What is the Behavioral Health Community Partner Program?

- A Behavioral Health Community Partner (BH CP) program is intended to provide care management and coordination to qualifying MassHealth members. The Coordinated Care Network (CCN) is a BH CP program and can provide support to certain members with significant behavioral health needs including; serious mental illness and substance use disorders.
- CCN coordinates care with the Enrollee’s behavioral health and medical providers to ensure everyone has the most up to date information on the persons served including: medical and behavioral health diagnosis as well as medication changes. CCN can also advocate with the health insurance provider.

How can CCN help your person served?

A care team, which includes: Clinical Care Managers, Care coordinators and Nurses, will:

- Assist with organizing medical and behavioral health appointments.
- Make referrals for substance use disorder services; specialty programs; in home supports such as visiting nurse for medication management or wound care; home health aides; homemaking services; personal care assistance; and transportation resources including PT1s.
- Notify you of events such as hospitalizations, emergency room visits and/or long term placement.
- Assist and participate in discharge planning if admitted to hospital or emergency department to support bridging any gaps that may be encountered.
- Getting resources to help with food, finances, safety, health and nutrition.
- Each Enrollee is assigned a nurse who will follow their care through medication verification and reconciliation after discharges along with offering health and wellness coaching to assist with managing chronic health conditions.

Will the person served qualify? (Must meet all criteria indicated with check boxes)

☐ 18-64 years old; and;
☐ One of the following diagnoses: Substance use disorder, bipolar, schizophrenia, mood disorder, psychosis, history of suicidal/homicidal, depression, adjustment reaction, anxiety, psychosomatic, or PTSD, and;
☐ One of the following:
  - Emergency Service Program encounter
  - Detox Admission or Methadone Treatment
  - 3 or more Inpatient Admissions or 5 or more emergency department visits in the past 12 months,
  - 3 medical diagnosis
  - Services for chronic long term health disorders, and
☐ Have Eligible Masshealth plans listed and an ACO or MCO

Masshealth Standard ☐ Masshealth Commonhealth ☐ Masshealth Care Plus ☐ AND an ACO/MCO:

BMC HealthNet Plan Community Alliance ☐
BMC HealthNet Plan Signature Alliance ☐
Community Care Cooperative (C3) ☐
Partners HealthCare Choice ☐
Tufts Health Together with Atrius Health ☐
Tufts Health Together with BIDCO ☐
BMC HealthNet Plan Southcoast Alliance ☐
BMC HealthNet Plan ☐
Steward Health Choice ☐
Wellforce Care Plan ☐
Tufts Health Together ☐

EXCLUSIONARY CRITERIA: Some populations are excluded from participation in the CP Program, as their current Masshealth program already includes care management supports. Excluded populations include: Masshealth Standard PCC plan with only MBHP; and recipients of DMH PACT programs.
BH CP Suggested Referral Form

FAX TO: 833-460-3671

Member Information

Member Name: __________________________ DOB: __________ MMIS#: __________________

Gender: ________________ Home Phone: __________________ Mobile Phone: __________________

Address: ____________________________________________________________

______________________________________________________________

Guardian: ________________________________________________________

Referring Source Information

Referring Name: _______________________________________________________

Circle One: Self PCP Specialist Other

Referring Source Phone #: __________________________ Fax #: __________________

Agency Involvement: __________________________________________________

How did you hear about the Program? ______________________________________

______________________________________________________________

Clinical Information

Diagnosis

Pertinent Clinical Information:

Reason for Referral to BH CP:

Dates of last emergency room visit and inpatient stay (behavioral or medical health):

*All referrals need to be approved by ACO/MCO and are not guaranteed.