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Tuesday, February 12, 2013

Lessons Learned From The Health Home Trenches

Health homes (and medical homes) are so new that it is rare to find someone who has been managing them long enough to give us "lessons learned." But we got just that at the 2013 *OPEN MINDS* Performance Management Institute. One of the keynote addresses featured a presentation by Michael Mittleman, Ph.D., Senior Vice President of Corporate Compliance of PSCH – an organization managing health homes in the New York market since **DATE** (see **Using Technology To Succeed With Accountable Care Organizations & Health Homes** *premium members*).

PSCH (Promoting Specialized Care and Health) is a 501(c)(3), comprehensive human service agency for people with developmental, psychological and behavioral disabilities, and serving 8,500 individuals in NYC's five boroughs, Long Island, Westchester, and New Jersey. PSCH has traditionally offered day treatment, residential, therapeutic, rehabilitation, educational, vocational and social services. PSCH's CareConnect interface connects and exchanges information from members of PSCH's Coordinated Behavioral Care (CBC).

The New York Medicaid Health Homes initiative is an initiative with the New York Department of Health (DOH). The DOH moved forward with implementation after the federal Centers for Medicare and Medicaid Services (CMS) approved New York's Medicaid state plan amendment for the initiative on February 3, 2012 – and the first of three enrollment waves began on January 1, 2012 with phased-in enrollment of about 700,000 people with mental health and/or addiction disorders and chronic medical illnesses.

Dr. Mittleman's advice to our audience?

1. Communicate – There is no way to overcommunicate. Organizations need to do

organization

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this, and do this often at all steps of organizing a health home.

2. Build consensus – In any HH, there are many members with many votes. Consensus building can be a slow, but important process in decisionmaking.

3. Provide latitude – Work committees need a lot of room to develop the ideas that boards need to consider before moving forward with implementation.

4. Be agile or perish – With extreme regulatory volatility ruling the day in the market, organizations need to be able to change with changing requirements.

5. Hire legal counsel – The legal environment surrounding health homes is also volatile, with little or no case law for guidance. This complexity demands legal professionals.

6. Define IT needs internally, and outsource the solution – The competitive pressures within the industry mean that member organizations cannot expect to provide tech solutions without incurring possible distrust from other member organizations.

7. Acquire outside money – At startup, per member per month costs will not cover costs.

8. Hire full-time staff – Using existing staff alone also won't cut it. Hiring both full-time health home employees, as well as full-time IT staffs are a must to meet the staffing demands of health homes.

For a complete recap of our coverage of the 2013 *OPEN MINDS* Performance Management Institute, check out our **official wrap-up.**

Sincerely,
Monica E. Oss
Chief Executive Officer, *OPEN MINDS*

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For another free resource, see: **Growing A Few Dozen Oak Trees** *all members*

This resource is free for the next sixty days to all registered *OPEN MINDS Circle* members.

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