Slide 1

**Mobile Integrated Health Care and Community EMS Programs**

**MIH Program Application Overview**

**October 16, 2018**

Slide 2

**Objectives**

Review the MIH Program application requirements
Understand the process for MIH program application submission to the Department of Public Health (DPH)
Learn more about the gap in service delivery narrative

Slide 3

**MIH Background**

MIH is a system of pre- and post-hospital services that utilizes mobile resources, including EMS Personnel and community paramedics, to deliver a coordinated continuum of care that supports patients’ needs in the community.

Care is planned through collaborative and innovative program development to address gaps in service delivery and prevent unnecessary hospitalizations and other harmful or wasteful resource delivery.

An MIH Program may apply separately to include an ED Avoidance Component.

Slide 4

**MIH Requirements**

Completed application form

Executive summary of the program

Gap in service delivery narrative

Coordination of care and partnership description and documentation

Organizational readiness description as well as an organizational chart specific to applicant organization’s management and structure in the field

MIH Compliance and Capacity Form

Medical control and medical direction description, Medical Director biography, medical oversight plan

Slide 5

**MIH Program Application Submission**

DPH will begin to accept MIH program applications in late November 2018

All application forms and materials will be posted at www.mass.gov/MIH

Applications and required documents will be submitted by fax

Applicants must submit a one-time, $1,000 application fee with each application

Approved programs will receive a Certificate of Approval and must submit the $30,000 registration fee to DPH

Program registration is valid for two years; approved programs will be required to apply to renew their approval

Slide 6

**MIH Program Application**

Slide 7

**Applicant Information**

Image of Applicant Information section

* **Ensure that all information is correct**
	+ the individual listed will be the primary contact for the application
* **Digital signature process**
	+ Instructions will be available on the MIH website
	+ Wet signatures are not needed
* **Ambulance service information**
	+ Includes total number of EMTs and paramedics that will work with the proposed program
* **Funding sources**

Slide 8

**Proposed Operational Partners**

Image of Operations Partners section

If your proposed MIH program will have a primary focus on MassHealth beneficiaries with behavioral health needs, the proposed program must partner or coordinate with an Emergency Services Program (ESP). This is a requirement is found at 105 CMR 173.040(A)(4).

Slide 9

**Attestations**

Image of Attestation section

* Attestation that the applicant understand the regulatory requirements of the MIH program that they are applying to operate
* Signed by an authorized signatory of the applicant organization and the proposed program’s Medical Director

Slide 10

**Proposed Program Overview**

Image of Proposed Program Overview section

* Applicants will attach an executive summary that describes the proposed program
* The executive summer must include:
	+ The purpose and goals of the program
	+ Key organizations and partners involved operationally in the proposed program
	+ The proposed service that would be provided as part of the program

Slide 11

**Gaps in Service Delivery Narrative**

Image of Proposed Gap in Service Delivery section

* The gap in service delivery narrative should use data and leverage a corresponding community health needs assessment (CHNA)
* Applicants should reference the *Guidance for Preparing a Gap in Service Delivery Narrative* when preparing their document
* Applicants must identify the improvements that their proposed services will address

Slide 12

**Gaps in Service Delivery Narrative, cont’d**

Image of Proposed Gap in Service Delivery section

**Proposed services should provide:**

* improvements in quality, access, and cost effectiveness
* an increase in patient satisfaction
* improvement in patients’ quality of life
* an increase in interventions that promote health equity, including cultural and linguistic competencies

Slide 13

**Gap in Service Delivery Narrative Organization**

Image of table describing organization of gap in service delivery narrative

Slide 14

**Gap in Service Delivery Narrative: Quantitative Data Source Examples**

Image of table describing quantitative data source examples to use in gap in service delivery narrative

Slide 15

**Gap in Service Delivery Narrative: Quantitative Data Metric Examples**

Image of table describing quantitative data metrics to use in gap in service delivery narrative

Slide 16

**Gap in Service Delivery Narrative: Qualitative Data Source Examples**

Image of table describing qualitative data source examples to use in gap in service delivery narrative

Slide 17

**Additional Resources Helpful for Developing Gap in Service Delivery Narratives**

* Community Tool Box, KU Work Group for Community Health and Development, University of Kansas, http://ctb.ku.edu/en
* Community Health Assessment Toolkit, Association for Community Health Improvement, http://www.assesstoolkit.org
* Community Health Assessment and Group Evaluation: Building a Foundation of Knowledge to Prioritize Community Needs: An Action Guide, CDC, April 2010, https://www.cdc.gov/nccdphp/dch/programs/healthycommunitiesprogram/tools/change/pdf/changeactionguide.pdf
* Principles to Consider for the Implementation of a Community Health Needs Assessment Process, Rosenbaum, JD, George Washington University, June 2013, http://nnphi.org/wp-content/uploads/2015/08/PrinciplesToConsiderForTheImplementationOfACHNAProcess\_GWU\_20130604.pdf
* CDC Community Health Improvement Navigator, https://www.cdc.gov/chinav/index.html
* Community Commons Community Health Needs Assessment,
https://www.communitycommons.org/chna/

Slide 18

**Partnerships and Coordination of Care**

Image of Partnerships & Coordination of Care section

* Applicants will attach a description on how the proposed program will ensure coordination of care between partners
* Include documentation that details existing or proposed partnerships between the proposed program and any health care or related entity.

Slide 19

**Partnerships and Coordination of Care, cont’d**

Image of Partnerships & Coordination of Care section

**Description should include** how the proposed program will deliver health care services without duplicating services.

**Applicants will attached a description on the proposed coordination and interaction with applicable 911 EMS systems, including confirmation of:**

* Policies and procedures that address the management of patients who experience a medical emergency and require activation of the 911 EMS system
* An MIH Program’s on-scene personnel, after assessment and in accordance with medical direction, determines that the patient is experiencing a medical emergency, the MIH Program’s on-scene personnel will activate the 911 EMS system and continue to assess and treat the patient

Slide 20

**Organizational Readiness**

Image of Organizational Readiness section

The description of organizational readiness should demonstrate that the applicant organization(s) have sufficient capacity to develop and operate the proposed program.

* “Sufficient capacity” can be demonstrated through financial and legal viability information as well as sustainability and compliance history
* Applicants must include:
	+ an organizational chart that is specific to the management and operational structure in the field and describe the roles for the proposed MIH program
	+ a completed compliance and capacity form

Slide 21

**Medical Oversight**

Image of Medical Oversight section

Applicants must attach a description of how the proposed program will provide access to qualified medical control and medical direction.

* Include the Medical Director’s biography
* Include the plan for medical oversight:
	+ Lines of authority and responsibility
	+ Development and review of clinical protocols
	+ Training and assessment of skills
	+ Communication systems
	+ Continuous quality assurance and improvement

Slide 22

**Medical Oversight, cont’d**

Image of Medical Oversight attestation section

The proposed program’s Medical Director must attest to complete medical oversight over all clinical aspects of the proposed program.

Slide 23

**Document Submission**

* The application includes instructions for filing the application by fax to DPH
* A 14-digit application ID will be auto auto-generated by the fillable PDF
* Please use 14-digit application ID on all communications regarding your application, including all attachments that accompany the application form
* Keep a copy of the application for your records

Slide 24

**Making MIH Work**

* Discuss partnerships that make sense to solve issues that affect the specific community, and bring together potential partners
* Think about care of patients as a system involving your community
* Encourage innovative programs and thinking about improvements that matter to patients and staff

Slide 25

**Potential Partners for ACOs and Hospitals**

**Your patient population will determine your partners:**

* Ambulance Services
* Visiting Nurse Associations
* Skilled Nursing Facilities
* Behavioral Health Providers
* Boards of Health
* Prisons
* Social Service Organizations
* Newly created organization (LLC, Inc., etc.)

Slide 26

**MIH & MIH with EDA Program Application Overview Sessions**

Image of table with upcoming webinar sessions

* Register online for the MIH with ED Avoidance program application overview session at:
<https://www.mass.gov/service-details/mih-and-community-ems-educational-resources>
* Materials from both webinars will be posted online following each session

Slide 27

**Online Resources**

Information, application materials, and resources will be posted online as they become available at: **www.mass.gov/MIH**

**Applicant Resources:**

* Application forms and instructions for each program type
* MIH Regulations, Guidance, and Protocols
* Data submission information and resources for each program type
* Application resources, such as best practices for completing a gap in service delivery narrative
* Instructions to sign up for the MIH and Community EMS Listserv to receive email updates

Slide 28

**Questions?**

Thank you for participating
in today’s webinar!

Questions?

Mobile Integrated Health Care Program

MIH@state.ma.us

617-753-8484