

Meeting Minutes -



Arkansas
Behavioral Health
Integration Network

Location: Zoom

Date: March 14, 2024

Meeting: AR CoCM Community Stakeholders Meeting

Time: 12:00-1:00

Attendance

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|--------------------|--------------------|--------------------|
| 1. Julie Carman | 4. Nicole Portrude | 7. Brea Strong |
| 2. David Jones | 5. Tisha Deen | 8. Mark Jansen |
| 3. Caitlyn Johnson | 6. Virna Little | 9. Marybeth Rogers |

Agenda Items

1. Welcome/Updates/Announcements
2. SAMHSA BHI-Hub Executive Committee Meeting Report CoCM Grant Review
3. Local & National CoCM Updates
4. Update from DHS
5. UAMS Update
6. Upcoming Events

Summary:

- Tisha Deen, Director of Behavioral Health Integration at UAMS, stood in for Kim and led the meeting and included introductions from participants. The team discussed challenges and rewards of their work in integrated care, updates on executive committee meetings, patient consent issues, updates from the Department of Health and Human Services, progress of collaborative care programs, and the difficulties in supporting Medicaid patients due to unsustainable reimbursement issues.
- **Executive Committee Updates and Informed Consent Concerns**
 - The executive committee meetings have primarily been structural and focused on introductions. The subcommittees are working on evaluation pieces and implementation, with sustainability being moved to the State planning commission group. A significant part of the discussion revolved around the issue of informed consent, and concerns that requiring an additional signed consent could deter patients from engaging. Also noted, was that they are working on contracts and have ongoing discussions with SAMHSA about their expectations.
- **Patient Consent Challenges and Solutions**
 - Concerns were raised about the challenges of obtaining written consent from patients, especially in remote environments, and the potential barriers to this process. It was suggested to incorporate consent into the yearly consent form provided by primary care providers, while a clarification was made that the consent must be given and documented by the primary care provider and promoted ongoing advocacy efforts to modify this requirement. The team also discussed potential issues related to the SAMHSA grant's data collection, which may require specific informed consent. The topic of patient consent was further discussed, particularly in relation to annual renewals, with Mark sharing his recollections from his practice days and expressing uncertainty about the regulations in a private office setting and the possibility of additional requirements related to mental health.
- **HHS Updates, Collaborative Care Framework, and National Updates**

- Department of Health and Human Services (HHS) updates noted that SAMHSA was beginning to review forms submitted in October, which might lead to further changes. Also discussed was the need for a framework on collaborative care in Arkansas, which would guide their next steps. Tisha suggested a meeting with David and Paul to discuss data and information from their existing clinic. National updates emphasized that payment for collaborative care and achieving financial sustainability were major challenges across health systems.
- **Grant, Hiring, Epic Build, Educational Materials, Psychiatric Consultant**
 - There was excitement about the SAMHSA grant and its potential outcomes. UAMS mentioned the challenges they faced in hiring licensed mental health professionals and the need to change job descriptions as well as the progress on the Epic build for the registry and the approval of a new project. Educational materials and a site visit by Dr. Radsliff and Monica Harris were also discussed. Lastly, UAMS announced the implementation of a psychiatric consultant, Jonathan Chastain, in Palm Bluff.
- **Collaborative Care Programs Progress**
 - Inquiries were made about the progress of collaborative care programs and the team's activities. Boston Mountain shared that they were in a state of suspense, having paused some initiatives due to uncertainty about the direction to take. The importance of provider education, scalability, and sustainability in their operations was emphasized and mentions were made that they were focusing on expanding their reach and efficiency, hiring collaborative care managers, and working with large partners such as Baptist Health.
- **Medicaid Challenges and Solutions in Arkansas**
 - The team discussed the challenges faced in supporting Medicaid patients in Arkansas due to unsustainable reimbursement issues. They agreed on the need to develop a framework for Medicaid policies in Arkansas and secure approval from CMS for any changes. Virna offered to share data on the thousands of patients they have cared for in Arkansas and drafts of Medicaid language and a document supporting cost reduction. The team also discussed the consultation process in Boston Mountain's (BM) team and the need for more specificity to meet the collaborative care requirement. Virna also suggested a consultation document and offered to help with billing issues, which BM agreed to. They also discussed the prevalence of opioid overdoses in Arkansas and the potential of implementing HBA and interprofessional billing codes to provide more revenue and support for the consultation process.

Next steps

- Tisha will reach out to Virna to pull together data for DHS on the thousands of patients, 6+ that Concert Health has cared for in AR with outcomes and suicide reduction.
- Tisha, Nicole, and Julie will discuss with Paul and David about the implementation of collaborative care in Arkansas, using data and information from UAMS.
- The team will discuss billing and reimbursement issues at a later time.
- Tisha, Virna, and Julie will discuss specifics of the collaborative care consultation requirement.

Important Date(s):

- ▶ March 11th – June 9th (ongoing), Using the Collaborative Care Model In Populations with Serious Mental Illness virtual learning provided by SMI Adviser, [registration link](#)
- ▶ Thursday, April 11th, 8-4:30, ABHIN's 2024 Behavioral Health Integration Conference: *Cultivating Connections – Strengthening Provider Collaboration in Behavioral Health Integration* [BHI website](#), [registration link](#)
- ▶ Friday, April 12th, 12:00, AR CoCM Community Stakeholder's Meeting
- ▶ April 17th – 18th, CFHA's Spring Virtual Conference, [Breaking Silos, Building Bridges: Uniting for Whole Person Health](#)
- ▶ Saturday, June 1st, Arkansas Psychiatric Society 2024 Annual Conference, [Untangling the Web](#)

of Addictions: CoCM and Substance Use Disorders

- ▶ Friday, June 7th, 8-5:00 – AIMS 3rd Annual Integrated Care Conference, *Integrated Care Conference 2024: Cultivating Integrated Care within the Behavioral Health Ecosystem*

CoCM Resources:

- ▶ [ABHIN CoCM Training & Resource webpage](#)
- ▶ [CMS Updated FAQ, Billing Medicare for BHI Services](#)
- ▶ American Psychiatric Association, [Using the Collaborative Care Model for Special Populations](#)
- ▶ Journal of the Arkansas Medical Society, [Obesity, Addiction, and all Mental Health Disorders ARE Chronic Medical Diseases](#)
- ▶ North Carolina CoCM Resources:
 - Webinar, [Integrating Physical and Behavioral Health Through Collaborative Care: A Roadmap from North Carolina](#)
 - [A Roadmap for Statewide Capacity Building to Integrate Physical and Behavioral Health Care](#)
- ▶ Bipartisan Policy Center, [Strengthening the Integrated Care Workforce, You Tube](#)
- ▶ [CFHA Collaborative Care Model Special Interest Groups \(SIG\)](#)
- ▶ [AIMS Center](#)