

A large, abstract graphic in the background, resembling a butterfly or a fan, composed of many thin, radiating lines in shades of yellow, orange, red, green, blue, and purple.

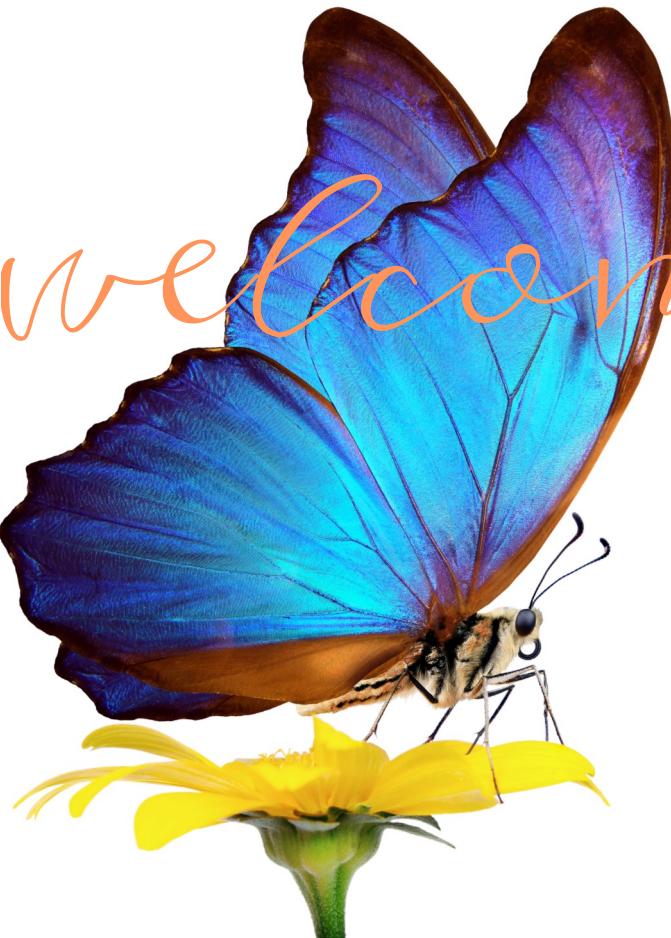
# THE EVOLUTION OF *wellness*

2018-2019  
TMCA Annual Report  
to the Board of Directors

# Growth

- (1): a process of continuous change from a lower, simpler, or worse state to a higher, more complex, or better one.
- (2): a process of gradual and relatively peaceful social, political, and economic advance.

welcome



# A MESSAGE

## from the executive director

Change is a process not an event....

I have been in the Behavioral Health field for 30 years. In this relatively short amount of time change has become the constant. Incremental in nature, this process of evolution has impacted the behavioral health industry view of treatment and supports for individuals with mental health and substance use disorders. From the design of payment and service structure to treatment modalities and education, how we view the diseases and the ability to recover to reach maximum human potential has advanced considerably.

One of the greatest transformations has been the recognition of an individual's role in their own treatment and the complementary supports necessary to be in place for a person to achieve recovery or for children the necessary elements to foster resiliency. The system no longer encourages the individual to be complacent, being acted upon by professionals and accept the chronicity and limitations of the disease. We no longer rely only on pharmacology, physician and clinician appointments in traditional office settings but also recognize the importance of the impact on an individual's well-being to have stable housing, have the supports of peers who have lived experience, feel productive in their day's structure, to have their needs and strengths coordinated across systems and to have services delivered in settings which are convenient and accessible.

The basic design of the Franklin Fulton Behavioral Health Medicaid program included the building blocks of traditional behavioral health services. Tuscarora Managed Care Alliance has developed, with the benefit of effective management of medical claim dollars and the resulting savings, auxiliary services to support individuals working towards their personalized journey of recovery. These programs address what the healthcare industry has coined the Social Determinants of Health and improve the likelihood of positive outcomes complimentary to basic treatment.

This year's annual report will highlight some of the efforts the agency has put into place to better empower Franklin/Fulton residents to become well and craft their own journey towards recovery. We will discuss how the individual is assessed to discover both strengths and challenges related to Social Determinants of Health to programs which inherently address the determinants in addition to the individuals behavioral health needs. We will also discuss whether the programs are meeting the intended purpose of recovery through not only data and outcomes but also from direct thoughts of clinicians and individuals using the programs.

TMCA is committed to enhancing the lives of the Franklin and Fulton County Medicaid recipients through a mutual evolution toward wellness, not only in our traditional services, but also through supports and sound fiduciary management. These constant changes will benefit our population and we will continue to adapt to whatever changes come our way.

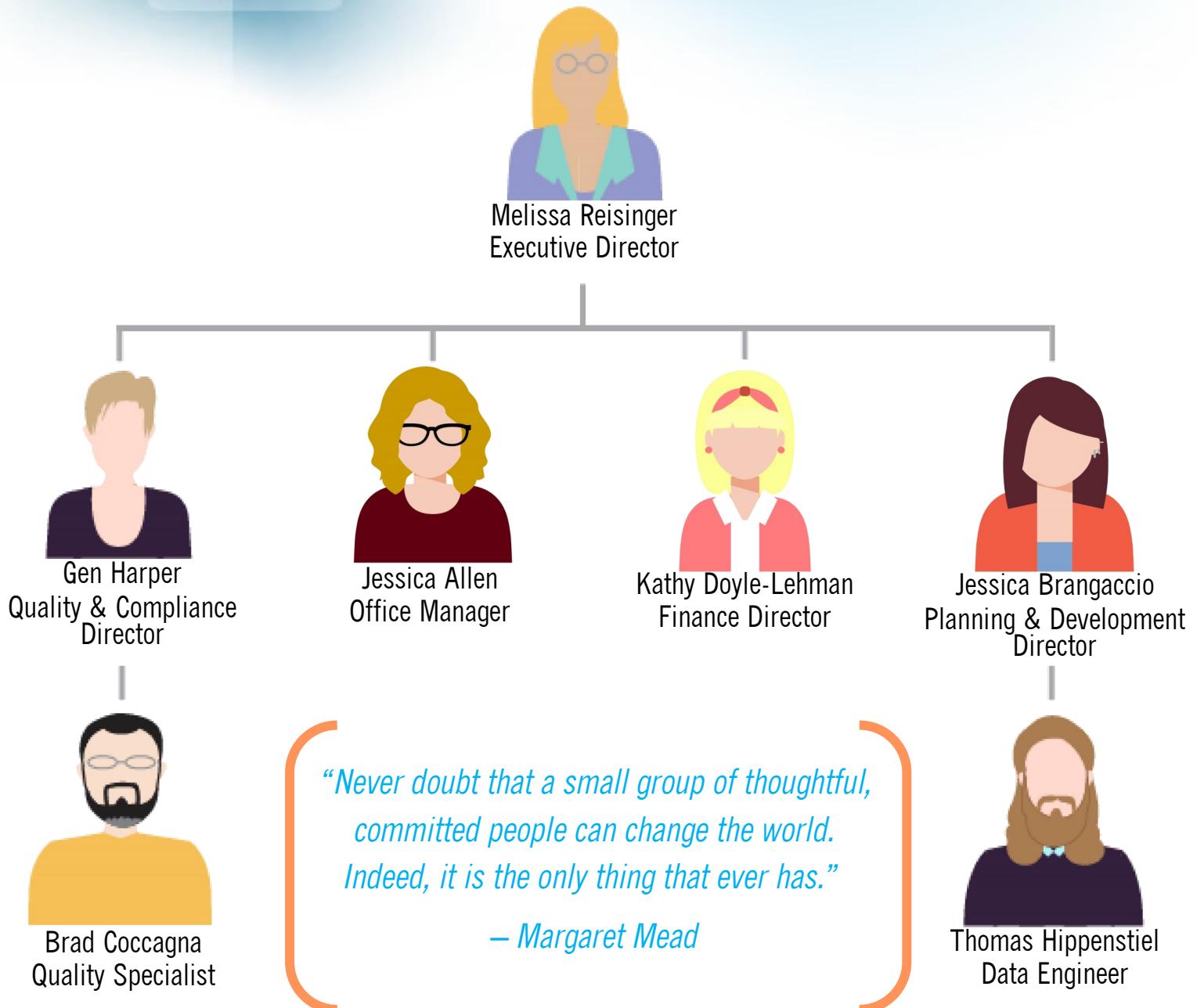
.....Change is a process and not an event.



Melissa Reisinger, Executive Director

# OUR ORGANIZATION

meet our most valuable assets



# STEERING COMMITTEE

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Franklin County Community Member

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# HEALTHCHOICES DEMOGRAPHICS

power to change starts in our community



## CHILD/ADOLESCENT CONSUMERS BY SERVICE:

Inpatient Mental Health	73
Psychiatric Partial Hospital	3
Inpatient Drug & Alcohol	8
Outpatient Mental Health	2,328
Behavioral Health Rehab. Service	466
Residential Treatment Facility	29
Outpatient D&A	27
Crisis Intervention	220
Family-Based MH	190
Targeted MH Case Management	296
<b>GRAND TOTAL</b>	<b>2,510</b>

## ADULT CONSUMERS BY SERVICE:

Inpatient Mental Health	263
Outpatient Mental Health	3,617
Outpatient Drug & Alcohol	951
Inpatient Drug & Alcohol	286
Crisis Intervention	430
Targeted MH Case Management	477
Peer Support Services	112
Tele-psychiatry	114
<b>GRAND TOTAL</b>	<b>4,607</b>

**PENETRATION RATE: NINETEEN PERCENT OF MEMBERS RECEIVED A SERVICE.**



# MEASURES OF WELLNESS

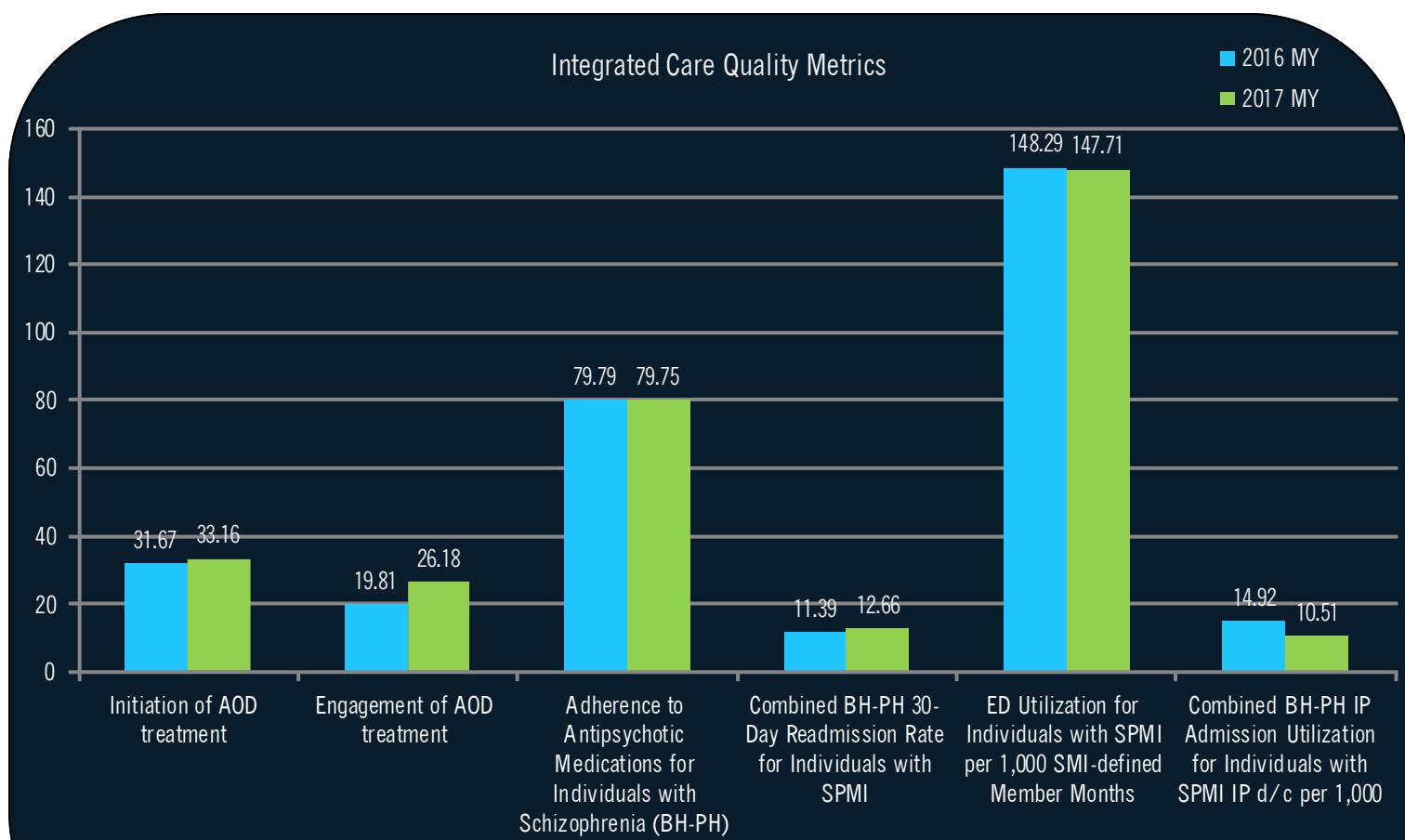
## assessing quality outcomes

### INTEGRATED HEALTHCARE—PHYSICAL AND BEHAVIORAL HEALTH

The Healthcare Effectiveness Data and Information Set (HEDIS) is a widely used set of performance measures in the managed care industry, developed and maintained by the National Committee for Quality Assurance (NCQA).

The Department of Human Services is continuing a Pay for Performance Program (P4P) for all Medicaid (MA) Managed Care Contractors per HEDIS 2019 and select Pennsylvania Performance Measures (PAPMs) . This P4P program is aligned with the Departmental goal for greater integration and coordination of behavioral health (BH) and physical health (PH) services. The Department expects this Integrated Care Plan Program to improve the quality of health care and reduce MA expenditures through enhanced coordination of care between Physical Health Managed Care Organizations, Behavioral Health Managed Care Organizations, Primary Contractors and providers.

Franklin Fulton members are benefiting from a variety of programmatic efforts that address the need for physical health and mental health coordination and collaboration. Below are the performance measure rates from the past two Measurement Years for TMCA.



# SOCIAL DETERMINANTS OF HEALTH

## focusing on whole-person wellness

### DLA-20 ASSESSMENT TOOL

The DLA-20 is an assessment tool of overall functionality across multiple life domains. The assessment is 20 questions based on an individual's daily living activities over the past 30 days. Some of the daily activities included in the assessment are time and money management, nutrition, family relationships, community resources and coping skills.

*"My life was so unmanageable in many areas. These questions helped me to visualize and set goals in the areas that need the most attention right now."*

*-Consumer*

The DLA-20 can help uncover an individual's needs with the social determinants of health. For example, if an individual has a low score in housing stability or social network, a plan will be developed to focus on those needs. Each category is scored based on strengths (5, 6, or 7) and weaknesses (1, 2, 3, or 4) as compared to the general population. Scores are then added up and divided by 20 to give the final DLA-20 score. These are the final scores that are provided to TMCA and PerformCare.

*"It is a great tool to see a comparison in progress for individuals who stay with us up to 90 days, versus someone who only stays for, say, 45 days. The numbers are very different. As far as goal planning, it helps me in seeing the areas individuals lack in to set up goals to achieve in those areas while they are here. And, yes, I think it helps. Especially in the beginning because it shows the vital areas in their lives that need attention to look and work at to be successful moving forward."*

*- Certified Recovery Specialist*

The first assessment takes place upon the beginning of service. Follow-up assessments can be repeated as frequently as every 30 days, but take place at various intervals depending on the type of service the individual is receiving. A final assessment is given at the time of discharge.

The DLA-20 levels the playing field across all services types because it measures improvements in functioning rather than symptom reduction. The focus on improving basic daily functions helps the individual and providers see the progress being made.

*"80-90% of treatment outcomes are dependent upon Social Determinants of Health, 10-20% of treatment outcomes result from traditional medical care."*

*- Theodore A. Christopher, MD FACEP*



# SOCIAL DETERMINANTS OF HEALTH

## focusing on whole-person wellness

### NURSE NAVIGATOR PROGRAM

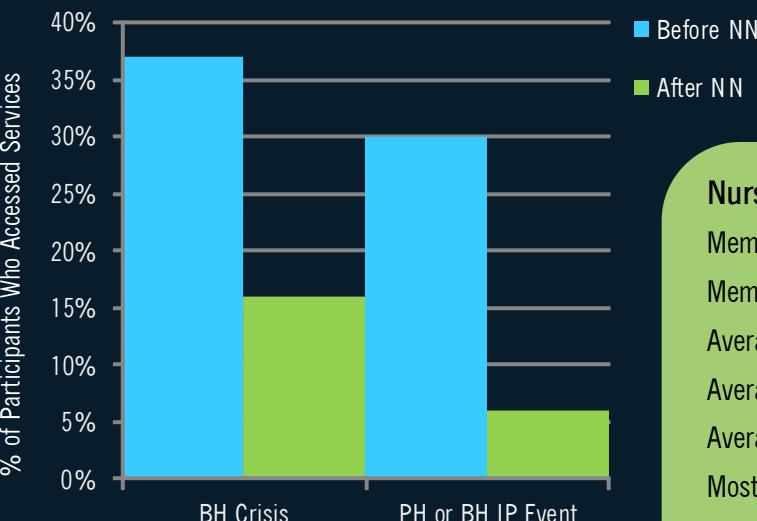
It is widely believed that treating the whole person through the integration of behavioral health and general medical healthcare can save lives, reduce negative health outcomes, facilitate quality care, and promote efficiency and cost savings.

*"The program is fantastic and the staff are awesome! The staff have been very helpful to me in losing weight and improving my health"*  
-Member

TMCA introduced the Nurse Navigator program in 2017 to address integration of care for members with identified high Behavioral and Physical Health needs. There is a Wellness Plan developed for each member that participates, and the Nurse and the members Intensive Case Manager work together to coordinate care between Physical and Behavioral Health Providers. Some examples of success include support of a member in accessing necessary diabetic medication, which reduced the need to visit the emergency room when having a diabetic crisis; monitoring a wound a member was having trouble with because they did not want to leave their home; and connecting members with a home delivery of healthy meals program, sponsored by their PH-MCO's. When analyzing overall costs of care for members enrolled in the Nurse Navigator program, the noted trend was an increase in PH costs, and minimal change in BH costs. The belief is members were accessing PH care they were previously unable to access. There was a 19% reduction in crisis events overall for this population 6 months after being initially enrolled.

*"The program has helped our individuals to improve their lives by decreasing physical and behavioral health symptoms. The participants have been able to gain access to the necessary providers and resources in the community in order to improve their quality of life. Many individuals have learned more about nutrition in order to be able to lose weight, improving their physical health, which has improved their overall wellness. This has led to decreases in emergency room visits and inpatient hospitalizations because the individuals are accessing the appropriate providers while remaining in their natural environment. We have been able to serve many individuals who have complex physical and behavioral health concerns in both Franklin and Fulton counties through education, assistance, and support."*  
-Provider

Decrease in BH Crisis & PH/BH Inpatient Events



#### Nurse Navigator Details:

Member Count—43

Members with  $LOS \geq 2$  Months—40

Average Length of Stay—6 Months

Average Units of Service-ICM—117.6

Average Units of Service-Nurse Navigator—58.44

Most Common Diagnosis—Major Depressive Disorder

Second Most Common Diagnosis—Schizoaffective Disorder



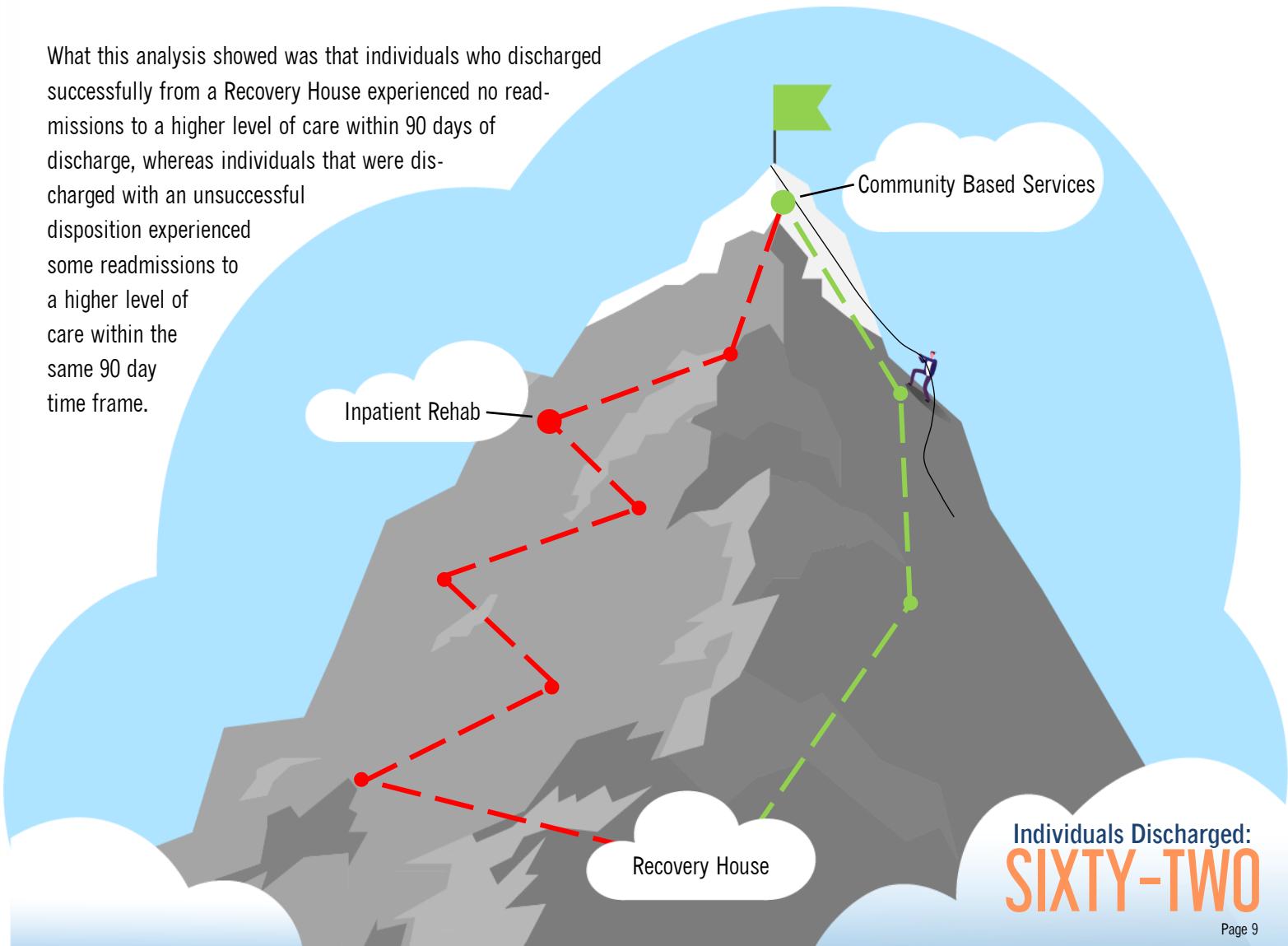
# SOCIAL DETERMINANTS OF HEALTH

## focusing on whole-person wellness

### SUPPORTIVE HOUSING BRIDGE SUBSIDY

TMCA has provided rental subsidies for individuals residing in a Recovery House on a short-term basis. These individuals must have recently completed treatment in a rehabilitation program or are those at risk of requiring intensive treatment in a rehabilitation program without immediate diversion. During the fiscal year 55 new individuals were served, with 6.5 months being the average length of stay in a Recovery House. Additionally, those discharged from a Recovery House during this time period were assigned a discharge disposition of successful, unsuccessful, or remained in Recovery Housing. A successful discharge was defined as one where the individual was able to move into a living situation that was stable, a recovery support system was present, and they were engaging in activity that was meaningful to them. An unsuccessful discharge was defined as one where the individual left the Recovery House due to ongoing substance use, moved into an unstable housing situation that included a homeless status, and lack of recovery supports. Individuals that remained at the Recovery House beyond their TMCA funded authorization period were not categorized as successful or unsuccessful.

What this analysis showed was that individuals who discharged successfully from a Recovery House experienced no readmissions to a higher level of care within 90 days of discharge, whereas individuals that were discharged with an unsuccessful disposition experienced some readmissions to a higher level of care within the same 90 day time frame.



# SOCIAL DETERMINANTS OF HEALTH

## focusing on whole-person wellness

### HOUSING DEVELOPMENT

Housing is a fundamental need in the lives of everyone. Housing needs across Franklin and Fulton Counties have continued to increase, with the total number of individuals on a wait list or searching for subsidized housing being in excess of 200 at the end of the fiscal year. In addition to those searching for housing within our community, there was an increase in the use of the 2-1-1 system, a 24/7 free and confidential service that assists individuals in finding the local resources they need. During the last fiscal year, an average of 253 calls per month occurred in Franklin County related to housing searches, including requests for support and funding related to housing expenses.

In response to this need, and due to the success of the Franklin County Housing Authority (FCHA) utilizing all of their HUD funded housing vouchers within a short time frame, TMCA submitted a five-year housing plan for Franklin County that included a collaborative partnership with the FCHA to provide rental subsidies and housing support for individuals with either a mental illness or co-occurring disorder of substance use and mental illness, that meet the eligibility requirements of the HUD funded vouchers. This plan will provide rental subsidies for use in up to seven rental locations in the community, housing supports linked to the individuals and families that will be utilizing the subsidies, and additional funding that can be used to further support sustained and successful living in community based housing.



Allocation of Fulton County HUD funded housing vouchers comes from outside county, but it has been identified that housing support services are a need in order to maintain the 187 vouchers that are currently assigned to the Fulton County community. TMCA is collaborating with organizations within Fulton County to create a plan to address Fulton County's unique needs this in the upcoming fiscal year.

# RECOVERY AND RESILIENCY

## supports towards wellness

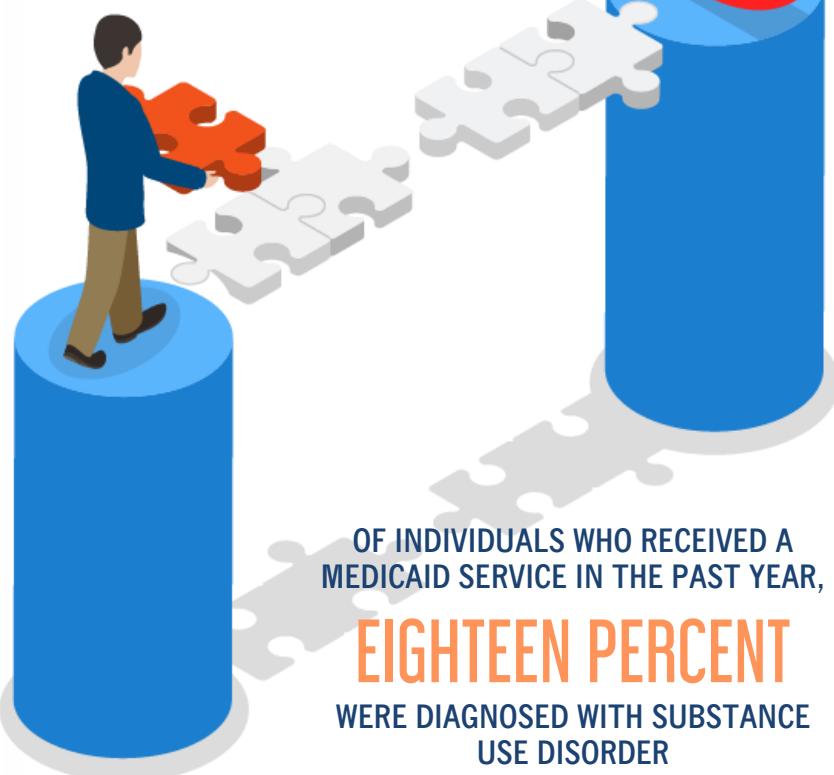
### DRUG & ALCOHOL CERTIFIED RECOVERY SPECIALISTS (CRS)

A Certified Recovery Specialist is defined as peer based recovery support services for individuals striving to achieve long-term recovery from substance use disorders. This service targets adults with a substance use disorder and a high re-entry rate into substance use rehabilitation centers and/or institutions that are involved with the Criminal Justice system. During this fiscal year, 53 individuals were served and approximately 20% of this group completed the full six (6) month service time frame. Initial outcomes for those individuals who completed the program fully include 100% engagement with outpatient services, increased overall functionality, and 90% did not have an admission to a higher level of care in the 90 days following program completion.

INDIVIDUALS WHO RECEIVED CRS SERVICES SAW, ON AVERAGE, A

**TWENTY-THREE PERCENT**

INCREASE IN OVERALL FUNCTIONALITY BASED ON DLA-20 ASSESSMENT SCORES



*"I believe that Certified Recovery Specialists are an essential ally not only with our providers, but most importantly, within our community to advocate for all individuals in recovery. They provide a supportive network and recognize the critical role that peer support plays in supporting individuals with choosing their recovery path. Certified Recovery Specialists help share resources and build skills to find meaning and purpose in their lives and within their community by helping build both community and interpersonal relationships in order to bring awareness that people can recover, help end harmful stigma, and help people treat substance use disorders as seriously as any medical condition." - Certified Recovery Specialist*

### RECOVERY POPULATION

The total combined population for Franklin and Fulton County is estimated at 164,463. In the 2017 National Survey on Drug Use, it was estimated that 8.4% of the population experienced a Substance Abuse Disorder in their lifetime. Using this estimate, we can assume that 13,814 residents in our community have or had substance abuse issues requiring treatment. One in four Franklin County residents have Medicaid for their healthcare coverage resulting in an estimated 3,454 Medicaid recipients who are likely to experience a substance abuse disorder.

# RECOVERY AND RESILIENCY

## supports towards wellness



The Peer Operated Recovery Center will serve adults with a substance use disorder, either active or in recovery, while also serving as support for individuals impacted by substance use of a loved one. The center will be operated by individuals who have lived experience in recovery and resources will include education, information, and support, while also promoting substance free pro-social activities. Additionally, the center will provide opportunities for referrals, linkages, and coordinated service to address individual treatment needs and to assist with increasing planning related to social determinants of health.

Reinvestment funds will be utilized for startup costs associated with the creation of this center to equally serve Franklin and Fulton County communities, with the main center being geographically located in an accessible area, so that it can also serve as a hub for the mobile services that will be offered to areas with limited access.

## PEER SUPPORT SERVICES (PSS)

Peer support services are an evidence-based mental health model of care which consists of a qualified peer support provider who assists individuals with their recovery from mental illness. Currently there are three providers for the Franklin and Fulton County area. Peer support services are increasing both in the number of certified staff that are available to provide the service and with the number of individuals being engaged in the service. Due to the increased availability of certified staff, the average length of time that individuals are remaining engaged for support is increasing as well, with the hope that this will support a strong individualized continuum of care for our target population.



*"The Peer Support Program is really strong. Peer Support helps individuals advocate for themselves and it empowers people. They have the support they need to work on their goals with solid ground under their feet."*

*— MHA Program Manager*

# RECOVERY AND RESILIENCY

## meaningful success through adversity

## CONSUMER FAMILY SATISFACTION TEAM (CFST)

The Consumer Family Satisfaction Team (CFST) is a group of surveyors that are chosen to be a part of the team because they are a person with lived experience either directly or as a family member. Currently there are six surveyors that are completing surveys with Medicaid members that received a service. A minimum of 110 surveys are completed each quarter, resulting in at least 440 surveys generated per year. The data from these surveys is then analyzed by the Mental Health Association of Franklin and Fulton Counties and reported to TMCA for review.

The image below represents adult answers to the question “What is important to you in your treatment?”



# RECOVERY AND RESILIENCY

## meaningful success through adversity

### RESILIENCY THROUGH CHILDREN'S SERVICES

Children are the most resilient population and they have the best chance of recovery. The earlier we can identify and get families into treatment the less likely it will be a lifelong need. TMCA has focused on the importance of improving access to the least restrictive services available, while identifying the needs of the child and ensuring the participation of the family.

Mental Health Outpatient is the least restrictive level of service. TMCA has developed and encouraged providers to implement evidence-based treatment to help improve the quality and effectiveness of service. Some of the specialized evidence-based practices available include TF-CBT (Trauma-Focused Cognitive Behavioral Therapy) and PCIT (Parent-Child Interaction Therapy). PCIT focuses on younger children (ages 2-7) and works on their relationship with their parents while teaching the parent techniques to decrease negative child behavior. TF-CBT is an evidence-based treatment for children and adolescents impacted by trauma and their parents or caregivers. It has proven successful for children with significant emotional problems caused by abuse, violence or grief.

School-based outpatients services is another Outpatient Service that has helped improve access for families that may have difficulty scheduling a therapy appointment at an office outside of the 8-4 PM day. School-based outpatient takes place in the child's home school. Therapists are stationed in a private room in each school and the children attend their regularly scheduled appointments. The therapist maintains regular contact with the family to discuss strengths, needs and progress.

Adolescent Peer Support is a new service that was added to benefit older youth in Franklin and Fulton Counties. The Mental Health Association and TrueNorth Wellness have been approved to add youth aged 14 to 17 to their Peer Support Services. Before services can begin, both providers must complete specialized training that focuses on youth peer support. Peer support can assist the youth in engaging mental health treatment by breaking down some of the barriers of mistrust of adults and service providers and having inside knowledge of the youth systems.

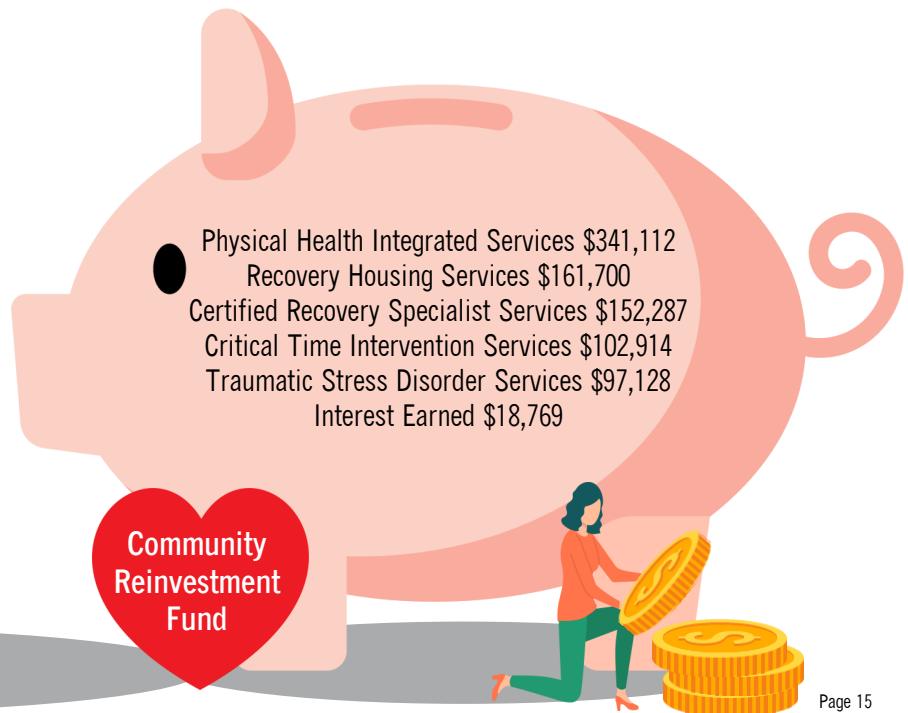
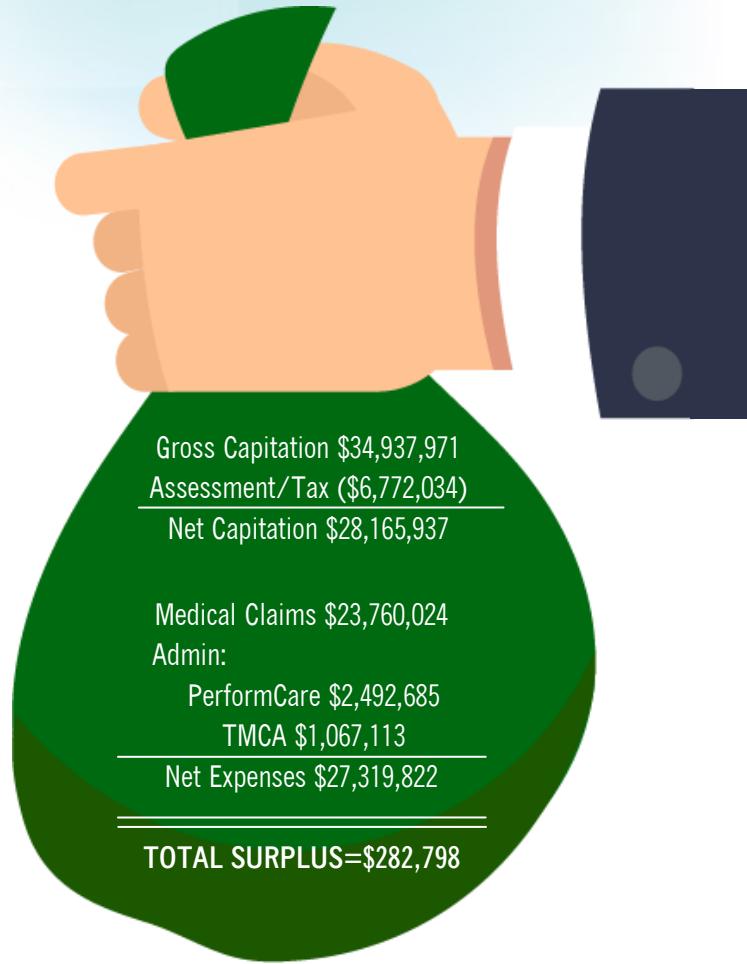
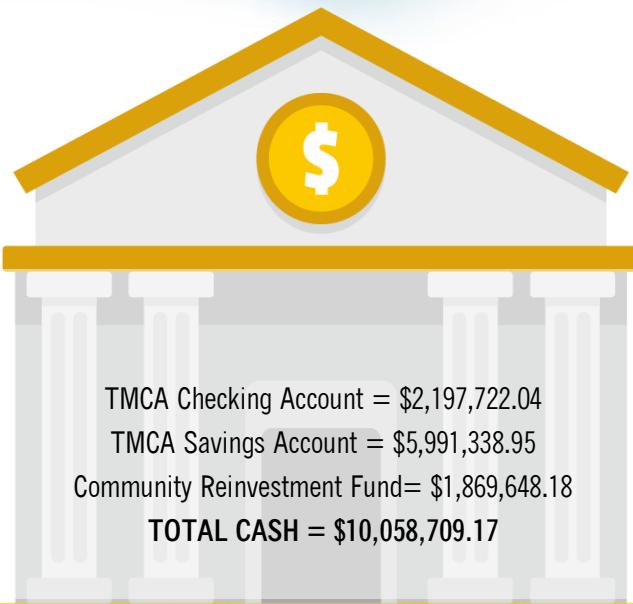


*"School based outpatient therapy seems to be particularly helpful in filling the gap for those children who would not otherwise be receiving mental health services for a variety of reasons. In addition to addressing mental health needs, the service can be beneficial in also supporting transition periods in a child's life, thus preventing escalation of behaviors and the need for higher levels of care. In working within the child's school setting, school based outpatient therapy is helpful in identifying needs of the child which may have been overlooked. This can be helpful to ensure that children are receiving the best care and support from a holistic perspective. Oftentimes, in the course of treatment, children become more connected to the community by being supported and encouraged to engage in additional activities. In the course of treatment, important psychoeducation is given to families and children as well as school staff about mental health and how best to support the child in need. This collaborative approach helps to build a support system around the child so that once they are discharged from therapy; they continue to be supported by those who provide daily care and education."*

*-School Based Outpatient Provider*

# FINANCIAL HIGHLIGHTS

a picture of financial wellness



# FINANCIAL HIGHLIGHTS

## a picture of financial wellness

**FY 18/19 Membership**

TANF/HB/MAGI Child	16,462
TANF/HB/MAGI Adult	4,530
SSI w/Medicare & Healthy Horizons	3,322
SSI w/out Medicare Child	1,742
SSI w/out Medicare Adult	1,966
HC Expansion (Newly Eligible)	10,606
<b>Total</b>	<b>36,101</b>

### BREAKDOWN BY CATEGORY OF AID

