



**BHH Designated Provider Agency  
Implementation Session**  
December 2<sup>nd</sup>, 2016 • 1:30pm to 3:00pm  
RVS at CVH



**Attendees:** DMHAS (Jessica DeFlumer-Trapp); BHcare (Pat Curley, Alex Kosakowski); Bridges (Dawn Silver DeAngelis, Shirley Dolce, Valerie Mallard, Howard Tilove); CMHC (Nancy Watsky); CRMHC (Judy Moran-Lounsbury); Intercommunity (Ryan MacDonough); OOC (Lauren Staiger); Rushford (Valerie Walton, Jennifer Williams); RVS (Anne Kiwanuka, Elsa Arce); SMHA (Stephenie Guess); Sound (Diana Ryan, Amy Oulundsen, Enrique Juncadella); SWCMHC (Dorothy Washington); United Services (Jennifer Rossi); WCMHN (Ellen Severn); ASO (Bonni Hopkins, Amy Miller, Virginia Texidor, Denise Roberts)

**1. Introductions**

**2. BHH Round Table Discussion**

**a. Health Observances**

- i. 2017 Health Observances – attendees received a list of possible observances for the upcoming year. They were asked to review the list and prepare to discuss the possibilities at the 12/16 Strategic planning meeting. People may also contact Virginia with comments or questions at 1-844-551-2736.
- ii. Discussion on 2016 topics and content, based on survey results
  1. Overall, people were pleased with the content of the 2016 health observance packets
  2. Feedback
    - a. Packet used every month, very valuable
    - b. Good focus, take it to groups
    - c. Readily available
    - d. Used it individually with clients
    - e. Format for folders okay
  3. No clear method of how to use. Ways people are currently using it:
    - a. Looking at the material and personalizing it to fit the needs of their agency
    - b. Printing flyers from calendar
    - c. Hanging calendar on BHH door
    - d. Printing toolkits/handouts
- iii. Attendees were given the December 2016 Health Observance Packet: National Impaired Driving Prevention Month

**b. Other Provider Issues**

- i. QMB – should providers rely on quarterly report for QMB updates or should they be doing their own research on a regular basis?
  1. The practice guideline indicates these checks should be done quarterly. Can discuss and reassess in future.

2. Challenge is that you must look back month by month, to see status for last six months. No way to select a timeframe.
  - a. WCMHN: if someone is on the radar for another reason, his/her Medicaid status is checked. If they are on a QMB, their Medicaid status is then checked again, six months after the start of the QMB, to determine their BHH status
3. Reminder that BHHs funded for Administrative System Specialists, that have the responsibility to check eligibility.
4. Some providers check QMB status aggressively:
  - a. Person's status was checked whenever s/he was in for an appointment
  - b. Clerical staff assigned to each team that check status quarterly and use Lapse in Medicaid report to check everyone individually
  - c. Check randomly for QMB

### 3. Discussions and Updates

#### a. SPA Guidance Documents

- i. Documentation Document – highlights how providers are expected to provide services to clients and the expected quality of such services. It also provides information on steps to ensure that services are billable and information on cost and rates
- ii. Provider Standards – list of minimum requirements and expectations for Health Homes providers. In addition, the document includes provider assurances including credentialing, Implementation Sessions, and Learning Collaboratives
- iii. Staffing Qualifications – confirms professional and educational background requirements for the seven BHH positions. Document also includes information on staffing assurances including the Random Moment in Time Study and the PC Tracker

#### b. RMTS/TCM Trainings and Updates – The two trainings are scheduled for Monday, 12/12 and Wednesday 12/14 from 9am-12pm. BHH Directors and Admin must now be included in the RMTS study, and are encouraged to attend the training.

- i. How to document time for part-time staff members: if a part-time BHH staff member is asked to document their activities during a time when they were not working for BHH, it will formulate as a non-applicable cost.
- ii. Question about how to handle the staff from the Yale Staffing contract-Jessica to follow-up.

#### c. LOB Photo/Video Shoots – 2 photo shoots have been completed and the remaining three are scheduled. Providers are encouraged to promote the photo shoots on their agency's social media page.

#### d. Data Edits – Everyone is expected to keep working on waiver list and DDaP Payor

#### 4. **Provider Spotlight**

##### a. **Bridges Peer Services**

- i. **BHH self-esteem group:** Designed so clients who feel vulnerable are able to complete the group feeling positive. It is not clinical, designed to be fun, needed time to discuss emotions. Facilitators were trained in self-esteem through Focus on Recovery-United (FOR-U). Clients are recruited through word of mouth, calls, flyers and announcements made by team leaders.
- ii. **Peer Case Manager:** Assists the BHH team in enrolling BHH clients, helped with the wellness health fair and mobile mammogram van. Facilitates the Whole Health Action Management (WHAM) – peer-led intervention group. Classes are offered all campus and anyone is allowed to attend. It provides valid accountability for those with lived experience.

5. **Holiday Celebration Sign-Up** - attendees were asked to bring a dish to the BHH holiday party. The list will also be sent via email for people to sign-up who were not in attendance.

#### 6. **Upcoming Meetings**

- a. December 16<sup>th</sup>                      Learning Community and Implementation Session  
Capitol Region Mental Health Center – 500 Vine Street, Hartford  
10:30am-12:30pm and 1:30pm-3:00pm  
*2017 Strategic Planning and Celebration*
- b. January 13<sup>th</sup>                      Implementation Session @ Beacon Health Options –  
4<sup>th</sup> Floor – Huntington Room
- c. January 25<sup>th</sup>                      State of the State meeting 9:00am-10:30am  
The Solarium in Page Hall at CVH