Meeting Minutes -



Meeting: AR CoCM Community Stakeholders Meeting

Location: Zoom

Date: February 14, 2025

Time: 12:00-1:00

Attendees:

- 1. Kim Shuler
- 2. Patty Gibson
- 3. Amanda Lunsford

- 4. Miste Trent
- 5. Caitlyn Johnson
- 6. David Jones

- 7. Sarah Bernes
- 8. Brea Strong
- 9. Tisha Deen

<u>Agenda:</u>

- 1. Welcome/Updates/Announcements
- 2. IBHA Executive Committee Meeting Update
- 3. CoCM Update from DHS
- 4. UAMS Update
- 5. CoCM Events and Resources

Meeting Notes:

SUMMARY:

The team discussed the implementation of collaborative care statewide, focusing on training capacity, technical assistance, and policy implementation. They also shared updates on the progress of their implementation, highlighting the challenges faced and the successes achieved, particularly in Eastern Arkansas and UAMS. Lastly, they discussed the effectiveness of their care model, its potential to be expanded to the pediatric population, and upcoming events such as a conference and a webinar.

ABHIN UPDATE:

Kim provided an update on the hiring process for Eastern Arkansas, mentioning that six interviews were scheduled, and a second Behavioral Health Care Manager (BHCM) was expected to be hired soon. She also announced that the ABHIN team would be traveling to Eastern Arkansas on February 27th for a half-day training session with the providers and mentioned that the upcoming conference would feature a panel presentation with the Woven doctors and a presentation on CoCM. Kim also

reassured David of their availability and readiness to assist in helping Medicaid roll out CoCM, highlighting the progress made in Eastern Arkansas with the systematic caseload reviews. She also mentioned positive feedback from the psychiatrists involved in the project, emphasizing the importance of the psychiatric consultant's role in the model. Kim also mentioned that a recording of a webinar featuring Dr. Jason Onugha and Dr. Cyril Appiagyei discussing their interest in the model is available on the ABHIN website.

DHS UPDATE:

David shared that he had a meeting with Paula, who suggested that the team should focus on looking at training capacity, technical assistance, and policy implementation before rolling out collaborative care statewide. Paula also mentioned that they should start looking at how to handle the demand when multiple physicians' offices want to be on board. Kim added that North Carolina is a good model for this, with 49 active clinics currently using collaborative care. The team agreed that technical assistance is crucial for the successful implementation of collaborative care. David emphasized his reliance on the team for assistance and support.

UAMS UPDATE:

Tisha then shared updates on the progress at UAMS, highlighting the successful onboarding of a second psychiatric consultant, Dr. Joseph Socal, and four behavioral health care managers. She also mentioned the initiation of case reviews in five clinics and the positive engagement with patients. She went on to discuss the effectiveness of their care model, highlighting its ability to reduce medical and mental health use, particularly in emergency rooms. She emphasized the model's holistic approach, which includes psychiatric consultants and care managers, and how it has improved patient engagement with the primary care team.

Kim expressed excitement about the model's potential to be expanded to the pediatric population but also raised concerns about accessing the necessary resources for its growth. Tisha and Kim agreed on the importance of considering these issues as the program expands.

Continuing with the progress of their implementation, she highlighted the challenges faced in Pine Bluff and the successes in Texarkana and Helena. Caitlyn expressed curiosity about the engagement with care managers and the quality of referrals. Tisha explained that they are still in the working phase, with 15 patients on Carson's caseload. They are focusing on high utilizers and are working on systematic referrals. Tisha also mentioned their efforts to establish child psychiatry time, particularly in pediatric clinics. She concluded by sharing case study write-ups to illustrate their work and patient progress.

Tisha presented two patient examples from her work in internal medicine, focusing on the effectiveness of collaborative care in managing patients' mental health. The first patient, Katrina, a black female in her fifties, presented with obesity, high blood pressure, and prediabetes, along with elevated PHQ-9 and GAD-7 scores indicating moderate to severe levels of depression and anxiety. Over three months, Katrina received six telephone calls with a behavioral health care manager and three case consultations, totaling 88 minutes of care. Her scores significantly improved, and she met her goals of improved coping with stress, improved mood, and reduced smoking. The second patient, Matthew, a black male in his twenties, presented with elevated levels of anxiety and depression, and migraines. Over four months, Matthew received six telephone calls with the behavioral health care manager and three case consultations of care. His scores also improved, and he regained employment and learned skills to manage his migraines. Both patients showed significant improvement in their mental health and quality of life after receiving collaborative care.

Important Date(s):

- Tuesday, April 8th, 8:00 4:30, Little Rock, AR <u>3rd Annual BHI Conference</u>
- Thursday, April 10th, 8:30 11:30 Little Rock, AR Suicide Prevention Update Conference
- May 2nd 4th, Virtual training presented by Reach Institute and Blue & You Foundation Adult Behavioral Health in Primary Care (See attached flyer for more information)
- Second Tuesday of each month, 1:00 2:00 (CST) AIMS Center's BHCM Learning Community

CoCM Resources:

- ABHIN CoCM Training & Resource webpage
- ► <u>AIMS Center: Collaborative Care Monthly Finance Office Hours</u>
- ► AIMS Center: Collaborative Care Monthly Implementation Office Hours
- ► ABHIN While You Wait Podcast now streaming:
 - o <u>Amazon</u>
 - o Spotify
 - YouTube

