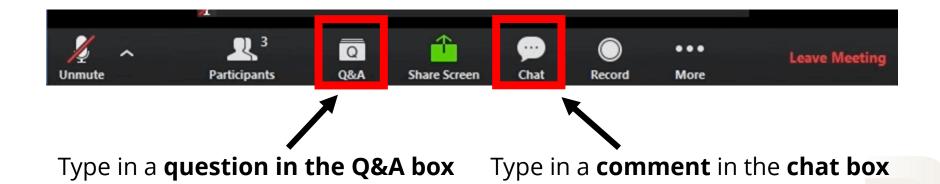


# Advancing Rural Health Equity through Integrated Care ECHO Session 6

Wednesday, May 18, 2022 11:30am-1:00pm ET

## How to Ask a Question/Make a Comment



Located at the bottom of your screen.

We'll answer as many questions as we can during today's session.



## Disclaimer

The views, opinions, and content expressed in this presentation do not necessarily reflect the views, opinions, or policies of the Center for Mental Health Services (CMHS), the Substance Abuse and Mental Health Services Administration (SAMHSA), or the U.S. Department of Health and Human Services (HHS).



Substance Abuse and Mental Health Services Administration

www.samhsa.gov

## Welcome from the National Council for Mental Wellbeing!

**3,300+ health care** organizations serving over 10 million adults, children, and families living with mental illnesses and addictions.

- Advocacy
- Education
- Technical Assistance

council for Mental Wellbeing

### **Introductions**



Carolyn Rekerdres, MD
Medical Director, East Texas
Behavioral Health Network,
NE Region,
National Council for Mental
Wellbeing, Medical Director
Institute



Christina Arredondo, MD

Medical Director of Behavioral
Health, El Rio Community Health
Center, National Council for
Mental Wellbeing, Medical
Director Institute



Shauna Reitmeier, MSW, LGSW
CEO, Northwestern Mental
Health Center,
National Council for Mental
Wellbeing, National Board

### **Introductions**



Danica Love Brown, MSW, PhD

Choctaw Nation of
Oklahoma
Northwest Portland
Area Indian Health
Board,
Behavioral Health
Programs Director



Kait Hirchak, PhD

Eastern Shoshone

Assistant Research

Professor, University of

Washington



Thomasine Heitkamp, MSSW, LCSW,

Chester Fritz Distinguished
Professor Emeritus and
Behavioral Health
Specialist, University of
North Dakota



Dennis Mohatt, MA

Vice President for Behavioral Health, Western Interstate Commission for Higher Education

> national council for Mental Wellbeing

## Curriculum

Month	Session Topic
November	Session 1: Structural Urbanism and its Impact on Rural Health Outcomes
December	Session 2: Identifying equitable approaches and providing culturally responsive services to those most in need in rural communities
February	Session 3: Improving capacity of primary care provider organizations to address mental health and substance use needs
March	Session 4: Innovative community partnerships to improve mental health and substance use service delivery and reach
April	Session 5: Innovative approaches to improving workforce capacity and wellbeing for rural health providers
May	Session 6: Sustainability considerations and opportunities (funding, local policy and advocacy, etc.)

### **Session Norms**

Speak from the "I" perspective Uphold confidentiality

Listen to understand, not to respond

Take space, give space

Take care of yourself

We all make mistakes & are learning

Approach discomfort with curiosity

We have been socialized to believe that it is not polite to talk about oppression, race and racism (and other –isms) – hearing about & talking about these things may bring up feelings of discomfort.

We ask ourselves and participants to be mindful of assumptions, and biases during this presentation.

We ask ourselves and participants to be aware of multiple identities, backgrounds and perspectives in our virtual space.

## Who is in the Room?

## Share in the chat your Name, Title, Organization and State





## Sustainability: Considerations & Opportunities

"The ability to be maintained at a certain rate or level" - Oxford Languages

Shauna Reitmeier, MSW, LGSW

CEO, Northwestern Mental Health Center, National Council for Mental Wellbeing, National Board

## Overview

- Connect the Dots
- Maximization of existing services & funding options
- Community Partnerships
- Value Proposition
- Advocacy & Education

## Putting it all together

#### Structural Urbanism

Policy impact

#### **Equitable approaches and Culturally Responsive services**

Diverse communities, trauma, new ways of delivering svc

#### Improving Capacity of Primary Care providers to address MH & SUD

Expands reach and access

#### **Innovative Community Partnerships**

Stronger together

#### Improving Workforce & Wellbeing

Systemic, Engagement, Belonging





## Maximizing Your Federal Options

Medicare & Medicaid

Grant Funding SAMHSA, HRSA, USDA, FCC, NIH

**Telehealth** 

**Technology** 



## **Maximizing Your State Options**

#### **Medicaid State Plan**

Do you know what is in your State Plan?

- Waivers (rehabilitation, elderly, children etc...)
- Crisis response
- Peer Recovery
- Is your agency certified or licensed to provide all services?

#### 1115 Waiver

- Demonstration
- Cost neutral
- Up to 5 year

## Certified Community Behavioral Health Clinics (CCBHCs)

Demonstration Certified Community Behavioral Health Clinics – Prospective Payment System & Cost-based Payment

OP MH & SUD services

Screening, Assessment Person Centered Treatment Planning 24/7 mobile mental health crisis response

Targeted Case Management Psychiatric Rehabilitation Services

Peer Recovery
Services

OP primary care screening & monitoring

OP ambulatory withdrawal management

Community-based mental health care for Veterans

Care Coordination

## **CCBHCs**



#### **SAMHSA Grants**

- Planning, Development & Implementation Grants
  - Just starting, helps to build your CCBHC continuum of care
- Expansion Grants
  - For existing CCBHCs that want to take their model of care to the next level or further grow their services
- Planning For Sustainability

Visit the CCCBHC Success Center for more information:

https://www.thenationalcouncil.org/program/ccbhc-success-center/NATION

for Mental
Wellbeing



## Leveraging Local Resources

- Children & Family Mental Health Collaboratives
  - Transitions program with Juvenile Justice systems
- Co-Location Arrangements
  - Partnership with Primary Care Clinics
  - Partnership with Schools
- Law Enforcement
- Grant Writing
  - Universities
  - Foundations
- Relational, Shared Purpose, Mutual Benefit
- Board Composition



## Value Proposition

#### Partnership with Public Health – Prevention & Promotion

- Suicide Prevention
- Wellbeing Messaging Campaigns
- Education

#### **Health Informatics**

- What story does your data say?
- Who is interested in the great work you are doing?
- Payers are looking for Value brought to their network

#### **Marketing & Communication**

- Get the word out about what your doing
- Attract workforce and shows value

#### Co-Location; Merger; Acquisition; Private Equity

## **Advocacy & Education**



### National & State Trade Associations

- Connections to key stakeholders
- Lead messaging and areas of focus
- Lobby Legislatures



## Build Relationships with your Legislators

- Show them what you are doing & where there are gaps
- One of your biggest assets



#### Build Relationships with State Departments

 Help them with heavy lifting of policy change



## Build Community Awareness & Mobilization

 Marketing, Action Alerts

> council for Mental Wellbeing

## Questions, Comments?



## **Case Discussion**



### **Case Presentation**

## Gina Bizzoco-Fraatz, LCSW-R, Director of Project Development, Astor Services for Children & Familiar (New York)

Astor is being asked to assist in rural areas and we want to help; but we don't know the best way to do that. We are typically in the most populated areas – expansion typically driven by the number of people who need services due to fee for service models and because we want to make the most impact on a macro level. If we can't use the 'number of people' to guide us, how do we redefine 'need' to not be related to population density? How do we make an argument to reshape the mission and answer the question: why are we going to rural areas if the numbers aren't there? These are two examples of specific communities we're trying to target:

- School-Based Behavioral Health and Training school-based clinics in Pawling, Onteora, Millerton communities (and other schools requesting contracts)
- Sullivan RFP received award to do outpatient counseling services

**Barriers:** workforce shortages, increased needs, can use telehealth but then limited accessibility in rural areas

**Efforts to manage this:** working to increase salaries for new hires, retention committee, tried to partner with schools to have telehealth sessions during school day in their buildings with resources/WIFI (this was unsuccessful)

Main Question(s) from the presenter: How do we define or redefine 'need' so we can best manage it? How do you build a flag ship in a rural area? How do you develop sustainable services that successfully meet the identified needs in rural areas? How do you manage costs for travel and limited access to reliable internet?

## Open Discussion in Breakout Groups



## **Discussion Conclusion**



## Series Summary – Rural Health Equity



Structural Urbanism and its Impact on Rural Health Outcomes



Identifying equitable approaches and providing culturally responsive services



Improving capacity of primary care provider organizations



Innovative community partnerships



Improving workforce capacity and wellbeing for rural health providers



Sustainability considerations and opportunities













Thank You Case Presenters



## Series Feedback

What has been the most helpful thing you've learned throughout this ECHO?

Please unmute & share or type in chat box!



## Series Feedback

What is at least 1 thing we can improve if we do this ECHO again?

Please unmute & share or type in chat box!

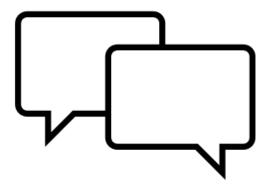
## Series Feedback

Has your organization been able to implement any of the information or strategies you've gathered throughout this series? If so, what has your organization been able to accomplish?

Please unmute & share or type in chat box!



## **Poll Question**



Are you willing to be interviewed about your Rural Health Equity ECHO experience as an individual and/or team/organization?

## Goodbye for Now!

- Faculty Closing Thoughts
- Post Series Survey Coming Soon!



#### Resources

#### National Council for Mental Wellbeing

- Center of Excellence for Integrated Health Solutions
- National Council for Mental Wellbeing CCBHC Success Center
- Behavioral Health Workforce is a National Crisis: Immediate Policy Actions for States
- Immediate Policy Actions to Address the National Workforce Shortage & Improve Care
- Leadership & Workforce Development Training
- Workforce Development Trainings, Events & Consulting
- Workforce Development: We Must Fill the Talent Pool
- Trauma-Informed, Resilience-Oriented Equity Climate Assessment

#### Other

- Aspen Hope Center
- Center for Medicare & Medicaid Services
- Northwest Minnesota Council of Collaboratives
- SAMHSA



## **Upcoming CoE Events:**

Comprehensive Health Integration Part 2: Domains & Constructs

Register for the webinar on May 25, 1-2pm ET

Office Hour: Health Equity in Perinatal Health

Register for the office hour on May 26, 2-3pm ET

Interested in an individual consultation with the CoE experts on integrated care?

Contact us through this form here!

Looking for free trainings and credits?

Check out integrated health trainings from Relias here

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Subscribe here

## Thank You

#### **Questions?**

Email paulaz@thenationalcouncil.org

SAMHSA's Mission is to reduce the impact of substance abuse and mental illness on America's communities.

#### www.samhsa.gov

1-877-SAMHSA-7 (1-877-726-4727) 1-800-487-4889 (TDD)