

CSB CASE STUDY

Meeting Compliance Standards and Coordinating Care for Vulnerable Individuals



Rappahannock Area Community Services Board provides clinics and programs for a number of Virginia’s most vulnerable patient populations—including those with substance use disorder, behavioral and mental health diagnoses, intellectual and developmental disabilities and social determinants of health. Its motto, “Hope Starters,” speaks to its mission of creating a better tomorrow for many of society’s marginalized patient populations. But successfully caring for such a diverse and often complex patient population required careful documentation and communication—a difficult ask of mission-driven staff with already-bursting caseloads.

The Challenge

The Administrative Burden of Maintaining Good Care Management

The Rappahannock Area Community Services Board (RACSB) offers a number of different programs to support many different, and sometimes overlapping, patient populations. Among others, they offer both long and short-term services for those with substance use disorder (SUD), behavioral and/or mental health diagnoses, intellectual and developmental disabilities (IDD) and social determinants of health. For the case managers who work at RACSB, the paperwork associated with each patient can be overwhelming on its own. Then, ensuring the proper follow-up and tracking of each patient makes things even more challenging. Brandie Williams, Director of Operations at RACSB, explains:

“We’re required to do certain reporting to our state and our state Medicaid managed care organizations when certain incidents occur—such as when specific individuals go to the emergency department or are admitted to the hospital. Those reports need to be sent to the state within 24 hours, otherwise we’re out of compliance. With the population we serve, calling to let us know they went to the hospital is not high on our patient’s priority list—if they want to share with us at all. This ultimately impacts more than just compliance; it impacts our ability to circle back with each patient and make sure they have the follow-up care resources needed.”

The Solution

Administrative Automation

RACSB joined the Emergency Department Care Coordination (EDCC) Program and implemented the Collective Medical platform to help automate patient tracking using a real-time, ADT-based network. Starting with their higher-touch programs—such as those for patients with mental health conditions or those enrolled in the organization’s IDD program—Williams began receiving a morning report of patients in these programs who had presented to the ED within the past 24 hours. From there, she was able to send the appropriate information directly to each patient’s respective case manager—limiting the amount of unnecessary emails and notifications for each social worker while ensuring that appropriate follow-up care took place. Not only did this improve outcomes for patients, but it led to higher rates of compliance throughout the organization. Williams continues:

“Although most providers shrink at the idea of yet another piece of technology, the platform really did simplify administrative work for us. Within two weeks of implementing our pilot programs, I had the other programs banging down my door, asking to be onboarded to the platform as well. Our clinicians saw the value that the information in these notifications provided, came to me to ask for it and ultimately thanked me for adding it to their workflow.”

Since initial implementation, RACSB has expanded their use of the platform to support all programs within the organization. With all providers able to receive relevant, up-to-date info on their patients—without additional administrative burden—patient care in these programs improved as did the workflows involved. With an automated system in place to improve responses to patient crises, it was time to work proactively on preventing the ED visits themselves.

Diagnosing Key Problems Through Improved Analytics

Partnered with Anthem's Virginia Medicaid health plans, RACSB runs a behavioral health home initiative for individuals who require more care coordination. Each patient is tagged using the platform, and RACSB care teams meet regularly with Anthem advocates to deep dive into finding unique and innovative ways to help support these individuals. The EDCC program in conjunction with the platform helps case managers easily identify the patients with the highest utilization patterns, helping the collaborative team know where to focus their efforts. Williams explains:

"The EDCCP program which provides the Collective platform enables us to have discussions around our most vulnerable patients. In our monthly collaborative meetings, we take a look—going into each patient individually—brainstorming and strategizing about what we can do for these patients. We're all in the same room together, working out strategies and action plans to support each patient from the clinical and the insurance side of things. It's fantastic and exciting to be a part of. And because the platform provides access to those analytics almost immediately, it makes it easier for us to find out the details, reach out to the patient and support the patient with the appropriate level of care, education and resources."

Analytics also helped RACSB realize that many patients—both inside and outside the behavioral health home—had social determinants of health (SDOH) that were playing a key part in high ED utilization and poor patient outcomes.

Using the platform, RACSB staff are able to begin tracking their care in connection to conditions outside the hospital and clinic. Understanding that social determinants of health could account for 80-90 percent of a person's health outcomes, Williams decided to put these analytics to use tracking SDOH—starting with homelessness—in hopes of qualifying the organization for additional funding to help meet these patients' needs.

With the supporting data provided by the platform, RACSB was able to qualify for and receive a \$819,577 grant to build a permanent supportive housing program for individuals with persistent, serious mental illness who are homeless.

Organization Outcomes

Through automation and analytics, RACSB has gone beyond simply meeting compliance regulations for licensing to providing highly-personalized care for some of Virginia's most vulnerable patient populations—all while streamlining provider workflow and improving overall patient care.

Helping those with IDD

Some of the patients RACSB serves in its programs have one of Virginia's three Medicaid developmental disability waivers. The waivers vary depending on the severity of the intellectual or developmental disability—from those who live in group homes, to those who live at home with sporadic support.

To help protect these patients, RACSB adheres closely to the guidelines set by the US Department of Justice, which ultimately aims to help these individuals with IDD integrate successfully into the community through access to appropriate support and freedoms. Williams explains:

"There are a lot of regulations surrounding the health and safety of our individuals with IDD, so our case managers need to monitor these patients very closely. Having patient info easily accessible in one platform puts them into a position to be able to do their job effectively, know who to call for help and support individuals and families around their needs."

Quote

"No matter what we do, whether it's sitting down with an individual or managing care plans in a platform, we're all hope starters. The collaboration, compliance and care we strive for enables these individuals to have better health and better tomorrows, and all of us to have a brighter and better community."

Brandie Williams
Director of Operations
Rappahannock Area Community Services Board

Contact

To learn more about Virginia's Emergency Department Care Coordination Program:
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For Collective Platform technical assistance:
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¹ <https://nam.edu/social-determinants-of-health-101-for-health-care-five-plus-five/>