

Behavioral Health Outcomes Stakeholder Kickoff Meeting

Wednesday, January 24th, 2024 | 2:30pm-3:30pm

Meeting held virtually using [Zoom](#). Pre-registration is not required.

Meeting Minutes

Roll Call + Introductions

Each of the stakeholder workgroup members introduced themselves and their roles in their respective organizations.

Welcome

Chief David T. Jones, Governor's Office, welcomed the group and introduced the purpose of the workgroup. The following rules were established:

- Materials will be shared on [HFS's BH Outcomes Stakeholder Workgroup webpage](#)
- Roll call will be done at the beginning of each meeting and committee members will cast a vote on minutes and recommendations utilizing either yes, no, or abstaining
- Quorum present: it will be majority rule in terms of moving motions forward

Presentation from Kati Hinshaw, HFS: Overview of Team-Based Services

Kati Hinshaw, HFS, gave a presentation overviewing team-based services, which includes Assertive Community Treatments (ACTs), Community Support Teams (CSTs), and Violence Prevention Community Support Teams (VP-CSTs). With each team-based service, she discussed the services and models, delivery requirements, and target populations. She reminded the group that everyone will get a copy of the slides and they will be posted on [HFS's BH Outcomes Stakeholder Workgroup webpage](#).

Group Discussion: Feedback and Q&A

Chief Jones opened the floor for questions. The following were questions and concerns were presented by the group:

- Fanya Burford-Berry, West Side Task Force, asked where ACTs are on the West Side of Chicago.
 - Debbie Pavick, Thresholds, confirmed that Thresholds has 4 teams that work on Chicago's West Side: 1 ACT and 3 CSTs. Additionally, Thresholds has close to 30 CSTs and 10 ACTs scattered throughout the Chicago area.

- Aron Janssen, Lurie Children's Hospital, asked for context as to why ACTs exclude pediatrics and if there is history in the state of Illinois affiliated with academic or teaching institutions.
 - Kati responded that ACT is an Evidence-Based Practice (EBP) for adults 18+ and was designed as an adult model, so research around it is focused on that age range. However, there has been discussion on lowering the age to 16 in places that do young adult versions of ACTs and possible CSTs as well. It has been her understanding that Illinois developed CST model to be broader and cover additional populations, particularly youth, so the intent of CST is to give broad framework to focus team to allow for enough flexibility to make adjustments since it is not as rigid of a model as ACTs.
- Fanya asked for clarification of what is considered a "unit" when charging \$9 per service unit.
 - Debbie replied that 15 minutes is a unit.
- Kati brought up the concern of 15-minute billing not aligning with certain activities and how to make those activities fit into billing. She then asked the group where they think team-based services should go in terms of moving to a different team model, what we should be focusing on, different funding mechanisms to help support this vision, and measurements to make sure we are hitting those mechanisms.
 - Chief Jones added that he wants the group to make suggestions on the Pay for Performance (P4P) model prospectively and strategies that will help achieve these outcomes and be useful in implementing a P4P model.
 - Matt Werner, M. Werner Consulting, suggested discussing how to set up reimbursement methodology that adapts and grows and further recommended a design that drives outcome and access growth but includes a review component.
 - Jill Hayden, IAMHP, replied that from a managed care perspective, take into consideration factors to ensure it is operational for plans and providers so it has a framework and can be submitted as a claim and is payable.
- Mark Ishaug, Thresholds, asked if there will be opportunity to talk about additional ACT/CST services, including substance use outreach and engagement, at the next meeting.
 - Chief Jones replied that if this is something the workgroup would like to put forward and raise as a topic, we can include it in future meetings.
- Aaron Mallory, GRO, asked to talk more about what is value-based, what the pros and cons are, and having generally more information provided around that.
 - Chief Jones responded that they can give more information around value-based models.
- Mark suggested that it would be helpful to hear from the Illinois Health Practice Association (IHPA), as the group includes many organizations that provide ACT and CST. He explained that it would be helpful to hear about the experiments they are doing around P4P. He further recommended hearing about their experiences with managed care companies trying to implement bundle payments with partners without a clear understanding and sharing of data, explaining that access to data and understanding in real time what is happening with clients being served is a challenge providers face.

Next Steps

Chief Jones stated that the meeting cadence is currently set to the fourth Wednesday of each month from 2:30pm-3:30pm and received majority approval. The next BH Outcomes Stakeholder Workgroup meeting will be held virtually on February 28th, 2024 from 2:30pm-3:30pm at the same Zoom link provided.

Meeting adjourned at 3:31pm CST.

Action Items

- Share slides on HFS's BH Outcomes Stakeholder Workgroup webpage – Kati Hinshaw, HFS
- Share finalized minutes of HFS's BH Outcomes Stakeholder Workgroup webpage – Amy Frye, OMI
- Provide more information to members regarding value-based models – Kati Hinshaw, HFS

Member Attendance

Non-Government

	First Name	Last Name	Organization
X	Fanya	Burford-Berry	West Side Task Force
X	Clara	Burklow	Egyptian Health Department (EHD)
X	Drue	Cannata	Arukah Institute of Healing
X	Mary	Garrison	Heritage Behavioral Health Center
X	Jill	Hayden	Illinois Association of Medicaid Health Plans (IAMHP)
X	Aron	Janssen	Lurie Children's Hospital of Chicago
X	Aaron	Mallory	God.Restoring.Order Community (GRO)
X	Jen	McGowan-Tomke	Illinois National Alliance on Mental Illness (NAMI)
X	Melissa	Pappas	Rosecrance
X	Debbie	Pavick	Thresholds
X	Matt	Werner	M. Werner Consulting

Government

	First Name	Last Name	Organization
X	Shawn	Cole	Office of Medicaid Innovation (OMI)
X	Amy	Frye	Office of Medicaid Innovation (OMI)
X	Kristine	Herman	Illinois Department of Healthcare and Family Services (HFS)
X	Kati	Hinshaw	Illinois Department of Healthcare and Family Services (HFS)
X	David T.	Jones	Office of Illinois Governor JB Pritzker
X	Carrie	Muehlbauer	Office of Medicaid Innovation (OMI)