



# Anthem Innovation

Behavioral and Primary Care  
Integration

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# Meeting the needs of our customers through BH/PH Integration

***Improving the Health of the People and Communities we serve.  
Our expanding membership markets:***

- ❖ Commercial Markets – 14 states serving 24,265,208 lives  
(19,395,045 for BH)
- ❖ Medicaid Markets -- 21 states serving 6,313,707 lives
- ❖ Medicare Markets – 20 states serving 1,748,536 lives

## **Members with a Behavioral Health/Physical Health (BH/PH) diagnosis**

- ✓ Medicaid 6.8%
- ✓ Medicare 15.1%
- ✓ Commercial 19.3%

# Anthem Integration Focus

## Promote Integrated Care:

- Assess and support integration needs at a practice level
- Provide data analytics and reporting related to high risk members
- Promote and provide educational opportunities and trainings
  - PCP learning collaboratives
  - Workflow development
- Recognize quality metrics and outcomes through innovative value-based payment initiatives

# Models of Integration

Coordinated Care Model	Co-located Care Model	Fully Integrated model
<ul style="list-style-type: none"> <li>▪ Behavioral Health partners are located in separate facilities</li> <li>▪ <b>Separate documentation systems</b></li> <li>▪ Separate treatment plans</li> <li>▪ <b>Communication occurs periodically and is driven by specific patient issues</b></li> <li>▪ Completed in primary care</li> <li>▪ <b>Patients referred out</b></li> <li>▪ Separate funding and separate billing</li> <li>▪ <b>Appreciate each other's roles as resources</b></li> <li>▪ Coordination or management of collaborative efforts at the leadership level is minimal at best, with focus generally on information sharing processes</li> </ul>	<ul style="list-style-type: none"> <li>▪ Behavioral Health partners are in the same facility or building but not necessarily the same offices</li> <li>▪ <b>Systems may be the same</b></li> <li>▪ Collaborative treatment planning</li> <li>▪ <b>Communicate regularly, including face to face interactions about patients</b></li> <li>▪ Behavioral Health partners are able to assess patients in the primary care setting</li> <li>▪ <b>When ongoing behavioral health intervention is warranted attendance can be more easily tracked</b></li> <li>▪ Funding and billing remain separate</li> <li>▪ <b>All partners have a basic understanding of the roles and culture and increased feeling of being "part of a team"</b></li> <li>▪ Organization leaders support integration and are more open to problem solving any weaknesses in collaborative processes</li> </ul>	<ul style="list-style-type: none"> <li>▪ Behavioral Health partners in the same space within the same facility, sharing all practice space</li> <li>▪ <b>System is the same</b></li> <li>▪ One collaborative treatment plan for each patient</li> <li>▪ <b>Communicate consistently at the system, team and individual levels – including meetings during and after patient contact</b></li> <li>▪ Population Medical and Behavioral Health screening is standard practice, available to all team members and response</li> <li>▪ <b>Are immediate and occur within the same office space</b></li> <li>▪ Funding and billing integrated</li> <li>▪ <b>Team members have roles and cultures that "blur or blend"</b></li> <li>▪ Organization leaders and treatment team members driven by shared concept of team care</li> </ul>

Adapted from: Heath B, Wise Romero P, and Reynolds K. A Review and Proposed Standard Framework for Levels of Integrated Healthcare. Washington, D.C.SAMHSA-HRSA Center for Integrated Health Solutions. March 2013



# Anthem's Integrated Care Approach

**Collaborate on workflow development and learning**

**Support screening, intervention and referral**

**Promote care coordination**

**Drive effective medication management activities**

**Leverage technology**

**Provide BH/PH Case Management resources**

# Transforming Care to Get Results

## PRACTICE TRANSFORMATION

- Embedding BH care into primary and pediatric practices
- Integrated care Focused on Frail and Elderly populations

## TECHNOLOGY

- Tele-health - Psychology rolled out in Jan, 2016 to comm'l adult membership
- GA Medicaid tele-health partnership to support a medical neighborhood model
- BH computer-based cognitive behavioral therapy (cCBT) services

## Initial Results

- ✓ Practice Transformation
  - Supported embedding BH in 10 states within primary/pediatric practices
  - Supported implementation of integrated care in 8 states
  - 41 Centers, 541K appointments in 2015
- ✓ Tele-health:
  - 45% of online BH visits occur in evenings; 20% utilization over weekends
  - 25–35% month-over-month growth of on-line utilization
  - Adolescent psychology live on July 1st
- ✓ GA Tele-health:
  - Expanded to 8 presentation sites in pediatric practices; 1 elementary school live
- ✓ cCBT:
  - 3,336 registrants through May, 2016

# Integrating Behavioral & Medical for Substance Use

## Substance Use and Opioid Epidemic

- Expand and promote Medication Assisted Therapy (MAT) among primary care providers
- Encourage and reimburse for Screening, Brief Intervention, Referral to Treatment (SBIRT)
  - 60% increase in PCP screenings in 2015 over prior year
- Supplement MAT, with BH supports including BH providers, peer recovery supports, BH case management and care coordination
- Established pharmacy utilization monitoring programs

# Anthem is Committed to Quality



## Future Opportunities

- **Expansion of tele-health to include Psychiatry**
- **Promotion of integrating BH with medical specialties**
- **Availability of online peer support and discussion forums for specific populations**
- **Expand pay for performance programs for quality outcomes**