

State of Connecticut Department of Social Services Medical Care Administration 25 Sigourney Street Hartford, CT 06106-5033

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Commissioner

March 1, 2008

Effective Date

TO: General Hospitals and Freestanding Mental Health Clinics

SUBJECT: Primary Care/Behavioral Health Requirements for Enhanced Care Clinics under

the Connecticut Behavioral Health Partnership

The purpose of this bulletin is to notify Enhanced Care Clinics of new requirements for continued designation as an Enhanced Care Clinic (ECC). These requirements pertain to Primary Care Behavioral Health Coordination. ECCs must be able to demonstrate compliance with the requirements outlined in this transmittal no later than September 1, 2008. As used in this transmittal, the term ECC includes the primary site and associated secondary sites.

Each ECC is required to develop formal relationships with primary care practices to support mutual referral practices and to facilitate collaborative care and the efficient exchange of information to support patient care. Each ECC is required to enter into a memorandum of understanding (MOU) with each primary care practice with which it is establishing a formal relationship and develop policies and procedures that implement such MOUs.

#### MEMORANDUM OF UNDERSTANDING

## **General Requirements**

Each ECC that serves children or adolescents must enter into an MOU with two or more pediatric primary care practices. The first of these pediatric agreements must be executed by September 1, 2008 and the second by September 1, 2009.

Each ECC that serves adults must enter into an MOU with two or more adult primary care practices. The first of these adult agreements must be executed by September 1, 2008 and the second by September 1, 2009. An MOU with a primary care practice that serves both children and adults can fulfill the requirement for both children and adults.

Qualifying primary care practices include hospital outpatient primary care centers, freestanding licensed medical clinics, including Federally Qualified Health Centers, and independent group primary care practices. School-based health centers do not qualify for such agreements unless they provide a full range of primary care services throughout the year.

# **Specific Requirements**

Each MOU must provide for the following:

- 1) Protocols for referral of primary care patients to the ECC to include the following:
  - o Provisions for timely access to emergent, urgent, or routine evaluation and treatment services and
  - o Provisions for timely access to evaluation and management consultation visits with a psychiatric medical professional (MD or APRN).
- 2) <u>Protocols for referral of ECC patients to the patient's primary care provider to include the following:</u>
  - o Protocol for referral of stable ECC patients to the patient's primary care provider for ongoing medication and general medical management,
  - o Accompanying written referral summary and recommendations for follow-up care.
  - o Periodic written communication with the primary care provider for patients who continue to be seen by a non-medical practitioner within the ECC,
  - o Ad hoc telephone consultation with ECC clinician regarding the above primary care managed patients, and
  - o Protocols for referral back to the ECC for further psychiatric evaluation and crisis management.

# 3) <u>Communication guidelines to support:</u>

- o ECC and primary care co-management of patients with behavioral health and physical health disorders,
- o Care of patients for whom the primary care provider has assumed responsibility for psychiatric medication management after stabilization by the ECC, and
- o Clear delineation and agreement of responsibility for monitoring psychiatric medication side effects and dosages.

#### 4) Designated agents:

o Designation of parties responsible for coordinating necessary medical and behavioral health services.

### 5) Education and Training:

o ECC conduct of annual education and training events for primary care providers and their office staff related to prevention, screening, evaluation and

family-centered management of behavioral health disorders in primary care and indications for referral to ECC.

# 6) Optional Components:

- o Informal telephonic consultation by ECC to primary care providers regarding the management of patients with no history of treatment by the ECC,
- o Protocols for early identification and intervention, and
- o Streamlined access models to ensure early and effective linkage to behavioral health services such as co-location of behavioral health services within primary care.

Sample forms, including a psychiatric medication management referral form and a request for treatment update form can be downloaded from <a href="https://www.ctbhp.com">www.ctbhp.com</a>.

#### **POLICIES AND PROCEDURES**

Each Enhanced Care Clinic is required to develop policies and procedures that implement the activities provided for under the MOUs. The policies and procedures must, for example, outline the circumstances under which a referral for medication management by the primary care provider (PCP) would be pursued and administrative methods for identifying candidates for referral. Such policies and procedures must also provide for timely response to PCP inquiries with regard to patients currently or formerly treated by the ECC. The policies and procedures will need to be submitted for review by the Departments of Children and Families and Social Services with appropriate documentation and must be maintained by the ECC that demonstrates compliance with the policies and procedures.

In the future, the Department may introduce additional requirements for communication with primary care and other medical providers, over and above the primary care providers that participate in the above MOUs. Any such requirements will be developed in consultation with the Connecticut Behavioral Health Partnership Oversight Council.

<u>Posting Instructions:</u> Provider bulletins can be downloaded from the Web site at www.ctdssmap.com

<u>**Distribution:**</u> This policy transmittal is being distributed to holders of the Connecticut Medical Assistance Program Provider Manual by Electronic Data Systems.

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