

ATTACHMENT B

DELIVERY SYSTEM REFORM INCENTIVE PAYMENT (DSRIP) PROGRAM COMMUNITY PARTNER (CP) BP3 ANNUAL REPORT RESPONSE FORM

PART 1: BP3 ANNUAL REPORT EXECUTIVE SUMMARY

1. General Information

Full CP Name:	Beth Israel Lahey Health Behavioral Services BHCP
CP Address:	199 Rosewood Dr Suite 225, Danvers MA, 01923

Part 1. BP3 Annual Report Executive Summary

Beth Israel Lahey Health Behavioral Services (BILH BS) remains committed to serving MassHealth Enrollees in the Northeast Region in partnership with 9 ACOs and 2 MCOs. Our BHCP continued to collaborate with these partners to improve the total healthcare needs (medical, behavioral, and social) of this complex population during BP3. Our efforts during this reporting period resulted in relationships with housing agencies, fuel assistance programs, faith-based organizations and social-service agencies.

Our BHCP launched a new care management platform, eHana, at the end of the 2019 however, most of the onboarding of staff and transfer of client records continued into this reporting period. We trained several BHCP staff as super users as well as conducted trainings on reports and care coordination utilization. eHana's platform has decreased our manual workarounds on billing and reporting, thus allowing us more time for program oversight. Improvements and additions to the platform are ongoing, allowing leadership to closely monitor client care, staff workflows, metric completion, and quickly pivot to improve outcomes.

During this time, we continued our Technical Assistance work with Milliman, Inc. to create a data warehouse of claims information which was delivered in the fall to our CP. Having the ability to quickly access claims data for our clients will allow us to further develop treatment goals, risk stratification, and financial planning for our program. A major goal moving forward will be to determine the decrease in total medical expense our CP has helped achieve with studies of client cohorts within the data warehouse.

Our program focused largely on mitigating the effects of COVID-19 on our client population and workforce. This included several new initiatives that would not have been previously possible, including increasing the use of telehealth services. In late March, staff transitioned to remote work, due to COVID-19. BILH BS quickly released and promoted the use of VIDYO, our HIPAA compliant telehealth platform. VIDYO has allowed our BHCP staff to connect with clients in their homes while keeping clients and staff safe. In the latter half of the reporting period, staff returned to outdoor community-based visits with clients, to ensure they are receiving the highest quality of care. COVID Recovery efforts continue into BP 4.

BILH BS administered client incentives during this reporting period by providing grocery gift cards to clients based on progress toward goals in their enrollment and/or on their care plan. Clients are eligible to receive a grocery gift card when they meet certain milestones in their engagement process.

BILH BS underwent a transition of program leadership, with a new director starting in early June. Emily Marion, LMHC, began in the position with a renewed interest in improving standard work practices, due to the changing nature of the way BHCP operates during the COVID-19 pandemic. Program management has been meeting weekly to ensure all workflows meet requirements of the program in this remote work environment. Significant improvements have been made to streamline the initial outreach workflow, and include the hiring of a bilingual Engagement Specialist, in addition to the current Engagement Specialist on staff. Improving and increasing outreach will be a central focus in BP 4.

Other initiatives include increased training and skill building for client-facing staff, further utilization of ACO Flex Programming for housing, and improvements to the nursing workflows, allowing for increased access to health and wellness coaching and medical follow-up by an RN. In December, our BHCP held a virtual Consumer Advisory Board Meeting with five clients at different stages of treatment within the program and BHCP program staff and leadership. Virtual CAB Meetings will continue into the next budget period.