

MOVE TO MANAGED BEHAVIORAL HEALTHCARE WORKGROUP: 4/29/2013 LARGE GROUP CHALLENGE AND PRIORITIES

Challenge! Large Group: All of us need to come together within this new world...

- What can DMHAS do to support consumers, families and providers as we make that transition? What do you need from us?
- What action steps should we take now? Let's formulate this as a "To Do" list

**Note: numbers that follow each item reflect the last group exercise, in which individuals placed stickers on areas that they thought should be priority areas of focus for the Division Plan.*

Clear, consistent communication – 37

Clarity re: SMI & mental health – 4

Everything transparent, including stakeholders – 3

Capacity of IT for data and outcomes – 26

Work with providers to secure fiscally – 17

Prioritize 211/a place to call – where do I go? What do I do? – 13

Announce realistic launch dates to help with budgeting and planning – 22

Develop guidelines: steps to take to prepare for change – 25

Get politicians to embrace and speak about the move to managed Behavioral Healthcare in their forums – 1

Have discussions with those who won't be covered – 19

Fix SAMS, streamline clinical documentation – 12

Separate what is fee for service and not fee for service so providers can plan – 19

State match dollars: Help and protect providers – 4

Specific clinical outcomes need to be set for the ASO – 16

Set up feedback now for real-time assistance to providers as systems change occurs – 19

Specify outcomes – look now at the outcomes for EBPs and use to overlay – 9

*During this workgroup session, a list was developed by participant(s), independent of the large group exercise, and participants incorporated this list into the overall priorities exercise. It is not known if **all** participants had benefit of reviewing this new list, as it was not part of the formal exercise, and the timing of its development is unknown.*

Results of that list and identified priorities are below:

Increase number of and accessibility to peer provided services – 12

As soon as possible, provide list of fee for service services and the rates of reimbursement so providers can plan and provide feedback – 8

Demonstrate the importance of providing culturally and linguistically important care to diverse consumers, families, and emphasize the benefit of achieving health equity in this new system of care – 8

Better communication between DMHAS and DCA