



Community Health Resources Commission Behavioral Health White Paper Series

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CHRC as grantor

Expand access to health care services in underserved communities in Maryland, inclusive of behavioral health

CHRC has a unique role among a field of state, federal, and private funding



CHRC's
behavioral health
grantmaking
impact from three
different
perspectives

Integrated
Care

Substance Use
Disorder Care

Re-entry
Programs

Addressing behavioral health needs from three different perspectives

- Building a Base for Integrated Care; June 2017
- Inclusion of Medications in SUD Care: Paving the Way to Uncover Opportunities and Challenges; August 2017
- Re-entry Programs: The Intersection of Behavioral Health and Criminal Justice; expected later this fall

The impact of CHRC behavioral health funding – Integrated Care

- Increased number of new patients receiving community-based behavioral health and somatic care in an integrated manner
- Increased capacity to provide patient-centered care
- Improved IT interactions and infrastructure, allowing sites to collect and understand patient-level data as well as allowing them to code and bill for services

The impact of CHRC behavioral health funding – Integrated Care, cont'd.

- Incorporation of evidence-based practices
- Increased ability for sites to leverage other funding streams, including both public and private funds

The impact of CHRC behavioral health funding – Substance Use Disorder Care

- Increased access to and awareness of Medication-assisted Treatment across the state within existing SUD service systems, providing resources for medications until providers could establish a system of reimbursement
- Demonstrated different ways to provide services depending on capacity and patient population

Critical success factors

Medicaid
expansion and
ACA

Visionary and
committed
leadership

Patient-
centered
vision

Collaborative
spirit

Willingness to
try new ideas

Use of data
for continual
improvement

How did CHRC's funding achieve this impact?

- Supported the clinical time and development of infrastructure for behavioral and somatic health care providers and promoted new partnerships with the criminal justice system
- Supported behavioral health providers as they transition to new payment systems
- Provided seed funding for innovative processes and programs that could be replicated statewide and provided technical assistance to organizations interested in implementing similar programs

How did CHRC's funding achieve this impact?

- Provided time and planning necessary to leadership to change the clinical culture of their organization regarding treatment options
- Supported critical up-front costs until providers could establish reimbursement mechanisms
- Supported the time needed to work with and educate partners about the importance of medications within the SUD system of care

Challenges Faced

Hiring and retaining staff

Sustainability, especially with reimbursement

Ability to offer full range of MAT services

Stigma, both internal and external

State and Federal policies

Ability to collect data within and across systems

Evidence base not always there

In Conclusion

- CHRC has supported programs that can be replicated statewide to
 - expand access to treatment services
 - inform policies and procedures to improve provision of care
- CHRC has a unique and important role in
 - serving vulnerable populations by supporting the infrastructure needs that allow for development and expansion of services
 - disseminating best practices and lessons learned among its grantee and wider audiences