

County of Los Angeles – Department of Mental Health

**Healthy Way LA**  
**LA's Low Income Health**  
**Plan in the Context of Health Care**  
**Reform Readiness**

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**Health Reform Readiness:**  
**Status of Efforts in Los Angeles County**

- ❖ About Los Angeles County
  - Very Large County
    - ❑ 10 million residents in over 4,000 square miles
- ❖ 8 separate Service Planning Areas
- ❖ Departments of Health, Mental Health, and Public Health (including Substance Abuse) are separate but report to the CEO and are grouped in one "cluster" for planning and oversight
- ❖ 3 general County hospitals with 4th opening in 2013




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**Health Reform Readiness:**  
**Status of Efforts in Los Angeles County**

- ❖ Los Angeles County Department of Mental Health (LACDMH)
  - Local mental health plan; operates specialty mental health services to:
    - ❑ 250,000 individuals annually
    - ❑ With \$1.89 billion gross Fiscal Year (FY) 2012-13 budget
  - Network:
    - ❑ 47 directly operated outpatient clinics (108 sites)
    - ❑ 122 legal entity contract providers (388 sites)
  - Services delivered annually to 35,909 individuals in Los Angeles County jails
  - 8,857 youth receive mental health services in juvenile justice programs annually




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**Health Reform Readiness:  
Status of Efforts in Los Angeles County**

❖ Variety of initiatives provide opportunities to prepare:

- Migration of SPDs into managed care
- 1115 Waiver and the LIHP (Healthy Way L.A.)
- Mental Health Services Act
  - Prevention and Early Intervention
  - Innovations
  - Workforce, Education and Training
- Board of Supervisors' Initiatives
- Los Angeles County Governance Structure




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**Health Care Reform Readiness:  
Coverage Expansion**

❖ Objective 1: Ensure Network Capacity (LIHP)

- DMH co-locations with DHS
- Enhance contracts with 22 legal entities
- Develop limited scope contracts with 33 Community Partner agencies and 17 Ryan White providers
- FY 2011-12 HWLA/LIHP outpatient services delivered to
  - 13,192 individuals with serious mental illness
  - 11,405 individuals with acute mental health disorders




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**Health Care Reform Readiness:  
Coverage Expansion**

- ❖ Objective 2: Ensure care coordination through strategic alignment of providers (LIHP)
- ❖ Objective 3: Ensure timely access through developing and monitoring referral tracking system (SPD; LIHP)
- ❖ Objective 4: Develop workforce capacity through expansion and development (MHSa WET and PEI)
- ❖ Objective 5: Implement technology that can enhance care (MHSa; grant)
- ❖ Objective 6: Develop EHR and HIE (MHSa IT; Los Angeles County Initiative)




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**Health Care Reform Readiness:  
System Redesign**

- ❖ **Objective 1:** Build new structural models
  - Bidirectional care
    - Co-location/integration (PEI; LIHP)
    - Strategic Partnerships (PEI; LIHP)
  - Integrated community-based teams (BOS)
  - Integrated Team adaptations for special populations (MHSA Innovations)
- ❖ **Objective 2:** Introduce evidence-based mental health treatment strategies
  - Mental Health Integration Program – University of Washington AIMS Center (MHSA PEI; LIHP)
  - FBP menu (MHSA PEI)

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**Health Care Reform Readiness:  
System Redesign**

- ❖ **Objective 3:** Ensure effectiveness of new integration models
  - Outcome evaluation of Project 50 (BOS), Innovations (MHSA), and HWLA (PEI, LIHP) Programs
- ❖ **Objective 4:** Ensure integration of substance abuse services
  - COD assessment and treatment as standard of care
  - Integration of substance abuse providers in treatment teams/programs
    - Urgent Care Centers
    - Project 50
    - Innovations

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**Health Care Reform Readiness:  
Payment Reform**

- ❖ Challenge of preparing for the unknown
- ❖ Work with providers, other counties on defining roles/options for public mental health system
- ❖ **An Early Step:** California Coordinated Care Initiative (Dual Eligibles Pilot) in a 2-plan county
  - Use of integrated provider network to avoid discontinuity in care
  - Joint care management teams determine authorization for payment and level of care
  - Differing levels of case management intensity
  - Use of care management algorithms for authorization for service reimbursement

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*Safety net, outcomes, and costs*

- Health care reform legislation has linked the ability to demonstrate quality outcomes with managing costs. The changes underway in the health care environment—universal coverage, delivery system design, and payment reform—make bidirectional integration of MH/SU services with health care more important than ever before, especially in systems that historically have served the safety net population.




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*LAC DMH as a Mental Health Authority*

- Our Reality: LACDMH continues as the local mental health authority, overseeing and providing specialty mental health services beyond January 2014
- Current 1915b waiver in effect until 2015




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*LAC DMH as a Behavioral Health Provider*

- LACDMH is ideally suited to be the public sector behavioral health provider in the world of health care reform due to our comprehensive, countywide culturally- and linguistically-competent continuum of specialty mental health services and supports for the Medi-Cal population, including:
  - TAY, adults and older adults with serious and persistent mental illness
  - Children and TAY with Serious Emotional Disturbance
  - Individuals of all ages who meet Medi-Cal medical necessity criteria




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*LAC DMH as a Special Populations Provider*

- **Our Core Mission**
  - Provide services to special populations for whom the County has a mandated duty:
    - Adults in jail settings
    - Adolescents in juvenile justice programs
    - Children and youth in specialized foster care
    - Individuals who are conserved
    - Persons supervised under AB 109




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*LAC DMH as a Safety Net Provider*

- **Our Core Mission (con't)**
  - Deliver prevention & early intervention services with the community (e.g., schools, faith-based organizations)
  - Offer safety net services to LA County residents
    - Residually uninsured individuals
    - Psychiatric mobile response
    - Outreach & engagement to vulnerable populations
    - Disaster Response




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*LAC DMH as an Exchange Provider*

- **Our Core Mission (con't)**
  - Expanding Our Horizons Expanding Our Horizons
    - Provide specialty mental health services for individuals in the Exchange – particularly rehabilitation option services and early intervention
    - Provide acute services for individuals in the Exchange
      - o Mental health urgent care
      - o In-home mental health services for frail individuals




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- Our Preparation under Healthy Way LA
  - Coverage/network capacity expansion
    - Co-location of specialty mental health providers in primary care settings
    - Delivery of evidence-based behavioral health services in Federally Qualified Health Centers
    - Co-location of primary care service delivery teams in specialty mental health settings, including residential treatment programs



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- Our Preparation under Healthy Way LA (con't)
  - Partnerships between primary care clinics and outpatient mental health providers through strategic alignment in all areas of Los Angeles County.
  - Implementation of three Innovative Integrated treatment models, including the Integrated Mobile Team, Integrated Clinic Model and Integrated Service Model.



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- Our Preparation under Healthy Way LA (Con't)
  - Workforce Development
    - Training in evidence-based practices with demonstrated effectiveness in primary care settings (MHIP); over 200 clinicians trained
    - Development and implementation of training for individuals with lived experience as promotoras and health navigators
    - Psychiatric consultation service established in two telehubs



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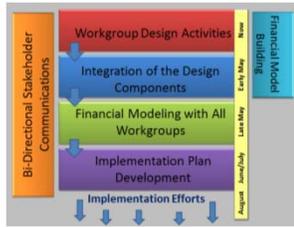
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• Our Work in Progress




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• Our Work in Progress (con't)

10 Workgroups:

1. Behavioral Health Centers of Excellence
  - Behavioral health homes
  - Treat to target
  - Levels of care
  - Care transition teams
2. Primary Care/Behavioral Health Integration
  - Bi-directional care
  - Integration of primary care into mental health settings
  - Advocacy and education of primary care




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• Our Work in Progress (con't)

3. Health Neighborhoods
  - Identify and foster necessary relationships to coordinate care
  - Build on early intervention strategies for vulnerable individuals and families
  - Improve the health of the population
4. Client Experience
  - Ensure a positive experience of care
  - Access: clinic re-design
  - Facilities: site improvement project
  - Consumer satisfaction: customer service training; site-based project




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• **Our Work in Progress (con't)**

- 5. *Hot-spotting*
  - Decrease avoidable re-hospitalizations/ER use
- 6. *Financial & Clinical Modeling*
  - Centralization of certain business functions, provider relations, credentialing
- 7. *Workforce Excellence*
  - Workforce expansion
  - Training of existing workforce
  - Develop workforce that functions at top of skill level

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• **Our Work in Progress (con't)**

- 8. *Technology Solutions*
  - Complete development of IBHIS, EMPI, LANES
  - Telepsychiatry expansion
  - E-consult
  - Computers for field-based teams
- 9. *Outcomes & Performance Measurement*
  - Develop outcomes, data collection and reporting at client, program, system level
- 10. *Managed Care Design*
  - Utilization Management

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