Agenda

• Executive summary
• New and enhanced services
• Ongoing work in 2023
• Performance management, measurement and oversight
Executive summary

- Community Behavioral Health Centers (CBHC) and the Behavioral Health Helpline (BHHL) launched January 3, 2023
  - 25 CBHCs covering every city and town in the Commonwealth opened their doors to 24/7 crisis and 7 day per week clinic services
  - The BH Helpline opened their line successfully for calls, texts and chats, 24/7
  - There have been many successful warm handoffs between the BHHL and CBHCs
  - CBHCs across the state have been working with police to increase drop offs to their sites
  - Plan for robust tracking and monitoring beginning April once claims data is more available

- Roadmap next steps / priorities in 2023
  - Ramp up marketing and public awareness for BHHL and CBHCs
  - Build workflows between ED's, CBHCs, and EMS to divert cases toward CBHCs and improve throughput and patient experience
  - Implement the BH Roadmap Monitoring and Evaluation Plan which includes both a monthly operational and performance dashboard as well as a more rigorous evaluation
Reforms through the Behavioral Health Roadmap

**Improved Structural Support Through:**
- Administrative Simplification
- Targeted Workforce Development Initiatives
- Diversification of the Workforce
- Added Requirements for Cultural and Linguistic Competency of Providers

**Increasing Access Through Additional & Enhanced Front Door(s):**
- **Behavioral Health Help Line**
  Streamlined approach for anyone seeking behavioral health treatment to find and access the treatment they need, including crisis support.

**Increasing & Strengthening Community-Based Care:**
- **Integrated Primary Care**
  The 1115 Demonstration is changing the way behavioral health is accessed through primary care, including through new payment models and incentives for PCPs to integrate behavioral health treatment, promote early intervention, and increase access.

**Improving the Patient Experience within Crisis and Acute Care:**
- **Improving Member Experience and Treatment Options**
  Improved and expanded behavioral health crisis evaluations in ED settings, including enhanced requirements for discharge planning and warm handoffs.

More inpatient psychiatric beds, stronger 24-hour addiction treatment to address co-occurring needs and better meet patient needs.

Expanded options for crisis stabilization services for adult and youth.

**Behavioral Health Urgent Care**
Access to same or next day outpatient appointments for urgent needs, follow-up appointments within 14 days, extended weekday and weekend hours.

**Community Behavioral Health Centers**
Access to real-time urgent care, evidence-based, integrated mental health and addiction treatment for all ages, 24/7 community crisis response.
NEWLY LAUNCHED BEHAVIORAL HEALTH PROGRAMS AND SERVICES
The 24/7 Behavioral Health Help Line is a single, insurance-blind, multi-channel entry point for Commonwealth residents in search of mental health and SUD treatment.

Key elements of the 24/7 Behavioral Health Help Line

- **Multi-channel access**
  - Available 24/7/365
  - Multi-lingual live response
  - Accessed through multiple modes
  - Includes informative website

- **Knowledgeable clinical team**
  - Staffing includes MA & BA clinicians as well as Peer Specialists
  - Expertise in appropriate crisis identification & action, de-escalation, & stabilization

- **Consistent Follow Up**
  - Process to ensure Individual is successfully connecting with the right services
  - Within 48 hours for crisis handoffs
  - Within 14 days for outpatient referrals

- **Clinical assessment and triage**
  - Formalized assessment tool supports appropriate triage pathway
  - Rapid determination of immediate crisis & completion of appropriate handoff

- **Referral match & warm hand-off**
  - Staff search for & identify providers with appropriate expertise
  - Warm handoff to referring provider whenever possible and appropriate (e.g., mobile crisis team, Community Behavioral Health Center, BH Urgent Care)

**Enabling technology:**

- Multi-channel cloud contact center system
- Clinical assessment & triage tools
- Directory of providers & resources
- Integrations with key partners & providers
- Client Management System

The Help Line will be closely coordinated with key existing resources, such as:

- **Crisis Dispatch**
  - 988/NSPL
- **Substance Use Helpline**
- **Mass Options**
  - Mass 211

**NOW LIVE!**

(833) 773-BHHL
CBHCs integrate crisis and community-based treatment by combining mobile teams, crisis stabilization, and outpatient and urgent care for mental health and addictions.

<table>
<thead>
<tr>
<th>Crisis triage and evaluation (same day)</th>
<th>Same or next day* treatment and stabilization</th>
<th>Open Access (same day)</th>
<th>Individualized outpatient treatment</th>
<th>Care Coordination</th>
<th>Referrals</th>
</tr>
</thead>
<tbody>
<tr>
<td>▪ Triage, evaluation and assessment</td>
<td>▪ Evaluation and assessment</td>
<td>▪ Evaluation and assessment</td>
<td>▪ Acute course of therapy using evidence-based practices</td>
<td>▪ Coordination with primary care providers, other behavioral health providers, SUD providers, insurance carriers, ACOs, Community Partners, state agencies, schools</td>
<td>▪ Referral relationships with other community providers</td>
</tr>
<tr>
<td>▪ Intervention / De-escalation</td>
<td>▪ Psychiatric consultation/ psychopharmacology (within 72 hours)</td>
<td>▪ Topic-based group therapy</td>
<td>▪ Maintenance therapy (e.g., counseling, medication)</td>
<td>▪ Specific treatment approaches for children, youth, families, older adults</td>
<td></td>
</tr>
<tr>
<td></td>
<td>▪ Individual/Family crisis intervention and therapy</td>
<td></td>
<td>▪ Prescribing (MAT and / or psychiatric medication)</td>
<td>▪ Community Support Program</td>
<td></td>
</tr>
<tr>
<td></td>
<td>▪ Same-day MAT induction / linkage</td>
<td></td>
<td></td>
<td>▪ Peer/support services**</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>▪ Peer/support services**</td>
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<td></td>
<td></td>
<td></td>
<td>▪ Adult and youth 24-hour Crisis Stabilization Services</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>▪ Peer/support services**</td>
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<td></td>
<td>▪ Medical screening</td>
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<td></td>
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<td></td>
<td></td>
<td>▪ Capacity to receive ambulance/police drop-off (to be implemented in first year)</td>
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</tr>
</tbody>
</table>

*Difference between need for crisis vs. urgent is based on diagnostic presentation of patient

** Certified Peer Specialists, Certified Young Adult Peer Specialists, Recovery Support Navigators, Recovery Coaches, Community Support Program services, and family support services
Behavioral Health Urgent Care centers (BH UC) are Mental Health Centers that provide **integrated mental health and addiction services** more urgently and with extended hours than traditional clinics.

**BH UC centers offer the following services:**
- Same/next day appointments available for diagnostic evaluation for new clients and urgent appointments for existing clients
- Urgent psychopharmacology and MAT evaluation available within 72 hours of assessment
- Non-urgent treatment and follow-up appointments within 14 calendar days
- Extended availability during the week outside of weekdays from 9am-5pm, including
  - At least 8 hours of extended availability per week during weekdays
  - At least two 4-hour blocks of availability per month on weekends
ONGOING WORK IN 2023: SYSTEMS AND MEASUREMENT
Ongoing work in 2023

EOHHS is monitoring effectiveness and culture shifts to ensure achievement of initial roadmap goals, including:

- Working through billing and operational challenges for CBHCs and EDs for crisis
- Improving throughput and patient experience
  - Emergency Departments and CBHCs seamlessly establishing patient flows including:
    - Regular and consistent discharge from ED to CBHCs for ongoing support
    - Streamlined processes for ED transfer for members presenting the CBHC with acute medical needs
  - Enabling direct admission to inpatient psychiatry from CBHC settings, including medical screening and non emergency transportation
  - Supporting education and training for first responders on CBHC and Helpline resources to enable policy drop off
  - Continued work with DPH, DMH, Hospitals and CBHCs to actualize the goal of allowable ambulance drop off at CBHCs by 2024
- Monitor and evaluate by tracking the quality and fidelity of the implementation of the BH Roadmap to identify opportunities for immediate support and further optimization
To minimize administrative burden on providers, we will exclusively use claims-based data to iteratively build out monthly dashboards to capture core BH Roadmap services, with a particular focus on crisis services.

### April 2023: Draft Operational Metrics

- **Mobile Crisis, CBHC Clinic Services, CCS, & ED Crisis Evaluations**
- Stratified by provider, # of unique members served, payer, place of service (for MCI), length of stay (for CCS), length of episode of care (for MCI and CBHC Clinic services)

### July 2023: Draft Pre- and Post-Crisis Care

- Unique members w/:
  - ED for BH w/in 7 days AFTER MCI
  - MCI or CBHC w/in 7 days AFTER ED for BH
  - MCI or CBHC w/in 30 days AFTER ED for BH
  - CCS w/in 7 days AFTER ED for BH
  - Disposition frequency FROM ED for BH
  - Disposition frequency TO ED for BH
- Stratified by provider, # of unique members served, payer, adult/youth

### Jan 2024: Draft Special Populations

- All Operational Metrics & Pre- and Post-Crisis Care for:
  - Age bands (including geriatric)
  - State agency involvement
  - Mental health, SUD, Dual Dx, SMI, SED, ASD/IDD

EOHHS engaged forHealth Consulting at UMass Chan Medical School to provide a multi-year independent, rigorous, and rapid-cycle evaluation of the Behavioral Health (BH) Roadmap to directly inform policy development and implementation.
CBHC Implementation Status

CBHC Updates

- All 25 CBHCs launched 1/3/23
  - Dashboards will use claims-based data after 90 days of operation; below is self-reported data from CBHC providers for the week 3/6-3/12

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<thead>
<tr>
<th>Date</th>
<th>ACCS Count</th>
<th>YCCS Count</th>
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<tbody>
<tr>
<td>3/6</td>
<td>80</td>
<td>12</td>
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<tr>
<td>3/7</td>
<td>74</td>
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<td>15</td>
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<tr>
<td>3/12</td>
<td>59</td>
<td>15</td>
</tr>
</tbody>
</table>

- Success stories and promising reports:
  - BHN assisted a caller who was in her car with thoughts to self harm and ambivalent about getting help. While triage stayed on phone with her, two peers went out to home and were able to sit with her and offer support until a clinician arrived and assessed.
  - CHA CBHC was successful in directly admitting a patient from community crisis evaluation to an inpatient psychiatric unit at Emerson, using the medical screening protocol and not requiring an ED medical clearance.
  - CBHCs across the state have been working with police to increase drop offs to their sites. Police drop off has occurred in Fall River, New Bedford and Plymouth, Dighton, Pittsfield, Greenfield, Lawrence, the Cape, Nantucket, etc.

Average Volume Across All Sites:
Week of 3/6-3/12

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<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>CBHC</td>
<td>1,200</td>
</tr>
<tr>
<td>AMCI</td>
<td>769</td>
</tr>
<tr>
<td>YMCI</td>
<td>1,300</td>
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</tbody>
</table>
BHHL Implementation Status


Success stories:
• Member called Helpline reporting that he was currently suffering from severe insomnia and was on 52 hours of sleep deprivation. Caller was in acute fear of psychological deterioration. The Helpline was able to connect caller with BH Urgent Care and caller was prescribed a short supply of medication for insomnia. When staff provided follow-up, caller reported that he was "much better and was able to sleep for 6 hours the last two nights".

• Member called in who was having a very difficult time, as they were going through IVF loss and they and their partner were grieving very differently. BHHL staff talked with the Member and made them feel supported and cared about. Staff connected the Member to support groups who work with people that are going through child loss. By the end of the call, the Member was so grateful, they shared that BHHL staff may have “saved their life today” and that staff’s “soothing voice” was exactly what they needed to hear in that moment.

AVERAGE SPEED OF ANSWER
15.75 seconds

AVERAGE MAXIMUM CALL WAIT TIME
8.01 minutes

AVERAGE CALL HANDLE TIME
18 minutes

Weekly Calls, Texts, Chats
(four most recent weeks)

Total Number of Warm Handoffs
2/12/23-3/11/23: 223

Warm Hand Off Dispositions
Success of the Roadmap requires **education to generate culture change.** DMH and MassHealth are working collaboratively with MBHP on the following **marketing, communication, and stakeholder engagement** processes.

<table>
<thead>
<tr>
<th>What</th>
<th>Who</th>
<th>Audience</th>
<th>Key Messages</th>
<th>Format / Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Statewide public awareness campaign</strong></td>
<td>MORE Advertising (contract with MBHP, overseen by EHS)</td>
<td>General public</td>
<td>BHHL as new front door to care; CBHC crisis walk-in option</td>
<td>• Digital ads and social media content</td>
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<td>• Out-of-home ads (e.g., billboards, public transit)</td>
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<td>• Radio and TV ads</td>
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<td>• Print materials (e.g., posters, brochures, wallet cards)</td>
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<td></td>
<td>• Most materials in 14 languages</td>
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<td></td>
<td></td>
<td>• Launching spring 2023</td>
</tr>
<tr>
<td><strong>Statewide stakeholder engagement</strong></td>
<td>MBHP, DMH, OBH (weekly staff-level coordinating meeting)</td>
<td>Providers, state agencies, community organizations, etc.</td>
<td>What new services are rolling out and how to access them</td>
<td>• Presentations</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>• One-pagers for various audiences</td>
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<td></td>
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<td></td>
<td>• <a href="https://www.mass.gov/BHRoadmap">www.mass.gov/BHRoadmap</a></td>
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<td></td>
<td></td>
<td>• <a href="https://www.mass.gov/CBHCs">www.mass.gov/CBHCs</a></td>
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<tr>
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<td></td>
<td></td>
<td></td>
<td>• Stakeholder toolkit</td>
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<td></td>
<td></td>
<td>• Ongoing beginning in Dec. 2022</td>
</tr>
<tr>
<td><strong>Regional stakeholder engagement</strong></td>
<td>CBHC providers, MBHP</td>
<td>Local providers and community organizations</td>
<td>Advertising the services and how to access them</td>
<td>• Presentations</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>• Relationship-building</td>
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<td></td>
<td></td>
<td></td>
<td>• Ongoing beginning Fall 2022</td>
</tr>
</tbody>
</table>
Easier, more convenient access to behavioral health services in Massachusetts

Community Behavioral Health Centers (CBHC)
www.mass.gov/CBHCs

✓ All ages.
✓ Mental health and addictions.

Mobile Crisis Intervention
- ✓ 24/7/365.
- ✓ No insurance necessary.
- ✓ All ages.
- ✓ Mental health and addictions.
- ✓ Crisis identification and action when needed:
  - Dispatch Mobile Crisis Intervention.
  - 911 connection when needed.
  - Follow-up within 72 hours.
- ✓ Clinical assessment and triage helps to find a provider with appropriate expertise and make a warm handoff.
- ✓ Follow-up to ensure connection is made.

Urgent and ongoing clinic services
- ✓ Same day evaluation, assessment, group therapy, peer support.
- ✓ Same or next day appointments, including psychopharmacology and medication for addiction treatment.
- ✓ Case management coordination and referral to needed services.
- ✓ Extended hours:
  - 8 AM – 8 PM week days
  - 9-5 weekends

Behavioral Health Help Line (BHHL)
(833) 773-BHHL

✓ Multi-lingual live response.
✓ Call, text, chat.
✓ 24/7/365.
✓ No insurance necessary.
✓ All ages.
✓ Mental health and addictions.
✓ Crisis identification and action when needed:
  - Dispatch Mobile Crisis Intervention.
  - 911 connection when needed.
  - Follow-up within 72 hours.
✓ Clinical assessment and triage helps to find a provider with appropriate expertise and make a warm handoff.
✓ Follow-up to ensure connection is made.

Adult and Youth Community Crisis Stabilization
✓ 24-hour diversionary level of care for individuals in crisis who don’t need inpatient level of care.

Behavioral Health Urgent Care (BHUC)
✓ Available to all MassHealth members.
✓ Same/next day appointments for diagnostic evaluation for new clients and urgent appointments for existing clients.
✓ Urgent psychopharmacology, medication for addiction treatment evaluation.
✓ Non-urgent appointments within 2 weeks.
✓ Extended hours.
Clinical decision making at the CBHC evaluates the behavioral and medical risks and needs of the individual. The below graphic demonstrates possible patient pathways based on clinical assessment.
Community Behavioral Health Centers and their catchment areas
The evaluation team seeks to understand implementation challenges and successes, member flow and experiences, and Roadmap implementation fidelity through key informant interviews, stakeholder meetings, document review, and observation data.

### Timeline of OBH BH Roadmap Evaluation

<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td><strong>Activities</strong></td>
<td><strong>Pre-baseline conversations</strong></td>
<td><strong>Baseline Data Collection</strong></td>
<td><strong>Baseline Data Reporting</strong></td>
</tr>
<tr>
<td>OBH introduced the evaluator to CBHCs</td>
<td>Stakeholder outreach, meeting and document review</td>
<td>Finalize baseline data collection</td>
<td>Conduct follow-up data collection</td>
</tr>
<tr>
<td>ForHealth conducted stakeholder outreach</td>
<td>Rolling recruitment for baseline interviews and focus groups</td>
<td>Finalize review and analysis of baseline data transcripts</td>
<td>Conduct follow-up data analysis</td>
</tr>
<tr>
<td>Early conversations with non-CBHC key informants (continue through Q1 2023)</td>
<td>Ongoing analysis of qualitative data</td>
<td>Ongoing analysis of qualitative and quantitative data</td>
<td>Prepare and submit progress and annual reports to OBH</td>
</tr>
<tr>
<td>Early conversations with CBHC key informants (continue through Q1 2023)</td>
<td>Ongoing acquisition and assessment of quantitative data</td>
<td>Submit annual report to OBH</td>
<td>Continue engaging stakeholders</td>
</tr>
<tr>
<td>Progress report and ad-hoc reports to OBH</td>
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</tbody>
</table>

* Follow-up implementation effectiveness and outcome data collection and analysis will be conducted in state FY24. Outcome analysis is expected to continue after FY24 with detailed scope to be further discussed with MassHealth.
# CBHC Providers and Catchment Areas

<table>
<thead>
<tr>
<th>Region</th>
<th>Organization</th>
<th>Catchment Area</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central</td>
<td>Riverside Community Care</td>
<td>Bellingham, Blackstone, Brimfield, Brookfield, Charlton, Douglas, Dudley, East Brookfield, Franklin, Holland, Hopedale, Medway, Mendon, Milford, Millville, Northbridge, North Brookfield, Oxford, Southbridge, Sturbridge, Sutton, Upton, Uxbridge, Wales, Warren, Webster, and West Brookfield</td>
</tr>
<tr>
<td>Central</td>
<td>Clinical Support Options</td>
<td>Ashburnham, Gardner, Hubbardston, Templeton, Westminster, and Winchendon</td>
</tr>
<tr>
<td>Metro Boston</td>
<td>Cambridge Health Alliance</td>
<td>Cambridge, Somerville, Everett, Malden, and Medford</td>
</tr>
<tr>
<td>Metro Boston</td>
<td>North Suffolk Mental Health Association</td>
<td>Chelsea, Revere, East Boston, Winthrop, and Charlestown</td>
</tr>
<tr>
<td>Metro Boston</td>
<td>Boston Medical Center</td>
<td>Boston, Brighton, and Brookline</td>
</tr>
<tr>
<td>Metro Boston</td>
<td>Riverside Community Care</td>
<td>Canton, Dedham, Dover, Foxboro, Medfield, Millis, Needham, Newton, Norfolk, Norwood, Plainville, Sharon, Walpole, Wellesley, Weston, Westwood, and Wrentham</td>
</tr>
<tr>
<td>Metro Boston</td>
<td>Aspire Health Alliance</td>
<td>Braintree, Cohasset, Hingham, Hull, Milton, Norwell, Quincy, Randolph, Scituate, and Weymouth</td>
</tr>
<tr>
<td>Northeast</td>
<td>Beth Israel Lahey Health BH Services</td>
<td>Andover, Lawrence, Methuen, and North Andover</td>
</tr>
<tr>
<td>Northeast</td>
<td>Vinfen</td>
<td>Billerica, Chelmsford, Dracut, Dunstable, Lowell, Tewksbury, Tyngsboro, and Westford</td>
</tr>
<tr>
<td>Region</td>
<td>Organization</td>
<td>Catchment Area</td>
</tr>
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<td>------------</td>
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</tr>
<tr>
<td>Western</td>
<td>Clinical Support Options</td>
<td>Amherst, Chesterfield, Cummington, Easthampton, Florence, Goshen, Hadley, Hatfield, Middlefield, Northampton, Pelham, Plainfield, Westhampton, Williamsburg, and Worthington</td>
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<td>Ashfield, Athol, Bernardston, Buckland, Charlemont, Colrain, Conway, Deerfield, Erving, Gill, Greenfield, Hawley, Heath, Leverett, Leyden, Millers Falls, Montague, New Salem, Northfield, Orange, Petersham, Phillipston, Rowe, Royalston, Shelburne, Shutesbury, Sunderland, Turners Falls, Warwick, Wendell, and Whately</td>
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<tr>
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<td>Center for Human Development</td>
<td>Belchertown, Bondsville, Chicopee, Granby, Holyoke, Ludlow, Monson, Palmer, South Hadley, Southampton, Thordike, Three Rivers, and Ware</td>
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<tr>
<td>Southeast</td>
<td>High Point</td>
<td>Abington, Avon, Bridgewater, Brockton, East Bridgewater, Easton, Holbrook, Rockland, Stoughton, West Bridgewater, and Whitman</td>
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<td>Child and Family Services</td>
<td>Acushnet, Carver, Dartmouth, Duxbury, Fairhaven, Halifax, Hanover, Hanson, Kingston, Marion, Marshfield, Mattapoisett, New Bedford, Pembroke, Plymouth, Plympton, Rochester, and Wareham</td>
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<td>Fall River, Freetown, Somerset, Swansea, and Westport</td>
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<td>Community Counseling of Bristol County</td>
<td>Attleboro, Berkley, Dighton, Lakeville, Mansfield, Middleborough, North Attleboro, Norton, Raynham, Rehoboth, Seekonk, and Taunton</td>
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<td>Bay Cove Human Services</td>
<td>Barnstable, Bourne, Brewster, Chatham, Chilmark, Cotuit, Dennis, Eastham, Falmouth, Harwich, Hyannis, Mashpee, Orleans, Osterville, Provincetown, Sandwich, Truro, Wellfleet, Woods Hole, and Yarmouth</td>
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<td>Fairwinds Center</td>
<td>Nantucket</td>
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