

# COMMUNITY HEALTH TEAM EXPANSION Question and Answer Session

## Blueprint for Health Central Office

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## Q&A SESSION INFO

Sessions aim to provide answers to questions about implementation of the CHT Expansion Pilot.

### SESSION FORMAT:

- Brief Overview of the CHT Expansion Program, including:
  - Program Expectations
  - Resource Allocation
  - Timelines
- Question Session:
  - Raise Hand to build a queue for questions
  - Chat will be disabled for participants
  - If you do not have access to a microphone, please e-mail your question to [mara.donohue@vermont.gov](mailto:mara.donohue@vermont.gov).
  - Discussion may be time-limited to allow for all participants to speak

## CHT EXPANSION PILOT PURPOSE

- Vermont has been experiencing increased and concerning levels of acuity in mental health and substance use disorders.
- There is a need to broaden Vermont's ability to screen for and address social determinants of health, including housing and food insecurity.
- The objective of this pilot is to enhance systematic identification of needs, provision of interventions in the medical home, and navigation to specialty and other community providers, across the entire population served by Blueprint for Health participating primary care practices by expanding Community Health Team staffing.

## EXPANSION PILOT PRACTICE ELIGIBILITY

To participate in the Expansion Pilot, practices must:

- Be a Blueprint Patient Centered Medical Home.
- Have at least 50 attributed Medicaid Members as of Q1 2023.
- Be willing to engage with a CHT member in the practice.
- Be willing and able to use screenings for mental health, substance use, and social determinants of health needs for individuals and families.
- Be able to participate in education and trainings offered by the Blueprint for Health.

## CHT EXPANSION PILOT SUPPORTS

Supports provided to Blueprint PCMH practices during the pilot include:

- **Embedded or Centralized CHT Staff**
- **Program manager support** for staffing either embedded staff members in the practice or centralized CHT staff members
- **Quality Improvement facilitation** to assist with implementation, continuous quality improvement, and pilot evaluation
- **Trainings** to increase knowledge and skill in mental health and substance use care
- **Guidance documents** summarizing best-practices, tools, and templates

## EXPANSION PILOT STAFFING & HIRING

The following staff types are supported by the Blueprint Expansion Funding:

- Family Specialist
- Mental Health Counselor (licensed or unlicensed)
- Social Worker (licensed or unlicensed)
- Community Health Worker
- Licensed Drug and Alcohol Counselor
- Psychologist

Funding is intentionally flexible to support practice needs and allow CHTs to hire staff appropriate for the varying practice types across the HSA.

# EXPANSION PILOT FUNDING

To support the expansion of CHT staff, Administrative Entities will receive funding based on the target staffing levels for their HSA. The minimum recommended staffing levels for practices are determined by the number of Medicaid members attributed to that practice during Q1 of 2023.

<b>Attributed Medicaid Members</b>	<b>FTE Recommended</b>
<b>0-49</b>	Existing CHT Resource
<b>50-249</b>	Centralized Resource
<b>250-849</b>	0.5 FTE
<b>850-2,499</b>	1.0 FTE
<b>2,500+</b>	1.5 FTE

The Administrative Entity may hire and manage staff, may create an agreement to pass funding through so a practice, designated agency, or other third party may hire and manage staff.

## DULCE AND FAMILY SPECIALIST FUNDING

- The DULCE program will receive two years of Expansion funding through VDH specifically to support Statewide Coordination.
- The two-year CHT expansion pilot is funded entirely through Medicaid. Its purpose is to test whether more robust funding supports successful screening, brief intervention, and navigation to services for primary care practices' entire patient populations.
- Additionally, all existing DULCE sites will be counted as at least 1.0 FTE in addition to the number of staff the CHT is funded to hire based on the sites' Medicaid attributions.
- If any existing DULCE practice discontinues the DULCE family specialist, the CHT will forfeit the funding for the additional 1.0 FTE.
- Family Specialists at existing DULCE sites are expected to begin to serve a broader age range, birth to age 5 at a minimum, as we work to implement an all-ages intervention.



## EXPANSION PILOT ATTESTATION

To participate in the Expansion Pilot, practices will review and sign an attestation document agreeing to:

- **Integrate CHT Members** into the practice for screening, assessment, intervention, and management of care interventions related to mental health, substance use, and social needs.
- **Engage with QI Facilitators** to implement pilot strategies, conduct continuous quality improvement activities, and evaluate pilot processes and outcomes.
- **Regularly submit** staffing updates, patient counts, and other information outlined in attestation requirements to the Blueprint Program Manager.
- **Utilize screenings** for mental health, substance use, and social determinants of health needs for individuals and families.
- **Participate in education** and trainings offered by the Blueprint for Health.

## EXPANSION TIMELINE

**JULY 2023:** Public review of Global Commitment Request for Blueprint Funding

**AUGUST 2023:** First Payment to Administrative Entities.

**15 SEPTEMBER 2023:** Program Managers collect Practice Attestations and forward to Blueprint.

**ONGOING:** Staff hired, and Blueprint Portal updated. Practices and Program Managers track service information.

**01 OCTOBER 2023:** Regular quarterly payments commence.

**QUARTERLY ONGOING:** Staffing reports due to Program Managers and updated in Blueprint Portal. Program Managers & QI Facilitators report expansion data to Blueprint.

## QUESTIONS?

- Please use the “Raise Hand” function in Teams to have your question addressed.
- If you are having microphone issues, please email [Mara.Donohue@vermont.gov](mailto:Mara.Donohue@vermont.gov) to have your question read aloud.

For all other questions after this meeting, please reach out to:

John M. Saroyan, MD

Executive Director

[John.M.Saroyan@vermont.gov](mailto:John.M.Saroyan@vermont.gov)