

Meeting Agenda Board of Directors Work Session June 26, 2024, 11:00 AM GVSU Muskegon Innovation Hub 200 Viridian Dr, Muskegon, MI 49440

- 1. Welcome and Opening Comments Mr. Stek
- 2. Public Comment
- 3. BHTEDs Wakely Presentation Jason Stading
- 4. OHH/BHH Presentation
- 5. Public Comment
- 6. Adjourn



Opioid Health Home (OHH) & Behavioral Health Home (BHH)

LRE Board of Directors Update.

June 26, 2024





Agenda

- Introductions
- What is a Health Home?
 - Opioid
 - Behavioral
- How do these differ & complement CCBHC?
- Finance
- Codes
- Contact Information





What is an OHH/BHH?

- Although the name suggests it is a place, it's not! Opioid Health Home is a model of care that coordinates health and social needs.
- OHH/BHH allows for enhanced, recoverycentered services through a personalized plan from a team of providers.
- OHH will become an SUD home effective 10/1. This will allow for Alcohol and Stimulants to be a covered service in addition to Opiates.

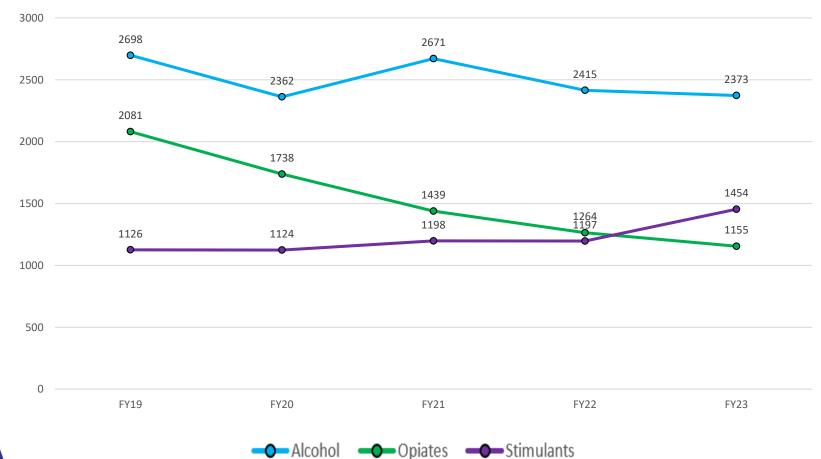


HEALTH HOME CORE SERVICES

Care Coordination Health Promotion **Comprehensive Care** management • Appointment • Providing patient Making assistance, and family • Development of an including education individual coordinating care/treatment transportation plan Comprehensive Individual and Family Referral Community and Transitional Care Support **Social Services** • Post-discharge outreach Increasing patient and Identifying family skills and to ensure appropriate communityfollow-up services based resources engagement

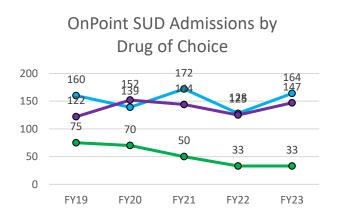


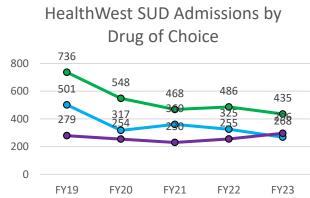
Regional SUD Trends



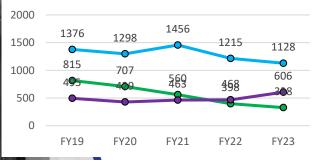
Regional SUD Admissions by Drug of Choice

Regional SUD Trends - CMH

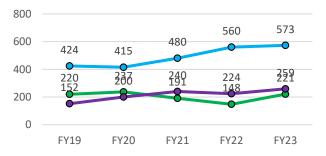




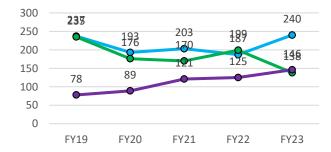
Network180 SUD Admissions by Drug of Choice







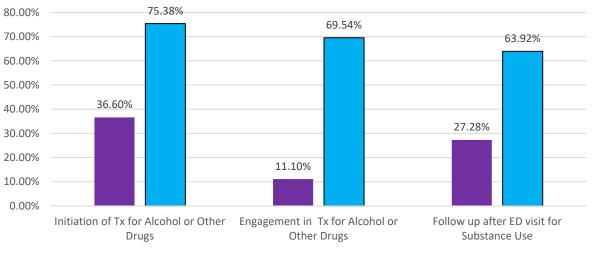
West Michigan SUD Admissions by Drug of Choice



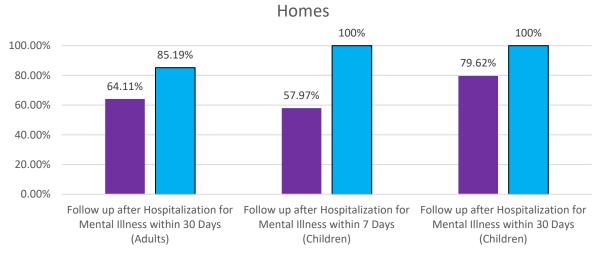
Alcohol — Opiates — Stimulants

For the People We Serve

Improved Outcomes for Participants in Opioid Health Homes



State Average OHH Average



Improved Outcomes for Participants in Behavioral Health

State Average BHH Average

CCBHC & Medicaid Health Homes

CCBHC

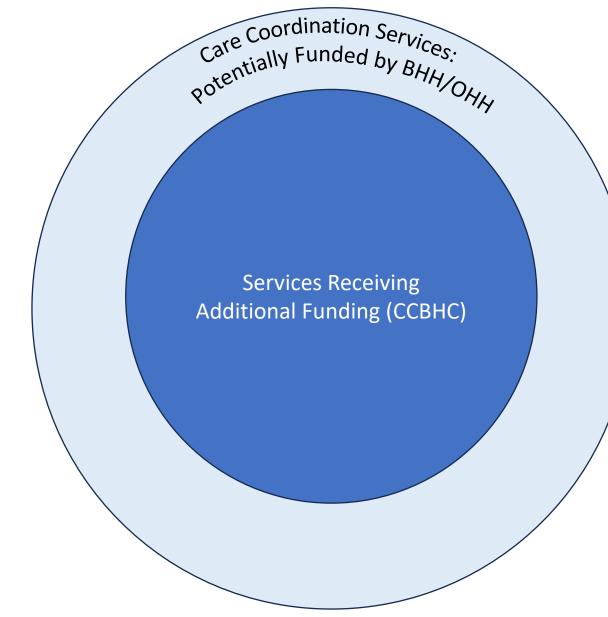
CCBHCs are required to provide outpatient behavioral health services to anyone with a behavioral health diagnosis, regardless of insurance status (Medicaid or Non-Medicaid), ability to pay, and geographic location.

Medicaid Health Homes

Health Home providers integrate and coordinate all primary, acute, behavioral health, and long-term services and supports to treat the whole person with an emphasis on peer support and community health workers. Health Homes are not charged with providing behavioral health services, instead providers deliver comprehensive care management.









Finance Definitions

- Penetration rate: % of Medicaid eligible cases to be enrolled in the program and receive monthly services.
- **BHH/OHH Case Rate:** a monthly amount paid to the BHH/OHH for care coordination.
- **Revenue** = Enrollees x Case Rate
- **Calculations**: Revenue and penetration rate calculations are annualized and based on data for our region and penetration rates from other regions.
- Enrollment Estimates: It's estimated 1-2% of eligible consumers will be enrolled. (MDHHS stated 2% and up to 3% by the end of FY25.)





Behavioral Health Home

FY25 Projected	BHH	
	Monthly Cases Enrolled (Penetration Rate)	Annual Revenue Increase by CMHSP
СМНЅР	1-2%	Annualized
Health West	140-279	\$ 588,242 - \$ 1,176,485
Network 180	298-596	\$ 1,254,429 - \$ 2,508,859
OnPoint	53-107	\$ 225,224 - \$ 450,449
Ottawa	93-187	\$ 393,780 - \$ 787,560
West Michigan	48-96	\$ 201,985 - \$ 403,970
Total	632-1265	\$ 2,663,661-\$ 5,327,323





Opioid Health Home

FY25 Projected - OHH		
	Monthly Cases Enrolled (Penetration Rate)	Annual Revenue Increase by CMHSP
CMHSP	1-2%	Annualized
HealthWest	23-46	\$ 90,877 - \$ 181,755
Network 180	49-98	\$ 193,719 - \$ 387,438
OnPoint	7-13	\$ 26,279 - \$ 52,557
Ottawa	12-25	\$ 48,774 - \$ 97,548
West Michigan	8-17	\$ 32,988 - \$ 65,977
Total	100-199	\$ 392,637 - \$ 785,275





CMH Requirements



Already Implemented

- Maintain a provider network & verify staff credentials
- Ensure the 6 Core Services are met Required for CCBHCs
- Adhere to the federal and state guidelines
- MOUs with MAT Clinics

Additional **Requirements**

- WSA Identify, Enroll, disenroll, refer, & transfer
- Meet billing & documentation requirements
- A Health Home lead (staff)
- Add Care Coordination Staff as increased case load demands
- Update Policies and procedures
- Attend State & Regional meetings as prescribed
- Additional documentation to maintain Health Home enrollment



• Questions?

• Comments?

•Thoughts?



- Mary Dumas, CEO <u>marymd@lsre.org</u>
- Stephanie VanDerKooi, COO stephaniev@lsre.org



