



Department of
Medicaid



Resilience through
Integrated Systems and Excellence

OhioRISE Services Stakeholder Workgroup Meeting Mobile Response & Stabilization Services

January 22, 2021

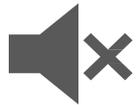
12:00-1:30 PM

The Webinar Will Begin at 12:00 PM

Webinar Instructions



If you have dialed in using a telephone, be sure to mute the sound on your computer to avoid feedback. If you are using sound via your computer, make sure sound is turned ON.



All participants can mute and unmute their own lines, **so please be sure to mute your line when you're not talking.**



All attendees may also enter comments or questions using the **question** box feature in the webinar control panel.



The slides from this meeting will be available following the meeting on the [OhioRISE Website](#).

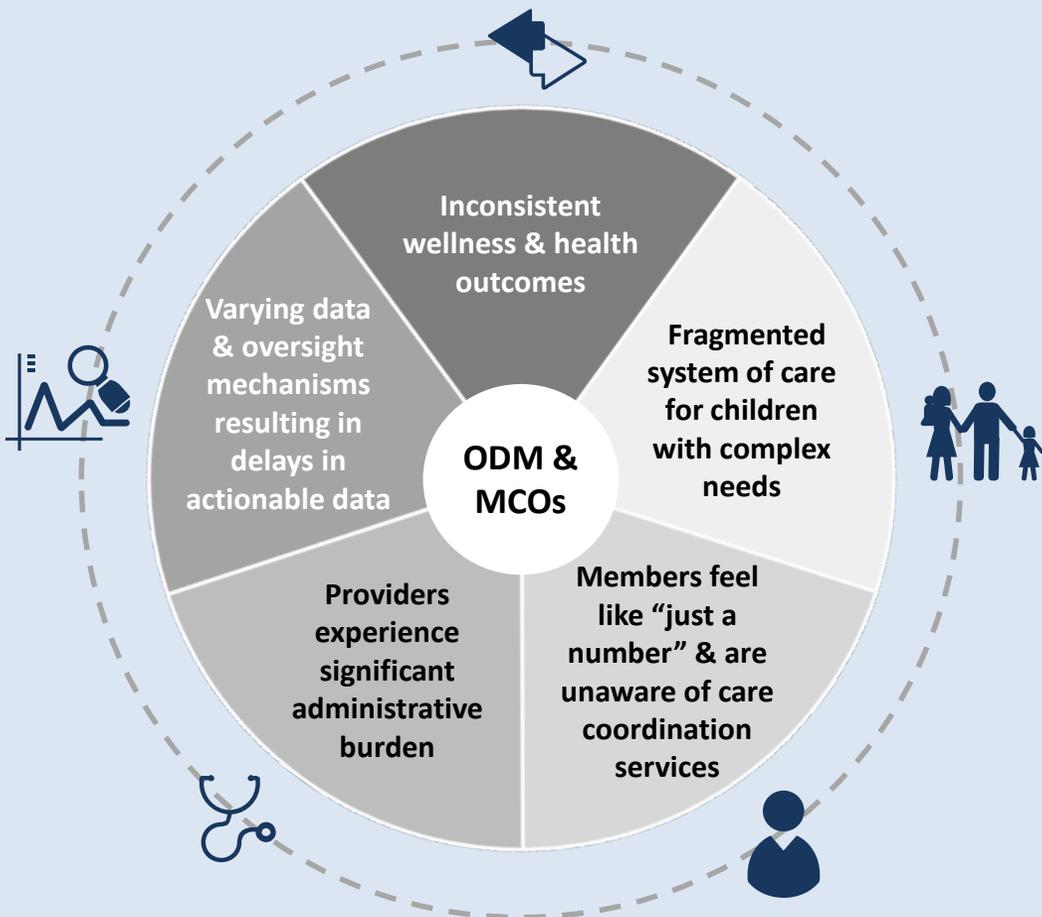
Agenda

- Welcome & Introductions
- OhioRISE Refresher
 - » Stakeholder Engagement
- MRSS and the Crisis Continuum of Care
 - » History of MRSS in Ohio
- MRSS Description/Introduction to MRSS
- Next Steps

OhioRISE Refresher

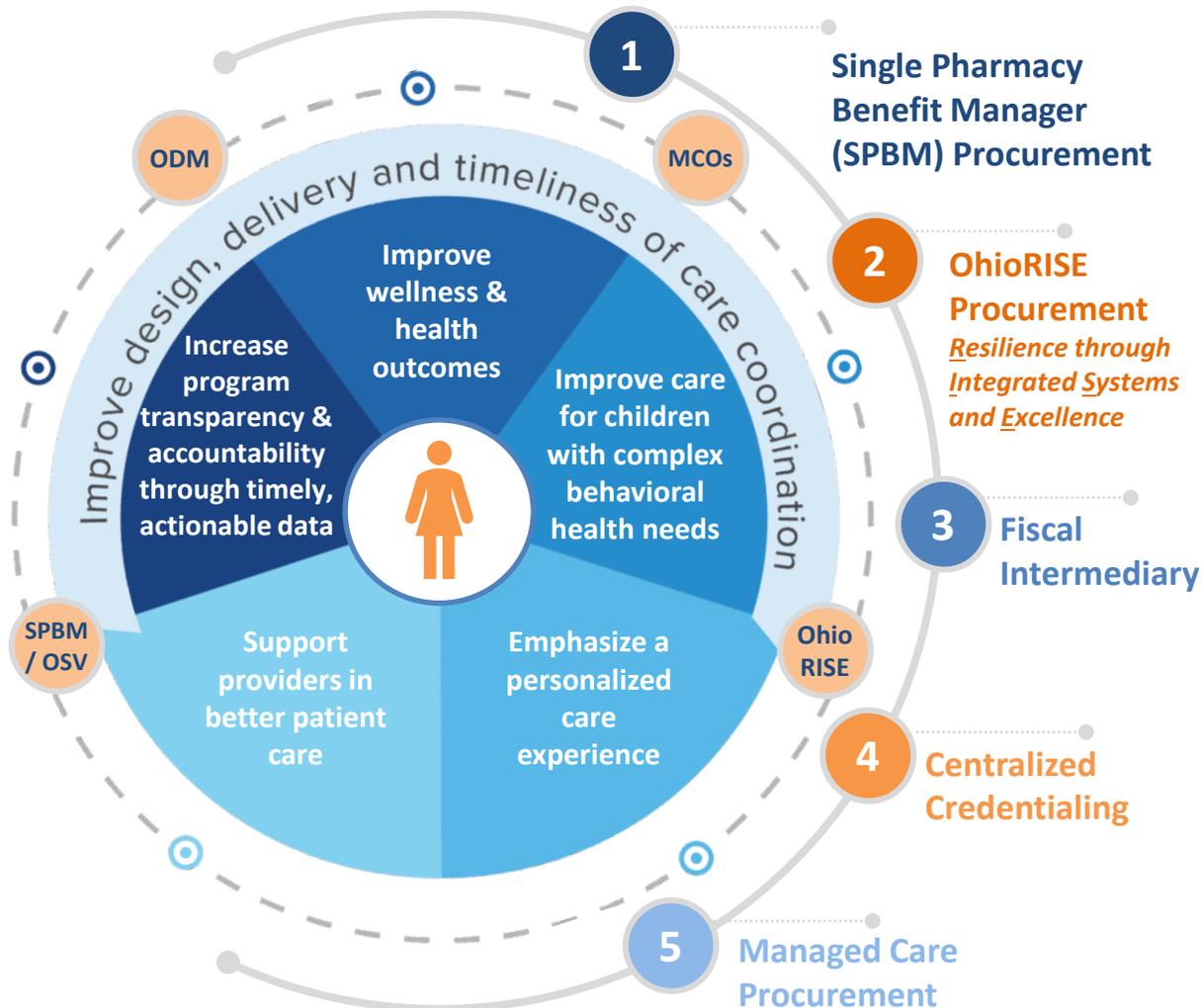
Today's Ohio Medicaid Managed Care Program

Members are impacted by business decisions that don't always take their needs or circumstances into consideration. Providers are not always treated as partners in patient care. We want to do better for the people we serve.



"Next Generation" of Managed Care in Ohio

The focus is on the individual with strong coordination and partnership among MCOs, vendors & ODM to support specialization in addressing critical needs.





Resilience through
Integrated Systems and Excellence

A specialized managed care organization (MCO) with expertise in providing services for the most complex multi-system youth

 **Specialized MCO**

ODM will procure a special type of MCO – a prepaid inpatient health plan (PIHP) – to ensure financial incentives and risks are in place to drive appropriate use of high quality behavioral health services.

 **Shared Governance**

OhioRISE features multi-agency governance to drive toward improving cross-system outcomes – we all serve many of the same kids and families.

 **Coordinated and Integrated Care & Services**

OhioRISE brings together local entities, schools, providers, health plans, & families as a part of our approach for improving care for enrolled youth.

 **Prevent Custody Relinquishment**

OhioRISE will utilize a new 1915c waiver to target the most in need and vulnerable families and children to prevent custody relinquishment.

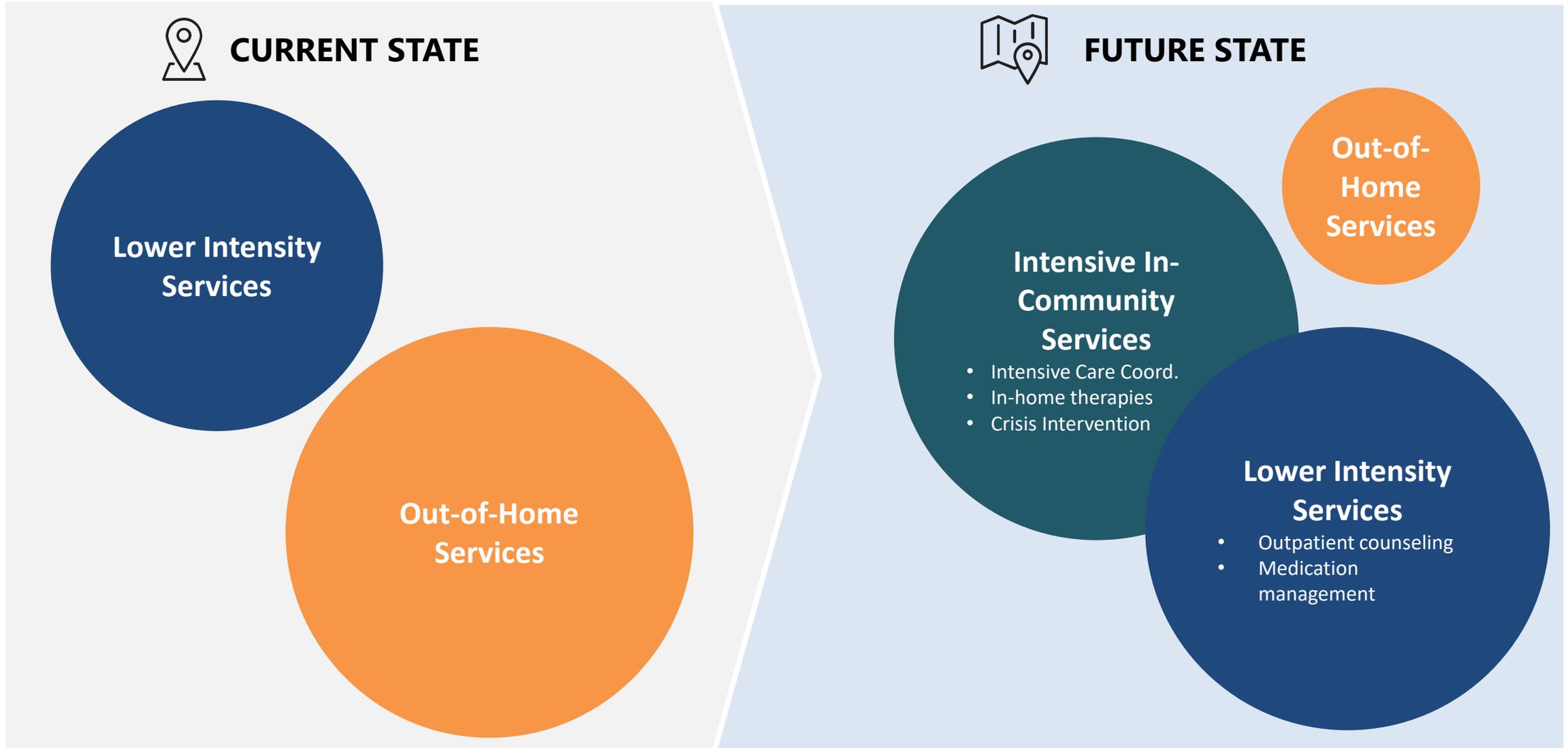
OhioRISE Enrollment

- ✓ Enrolled in Medicaid (managed care or fee for service)
- ✓ Up to age 21
- ✓ In need of significant behavioral health services
- ✓ Meet functional needs criteria as assessed by the Child and Adolescent Needs and Strengths (CANS)
- ✓ Estimate 55-60,000 children & youth by end of year 1

OhioRISE Services

- ✓ All existing behavioral health services – with a few limited exceptions (ex: BH emergency dept.)
- ✓ Intensive Care Coordination
 - Consistent with principles of High-Fidelity Wraparound
 - Delivered by a regional “Care Management Entity”
 - Two levels – intensive and moderate
- ✓ Intensive Home Based Treatment (IHBT)
- ✓ Psychiatric Residential Treatment Facility (PRTF)
- ✓ New 1915(c) waiver that runs through OhioRISE
 - Unique waiver services & eligibility
- ✓ Mobile Response and Stabilization Service (MRSS)
 - Also covered outside of OhioRISE (MCO and FFS)

We Need to Build Significant Capacity to Shift the System



OhioRISE Ecosystem

Family and Children First Cabinet Council:

Governor's Office of Children's Initiatives, Office of Family & Children First MHAS, ODJFS, DODD, ODM, DYS, DRC, ODH, ODE,
Federal and State funds | Governance and Oversight

Medicaid Managed Care Organizations (MCOs)
Physical health,
limited BH services

Service Providers

Contract with OhioRISE & MCOs to
provide services

OhioRISE Plan

Contract with CMEs, providers

Department of Medicaid
Contract, provide
oversight of the
OhioRISE and MCOs



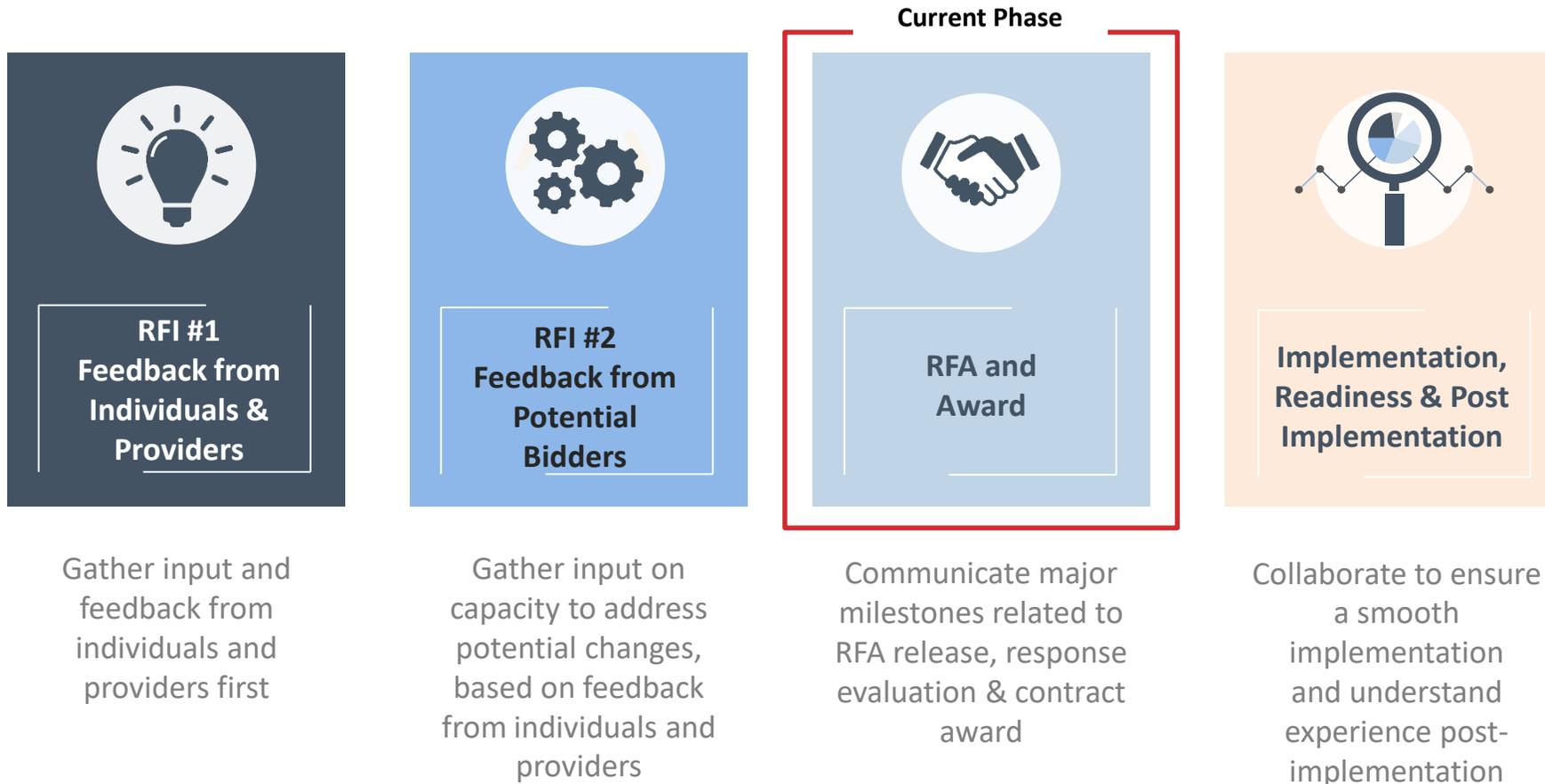
Network of Care Management Entities (CMEs)

Provide Intensive Care Coordination using High Fidelity Wraparound

Center(s) of Excellence (COEs)

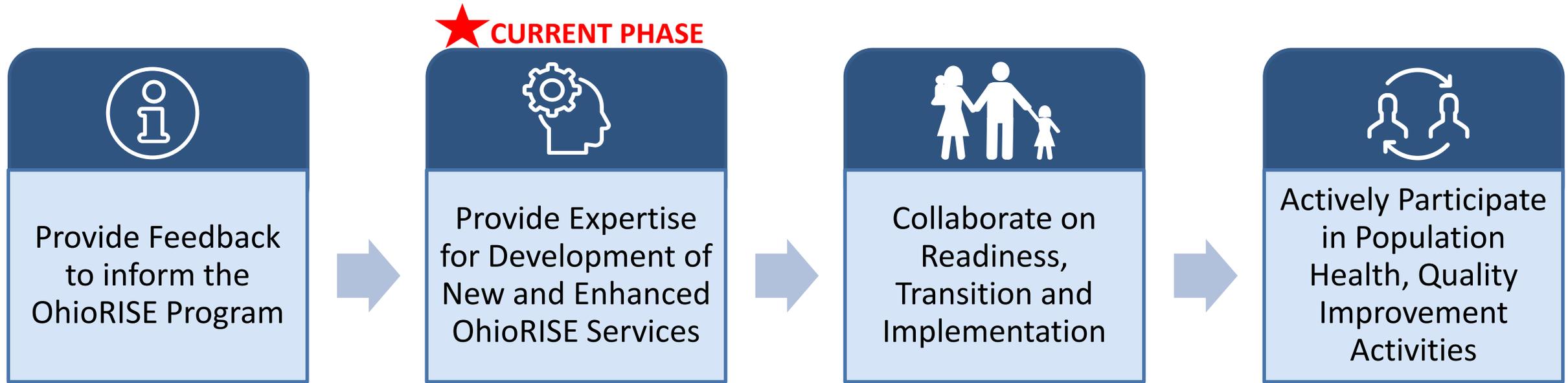
Support evidence-based practices, training,
fidelity reviews, workforce development

Medicaid Managed Care Procurement Project Phases



The current focus of the managed care procurement is on soliciting RFA responses and evaluating them in preparation for award.

Stakeholder Input Through Program Phases



Communicate with individuals we serve and our shared community partners
Provide ongoing feedback to OhioRISE Governance Network, collaborate, and learn across systems

Near-Term Areas of Focus

Provide feedback on new and enhanced OhioRISE services, eligibility

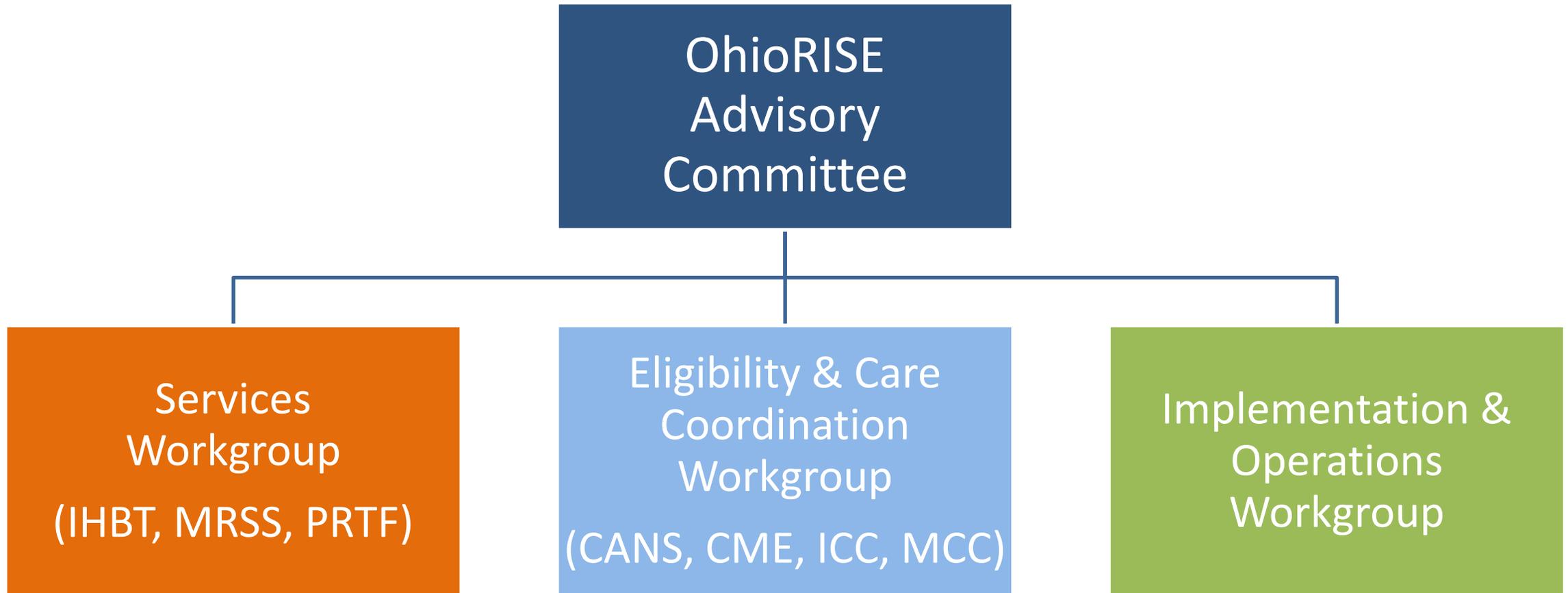
- ✓ Services
 - Service Specifications
 - Provider Qualifications
- ✓ Requirements for Eligibility
 - Assessment tool development, implementation, and training
- ✓ Care Coordination Model
 - Care Management Entities (CMEs)
 - Intensive and Moderate Care Coordination service development
- ✓ Provider Workforce Considerations
 - Recommendations for initial focus for OhioRISE
 - Recommendations for support needed for new or enhanced services

Longer-Term Areas of Focus

Prepare for and Implement OhioRISE Plan and Services

- ✓ Operational considerations
- ✓ Child/youth and family communication, education
- ✓ Provider education, training
- ✓ Preparations for Go-Live
- ✓ Feedback post-implementation

OhioRISE Advisory Committee & Workgroup Structure



OhioRISE Advisory Committee & Workgroups – Membership and Purpose

Purposes of the OhioRISE Advisory Committee & Workgroups

- » Offer specific advice, expert opinions and suggestions to Directors and staff regarding the OhioRISE program
- » Provide clinical and programmatic input on key components of new and enhanced services
- » Review rule development and changes
- » Provide critical technical feedback regarding initial implementation activities and OhioRISE operations



MEMBERS SELECTED FOR THE ADVISORY COMMITTEE WILL REPRESENT:

Diverse range of expertise and experience

Local system partners

Associations and providers of services

Youth and Families with lived experience

Ohio's geography

MRSS and the Crisis Continuum of Care History in Ohio

Crisis Continuum – Vision & Infrastructure

The Ohio Department of Mental Health and Addiction (OhioMHAS) and its partners are working to develop a supported quality crisis response system to serve as a timely and appropriate alternative to arrest, incarceration, unnecessary hospitalization or placement in too restrictive a setting with insufficient resources to address the acute nature of the situation a person is experiencing.

The vision is for every Ohioan to have access to a visible and accessible crisis continuum of services and supports that are person-centered, quality driven and focused on ensuring people are stabilized and thriving in the community.

BH Crisis Infrastructure			
Connect	Respond	Stabilize	Thrive
<ul style="list-style-type: none"> Care Lines, Hot Lines, Warm Lines Crisis Text Lines Treatment Finders 	<ul style="list-style-type: none"> Mobile Crisis, MRSS Teams CIT Teams Crisis Response Units (Critical Incident Stress Management Teams (CISM)) 	<ul style="list-style-type: none"> Crisis Stabilization Centers Short Term Residential Treatment Facilities Step Down (Adam & Amanda etc.) 23-48 Hour Observation Beds 	<ul style="list-style-type: none"> Housing Options Treatment Access Connections to Recovery Supports Community Supports Transportation Services

Mobile Response and Stabilization Services (MRSS) – History in Ohio

- The System of Care ENGAGE 2.0, award follows Ohio’s 4-year ENGAGE 1.0 (2013-2017) grant.
- This opportunity is a bold and strategic investment to “scale up” mobile response and stabilization services (MRSS), high fidelity wraparound, and intensive service coordination for children and youth ages 0 to 21 with severe emotional disturbances and their families.
- ENGAGE 2.0 advances collaboration across systems to promote person-centered social, emotional wellness and recovery for Ohio’s children, youth, and families. Two local planning jurisdictions for children’s behavioral health lead a multi-county region “Hub Center” in Northwest and Southwest Ohio.
- The MRSS teams provide 24/7 hotline, on-site mobile response triage, clinical assessments, referrals and follow-up services including wraparound for children, youth, young adults and families.

Introduction to MRSS

Mobile Response and Stabilization Services (MRSS) – Introduction

- MRSS helps children and youth and their families to promptly address crises and get access to supports
 - » Goal is to intervene before something urgent becomes an unmanageable emergency
 - » Mobile response: Initial assessment and planning at request of child/family
 - » Stabilization service: Coordination and delivery of services, link to longer-term supports
- Ohio’s approach will build on the existing OhioMHAS Mobile Response and Stabilization Services efforts (ENGAGE 2.0)
 - » Leverage the existing service approach and provider competencies
 - » Create a statewide capacity to offer the service
 - » Offer supports to MRSS providers to ensure fidelity to the service
- MRSS will be accessible across the Medicaid program: managed care, OhioRISE, and fee-for-service.



Key Areas for Stakeholder Engagement

- ✓ Inform service based on experience with ENGAGE 2.0 MRSS
- ✓ Staff credentials and requirements

High Level Definition

- Mobile response and stabilization service (MRSS) is a structured face-to-face treatment and support service provided by a mobile response and stabilization service team that is designed to promptly address a crisis situation in order to:
 - » avert a psychiatric admission or other out of home placement; or
 - » to maintain a child or youth who has recently returned from a psychiatric hospitalization or other out of home placement in their home or present living arrangement.

Best Practices

- MRSS is usually provided for up to six weeks
- Initial mobile response occurs within 60 minutes followed by a de-escalation period up to 72 hours and stabilization for up to six weeks
- Team model with competency in the population under 21
- MRSS is available 24 hours a day, 365 days a year
- The crisis is defined by the caller

MRSS is provided to:

People who are *under the age of twenty-one*.

Who are experiencing escalating emotional symptoms, behaviors, or traumatic circumstances that have compromised or impacted their ability to function within their family, living situation, school, or community.

These crises arise from situations, events, and/or circumstances that are unable to be resolved with the typical resources and coping skills or jeopardize the development of adaptive socio-emotional skills and strengths critical for healthy life functioning.

MRSS Activities

Screening & Triage

Mobile Response

Stabilization

MRSS Activities - Screening & Triage

- MRSS Service can be initiated either through
 - A call through the hotline
 - A call directly to the MRSS provider
- When the service is initiated through the call center then :
 - The provider will receive screening and triage information from the call center and deploy a mobile response.
- When the service is initiated through direct connection with the provider then:
 - An initial triage screening is done to gather information on the crisis or crises, identify the parties involved, and begin determining an appropriate response or responses. The initial triage screening is performed remotely, usually by telephone.
- All calls with a young person in crisis where 911 is not indicated, are responded to with a mobile response.

MRSS Activities - Mobile Response

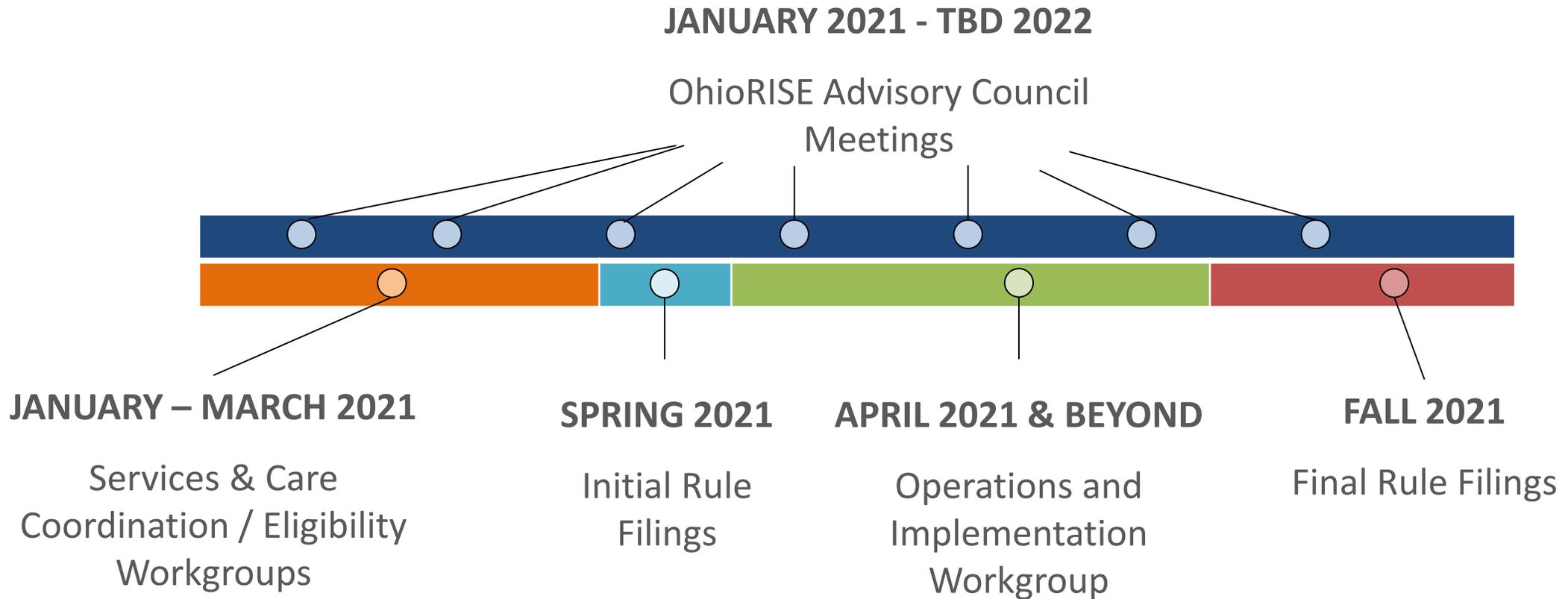
- Activities include:
 - Urgent evaluation of elements for de-escalation
 - Clinical interventions to de-escalate and stabilize the presenting crisis
 - Solution focused therapeutic responses
 - Consultation
 - MRSS intake
 - Crisis Assessment Tool (CAT) and evaluation of the presenting crisis including an assessment of child and community safety, caregiver capability, and clinical risk, social and natural supports; (time frame for doing CAT)
 - Development of an Individualized Crisis Plan including safety precautions

MRSS Activities - Stabilization

- Flexible array of services delivered through the development of a comprehensive and coordinated trauma sensitive ***Individualized Crisis Plan***. Interventions may include, but are not limited to:
 - Crisis intervention
 - Short term counseling
 - Peer support
 - Short term behavioral assistance
 - Skill building
 - Coaching
 - Mentoring
 - Referral to :
 - intensive in-community therapeutic services
 - medication management
 - caregiver stabilization interventions
- Advocacy and networking by the provider to establish linkages and referrals to appropriate community-based services and natural supports
- Coordination of specialized services to address the needs of youth with co-occurring intellectual/developmental disabilities and substance use are also available through this service.
- Service transition

Next Steps

OhioRISE Stakeholder Timeline



OhioRISE Website

On the [OhioRISE website](#) we will post –

1. Registration links for all OhioRISE meetings
2. Presentation materials from all meetings

Upcoming Meetings ^

Meeting Name	Date	Time	Registration Link
OhioRISE Advisory Committee Meeting	Monday, January 11, 2021	12:00PM – 1:30PM	Registration Link
OhioRISE Workgroup - MRSS	To be Updated	To be Updated	To be Updated
OhioRISE Workgroup - CANS & Care Coordination	To be Updated	To be Updated	To be Updated

Presentation Materials ^

[OhioRISE Advisory Committee Members](#)

[OhioRISE December Stakeholder Meeting – December 18, 2020](#)