/Collaboration evaluation survey. | <ul style="list-style-type: none"> November 2015 February 2016 |
| Deliverable 2 | Result, Product or Service | Description |
| | <ul style="list-style-type: none"> Methodology for baseline and ongoing tracking of levels of BH integration. | <ul style="list-style-type: none"> Updated annual survey of current levels of BH integration, developing actionable recommendations from the data gleaned from surveys. |
| Est. Timeframe | Start: 12/30/2015 | End: 04/30/2016 |
| Milestones | Event | Target Date |
| | <ul style="list-style-type: none"> Develop a methodology for administering and analyzing the evaluation tool. | March 2016 |
| Deliverable 3 | Result, Product or Service | Description |
| | <ul style="list-style-type: none"> Evidence-based BH screening tools. | <ul style="list-style-type: none"> Identify screening tools that could be adopted in PCMHs. |
| Est. Timeframe | Start: 12/30/2015 | End: 05/31/2016 |

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| Milestones | Event <ul style="list-style-type: none"> Identify evidence-based screening tools. Work with the SHIP Identified Partner to incorporate screening tools in PCMH. | Target Date <ul style="list-style-type: none"> March 2016 April/May 2016 |
| Deliverable 4 | Result, Product or Service <ul style="list-style-type: none"> Framework of options available for PCMH to integrate in the practice. | Description <ul style="list-style-type: none"> Recommendations of BH/PH models of integration for adoption in Idaho. |
| Est. Timeframe | Start: 03/01/2016 | End: 04/01/2016 |
| Milestones | Event <ul style="list-style-type: none"> Identify and reach out to current PCMH to discuss Idaho models of BH integration. Develop framework of integration options. | Target Date <ul style="list-style-type: none"> February 2016 March/April 2016 |
| Deliverable 5 | Result, Product or Service <ul style="list-style-type: none"> Recommendations regarding BH incentives. | Description <ul style="list-style-type: none"> Recommend incentives that would be effective in promoting BH/PH integration in Idaho. |
| Est. Timeframe | Start: 07/01/2015 | End: 04/01/2016 |
| Milestones | Event <ul style="list-style-type: none"> [TBD] [TBD] | Target Date <ul style="list-style-type: none"> [TBD] [TBD] |
| Deliverable 6 | Result, Product or Service <ul style="list-style-type: none"> Communications materials and presentations. | Description <ul style="list-style-type: none"> Provide outreach, education, and technical assistance regarding BH/PH to practices looking to become PCHMs. |
| Est. Timeframe | Start: 12/30/2015 | End: 04/01/2016 |
| Milestones | Event <ul style="list-style-type: none"> [TBD] [TBD] | Target Date <ul style="list-style-type: none"> [TBD] [TBD] |

Project Risks, Assumptions, and Dependencies

| Risk Identification | Event | H – M – L | Potential Mitigation | Potential Contingency |
|-------------------------------------|---|-----------|--|--------------------------------------|
| | <ul style="list-style-type: none"> Inadequate services in the community to meet BH needs identified in the primary care setting. | H | Increase access to BH services through telehealth. | Availability of telehealth services. |
| Assumptions | <ul style="list-style-type: none"> [TBD] | | | |
| Dependencies and Constraints | <ul style="list-style-type: none"> [TBD] | | | |

Project Reporting and Scope Changes

Changes to scope must be approved by the IHC after review by SHIP team.

Version Information

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| Author | Katie Falls (Mercer) | Date | 07/09/2015 |
| Reviewer | Gina Westcott (Behavioral Health) | Date | 08/26/2015 |

Charter Approval Signatures

Approval by the Workgroup on: September 8, 2015.

Final Acceptance

| Name / Signature | Title | Date | Approved via Email |
|-------------------|--------------------|------------|-------------------------------------|
| Dr. Charles Novak | Chair | 09/08/2015 | <input checked="" type="checkbox"/> |
| Ross Edmunds | Co-Chair | 09/08/2015 | <input checked="" type="checkbox"/> |
| Cynthia York | SHIP Administrator | 09/08/2015 | <input checked="" type="checkbox"/> |
| Katie Falls | Mercer Lead | 09/09/2015 | <input checked="" type="checkbox"/> |