

SFY 2014-15 Budget

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SPMI Health Homes and Other Community Medicaid Services

Problem: It is essential that a full continuum of care be made available for individuals being treated for mental health and addiction so that necessary services can be delivered in the most cost efficient setting as possible. This will also assist providers in keeping up with innovative treatment modalities and promote the integration of physical and behavioral health care.

Solution: Better care coordination can result in improved health outcomes while spending less of the taxpayers' dollars. The Ohio Department of Mental Health (ODMH), in conjunction with Ohio Medicaid, implemented a new Medicaid benefit – called a health home – in five Ohio counties in October 2012, for individuals on Medicaid who have serious and persistent mental illness (SPMI). Additionally, other services requested by the individuals served by the new state agency are in the works, including Assertive Community Treatment (ACT), Intensive Home-Based Treatment (IHBT), Family Therapy and Peer Support.

Background:

Health Homes:

The 2011-2012 biennial budget supported the design of a new, person-centered system of care to integrate physical and behavioral health care needs. A health home provides an individual who is eligible for services with an opportunity to obtain comprehensive medical, mental health and drug and/or alcohol addiction treatment and social services that are coordinated by a team of health care professionals.

Ohio Medicaid health homes for individuals with SPMI are designed to:

- Improve care coordination
- Improve integration of physical and behavioral health care
- Improve health outcomes
- Lower rates of hospital emergency department use
- Reduce hospital admissions and readmissions
- Decrease reliance on long term care facilities
- Improve the experience of care and consumer quality of life
- Reduce healthcare costs

Case management provided through Medicaid health homes will coordinate mental health services and assist individuals in finding a family doctor, pediatrician, dentist, nutritionist or other specialist. In addition, reminders will be sent to beneficiaries

regarding regular check-ups and preventative health care needs. Connections to supports such as transportation and child care will also be made available through this service.

The following health home services will be available for individuals with SPMI:

- Comprehensive care management
- Care coordination
- Health promotion
- Comprehensive transitional care
- Individual and family support
- Referral to community and social support services

The first phase of the implementation, which included Adams, Butler, Lawrence, Lucas and Scioto counties, represented rural, suburban and urban populations, and diversity in the models of care. Approximately 14,000 individuals are already enrolled. By July 1, 2013, the benefit, delivered by community behavioral health providers, will be available statewide. <http://mentalhealth.ohio.gov/what-we-do/protect-and-monitor/medicaid/health-home-committees.shtml>

Assertive Community Treatment (ACT):

ACT is a team approach designed to provide comprehensive, community-based psychiatric treatment, rehabilitation and support to people with SPMI. These services include case management; initial and ongoing assessments; psychiatric services; employment and housing assistance; family support and education; substance abuse services and other supports critical to an individual's ability to live successfully in the community. ACT services are available 24 hours per day, 365 days per year. Clients served by ACT have SPMI or co-occurring disorders with severe functional impairments. They have avoided or not responded well to traditional outpatient mental health care and psychiatric rehabilitation services. They often have co-existing problems, such as homelessness, substance abuse or involvement with the judicial system.

Intensive Home-Based Treatment (IHBT):

IHBT is a mental health service designed to meet the needs of youth with serious emotional disturbances who are at risk of out-of-home placement or who are returning home from placement. The goal of IHBT is to provide the necessary mental health services and supports to enable youth to live in their homes in the least restrictive, most normative setting possible. IHBT services are provided in the home, school and community where youth live and function. These services focus on the mental health issues that put the youth at risk, while promoting positive development and healthy family functioning. IHBT integrates core mental health services (community psychiatric supportive treatment, behavioral health counseling and therapy, mental health assessment and crisis response) into one seamless service. Service is flexibly delivered at a time that is convenient for the entire family and is available around the clock.

Family Therapy:

A treatment service that mirrors its name, family therapy works with both a youth and the family network to ensure safety and healing for the youth and a supportive family environment.

Peer Support:

Peer support services are offered by mental health consumers, people with addictions or others to provide support to one another. Peer support services can include drop-in centers, peer respite care or support groups. This service promotes another key aspect of recovery: employment.

Executive Budget Proposal and Impact: The Executive Budget continues to support the statewide rollout of SPMI health home services. The budget assumes statewide availability of the service effective July 1, 2013, building on the approximately 14,000 individuals who are currently enrolled in a five county region as of February 2013.

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