

Behavioral Health Consultants

Working to integrate whole person health



Dr. Elizabeth Zeidler Schreiter joined Access Community Health Centers in 2008 as a Behavioral Health Consultant (BHC) and moved into her new role as the Chief Behavioral Health Officer in 2015. Ten years after it was launched at Access, the integrated behavioral health program has improved the quality of life for our patients

and increased access to service while decreasing cost of care. Dr. Zeidler Schreiter explains how.

What is the goal of integrated behavioral health?

One of our primary goals as Behavioral Health Consultants is to improve and promote the overall health and wellness of the patient population we serve. This is important due to the high level of behavioral health needs that we find within primary care. We aim to provide the right level of care at the right time. When patients come to a primary care doctor, there are often social and emotional issues impacting their overall health and wellness. Having someone in the room in real time to see that patient and address those issues when the patient is ready is important.

Another big piece is increasing access to providers and services in a setting patients find familiar. This is helpful for any group of patients, but, in particular for the patients we serve at Access, given some of the difficulties of having adequate insurance, transportation, and potential challenges navigating services in the community.

Our overall philosophy of patient care is not solely focused on symptom management, but instead on quality of life and functional goals. As a team, we work alongside medical providers, nurses, and other clinic staff with the patient to come up with a plan to help them reach their goals and what's important to them in their day to day activities.

How does this approach impact patients?

What we know from research is that less than one third of referrals outside of the clinic to mental health services

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CEO Message

Our Work With The State

One year ago, the governor announced his biennial budget that included an item to reimburse many of the state's health centers using a different methodology. Attached to that change were significant cuts in payments to health centers for patients with Medicaid (BadgerCare) that would have greatly reduced Access' ability to provide care.



Through intense advocacy and lobbying efforts, and by working closely with our partners around the state, we were able to get the cost savings portion of the proposal removed from the final version of the budget. However, the change in the method of payment remains a priority for the state, and we are in the midst of working with them to determine how that will affect our BadgerCare reimbursement.

About 65 percent of Access' overall revenue comes from our billing for BadgerCare, so our work with the state is very important. To date, the process is going well. Last month, we met with a group of consultants hired by the state and representatives from the state Department of Health Services. We described our unique model of care, and gave them a tour of the Joyce & Marshall Erdman Clinic. The Department of Health Services has assured us several times that the reimbursement methodology

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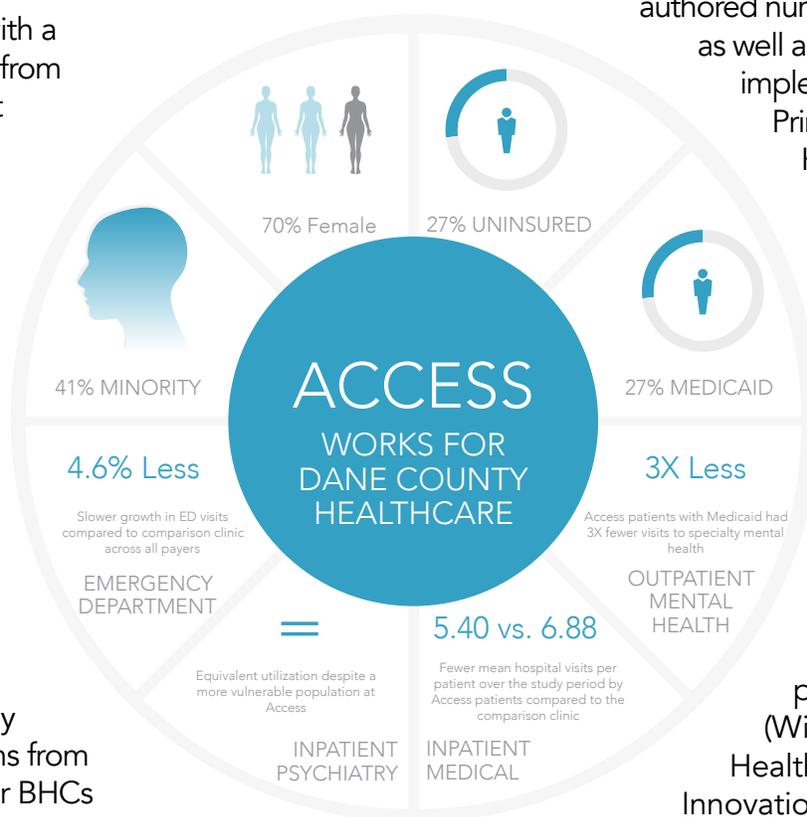
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are actually completed. In our model behavioral health providers are able to follow an individual based on their ongoing need when the need arises. Primary Care Behavioral Health (PCBH) does not replace specialty mental health services, but it's an augmentation of that care. We're able to assess readiness for change and offer motivational enhancement to connect with specialty services in the community if that's what's needed.

Who are the patients that you serve?

We can see patients with a multitude of concerns from ADD (Attention Deficit Disorder), parenting stressors, smoking cessation, weight management to more severe mental issues like bipolar disorder, anxiety, depression and anything in between. Another aim of this care is prevention; we attempt to provide support and intervention as early as possible to hopefully prevent acute problems from becoming chronic. Our BHCs are trained to be generalists.

We also follow up with patients that we have seen previously to come back for ongoing care. A vast majority of our patients remain in the clinic for behavioral health services instead of being referred out.



Your team also does extensive research. Why is that important?

Tracking outcomes and evaluating what we're doing on a continuous basis to support improvement makes the research and program evaluation work important. In addition, we hope to have more of a collective impact on disseminating this information to other health care systems because we've been able to see the benefits to our patient population.

The Behavioral Health team at Access has authored numerous manuscripts as well as a book regarding implementation of the Primary Care Behavioral Health model.

How are you working to spread the PCBH model?

One of the ways is by sharing information and participating in broader initiatives. Access was invited to participate in the SHIP (Wisconsin Department of Health Services State Health Innovation Plan) behavioral health work group primarily because

we have a reputation for innovation in integrated health care. One of the tasks of the work group is to study how to integrate behavioral health and physical health within primary care. We were well poised to be able to contribute with the lessons we have learned. They're hoping to create an evidence-based transformation model that aims at providing better care, at a lower cost, for improved health. And those are the aims of the Primary Care Behavioral Health model.

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Donor Profile

UW Credit Union: Supportive community partner

UW Credit Union's mission is to improve the financial well-being and quality of life for people in the communities it serves. Access Community Health Centers' work centers on improving the health and lives of its patients. Together, these organizations are building a healthier, stronger community.



Access' patients have benefited directly from ongoing support of UW Credit Union, as well as its members to provide patients with medical, dental and behavioral health services, in addition to targeted support for children's dental health through the Celebrate Smiles program.

"Access' focus on providing affordable services for individuals with limited financial resources aligns with one of our key giving areas of supporting charitable causes in our community that are focused on helping people meet basic human needs," said Lisa Girdharry, UW Credit Union senior vice president & chief marketing officer.

In 2013, the organization matched members' donations to Access' Celebrate Smiles program, which provides preventive and restorative dental care to children in local schools. The campaign provided \$50,000 in support, making dental care available to more children who need it. This is in addition to general support for patient services in clinics.

"The services that Access Community Health Centers provides are vital to our community, and UW Credit Union is proud to provide support," Girdharry said.

Save the Date for Access' Celebration of Service Dinner

Access Community Health Centers will hold its annual *Celebration of Service* dinner on April 14 at the Monona Terrace Community and Convention Center. Please join us for an evening of music, food and celebration of the work we do together.

This event, held each spring since 1999, gathers a broad and diverse community of supporters to celebrate their commitment to the people we serve. Access is fortunate to have broad support from organizations and individuals in Dane and Iowa counties, ensuring that people who need it have access to medical, dental and behavioral health services, as well as pharmacy services and community resources.

The dinner draws more than 700 people, and remains our largest fund raiser of the year. Money raised from the event goes to direct

patient care for the more than 26,000 people who call Access their health care home.

Purchase single or group tickets from our website: accesscommunityhealthcenters.org, or by calling Julia O'Donnel at 608/443-5602.



BY THE numbers

Integrated Behavioral Health Impact

Access patients
with Medicaid
decreased their use
of the emergency
department by
-4.2%
compared to
9.7% increase by
comparison clinic
patients

20%
1 out of every 5
Access patients
sees both a primary
care provider and
a behavioral health
consultant

-13.2%
Emergency
department use by
uninsured patients at
Wingra Clinic

-7.9%
Emergency
department use by
Medicaid patients at
Wingra Clinic

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Access has also been a leader in providing consultation services to other FQHCs (Federally Qualified Health Centers) in the state to develop integrated behavioral health programs in their clinics. We are currently working on site with Progressive Community Health Center and Sixteenth Street Community Health Centers (both in Milwaukee) to develop their behavioral health programs and train BHC staff.

Finally, we have a very robust training program that serves to provide well-trained behavioral health consultants for the workforce nationally. We've trained over 100 students many of which have gone on to become behavioral health consultants in clinics across the US. In addition, many past trainees have decided to plant roots in Wisconsin. Our current team is comprised almost entirely of previous trainees as we have been able to successfully train and retain an immensely talented and dedicated group of BHCs.

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change is important for them mainly to make reimbursing health centers a more straightforward process, not to cut payments to health centers.

We will continue our work with the state, and have more definitive information about the changes by the end of June. Throughout this transition, with the help of our community, we will continue to provide high quality care for our patients, and grow to meet the needs of more people who would greatly benefit from the services we provide at Access.

– Ken Loving, MD