

Dissemination

Presentations about the work of the NYCCP have been made at numerous meetings ranging from the American Psychiatric Association to the National Association of County Behavioral Health Directors to the New York Association of Psychiatric Rehabilitation Services. At the request of the New York State Office of Mental Health, the NYCCP provided state-wide training on person-centered planning in 2005.

Consultation

Consultation is provided to counties and states engaged in similar efforts to transform their service system to one that is person-centered and recovery focused.

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New York CARE COORDINATION PROGRAM

Creating a person-centered, recovery-focused system of care



OUR VISION

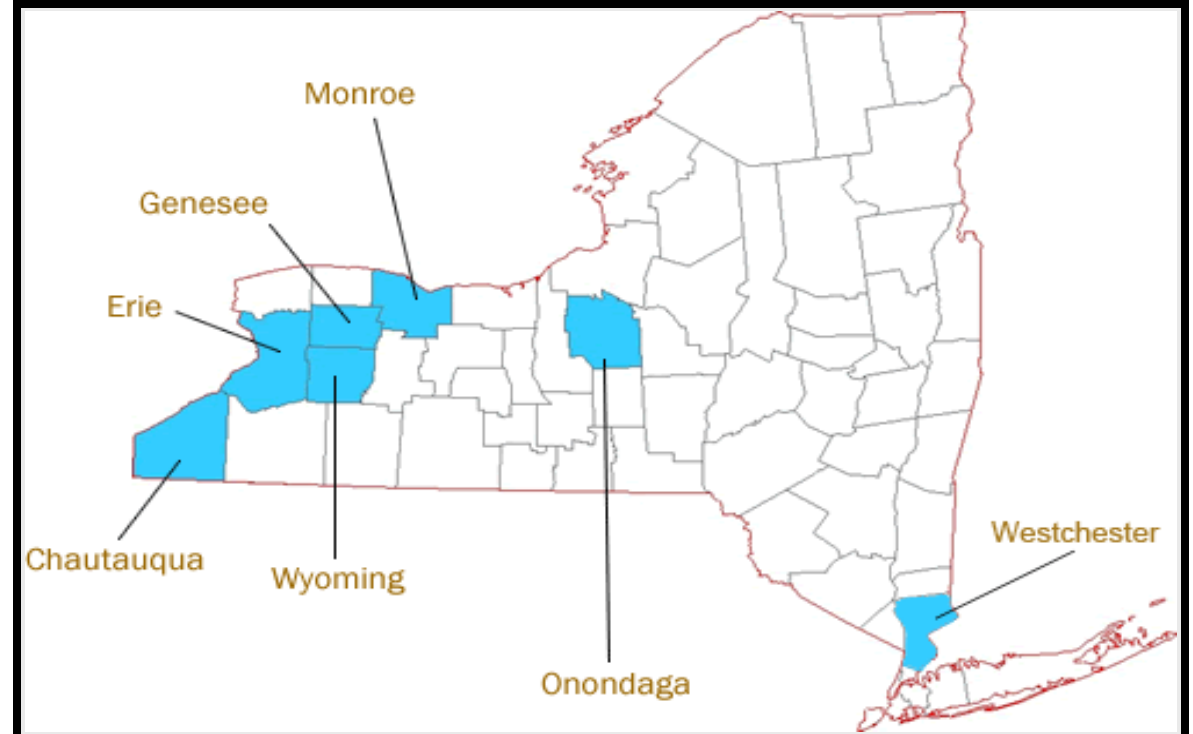
**System transformation
to person-centered,
recovery-focused health care,
which supports
people in defining and
achieving a satisfying life.**

OVERVIEW

The New York Care Coordination Program (NYCCP) is a collaboration among county mental health departments, service providers and consumers in Chautauqua, Erie, Genesee, Monroe, Onondaga, Westchester and Wyoming counties who share a belief in recovery and a common interest in the conservation of resources for the support of people with behavioral health issues.

With the support of New York State, NYCCP participants have taken a series of steps to support person-centered, recovery-focused approaches to service planning, care coordination and service to adults diagnosed with serious behavioral health issues.

NYCCP has achieved significant results for participating individuals, marked by improvement in recipient reported quality of life, increases in gainful activity, and fewer emergency room visits, hospitalizations, and arrests. Medicaid costs for enrolled persons are lower than those for comparable groups in similar New York State counties.



TRANSFORMATION INITIATIVES

Culture Change

More than 1,500 practitioners have been trained in person-centered practices and have learned to work with individuals to provide treatment and support services as well as Individual Service Plans (ISPs). The ideal ISP promotes choice and empowerment while simultaneously meeting regulatory requirements for documenting medically necessary services.

Care Coordination

Building from traditional case management, care coordination begins with the individual's strengths and recovery goals, which are then used to create a personal plan for recovery.

Individuals frequently report a greater sense of ownership of their plan, make meaningful choices, and are more motivated to achieve their recovery goals. Resources and natural supports (outside the mental health system) are explored, based on the plan, to help individuals reach their recovery goals in a more flexible and efficient fashion.

Integration of Physical and Mental Health Services

The integration of various services throughout the health care system is one way in which the NY Care Coordination Program is striving to improve the lives of those with serious mental illness. Several pilot programs have been developed relating to the integration of physical and mental health services.

Finance Reform

From its inception, a key goal of the New York Care Coordination Program has been reform of the system for financing behavioral health services in order to facilitate better outcomes for individuals with serious behavioral health issues.

Initiatives include availability of flexible funding, a demonstration pay for performance plan, and a partnership with Beacon Health Strategies, LLC to bring managed care technology and expertise to person-centered care coordination for individuals with complex physical and behavioral health issues.

OUTCOMES

Medicaid Claims Data Analysis *2008 Comparable County Data – Mental Health Services*

Updated data comparing ICM/SCM/Blended/ACT recipients in six NYCCP counties to six comparable counties shows costs are lower by 92% for inpatient, 42% for outpatient, and 13% for community support.

Periodic Reporting Form Analysis as of 2009

Analysis of data from the quarterly Periodic Reporting Form shows continuing positive changes in the lives of individuals enrolled in the New York Care Coordination Program – gainful activity up 31% (including a 51% increase in competitive employment), arrests down 25%, physical harm to others down 53%, self harm down 54%, emergency room visits down 46%, inpatient down 53%.

Enrollee Satisfaction Survey 2009

Year to year increases in enrollees reporting that services resulted in a better quality of life corresponds with increases in enrollees reporting that services were person-centered – and the timelines correspond with training for person-centered practices.

Review of Individual Service Plans for Hallmarks of Person-Centeredness

Each year 10% of the Individual Service Plans developed by enrollees with their care coordinators are reviewed against the Hallmarks of Person-Centered Planning. The 2009 survey of ISP's shows continued improvement in plans which reflect the hallmarks of person-centered, recovery-focused practices, and supports the effectiveness of the training.

GOVERNANCE

The New York Care Coordination Program is directed by a Board of Directors, which makes decisions at the policy level regarding the Program's values, goals, objectives, and initiatives. Implementation decisions are made at the county level. The Board of Directors is composed of nineteen voting members and one medical consultant -- the nine county directors of mental health, five providers, and five peer and family members -- and one non-voting medical consultant.

BOARD OF DIRECTORS

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- ❖ Two vacant spots