

**Washington State
Practice Transformation Support Hub
Listen Session Report to Stakeholders**

December 22, 2015

Prepared by

Cynthia LeRouge, Ph.D.
Ryan Sterling, MPH/MSW
Tao Sheng Kwan-Gett, M.D., MPH

On behalf of the University of Washington SIM Evaluation Project Team

Table of Contents

Background	3
Clinical Community Linkages	4
Themes Identified:	4
Highlights - Current state of linkages:	4
Key facilitators for strong linkages:.....	4
Key challenges & barriers impeding strong linkages:	4
Highlights - PTSH intervention ideas:	5
Physical and Behavioral Health Integration	6
Themes Identified:	6
Highlights - Current state of integration:	6
Key facilitators for integration:.....	6
Key challenges and barriers impeding integration:	7
Highlights - PTSH intervention ideas:.....	7
Value-based Payment Reform	8
Themes Identified:	8
Highlights - Current state of payment practices:	8
Key facilitators for value-based payment reform:.....	8
Key challenges and barriers impeding value-based payment reform	8
Highlights - PTSH intervention ideas:	9
Health Extension Centers	10
Themes Identified:	10
Highlights Current state of health extension centers:	10
Key facilitators for health extension centers:.....	10
Key challenges and barriers impeding health extension centers:	10
Highlights - PTSH intervention ideas:	10

Background

From July – October, 2015, the Washington State Department of Health’s Practice Transformation Support Hub (PTSH) hosted 14 listening session events intended to engage with as many stakeholder groups as possible to inform the development of PTSH activities. In total, 196 individuals attended listening sessions; these individuals were from 141 organizations, including community health organizations, physical and behavioral health practice organizations, and others with a vested interest in the health and well-being of Washington. PTSH staff were able to facilitate a dynamic community conversation about the constituent needs and preferences of the provider community in regard to PTSH design.

The goal of PTSH is to ensure that physical and behavioral health practices have access to the training and technical assistance resources needed to:

- Advance clinical community linkage priorities by supporting practice efforts to identify with, connect to, and align with community-based services to strengthen whole-person care;
- Accelerate the uptake of bi-directional behavioral health and primary care clinical integration; and
- Support payment reform progress from volume-based to value-based payment systems.

Aligned with PTSH objectives, this summary report compiles key themes profiled from listening sessions related to four key content areas, including:

- Clinical-community linkages;
- Physical and behavioral/mental health integration;
- Payment reform; and
- Health extension centers.

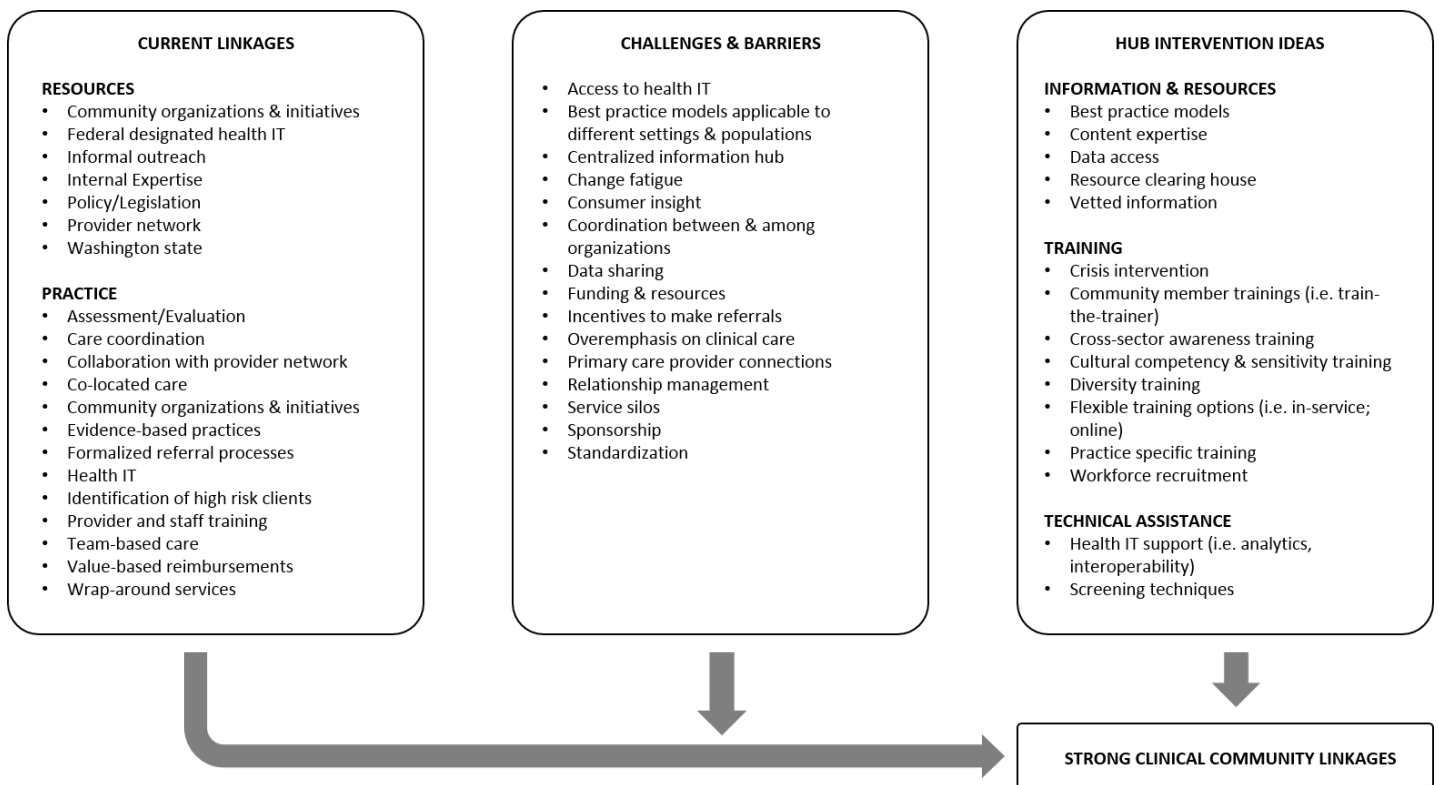
Reported themes were identified via qualitative data analysis conducted by members of the University of Washington State Innovation Model (SIM) Evaluation team at the request of PTSH. For each content area, reported themes capture:

- *Current state*: a description of how Washington providers currently practice;
- *Facilitators*: factors identified by participants that have a beneficial impact on practice transformation;
- *Challenges and barriers*: factors identified by participants that have a negative impact on practice transformation; and
- *PTSH intervention ideas*: ideas for PTSH intervention identified by participants.

Organized by the four key content area, forthcoming is a high-level review of key findings from the 14 listening sessions hosted by PTSH. Distinct themes identified and coded are represented graphically and followed by highlights of the analysis.

Clinical Community Linkages

Themes Identified:



Highlights - Current state of linkages:

- While practices are actively engaged in strategies to develop linkages with community partners, most practices are still in need of stronger clinical-community linkages
- Successful linkages are associated most with increased access to training and technical assistance, particularly the use of health information technologies (health IT), data sharing networks and evidence-based practice
- Community-based resources, provider networks and state and federally designated resources offer important support infrastructure to facilitate care coordination and establish linkages

Key facilitators for strong linkages:

- Relationships among providers and community partners
- Strong organizational leadership
- Strong IT capacity

Key challenges & barriers impeding strong linkages:

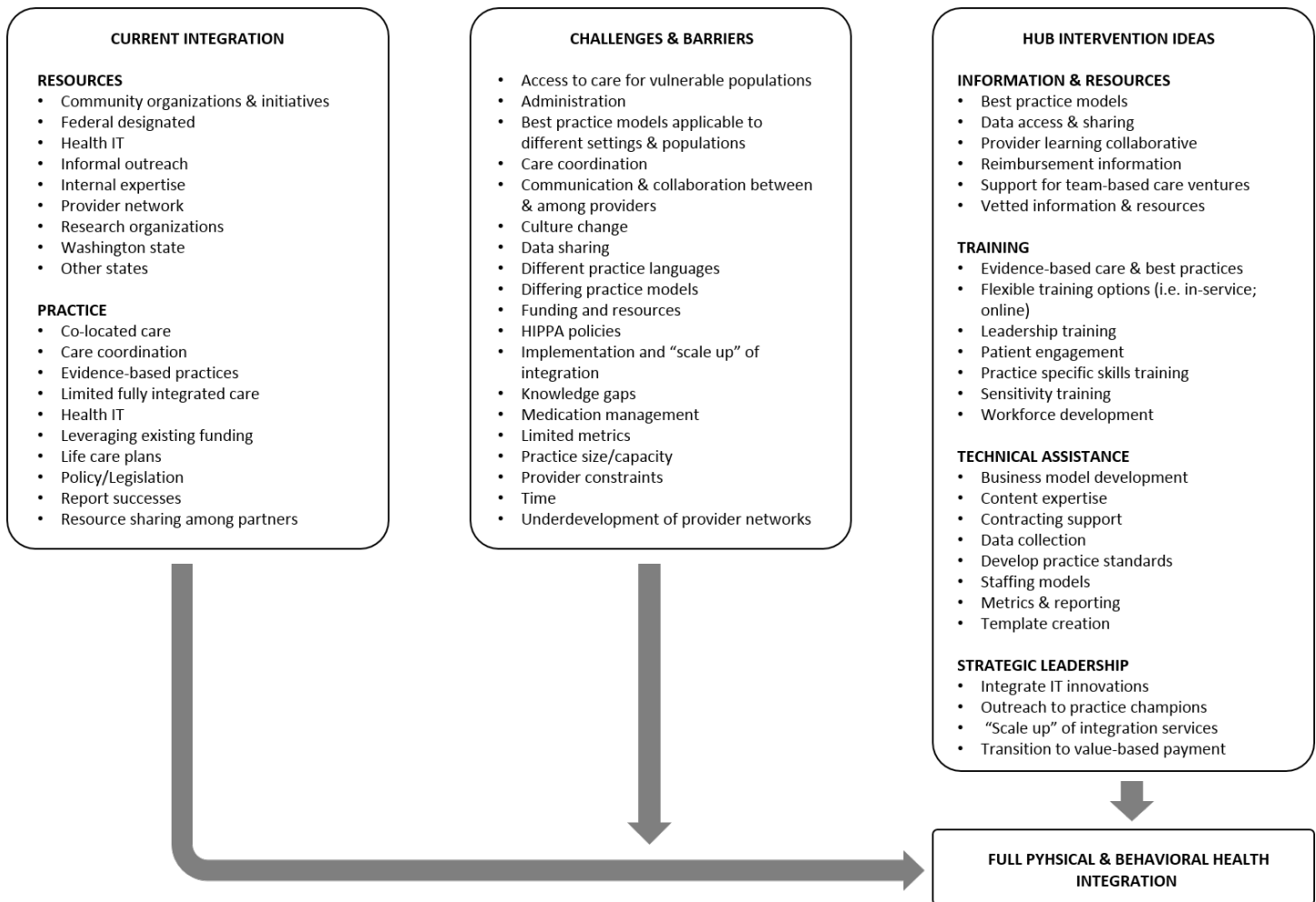
- Service silos
- Difficulty collecting and sharing data
- Limited funding and resources, particularly related to staffing and access to IT

Highlights - PTSH intervention ideas:

- Centralize and curate information and community resources
- Identify and promote best practice models for primary and behavioral health care practice
- Develop a web-based platform to share health indicators on shared patient populations
- Offer trainings related to health IT support and screening techniques

Physical and Behavioral/Mental Health Integration

Themes Identified:



Highlights - Current state of integration:

- The current level of integration in most practices is insufficient to meet the health needs of patients.
- Coordinated care is the dominant integration trend; co-located care is a limited but growing trend
- Fully integrated care is desired but limited across the practice community
- Practices rely on local provider networks, internal provider and staff expertise, and federally designated resources for information and guidance to support current integration efforts

Key facilitators for integration:

- Endorsement of the integrated care model among practice leadership and staff
- Sufficient organization capacity to support integration practice
- Reimbursement structure that supports and incentivizes integration efforts

Key challenges and barriers impeding integration:

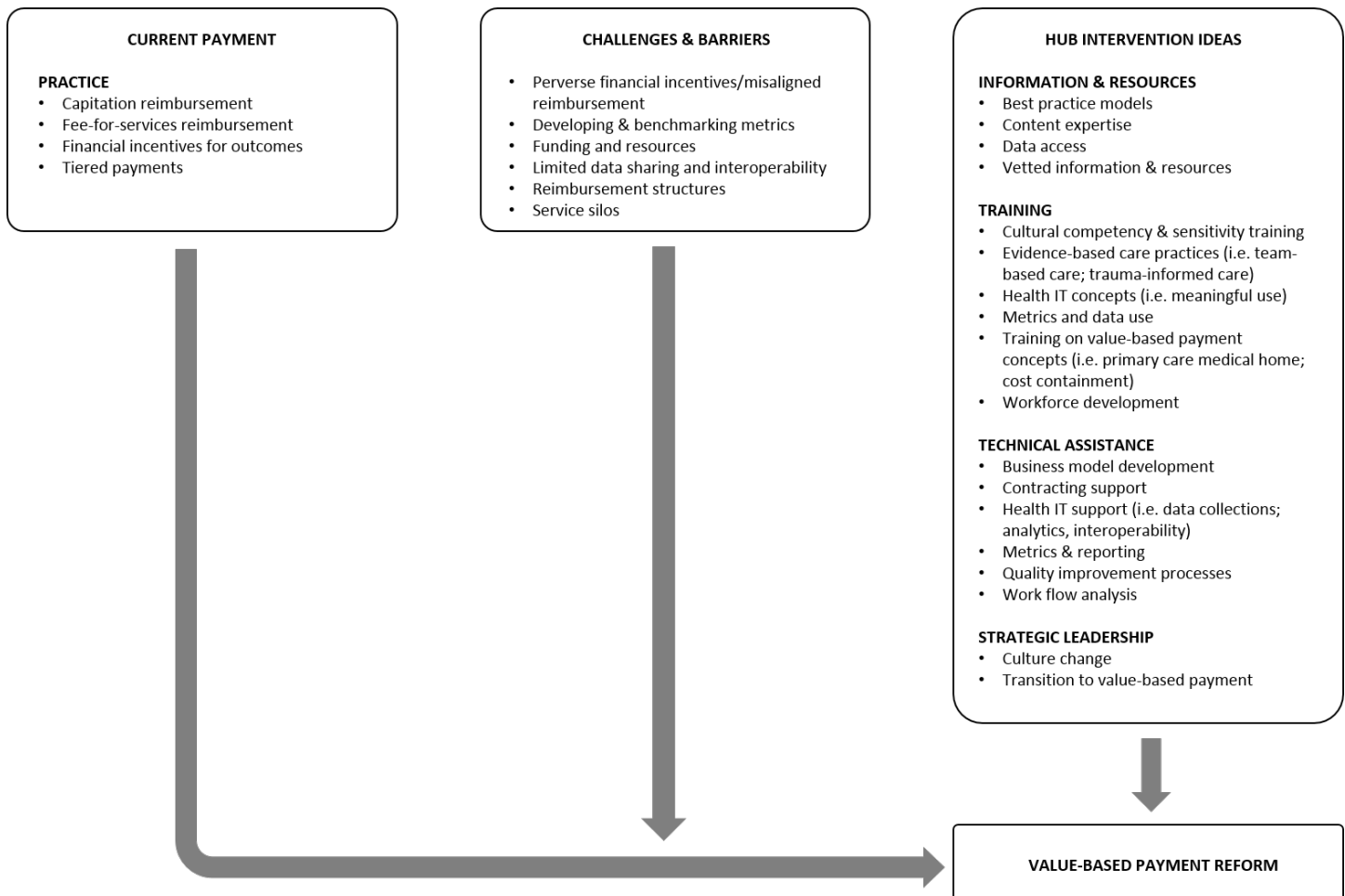
- Limited number of qualified behavioral health providers and lack of provider “buy-in”
- Difficulty maintaining sustainable funding and resources to support integration efforts
- Knowledge gaps and limited examples around what integration best practice looks like

Highlights - PTSH intervention ideas:

- Centralize and curate information and community resources
- Identify and promote best practice models for primary and behavioral health care practice
- Offer trainings related to practice management support (i.e. practice standards, staffing models) and other issues related to implementing integration in the practice setting
- Provide strategic leadership as provider organizations work toward integrated care

Payment Reform

Themes Identified:



Highlights - Current state of payment practices:

- Fee-for-service is the dominant form of reimbursement across Washington State primary and behavioral health practices; many providers are not familiar with value-based payment
- Capitation and other different iterations of payment for better outcomes (both clinical and utilization outcomes) are emerging reimbursement practices

Key facilitators for value-based payment reform:

- None identified by listening session participants

Key challenges and barriers impeding value-based payment reform:

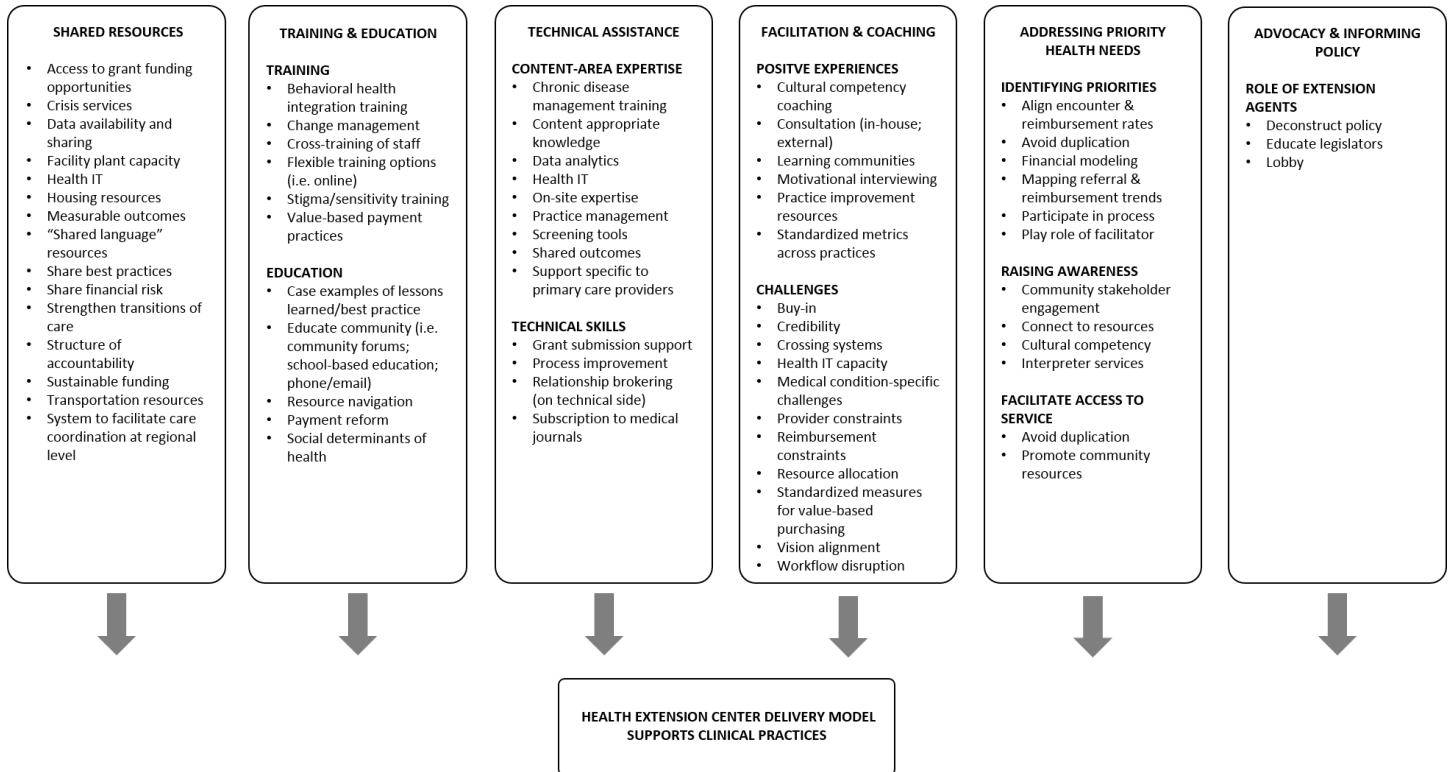
- Misalignment of reimbursement systems with the principles of value-based payment
- Difficulty developing, benchmarking and tracking metrics connecting performance to payment
- Reimbursement structures are siloed by provider and services type
- Difficulty collecting and sharing data

Highlights - PTSH intervention ideas:

- Centralize and curate information and community resources
- Identify and promote best practice models for value-based payment reform
- Offer trainings related to practice management support (i.e. business models, analytics) and other issues related to implementing value-based reimbursement in the practice setting
- Provide strategic leadership and provider organizations work toward value-based reform

Health Extension Centers

Themes Identified:



Highlights - Current state of health extension centers:

Recent Washington State legislation identifies an extension center structure for the delivery of practice transformation support services. No such structure currently exists.

Key facilitators for health extension centers:

- None identified by listening session participants

Key challenges and barriers impeding health extension centers:

- Concern that extension centers will duplicate local health department activities
- Concern that extension centers will divert funding away from local health departments
- Skepticism that extension centers will be staffed at a level to provide value to practices within an Accountable Communities of Health (ACH)

Highlights - PTSH intervention ideas:

- Health extension centers were a venue for many possible interventions mentioned previously in this document. Specific themes related to extension centers include:
 - Share resources, specifically around data, plant capacity, outcome measures, and best practices
 - Provide training and education related to PTSH objectives
 - Provide technical assistance, including both content-area expertise and technical skills

- Provide facilitation and coaching related to PTSH objectives
- Identify priorities, raise awareness and facilitate access to services
- Engage in advocacy and inform policy via health extension center agents
- Promote health equity