

THE PUBLIC HEALTH EMERGENCY UNWINDING

The Public Health Emergency Impacts HealthChoices

Just as BHARP was in the midst of its transition to the role of primary contractor for the HealthChoices behavioral health program in the region, the COVID-19 pandemic was also heavily impacting the nation. As a result, the federal and state governments declared a public health emergency (PHE). One of the strategies identified in the PHE was to suspend redetermination of benefits for those receiving Medicaid, which meant that everyone who was enrolled at that time and any new enrollees were permitted to remain on Medicaid regardless of their income. During the three-year span of the PHE, the HealthChoices program saw unprecedented growth in the BHARP region – April 2023 membership in the program reached an all-time high of approximately 284,000 members.

The Recovery

In the spring of 2023, the state began the unwinding process of the PHE. Medicaid eligibles began receiving notifications that they needed to once again verify their income to determine continued eligibility for the program. BHARP and its partners worked together to ensure that those who still needed Medicaid submitted the necessary paperwork to retain their benefits. It was encouraging that people were recovering from the effects of the pandemic both physically and financially – they seemed to be moving on and once again began receiving their benefits through their employers or other means.

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THE PUBLIC HEALTH EMERGENCY UNWINDING CONTINUED...

The Unintended Consequence

Like all HealthChoices contracts, the BHARP contract is paid per member per month to provide behavioral health care, and the effects of the PHE unwinding on the program have been significant. The unwinding ultimately resulted in an unprecedented loss of approximately 66,000 members between the spring of 2023 and the summer of 2024. The reduction in HealthChoices premiums for these members resulted in decreased financial resources in the program for BHARP. In addition, demand for many services returned to pre-COVID levels, even increasing in some levels of care. In the commercial insurance world, premiums for consumers can be adjusted to address financial challenges, but not in a publicly funded program.

What's Next

BHARP is working closely with both Community Care Behavioral Health Organization (our Behavioral Health Managed Care Organization or BH-MCO) and the Department of Human Services (DHS) to address the financial shortfall. All HealthChoices contracts are feeling these effects and are working similarly with DHS and their BH-MCOs. BHARP pledges its continued commitment to ensuring access to high quality care in this period of adjustment and transition for HealthChoices members in the region.



Upcoming Board of Directors Meetings

All meetings are held from 11:00am until 2:00pm at the BHARP offices

October 3, 2024

November 7, 2024

December 5, 2024

SINGLE SESSION CONSULTATION PILOT BEGINS

A 12-month pilot project has been approved by the Office of Mental Health and Substance Abuse Services to implement Single Session Consultation (SSC) – an evidence-based program designed to support individuals through a model of brief interventions and assessments. Five provider organizations are receiving clinical training and consultation, administrative consultation, and participating in a learning community: Concern, The Guidance Center, CMSU Behavioral Health, Child & Family Services, and CenClear. During the pilot, SSC will be delivered as part of routine care in outpatient programs in the communities and schools.

The Single Session Consultation pilot is being done through a collaboration between BHARP, Community Care Behavioral Health, and SSC developer and clinical psychologist, Dr. Jessica Schleider, PhD., Associate Professor at Northwestern University and Director of the Lab for Scalable Mental Health (www.schleiderlab.org). Grounded in Solution-Focused Brief Therapy, the SSC model is a provider-delivered program, designed for delivery in a single 30- to 60-minute session. This brief intervention approach supports individuals and may be administered at the time of service initiation with goals of managing individual clinical needs, managing wait lists for services, and improving access to care.

In real-world trials, SSC has demonstrated a prevention and reduction of mental health concerns in teens and adults waiting for longer-term treatment, while strengthening their sense of hope, boosting their motivation for change, and buffering against symptom decline. Data will be collected and measured to demonstrate short-term, mid-term, and long-term outcomes with future application to a larger-scale initiative.



COMMUNITY-BASED ORGANIZATION SPOTLIGHT



EAST LONG AVE

The journey to create the community organization, East Long Ave, began many years ago when the founders decided to embark on a real estate investment journey with the purchase of a triplex property. When the property was acquired, it already had three established tenants, one of which had a behavioral health diagnosis. Shortly after the property was purchased, the owners began receiving complaints about this resident.

After many complaints were received, the property owners handed an eviction notice to the man, but as they did so, they realized that they were about to make him homeless without addressing the root cause of his problem. Instead of proceeding with the eviction, they started discussing how to provide the man with the care he needed within the community. Through this discussion, more questions about his situation were uncovered. Was he consistently keeping his scheduled appointments with his primary care physician and mental health professionals? Was he taking his medications? Did he have access to an adequate amount of food? Did he have enough clothes? The list went on and on without any clear answers.

This marked the beginning of the exploratory process with the individual to ensure that all his needs were met. It also initiated multiple weekly check-ins to guarantee stability and compliance, as well as to address the individual's needs by providing transportation, scheduling appointments with providers, and arranging for someone to accompany the individual to appointments to advocate for them and provide accurate details of the events happening in their life. Additionally, it involved assisting with grocery shopping and connecting with local food pantries. After stabilizing and making progress, it was clear that the condition of the home needed attention. Hiring someone to clean on a weekly basis not only improved the living environment but also provided muchneeded companionship, which ultimately made a difference in the individual's overall lifestyle.

In the end, a real estate investment purchase turned into a true labor of love. After seeing the difference that could be made by choosing kindness instead of turning a blind eye to someone in need, the organization we know today as East Long Ave was formed. The name "East Long Ave" was chosen to honor the street on which that first investment in both property and an individual in need was made.

East Long Ave focuses on assisting individuals living in Clearfield and Jefferson counties with the Social Determinants of Health (SDoH), which are the non-medical aspects of an individual's life that help to promote success and the outcomes of the individual's life. Examples of SDoH are lack of adequate food, clothing, safe housing, financial difficulties, transportation and the cost of utilities. When an individual is facing these conditions in their daily life, it can negatively affect the individuals mental and physical health. East Long Ave helps to address these SDoH for those that participate in their services so that the individuals can lead happy and safe lives. To learn more about East Long Ave please visit their website at www.eastlongaveinc.com.

CRS SKILL-BUILDING AND SUPPORT COLLABORATIVE CONCLUDES

The BHARP sponsored CRS/CRS Supervisor Learning Collaborative recently concluded with a final in-person celebration. The Learning Collaborative, which kicked off in January with an in-person meeting and then continued each month with a virtual session, aimed to provide an opportunity for Certified Recovery Specialists (CRS) and CRS Supervisors to enhance their knowledge and skills, build ongoing relationships to enhance the growth of peerbased recovery support services, enhance peer-based resources, and strengthen recovery-oriented systems of care within local communities and the region. The Learning Collaborative, which was facilitated by Bev Haberle from Community Care Behavioral Health, focused on topics such as redefining sobriety, educating on life management skills, recruitment and employment of individuals in recovery, and many other valuable topics. Throughout the course of the Learning Collaborative, participants were encouraged to connect outside of the scheduled meeting and will hopefully continue leveraging these connections for growth and development after the collaborative ends. The Learning Collaborative was made up of roughly 15 Certified Recovery Specialists and CRS Supervisors from seven different Certified Recovery Support Providers across BHARP counties. The Learning Collaborative was viewed as a positive learning experience by those that participated and many feel that their knowledge and skills have benefited from their participation.



"This has given me
the opportunity to
have conversations
with staff about
meeting clients
where they are and
opened my eyes to
how individualized
recovery is."
-Collaborative Participant

Pictured (L to R): Shane Mahosky, Shane Ellis, Jody Kulakowski, Lonnie Woomer, Liz Haskins, Lisa Cherry

TRAINING OPPORTUNITIES

It is the vision of BHARP to ensure that all individuals receiving behavioral health services in the North Central Region have access to a comprehensive array of high quality, cost effective, community-based, and recovery-oriented services that maximize their potential for recovery. Along with the generous sponsorship of CEU's by The Meadows Psychiatric Center, BHARP supported this vision by presenting both Trauma-Informed Care (TIC) and the Juvenile Justice System as well as Seeking Safety training opportunities for various stakeholders across the BHARP contract.

Trauma-Informed Care and the Juvenile Justice System

BHARP was pleased to welcome back Kristine Buffington, MSW, LISW-S to our area. She is a certified TF-CBT trainer, with more than 20 years of experience. Kristine is considered an expert in trauma informed care and trains providers, courts, agencies, and therapists nationwide in TF-CBT under the direction of Judith Cohen, MD and Anthony Mannarino, Ph.D., the developers of this treatment model. Kristine served as Chair of the Ohio Department of Mental Health Child Trauma Task Force Training and Evidence Based Practices Committee. She presented TIC and the Juvenile Justice System in Clearfield, Potter, and Warren Counties. The training objective was to assist professionals, caregivers, and other stakeholders in understanding the impact of trauma on youth development, its connection to juvenile justice, and ways to provide trauma-informed care.



Seeking Safety

Demetria Nelson, LCSW, MA is the Commissioner of the Department of Human Services for the Town of Greenwich, CT. She formerly worked for BronxCare Health System for 13 years. During her last 4.5 years at BronxCare, Demetria was the Administrative Director for Addiction Treatment Services. She was first introduced to Seeking Safety in 2014 and has facilitated Seeking Safety groups and individual sessions ever since. This training focused on developing a current understanding of trauma, addiction, and their combination, increasing a sense of empathy and understanding towards trauma and addiction, and modeling Seeking Safety, an evidence-based model for trauma and/or addiction.

Due to the overwhelming positive reviews, BHARP will be presenting encore presentations of both Trauma Informed Care and the Juvenile Justice System and Seeking Safety in October. For more information, visit our website at www.bharp.org.

GAUDENZIA RECEIVES TRAUMA-INFORMED DESIGNATION AT FOUR LOCATIONS

Gaudenzia recently received trauma certification for substance use disorder (SUD) at four locations, Sunbury, Berwick, Lewisburg, and Middleburg, following their participation in the North Central Trauma Informed Care Initiative. The providers involved in this program have achieved expertise in Trauma-Informed Care (TIC), which involves trauma-specific treatment for individuals.



Pictured: Gina Melone, Kira Calderon, Dee Shirley, Melanie Irwin, Tabitha Swafford, George Weller, Erica Barnes, Christine Pellegrini, Lorie Kurrell, Sally Walker, Andrew Schmitt

They have also created a trauma-informed care culture within their organization and have successfully promoted safety for staff and individuals within the program. Dr. Lyndra Bills, Senior Medical Director, Community Care Behavioral Health Organization, extends: "Congratulations to Gaudenzia for their outstanding work as a Trauma Informed Care Center (TICC). They are committed to exceptional trauma informed care for their clients and their staff. It is wonderful to see their continued leadership and passion to excel in offering their clients great care."

The Sunbury and Berwick locations are newly certified TICC locations. BHARP would like to extend our gratitude to Gaudenzia for their supportive collaboration at both their Lewisburg and Middleburg locations as we develop a new process for offering the TICC designation to other providers and locations throughout the BHARP contract. To learn more, email Kimberly Alfieri at kalfieri@bharp.org.

MEDICATION ASSISTED TREATMENT (MAT)

The Opioid Epidemic has greatly affected the state of Pennsylvania in recent years, including those counties within the BHARP contract. As the crisis continues, the commonwealth remains committed to utilizing both prevention and treatment strategies aimed at reducing the occurrence of overdoses and increasing the number of individuals that seek and receive treatment for substance use disorders. These strategies often include education aimed at prevention for both individuals and prescribers, increasing access to naloxone, and the use of medication assisted treatment for those currently fighting addiction.

Medication assisted treatment (MAT) is the practice of using medications, such as Buprenorphine, Methadone, and Naltrexone, in combination with counseling and therapy, to treat substance use disorders. The use of these medications can help to sustain recovery and prevent or reduce opioid overdose.

This treatment approach has been shown to improve survival rates, increase retention in treatment, decrease illicit opiate use and other criminal activity among people with substance use disorders, increase patients' ability to gain and maintain employment, and improve birth outcomes among women who have substance use disorders and are pregnant. Research also shows that these medications and therapies can contribute to lowering a person's risk of contracting HIV or hepatitis C by reducing the potential for relapse.

A provider closure in 2023 in Huntingdon County added significant strain to access to MAT and other substance use treatments in the area. Mainstream Counseling, which is a licensed outpatient drug and alcohol treatment facility in Huntingdon County, decided they wanted to expand to address the epidemic and provider closure and to meet the still-present needs of members in Huntingdon County. Utilizing reinvestment funding, a nearby building was purchased to allow Mainstream Counseling to expand their current capacity limit and acquire a number of clients from the closed practice. The additional space allows for additional treatment space, more wellness visits conducted by LPNs, onsite buprenorphine inductions, an additional full-time counselor, and the addition of Certified Recovery Specialist services to their team.

BHARP would like to thank Mainstream Counseling for their continued support of our HealthChoices Members and Juniata Valley Tri-County Drug and Alchohol Abuse Commision for their support of this project.



Pictured: Stephanie Hand, Ashley Adams, Anne Michelle Butler, Suzanne Everhart, Lonnie Woomer, Dr. Mark Minor

SUPPORTIVE HOUSING COMES TO ELK AND CAMERON COUNTIES

Access to permanent, safe, and affordable housing for individuals with Serious Mental Illness (SMI) and Substance Use Disorders continues to be an identified housing need by stakeholders throughout our contracted region. Recently, Cameron and Elk Counties have seen an increase in blighted properties and a decline in overall housing stock. While many residents within the two counties have received housing subsidies, the subsidies have been lost due to lack units priced at HUD fair market rent. In addition, there has been an increase in the number of individuals and families sharing housing due to poverty levels.

In early 2022, Cameron and Elk Counties were approved to utilize reinvestment funding for a capital project to support the development of housing units to be utilized as permanent supportive housing. Also approved was contingency funding to support the individuals with security deposits, first month's rent, emergency rental assistance, essential furnishings, and obtaining necessary documentation.

Sustainability of the program beyond the reinvestment period will come from housing subsidies such as Pennsylvania Housing Affordability and Rehabilitation Enhancement funds (PHARE), Association on Higher Education and Disability (AHEAD), Home Again, Shelter & Housing Plus, and Section 8.



A developer, Whitetail Real Estate, who has a previous working relationship with Cameron/Elk Counties, was contracted to build three homes in St. Marys (two 2-bedroom and one 1-bedroom) and a one-bedroom home in Ridgway. Cameron/Elk Behavioral and Developmental Program has created an application process for individuals and families to apply for permanent residence in one of these homes. To further assist residents, misdemeanors and low-level felonies are not disqualifying elements during the application process. Construction on the homes in St. Marys has been completed and the first resident moved in on August 1st.

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