CONTEXT & FRAMEWORK FOR ACTION:

ACCOMPLISHMENTS TO DATE

WHAT STAKEHOLDERS HAVE TOLD US

HEALTH CARE REFORM

Holistic Array

Financing Strategies

Infrastructure

Performance & quality Improvement

Consumer & Family Engagement

Workforce Development
Purpose of this Presentation

- It is an Introduction to the Strategic Plan
- Highlights each component of the Framework for Action, emphasizing the guiding values and principles:
  - *What we believe*
  - *What is important to move forward*
- Timeline for Action steps - FY11, FY12, FY13
- Encourage this to be shared with constituents.
- Formal feedback by **November 12th**
The Context for the Strategic Plan

- Accomplishments to Date
- What we have heard from You
- Opportunities in Health Care Reform
Accomplishments to Date:

- Linking 2008-2010 Collaborative Plan goals to the Framework for Action

- Major accomplishments have built a strong foundation for the framework for action
What we have heard from you:

- Communities desire a system that is bottom-up
- Community-based, recovery focused
- Clinical integration of behavioral health and physical health services
  - Informed strategies in **Holistic Array of Services**
- Fragmented system jeopardizes recovery and wellness
- Rural & frontiers areas – better access
- Culturally appropriate
- Integrate prevention into the continuum of services
  - Informed strategies in **Infrastructure**
- Improve communications between state and local communities
- Increase the sharing of data on types, number and quality of services across providers in local systems of care
  - Informed strategies in **Performance & Quality Improvement**
What we have heard from you:

- Include perspective of consumers and family members to improve their local behavioral health system
- Support consumers & family in self advocacy for service
- Support transportation, develop workforce, expand supportive housing
  - Informed strategies in Consumer & Family Engagement
- Expand access to Peer/Family Specialist
- Partner with State & SE to plan workforce needs, identify technical assistance
  - Informed strategies in Workforce Development
- Clients must be at the center of decisions related to financial decisions
  - Informed Financial Strategies
Opportunities in light of Health Care Reform:

- Parity – includes behavioral health in the essential benefit package required for the new health insurance exchanges
- Elimination exclusions for pre-existing conditions
- Significant emphasis on prevention and wellness
- Expands coverage of population
- Creation of *health homes* for individuals with chronic conditions (aka, medical homes, clinical homes)
- Clinical integration of behavioral and physical health
- Electronic health records
Highlighting the Framework for Action

- What we believe and What’s important as we move forward
HOLISTIC SERVICE ARRAY

What we believe

- New Mexico’s behavioral health service array must maximize personal and family choice – and be child or person centered, youth guided, and consumer or family driven
- All programs within the service array must emphasize wellness, and be recovery and resiliency oriented
- The service array must be community-based, integrated, and as comprehensive as possible
- Services throughout the array must be culturally competent and responsive to community needs
HOLISTIC SERVICE ARRAY

What is important as we move forward

- The service array includes community-based recovery and resiliency driven services and supports that are evidence-informed, outcome driven and culturally competent.

- Ultimately, spending be shifted from expensive and restrictive services to community based services and supports.

- To optimally position behavioral health in the context of health care reform, it is imperative that we build out the array to include services and supports that provide behavioral health prevention and promote wellness.
HOLISTIC SERVICE ARRAY

What is important as we move forward

- Recognize the opportunity in health care reform to move beyond our current imperative to provide a safety net for populations with severe behavioral health issues to a service array that provides more to a wider population.
INFRASTRUCTURE

What we believe

- New Mexico’s behavioral health infrastructure must be embedded in the community as a local system of care and its networks and linkages and be responsive to community issues.

- Our services, strategies, and outreach must always be culturally competent in the fullest meaning of culture.

- All services must be integrated within a recovery and resiliency model and demonstrate results, outcomes in the real lives of people and effectiveness paired with efficiency.

- Every service must be designed with a person-centered focus, always remembering that services are meant to support the hopes and potentials of real people.
INFRASTRUCTURE

What’s important as we move forward

- We must continue to develop Core Service Agencies (CSAs) as clinical homes that will serve and support populations with complex behavioral health needs, and eventually provide for their primary care needs.
- Primary care and behavioral health have to be deliberately aligned and ultimately integrated.
- Person-centered care and the integration of primary care and behavioral health will require the development of local systems of care.
- Attention to infrastructure development in rural, frontier and tribal areas is also critical.
PERFORMANCE & QUALITY IMPROVEMENT

What we believe:

- Strong practice models are at the heart of effective care.
- Quality improvement & evaluation should be used routinely in all programs; they can improve practice & result in positive client & community outcomes. Accountability & results should be expected at all levels of the system: state agencies, statewide entity & across individual providers.
- Clinical & financial decisions made on the basis of sound data are better decisions that can lead to improved outcomes. Data & performance results should be shared & discussed broadly.
- Not all programs are equal, some interventions work better than others. All work better when adapted to fit the individual’s needs & community context.
PERFORMANCE & QUALITY IMPROVEMENT

What’s important as we move forward

- Our focus must support processes that promote practice improvement, strengthen systems for assessing clients needs and functional levels, and determine which services or programs have the most impact on successful client outcomes.

- A targeted set of client and system performance measures should provide feedback on the effectiveness of the service delivery system and point to areas for improvement.

- We must routinely report performance indicators to stakeholders and the public and improve communication with providers about performance expectations.
PERFORMANCE & QUALITY IMPROVEMENT

What’s important as we move forward

- To improve outcomes, all major initiatives should be evaluated, results shared broadly, and improvements identified and implemented, with fidelity to proven models.

- Building communities of learning through Quality Service Reviews, collective learning groups, and school mental health communities of practice, will help us grow knowledge and skills.

- Successes in practice improvement should be celebrated across providers and with local community stakeholders.
CONSUMER & FAMILY ENGAGEMENT

What we believe

- People diagnosed with mental illnesses, trauma-effects, and behavioral health challenges contribute immensely to the well-being of society.

- Consumers, youth and family members who are informed and actively directing their own recovery will achieve better long term outcomes. Peer and consumer-operated services provide opportunities for independence, leadership, and expanded recovery options.

- Peer and family support is an important part of recovery and resiliency. Recovery is a life-long process that has many phases – consumers, youth, and family members must have access to information and resources as needed from their immediate circle of peers/friends and family; from their community supports; and from provider agencies.
CONSUMER & FAMILY ENGAGEMENT

What we believe

- Diverse groups of community members who mobilize to participate in broad coalition-based prevention and treatment efforts can change important norms, policies and practices that lead to resilient and healthy communities.

- Consumers, youth, and family members should be partners in strategic planning, policy development, priority setting, service implementation, resource allocation, and evaluation in order to create an integrated and effective system of care.
CONSUMER & FAMILY ENGAGEMENT

What’s important as we move forward

- True engagement will come when consumer, youth, and family voice is recognized and acted upon.

- Consumers, Youth and Families are most empowered when they can determine how the system serves their needs.

- Peers serving peers is a powerful component of recovery.
CONSUMER & FAMILY ENGAGEMENT

What’s important as we move forward

- Consumers who understand their rights and responsibilities can better benefit from treatment and recovery supports.

- Consumer, youth, and family voices are needed at all levels.
WORKFORCE DEVELOPMENT

What we believe

- Persons in recovery, family members, and natural supports are pivotal members of the workforce.

- New Mexico’s behavioral health workforce must utilize the best evidence-informed practices available.

- New Mexico’s workforce must reflect the diverse cultures of New Mexico.

- New Mexico must have a professional, culturally competent prevention and intervention workforce that emphasizes wellness and recovery and is trained to work in public behavioral health settings.
WORKFORCE DEVELOPMENT

What’s important as we move forward

- The state’s higher education system and licensing boards must train and support the growth of a professional workforce that possesses the appropriate skills and experiences to be recovery oriented, culturally competent, and prepared to work in the public sector.

- We can review and prioritize for implementation recommendations of the Task Force on the Behavioral Health Workforce Report, recruitment and retention strategies to expand the workforce, especially in rural, frontier and tribal communities.
WORKFORCE DEVELOPMENT

What’s important as we move forward

- The Collaborative must develop more opportunities for provider training and cross-agency collaboration, especially across member agencies of the Collaborative.

- Health care reform can offer way to create new teams and partners among independent practitioners as well as among provider agencies.

- We must strengthen, standardize, and improved licensure and certification standards.
FINANCING STRATEGIES

What we believe

- Funding for behavioral health services will be increasingly limited over the next few years. The on-going economic challenges require creative strategies to increase efficiency and more effectively utilize limited available dollars.

- Funding strategies can promote the integration of primary and behavioral health care.

- A focus on performance and outcomes suggests new options for financing that can improve our system over time. Fee-for-service funding strategies are limited and other funding options such as capitation and pay for performance should be initiated.
FINANCING STRATEGIES

What we believe

- Flexible funding strategies that encourage improvements produce better outcomes.

- We can and will purchase evidence-informed strategies that have proven outcomes – and that provide the least restrictive care within an individual’s home community.
FINANCING STRATEGIES

What’s important as we move forward

- It will be essential to develop financial strategies that provide the appropriate amount of financial flexibility while keeping focused on performance and outcomes and finding new ways to share decision-making with consumers, youth and family members.

- We must pilot and use innovative and effective funding strategies that produce improved practice and outcomes.

- Financial incentives can encourage the development of a comprehensive services array that includes health promotion and illness prevention, evidenced based and promising treatments, and strong aftercare and recovery services.
FINANCING STRATEGIES

What’s important as we move forward

- The Collaborative should explore options to braid more funding streams that together create more comprehensive service arrays. Departments should work together to increase efficiency in braiding all behavioral health funding.

- A menu of evidence-informed practices must be developed for prioritized funding that reflects both the best available research findings and the unique characteristics of New Mexico.

- The Collaborative should explore options to braid more funding streams that together create more comprehensive service arrays. Departments should work together to increase efficiency in braiding all behavioral health funding.
FINANCING STRATEGIES

- The Collaborative has been working over the past years to include funding for evidence informed-practices with proven outcomes. These efforts are moving New Mexico’s system from merely purchasing a set volume of services to purchasing the most effective services and supports.

- Additional financial strategies are needed to provide incentives and flexible strategies to pay for system performance, reward consumer outcomes and move toward clinical integration of primary and behavioral health services when appropriate.
Your input...

- Have the essential values been expressed upon which future actions should be based?

- What’s important to move forward? Anything missing?

- Are we missing important strategic actions?
  - How might they be strengthened?
  - Is the timing correct? (low hanging fruit vs. down the road)?
Next Steps

- September 28 & October 12, 2010: Meet with the Collaborative appointed Review Team

- October 19, 2010: Introductory Presentation to the Behavioral Health Planning Council and all of its subcommittees as well as other interested stakeholder group.

- October-November 12th: Post document on the Behavioral Health Purchasing Collaborative website for ongoing input.
  www.bhc.state.nm.us

- Send comments to:
  Leticia.Rutledge@state.nm.us
Next Steps

- December, 2010: Present final document to the Collaborative for its approval.

- December, 2010: Conduct briefings with the Transition Team for the new Governor.

- Early January, 2011: Present the plan to the Legislative Finance Committee and the Legislative Health & Human Services Committee for their review.

- January/February, 2011: Develop Work Groups to draft the Implementation Plan