

How to Talk to Your Board of Directors About The Changes in The Health Care System-Office Hours

PRESENTED BY: PETER BEITCHMAN AND ROBERT ROSS

Introduction & Housekeeping

Housekeeping:

- Slides are posted at MCTAC.org
- Questions not addressed today will be:
 - Reviewed and incorporated into future trainings and presentations
 - Added to Q&A resources when possible
 - Office hours will be held on Monday, 11/28/16 from 2-3pm for follow up and more question and answers. Please register at ctacny.org

Reminder: Information and timelines are current as of the date of the presentation

What is MCTAC?

MCTAC is a training, consultation, and educational resource center that offers resources to *all mental health and substance use disorder providers in New York State*.

MCTAC's Goal

Provide training and intensive support on quality improvement strategies, including business, organizational and clinical practices to achieve the overall goal of preparing and assisting providers with the transition to Medicaid Managed Care.



McSILVER INSTITUTE
FOR POVERTY POLICY AND RESEARCH



The National Center on
Addiction and Substance Abuse

CTAC & MCTAC Partners



People Get Better With Us



Small Business Initiative Partners



What is the Small Business Initiative?

Goal:

- To assess, inform and educate providers who have little or no experience billing Medicaid on the essentials necessary for Managed Care readiness.
- This training is provided by MCTAC and the SBI partners at ASAP, NYAPRS, The Coalition and Families Together.

For more information or with questions about the Small Business Initiative please contact Daniella Labate at daniellal@nyaprs.org.

Strategies to Consider

- Form small groups of board members to become educated in a particular topic (DSRIP, VBP, HCBS, etc.) and have the group report and update the full board.
- Reach out to resources that will present to the board without charge (OMH or OASAS field office staff, staff or volunteers from advocacy groups and coalitions such as ASAP, NYS Council for Community Behavioral Health, Mental Health Association, NYAPRS, the Coalition for Behavioral Health, etc.)
- A Glossary is really helpful for the board (so many acronyms and new terms). Consider using the MCTAC Managed Care Language Guide.
- If they are knowledgeable and you're comfortable, use your senior management staff to do some of the educating.
- Create an agenda item and set time aside at each board meeting for updates on behavioral health and health care reform.
- Given all the changes in the emerging landscape, it's important for the board to be thinking strategically. A board strategic planning initiative should be considered

Questions

- Can you speak to how to solicit more involvement from voluntary board members?
- Do the speakers feel that small agencies will need to merge to survive VBP? Are there other options? How do we introduce affiliation to our boards?
- For agencies that have “semi-active” boards, how do program administrators ignite awareness and necessity of “activation” during this changing landscape? What topics are best to begin with? How do we wake up our board?
- Are there any resources you can recommend for Boards to consult with? What advocacy groups or coalitions would you recommend?

Questions Continued

- Your presentation seemed to focus primarily on board of directors in private organizations. I have county operated clinics. Do you have any different recommendations for local government boards in counties where there is great concern about the cost associated with delivering behavioral health services? I want to educate my Board of Supervisors, but at times, a little bit of information can be a dangerous thing.
- As a housing provider with OMH Congregate Treatment and Treatment Apartments and as a Safety Net Provider not offering HCBS, it was suggested by our Association of Community Living to sign contracts with MCOs now even though the contracts are not negotiable in order to allow the MCOs to get to know us and for us to know them in case sometimes in the future we may end up receiving referrals from the hospitals directly and receive payments based on our ability to provide housing and supports to individuals of high need/cost to Medicaid. Do you agree Residential Providers should sign contracts at this time and why?

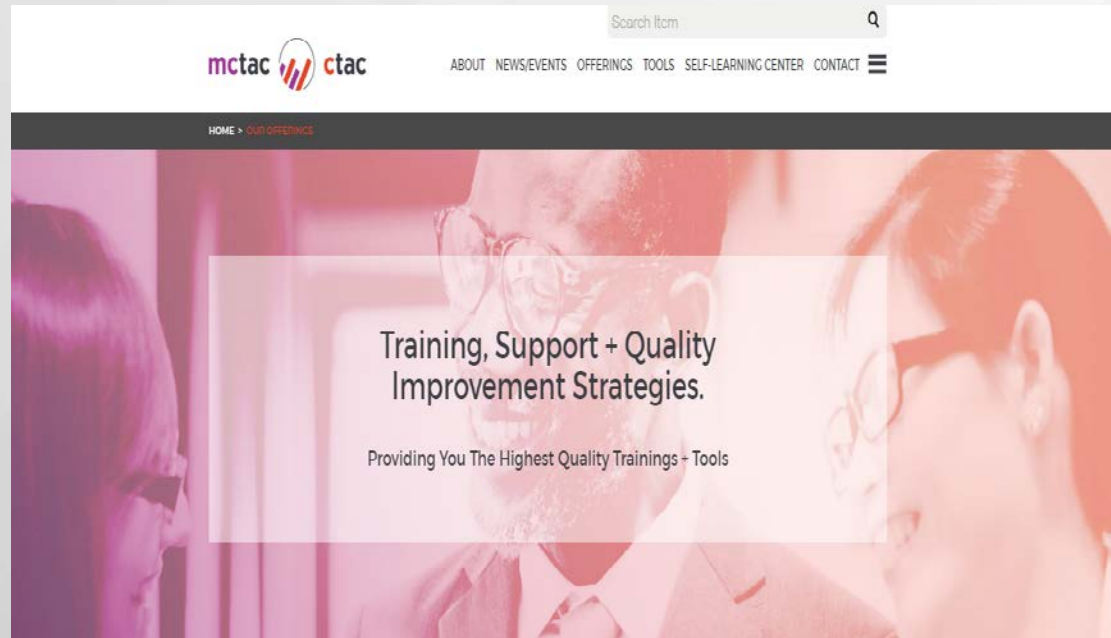
Questions and Discussion

Please send questions to:
mctac.info@nyu.edu

Logistical questions usually receive a response in 1 business day or less.

Longer & more complicated questions can take longer.

We appreciate your interest and patience!



Visit www.ctacny.org to view past trainings, sign-up for updates and event announcements, and access resources