

Part II

Lucet and BCBSKS- *A Behavioral Health Partnership*

Lucet

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Lucet-Today's Presenters



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Overview

Today's *conversation*

AGENDA

Lucet Overview

Lucet & BCBSKS

Lucet and Facilities

Provider Resources and Support

Additional Resources

WHAT WE'LL DISCUSS

Lucet and BCBSKS:
*Behavioral Health
Partnership*

About Lucet

25+ years

of behavioral health & clinical
research experience

Owned and operated behavioral health care
team with deep domain expertise

10 partnerships with health plans
22 million lives in 50 states & worldwide



Behavioral Health Clinicians



Call Center Support



Technology & Engineering

Manages BH authorizations for BCBSKS;
support members and providers with BH
needs.

750+ employees

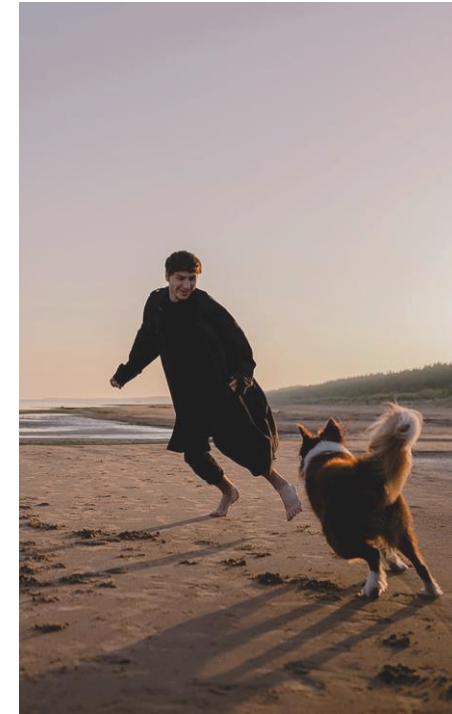
with clinical, call-center and
technology experience



Accreditations

Our Mission

Our Mission – and our passion – is to improve the lives of the members we serve and be the ideal partner for our providers.



Our Values

Serve everyone
with *compassion*



Step up and create
value



Ready to adapt to
a changing world



Nurture growth
and *belonging*



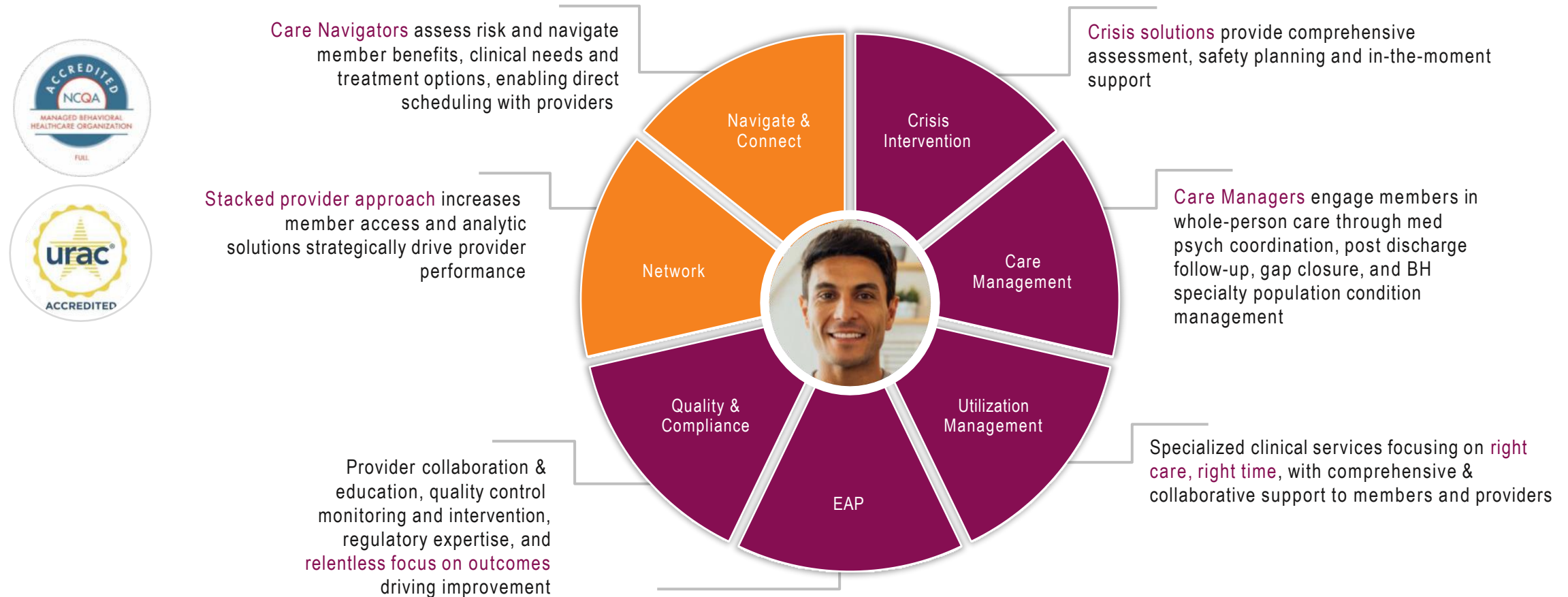
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Program & Initiatives

Lucet

Coordinated behavioral healthcare

Lucet brings over 25 years of managed behavioral health services experience with deep domain expertise



Crisis Line

Our Partnership

Providing 24/7/365 access to clinical assessors for at-risk populations seeking support and assistance. Seamless risk mitigation and triage to fully resolve member unmet needs and safety concerns

- ◆ No wrong door - member entry points can be tailored to health plan needs or surfaced via Lucet Care Navigator universal screening
- ◆ Clinician assessment of symptoms leveraging standardized screening
- ◆ Evidence-based safety planning with the member
- ◆ Crisis management and in-the-moment support for urgent needs
- ◆ Confirmed connection to care and ongoing support to ensure member stabilization and safety



Increased Need for Crisis Services

- ◆ Half of U.S. adults are reporting at least some signs of depression
- ◆ 11% of U.S. adults reported having seriously considered suicide in the month prior to a recent CDC survey
- ◆ A meta-analysis revealed that 26% of individuals who committed suicide had contact with mental health services in the year preceding their death

Autism *Resource Program*

Our Partnership

Utilization management review by Licensed Applied Behavior Analysts measures outcomes through periodic testing of continuing impairments and regular family contact, with support and consultation, for every member enrolled

- ◆ High-intensity network engagement

Staff:

- ◆ Board Certified Behavior Analysts (BCBA) who directly interact with providers and families
- ◆ Board Certified Behavior Analysts (BCBA)
- ◆ Behavioral Health Clinicians
- ◆ Certified Case Managers
- ◆ Psychiatric oversight



Research indicates up to 50% of children treated with Applied Behavior Analysis (ABA) at an early age will reduce the developmental gap between the child and their peers.



ABA treatment occurs up to 50 hours per week of direct therapy plus supervision, parent training, and reassessment over a 2–4-year period of time.



The goal of ABA treatment is to reduce the gap between member's “developmental age” and their “chronological age.”

Clinical Access

Ensures services are delivered efficiently and effectively, while enabling members to use the least restrictive setting that can provide for the safety of the member.



Improve Patient Care
with data and decision-
making support



**Reduce Total Cost of
Care** by aligning care
setting to necessity



Specialized tracks for
substance use disorder,
children & adolescents &
eating disorders

Our services facilitate timely, appropriate & medically necessary care.

Medical Necessity
Criteria includes
consideration of social
determinants of health
recovery impact.

Efficient clinical review,
with timely peer
review and appeals
coordination with
BCBSKS when
needed.

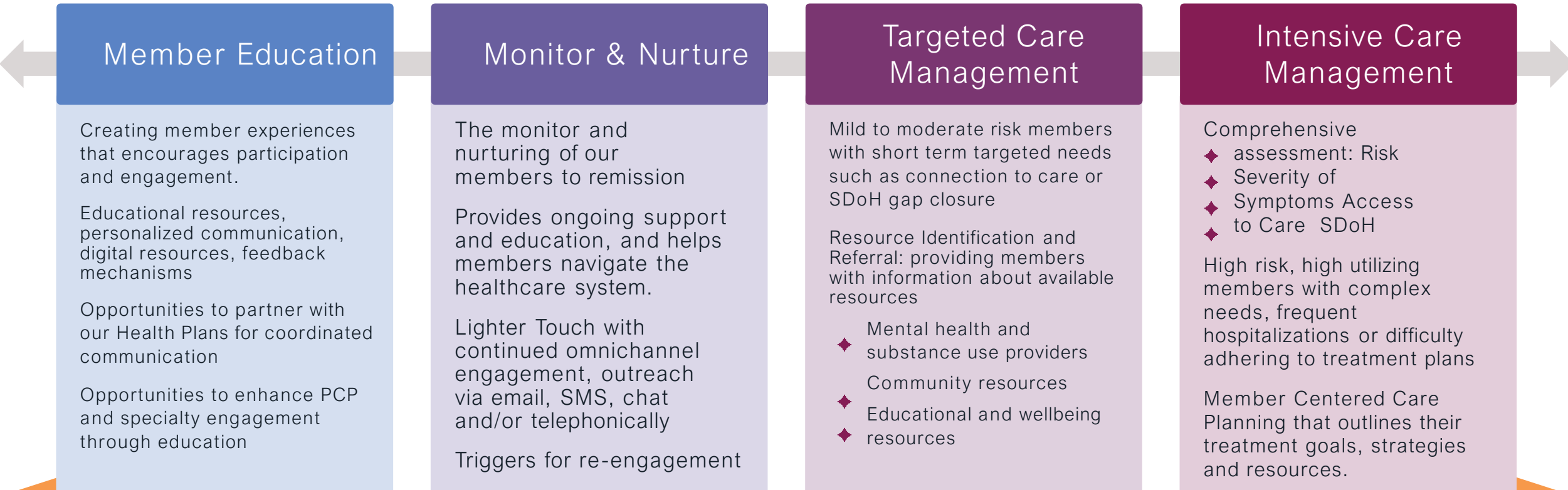
Case consultation with
treatment team to
support progress,
comprehensive
discharge planning,
and simplify transitions
of care.

Provider support
with clinical practice
guidelines based on
scientific research
and national
standards.

Assists members in
navigating levels of care
across inpatient,
outpatient,
residential, and other
care settings.

Care Management Programs

Connection to Care and Community Resources



Specialty Care Management: SUD - Eating Disorder - Child & Adolescent - 1st Admission - ABA

Eating Disorder *Program*

Why focus on Eating Disorders?

Estimated 9% of the U.S. Population will have an eating disorder in their lifetime and anorexia has the highest case mortality rate of any mental illness have one of the highest mortality rates of any mental illness¹ To help these individuals connect with the right treatment, Lucet developed dedicated resources to provide guidance and support to members who struggle with disordered eating.

*Eating Disorder Statistics | ANAD - National Association of Anorexia Nervosa and Associated Disorders

What is the Eating Disorder Program?

A dedicated team of a care manager, a utilization manager, and a medical director to support members with eating disorders across all health plans.

- Regular case rounds and didactic learning sessions
- Eating Disorder Tool Kit that includes articles, tip sheets and member experience videos
- Internal resources library that includes country-wide ED treatment options, resources links and strategic partnerships

Goals

- Improve member experience by providing subject matter experts across clinical lanes
- Create a consistent provider experience through support with transition of care and discharge planning
- Build provider partners to support continuity of care
- Increase Connection to Care

Children and Adolescent *Program*

Why specialize?

An estimated 15% of children and adolescents will be diagnosed with a behavioral health disorder before the age of 18, and about half of all mental illness begins by age 14. More than half of adults (53%) with children in their household say they are concerned about the mental state of their children. Lucet is committed to offering timely support to young members and their guardians to prevent the escalation of issues and improve long-term outcomes.

What is the Child and Adolescent Program?

A designated team of care managers assigned to help members under the age of 18

- Regular case rounds and didactic learning sessions with a board-certified child psychiatrist
- Build knowledge about access to specialty care
- Internal resources library that includes country-wide treatment options, tip sheets, resource links and strategic partnerships

Goals

- Improve member experience by identifying effective treatment options, family support programs and improve SDoH concerns
- Create a consistent provider experience through support with transition of care and discharge planning
- Decrease average length of stay (ALOS) at higher levels of care
- Increase collaboration with medical providers

Substance Use Disorder *Hybrid Program*

We are the Substance Use Disorder (SUD) clinical experts

Why?

Substance Use Disorder remains a growing public health and safety crisis.

- Members with active SUD tend to have a negative trajectory in terms of their mental and physical health, correlated with increased medical costs and poor health outcomes.
- Timely and appropriate evidence-based treatment and community supports are imperative to promote sustained recovery.
- Increased risks for the SUD population include a higher likelihood of co-morbid conditions requiring a more complex treatment team, higher stigma and sensitivity to stigma, and increased overdose risk following detoxification efforts.

Goals

- Improve member experience by providing a single expert in care as their connection
- Create a consistent provider experience through support with transition of care and discharge planning
- Decrease readmissions
- Increased connection to care

Transition of *Care*

Wraparound support for members that reduces cost of care, improves member outcomes, and promotes recovery.



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Higher Levels of Care

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Lucet's Authorization Standards

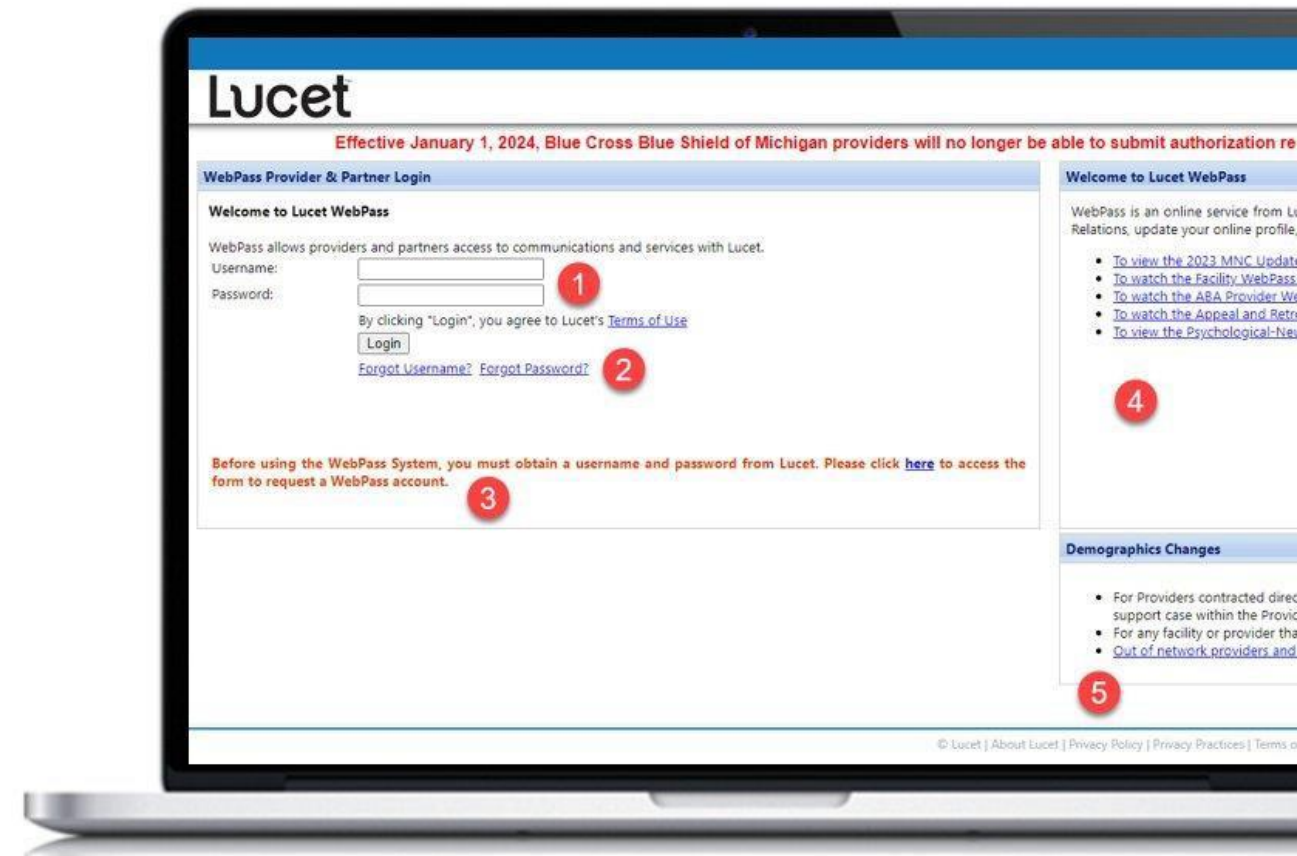
BCBSKS requires authorization for the following levels of care; Inpatient, Residential Treatment and ABA

***Reminder, FEP requires Prior Authorization BEFORE a member admits**

- ◆ Lucet's utilization management team are clinically licensed behavioral health staff.
- ◆ Lucet looks at the least restrictive level of care for each member's care, focusing on appropriate utilization of BH services to ensure quality and member safety. *Focus is on the right care at the right time for each member*
- ◆ In denial situations, a board-certified psychiatrist will make the final decision. We encourage facilities to utilize the offered peer-to-peer reviews with the attending psychiatrist to talk through the members' needs.
- ◆ Lucet applies nationally recognized medical necessity criteria (MNC) for all utilization determinations. These are:
 - ◆ Level of Care Utilization System (LOCUS)
 - ◆ Child and Adolescent Level of Care Utilization System (CALOCUS)
 - ◆ American Society of Addiction Medicine (ASAM)
 - ◆ Early Childhood Service Intensity Instrument (ECSII)
- ◆ ABA MNC criteria can be found in Lucet's medical policy using the link below:
 - ◆ More information on the medical necessity criteria (MNC) can be found here:
<https://lucethealth.com/providers/resources/mnc/>

Submitting Authorization Requests

- ◆ Please use our dedicated WebPass to submit clinical information for authorizations and discharges
- ◆ Medical Necessity Criteria (MNC) and crosswalks embedded in WebPass for convenient access
- ◆ Member search available to link clinical form submission for authorization request
- ◆ Information can carry over from initial to concurrent reviews
- ◆ Authorization dashboard showing open authorizations and status of new requests
- ◆ Tech support available at prwebpass@lucethealth.com
- ◆ Do you have more questions about MNC and the appropriate LOC? UM staff are available to help. Call 800-952-5906 and say “clinician”



Care Manager Role

Care Managers (CM's) may do any or all of the following:

- Work with members to develop a self-management plan
- Coordinate care with members' behavioral health providers
- Prepare the member for interaction with providers, to enhance treatment outcomes
- Facilitate communication between behavioral health providers and medical providers
- Identify and direct members toward community resources
- Resolve barriers whenever possible, including arranging for additional or special services

Care Managers do not provide counseling or behavioral health treatment services.

Whole-person care

Describing Lucet Care Management to members—why should they engage? (Suggested talking points)

- ◆ *“The (stress/anxiety/depression) you have been experiencing related to your (medical or behavioral condition) can be quite overwhelming. I’d like to have someone from Lucet reach out to you.*
- ◆ *Lucet is part of your benefits, and they are licensed professionals who provide free behavioral health care management services, just like BCBSKS provides medical case management for your (medical condition).*
- ◆ *While this is not a therapy service, they can help advocate for your behavioral health needs, connect you to free resources, and assist in the coordination of care between your providers.*
- ◆ *Behavioral Health care management is meant to be an added layer of support for you, and I think it could be helpful.”*

What is HEDIS?

The Healthcare Effectiveness Data Information Set (HEDIS®) was developed and published by the National Council on Quality Assurance (NCQA)

- ✓ Rates and benchmarks are reported and publicly published annually for each measure
- ✓ Health care's most widely used performance improvement tool - More than 235 million people are enrolled in plans that report HEDIS results



Standardized Measure Set

90+ measures (14 Behavioral Health) across 6 domains (Effectiveness of Care, Access/Connection to Care, Experience of Care, Utilization)



Research Based

Each measure has significant research and data evaluation to support improved quality of life and healthcare effectiveness.



Nationally Recognized Standards

Ranks health plans at the state and national level; Impacts reputation, funding, and ability to secure and maintain contracts; Funding and payments are tied to performance

Connection to Follow-Up Care = HEDIS



Attending follow-up care within seven (7) days and thirty (30) days of being discharged from the hospital, emergency room, residential, withdrawal management, or intensive outpatient/partial care improves the outcome trajectory for all members.

- ✓ Higher prospects for recovery
- ✓ Better quality of life
- ✓ 20% lower chance of readmission
- ✓ Decreased cost of care (*20% readmissions are equivalent to \$18 billion in Medicare funds*)

Anyone who has been recently diagnosed with a NEW BH diagnosis (no matter who diagnosis) has a better outcomes if they engage in 3+ follow-up sessions within a 47-day period.

	Qualifies	Does NOT Qualify
Services Treatment Types /	✓ Residential Treatment ✓ Individual and Group Outpatient ✓ Intensive Outpatient ✓ Partial Hospitalization ✓ ECT Outpatient ✓ Mental Health Home Health ✓ Community Mental Health Wraparound or Day Treatment ✓ Psychiatric Collaborative Care Management ✓ Biopsychosocial Assessment, Treatment Planning, etc. ✓ Peer Support Specialist Outpatient ✓ PCP appointment <i>with a primary MH Dx</i> ✓ Behavioral/Psychiatric Collaborative Care Management	- X Primary Care (PCP) Appointments <i>without primary MH dx</i> - X Physical Health Appointments - X School Counseling - X Pastoral Counseling - X Inpatient ECT - X Inpatient Place of Service (POS) Code
License Types	✓ Licensed Professional Counselors ✓ Licensed Social Workers ✓ Licensed Marriage/Family Therapists ✓ Psychiatrists ✓ Psychologists ✓ Psychiatric Nurses ✓ Physician Assistant with Mental Health License ✓ MD's/PA/NP <i>if primary dx is MH</i> ✓ Peer Support Specialists	- X Primary Care Physicians Drug and - X Alcohol Counselors - X Non-Licensed Clinicians or Staff
Time frame	✓ Appointments held on days 1-7 post discharge for FUH7 measure and days 1-30 for FUH30 measure.	X Appointments on same date as discharge

Discharge Planning

Best Practices

1. Coordination of Behavioral Health Care is Challenging for the Provider and Patient

Identifying areas in your processes to make discharge planning easier so the time and efforts while member was in treatment is effective.

2. Scheduling specific time before discharge to review the clinical paperwork

Include member resources that will assist members attending follow-up care or reduce life stressors to help member focus on continued recovery

3. Communicating the follow-up care appointment information to the member verbally and in writing:

- Talk to the patient about the importance of a follow-up to engage in treatment
- *Include support systems*
- *Ensure appointment is within 7 days of discharge and is a good fit considering things like transportation, location and time of the appointment*

4. Group Discharge Planning Sessions:

A group therapy session that focuses on the importance of follow-up care

5. Post-Discharge Follow-Up Contacts:

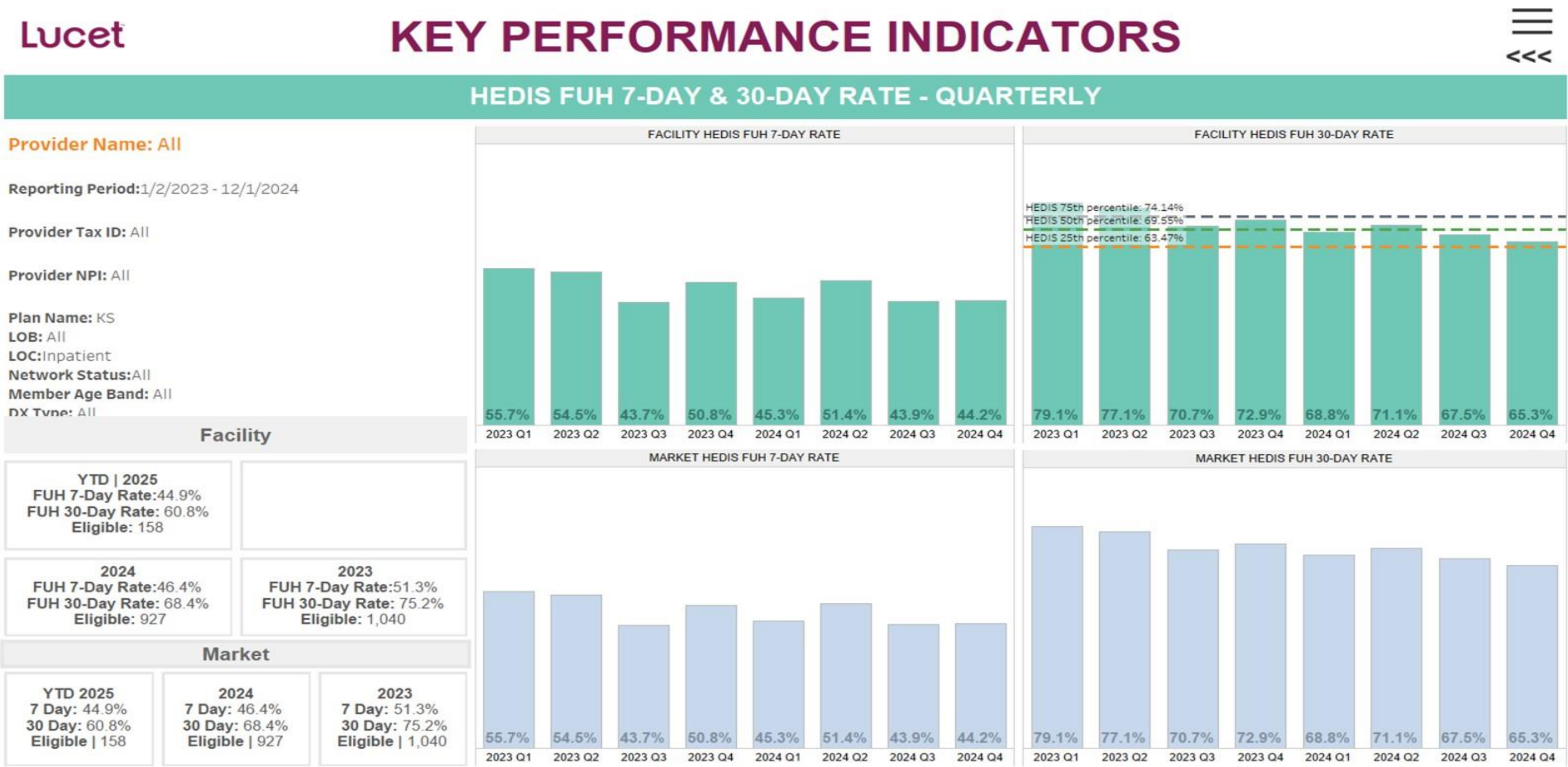
Discharge Follow-Up Calls to member within 48 hours of discharge

Can't Find a 7-day Appointment?

Lucet Can Help!

- ◆ Lucet Care Managers can assist in finding a 7-day appointment for members and in finding an appropriate provider
- ◆ Call 800-952-5906 and say “Care Manager”

Facility Scorecard Meetings



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Provider Resources and Support

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Follow-up Assistance Contact Info—*Blue Cross and Blue Shield of Kansas*

Assistance	Organization	Contact Information
Referrals for Follow-Up Care Appointments for Therapy or Medication Management	Lucet Health	800-952-5906
Behavioral Health Care Management	Lucet Health	800-952-5906
Provider Physician Help	Lucet Health	877-280-9246
Transportation	Find Help	www.findhelp.org
Clinical Access Support (MNC, LOC questions, etc)	Blue Cross and Blue Shield of Kansas	(800)952-5906 – Customer Service

Toolkits and Resources

A toolkit is available on Lucet's website at the link below. It offers guidance with HEDIS and related follow-up care. Each tile can be selected for additional details for these topics.

Toolkits



PCP Toolkit



HEDIS® Toolkit



Emergency Department Toolkit



Clinical Practice Guidelines



Care Management Services



Substance Use Hotline

Remember to call Lucet at (866)287-9569 We can help !

Link to Toolkits: [Click Here](#)