

## **Report for PIAC: June 2015 through August 2015**

### **Money Follows the Person Behavioral Health Pilot and Related Efforts**

The Money Follows the Person Behavioral Health Pilot (Pilot) in Bexar, Atascosa, Wilson, Guadalupe, and Travis Counties (San Antonio and Austin) helps individuals with co-occurring physical and mental health/substance abuse conditions leave nursing facilities and live independently in the community. Two pilot services, Cognitive Adaptation Training (CAT) and substance abuse counseling, are currently provided by the Center for Health Care Services (CHCS), San Antonio's local mental health authority (LMHA), the University of Texas Health Science Center at San Antonio (UTHSCSA), and Austin Travis County Integral Care (ATCIC). CAT is an evidence-based rehabilitative service that provides assistance to improve adaptive functioning by helping individuals establish daily routines, organize their homes, and hone their community living skills. Examples of increased independence include getting a paid job at competitive wages, driving to work, volunteering, getting a GED, teaching art classes, leading peer support groups, and working toward a college degree.

Significant updates since the last report include the following:

- The total number of people who have received at least one day of pilot services in the community since the start of the pilot in 2008 is 397. Of these, 214 have successfully completed one year of pilot services in the community. Over 70% of those who left nursing facilities under the pilot have successfully maintained independence in the community. In addition, pilot participants have shown statistically significant improvements in functioning independently. Participants show increased functional status and quality of life across time, and gains achieved during the intervention persist for at least a year after the end of services.
- CAT services have reached maximum capacity in the Austin and San Antonio service delivery areas due to robust outreach and recruitment efforts. New participants are enrolled as others transition off services. The pilot is currently serving 52 clients in the community and 27 in nursing facilities (pre-transition).
- The cognitive challenges faced by pilot participants are similar to those faced by some long term residents of state psychiatric facilities. DSHS has been working with CHCS to provide pilot services to individuals at the San Antonio State Hospital (SASH). This effort is funded with Mental Health Block Grant dollars. To date, 41 individuals have relocated from the state hospital into the community.
- DSHS staff continued to provide technical assistance to CHCS staff in San Antonio for the new Home and Community Based Services Adult Mental Health (HCBS-AMH) program and discussed opportunities for leveraging the SASH pilot to support successful transitions for individuals leaving the state hospital.
- UTHSCSA has continued to outreach LMHA staff and has provided training in Illness Management and Recovery (IMR) and CAT, funded under an MFP administrative grant award. To date, 4,553 supervisors and direct care staff members have been trained in the IMR psychosocial rehabilitative curriculum. In addition, 295 direct care staff members have received CAT certification.

- In July, DSHS staff conducted an MFP site visit to the Austin pilot site to ensure fidelity to the CAT model and to evaluate program implementation and effectiveness. The visit allowed staff to obtain in-depth information concerning administrative and operational aspects of the program. In addition, the site visit allowed staff to gather input from MFP participants to ensure that services reflect the values inherent in patient-centered care.
- Staff continued planning activities to develop a center of excellence to provide training and technical assistance to MCOs and their networks that would enable them to deliver evidence-based rehabilitative services (CAT). In addition, the center of excellence would create a learning community with resources to assist MCOs in understanding the implications of SUD disorders for institutionalized populations and provide them with strategies to deliver SUD services to individuals transitioning from institutions.
- DSHS continues to work with the UT School of Social Work's Addiction Research Institute (UTARI) to evaluate the pilot. This quarter, UTARI began their review of Minimum Data Set (MDS) and AVATAR data to examine whether information in these datasets, such as participant physical, psychological, and psychosocial functioning measures, diagnoses, medical assessments etc., can help predict (1) characteristics of participants that successfully returned to the community and (2) which participants remained in the community over time. In addition, UTARI staff conducted interviews with MFP pilot participants. DSHS staff will continue to use evaluation results to inform policy recommendations, facilitate programmatic improvement, and promote and disseminate effective practices relating to community transition for adult nursing facility residents with behavioral health conditions.