

AGENDA ITEM: Presentation: SAMSHA Health Home Initiatives

ENCLOSURES:

OTHER MATERIAL RELATED TO ITEM:

ISSUE:

Health Homes have been identified as one of the essential elements of Healthcare Reform in the Healthcare Reform (HCR) Committee’s Component Charter. Consequently, Brenda Goldstein, Lifelong Medical Care, will discuss Health Home Initiatives in a presentation addressing the following questions:

- Can you describe the SAMHSA health homes for SMI – what do these programs look like, what are their goals, what are any emerging data around outcomes?
- What else is happening in CA to get ready for health homes for individuals with SMI? How prepared is the behavioral health system for this move? How prepared is the primary care system for this move?
- How are consumers involved in the development, operation, and evaluation of the health homes that you know of?
- What groups are working on developing health homes for individuals with SMI? Are the ongoing processes that the Planning Council could plug into?
- What do you think are the biggest areas of opportunity and concern in the move to health homes for individuals with mental health issues?

BACKGROUND:

Health homes are population-based integrated care model targeting the provision of care to people with chronic conditions. Health homes, as a model, are an outgrowth of the medical home model. The health home model builds on the medical home model’s focus on acute care by incorporating linkages to other community and social supports, and enhancing coordination of medical and behavioral health care in order to better meet the needs of people with multiple chronic illnesses. Though they are similar, there are some important key differences between the two models.

The following table shows how health homes differ from patient-centered medical homes:

Category	Health Homes	Medical Homes
Population Served	Individuals with approved chronic conditions.	All populations
Staffing	May include primary care practices, community mental health centers, federally	Are typically defined as physician-led primary care

	qualified health centers, health home agencies, ACT teams, etc.	practices, but also mid-level practitioners.
Payers	Currently are a Medicaid-only construct	In existence for multiple payers: Medicaid, commercial insurance, etc.
Care Focus	Strong focus on behavioral health (including substance abuse treatment), social support, and other services (including nutrition, home health, coordinating activities, etc.)	Focused on the delivery of traditional medical care: referral and lab tracking, guideline adherence, electronic prescribing, provider-patient communication, etc.
Technology	Use of IT for coordination across continuum of care, including in home solutions such as remote monitoring in patient homes	Use of IT for traditional care delivery

Background on Lifelong Medical Care

LifeLong Medical care provides high-quality health and social services to underserved people of all ages; creates models of care for the elderly and people with disabilities; and advocates for continuous improvements in the health of our communities. Clinical Services provided are the following:

- Family Practice
- Dental clinic: comprehensive range of dental services
- Prenatal care: Over 5,000 prenatal care visits per year and availability of certified nurse mid-wives
- Adult medicine
- Pediatric care
- Women’s health
- Chemical dependency services