Expressing Yourself: How to Craft a Value Proposition

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May 23, 2017
Introduction & Housekeeping

Housekeeping:

- Slides are posted at MCTAC.org
- Questions not addressed today will be:
  - Reviewed and incorporated into future trainings and presentations
  - Added to Q&A resources when possible
- Feedback forms

Reminder: Information and timelines are current as of the date of the presentation
What is MCTAC?

MCTAC is a training, consultation, and educational resource center that offers resources to all mental health and substance use disorder providers in New York State.

**MCTAC’s Goal**
Provide training and intensive support on quality improvement strategies, including business, organizational and clinical practices to achieve the overall goal of preparing and assisting providers with the transition to Medicaid Managed Care.
CTAC & MCTAC Partners

McSILVER INSTITUTE
FOR POVERTY POLICY AND RESEARCH

The National Center on Addiction and Substance Abuse

CCSI
Coordinated Care Services Inc

ICL
People Get Better With Us

Families Together in New York State

NYAPRS
"Partners in Recovery"

IDEAS
Small Business Initiative Partners

ASAP NYS

NYAPRS

The Coalition for Behavioral Health

Families Together in New York State
Agenda

‣ How to define value for behavioral Health in a Managed Care environment
‣ Elements of a strong value proposition
“Value is in the eyes of the beholder”

-Anonymous
The “Beholders”

- You
- The people you serve
- Your payers
- Health care system objectives
- Potential partners (including PPS)
Properties of a Sound Value Proposition

- Be consistent with your agency’s mission
- Meet the expectations of:
  - The people who need and come to you for services
  - The Managed Care Organizations who will pay you to deliver services to their members
  - The State’s “Triple Aim” in healthcare transformation
  - Potential partners
The Triple Aim of Healthcare Transformation

- Improve the experience of care
- Improve the health of populations
- Reduce the cost of care
Where Do You Find Value?

- Mission
  - What you do
- Practice
  - How you do it
- Outcomes
  - Why you keep doing it
Mission

‣ What behavioral health services you provide
‣ To whom you provide those services
‣ To what end?
Example: “What You Do”

- Acme Behavioral Health provides recovery oriented housing, employment and peer support services to individuals with mental health and addictive disorders that serve to promote good health and greater participation in community life.
Question: Why health?

Answer: Because housing, employment and peer support are **social determinants** of health.

If you provide these or similar non-medical behavioral health services you are **in the healthcare business**!
Elements of Value

- Fully define the services (not the programs)
- Identify characteristics that further define or segment “people with mental health and addictive disorders”
- Demonstrate the impact or result of delivering these services to the people who receive them
Know Who You Serve

Segmentation of the larger population you serve by:

- **Age**
  - 18-24, 25-40, 41-64, 65+

- **Gender**
  - Male, Female, Transgender, Gender non-conforming, or Non-binary

- **Psychiatric diagnosis**
  - Schizophrenia, Depression, Bipolar Disorder, ADHD, Cognitive Disability

- **Chemical addiction**
  - Alcohol, Opioids, Amphetamines, Cannabis, Nicotine, Combination

- **Co-morbidities**
  - Asthma, Hypertension, Diabetes, Cardiovascular Disease, HIV
Once You Know Who You Serve…

› Which of those population segments represent the highest risk?
› Which of those population segments are the Managed Care plans concerned about?
› Which services/interventions will you apply to risk manage these population segments?
Some FACTS (of particular concern for the MCOs)

- People with mental health and addictive disorder co-morbidities increase average healthcare costs by 200% and increase hospital admissions by 300%.
- Untreated depression when combined with a co-morbid health condition leads to higher reliance on ER and inpatient hospitalizations.
- People with multiple chronic conditions have disproportionate ER and hospital utilization (20% of the Medicaid population who use 80% of Medicaid resources).
- More than 80% of high risk Medicaid beneficiaries have a serious mental illness.
- 16.3% of 18-25 year olds battle with substance use disorders (the highest percentage of any age group) & Heroin addiction for this age group has doubled in the past 10 years.
Value is applying *expertise and practice* that mitigates risk for overutilization of preventable high cost services in institutional settings:

*Services that improve health and reduce ER and inpatient utilization*
Are your services & practices trauma-informed? Recovery-based?

Is your direct care staff trained in motivational interviewing? Critical time intervention? Person-centered planning?

Does your workforce include peers?

Does your workforce receive health literacy training?

Are your services easy to access?
PRACTICE: Performance & Quality

POPULATION SEGMENT: Who you serve

IMPACT: What you can change & measure

VALUE
What to Measure

‣ Quality
‣ Process
‣ Performance
‣ Impact
Quality and Process

Process measures give an indication of how well the program functions internally and how well it is adhering to improving population health, e.g.

- Adherence to antipsychotic medication for people with Schizophrenia
- Antidepressant medication management
- Diabetes monitoring (for people with Schizophrenia)
- Post hospitalization follow-up for psychiatric admission (at 7 and 30 days)
- “Bridger” level of care, transition management
Quality and Process

- Same day access/crisis support

- Rates of client engagement, retention and utilization of behavioral health services

- Rates of client follow-through with primary care treatment referrals (for identified chronic disease)

- Referral to, support regarding and engagement in substance use treatment

- Participant satisfaction
Performance and Impact

- Treatment response (symptom management/health status)
- Hospital inpatient and ER use for behavioral health and “ambulatory care sensitive conditions”
- Readmissions within 30 days for both behavioral health and co-morbid chronic conditions
- ER diversion through same day access crisis management and 7 and 30 day post hospitalization follow up
- Referral to, and engagement in Health Homes and HCBS
- Social determinants (housing, employment, employment = quality of life)
- Engagement/retention in care
Value Through the Triple Aim Lens

- Improve the experience of care
  - How do your services engage high risk individuals in care that results in adoption of healthy behaviors?

- Improve population health
  - How does your service philosophy and practice positively impact the health of high risk populations?

- Reduce the cost of care
  - How do your services keep people in community based care and divert them from ERs and hospitals?
Cost Formula

What works?
How much does it cost?
How much does it save?

What will it cost you to deliver the proposed service/intervention to the targeted population at the needed frequency and duration to achieve the desired outcome?
Opportunity Knocks: Are You Ready to Innovate Value?

Potential “next generation” value

- Outpatient, community-based acute care
  - Behavioral Health Urgent Care
- Specialty Telehealth
- High intensity transition services designed to reduce inpatient days
- Home-based crisis stabilization (911 and ER diversion)
- On-call Peer Recovery Specialists
Template for a Strong Value Proposition

- Mission statement or “what we do” equivalent
- Services
- Populations
- Approach (Best Practices, philosophy, etc.)
- Outcomes
  - To demonstrate that your services have impact!
Creating Value Propositions

Join us for 1/2 day in-person workshops in your area. We will work with individual providers to help create clear and concise statements of value.

Hudson Valley: Tuesday, 6/6/17
Albany: Wednesday, 6/7/17
Batavia: Tuesday, 6/13/17
Buffalo: Wednesday, 6/13/17
Long Island: 7/25/17
NYC: Wednesday, 6/21/17

Please visit www.ctacny.org for location and registration information.
Questions and Discussion

Please email additional questions to mctac.info@nyu.edu and register for future events at http://www.mctac.org under “Upcoming Events.”