New
Jersey
B-HIP

Collaborative Breakthroughs: New Jersey Behavioral

Health and HIV Integration Project

Author: Greg Langan, LSW, MPH

Aim Statement

Develop a system of care in New Jersey that integrates behavioral health and HIV primary care services to improve system and patient outcomes.

Background

The New Jersey Behavioral Health and HIV Integration Project (B-HIP) is a four-year state-wide learning collaborative bringing together 18 RWHAP-funded agencies to improve outcomes through the integration of behavioral health care into HIV primary care settings.

The NJ B-HIP framework, derived from IHI's Breakthrough Learning Series Model, is aimed at building capacity for quality improvement and behavioral health integration.

Project Goals:

- 1. INTEGRATION of behavioral health and HIV care
- 2. Improved ACCESS to behavioral health care
- 3. Improved PATIENT OUTCOMES
- 4. SYSTEM CHANGE in behavioral health capacity for the NJ HIV care system

Conceptual Frameworks in B-HIP

SAMHSA Framework of Integration

COORDINATION We discuss patients, exchange information if needed. Collaboration from a

distance

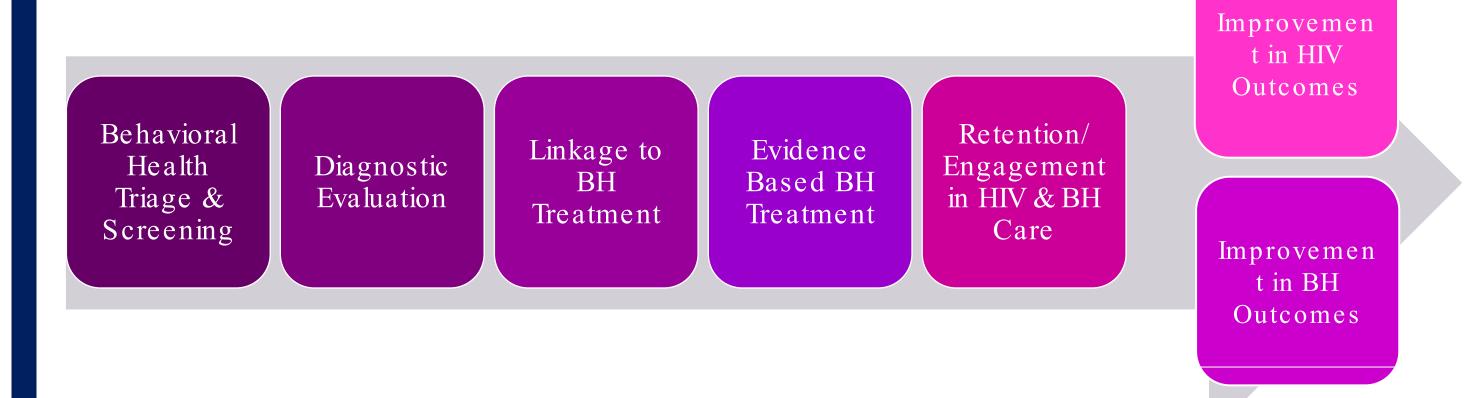
We are in the same facility, may share some functions/ staffing, discuss patients

CO-LOCATION

INTEGRATION System-wide transformation, merged practice, frequent communication as a team

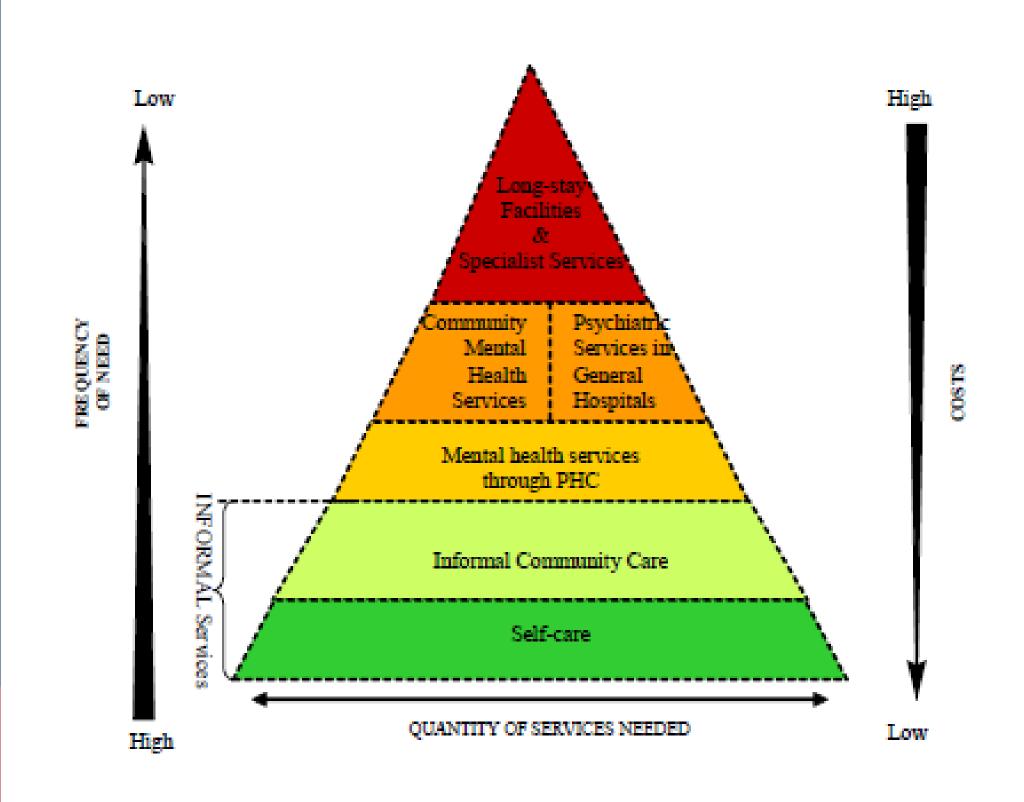
To guide B-HIP agencies in thinking about integration, agencies were provided the SAMHSA Standard Framework for Integration

Combined HIV & BH Continuum



To guide B-HIP agencies in thinking about HIV and BH Integration, the B-HIP team developed a combined Continuum.

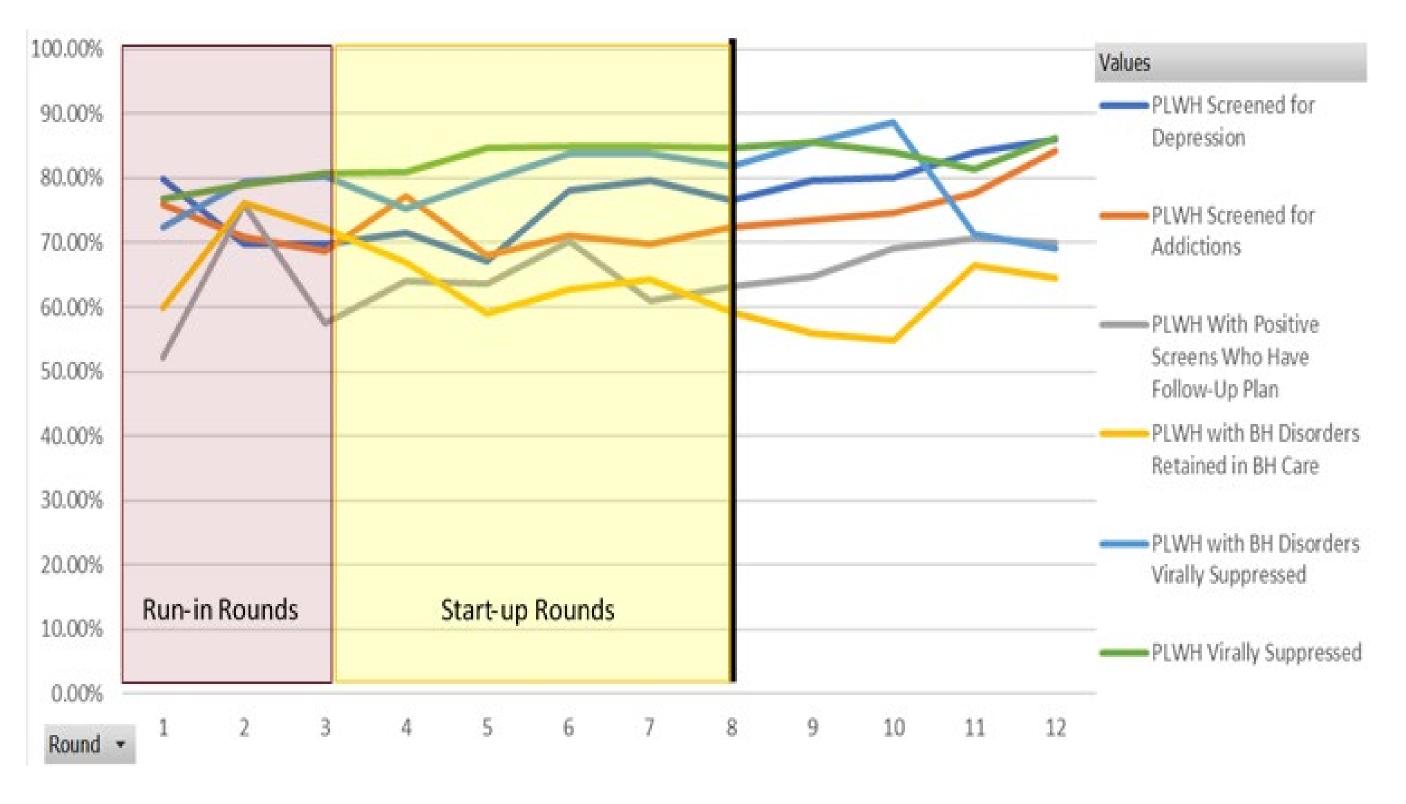
WHO Mental Health Service Pyramid



Performance Measures

Sites report bi-monthly on 6 measures with a 12-month measurement period (1) Depression Screening, (2) Substance Use Screening, (3) Follow-up to Positive Screens, (4) Retention in BH, (5) VLS in PWH w/BH Disorders, (6) VLS in all PWH

Data Submission Trends



B-HIP Coaches Toolbox

NJ B-HIP Coaches utilized traditional quality improvement tools (process mapping and cause & effect diagrams) as well as "homegrown" tools to facilitate integration by measuring screening frequency and mapping of records and referrals. To see the full B-HIP Toolkit and download the tools scan the QR code below.

SCAN ME

Performance Measures

PWH Screened for Depression

Numerator: Patients screened for clinical depression during the measurement period using the PHQ9 tool

Denominator: All HIV patients aged 18 years and older before the beginning of the measurement period with at least one primary care visit with a provider who has prescribing privileges during the measurement period.

PWH Screened for Substance Use Disorders (Based on NQF 418)

Numerator: Patients screened for substance use during the measurement period using TAPS.

Denominator: All HIV patients aged 18 years and older before the beginning of the measurement period with at least one primary care visit with a provider who has prescribing privileges during the measurement period.

PWH w/Positive Screens who have Follow-up Plans (Based on NQF 418)

Numerator: Patients screened for substance use during the measurement period using TAPS.

Denominator: All HIV patients aged 18 years and older before the beginning of the measurement period with at least one primary care visit with a provider who has prescribing privileges who screen positive for depression or substance use during the measurement period.

Performance Measures

PWH w/BH Disorders Retained in BH Care (not an NQF measure)

Numerator: Patients who are engaged in BH services as documented by a care marker in the referring providers' notes in the measurement period as evidence of BH services, internally or externally.

Denominator: All HIV patients aged 18 years and older before the beginning of the measurement period who have a BH disorder diagnosis at the end of the measurement period and at least one primary care visit with a provider who has prescribing privileges.

Exclusions: Patients who have achieved remission and who are no longer indicated for BH care should not be included in the denominator

PWH w/ BH Disorders Viral Suppression (based on NQF 2082)

Numerator: Patients with a viral load test less than 200 copies/mL at last HIV viral load test during the measurement year

Denominator: All HIV patients aged 18 years and older before the beginning of the measurement period who have a BH disorder diagnosis at the end of the measurement period and at least one primary care visit with a provider who has prescribing privileges.

Exclusions: Patients who have achieved remission and who are no longer indicated for BH care should not be included in the denominator.

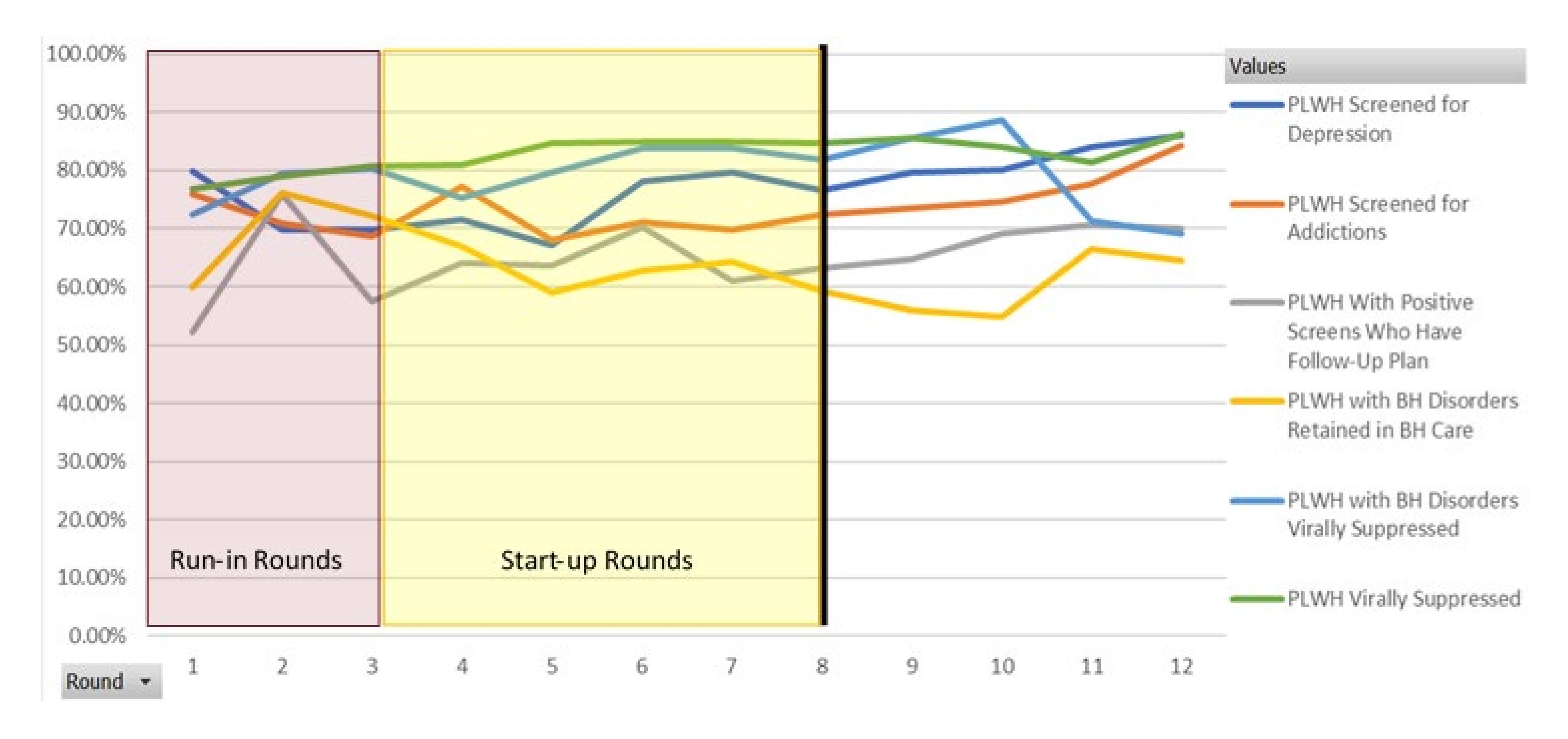
PWH w/ Viral Suppression (NQF 2082)

Numerator: Patients with a viral load test less than 200 copies/mL at last HIV viral load test during the measurement year.

Denominator: All HIV patients, regardless of age, with a diagnosis of HIV with at least one primary care visit with a provider who has prescribing privileges in the measurement year.

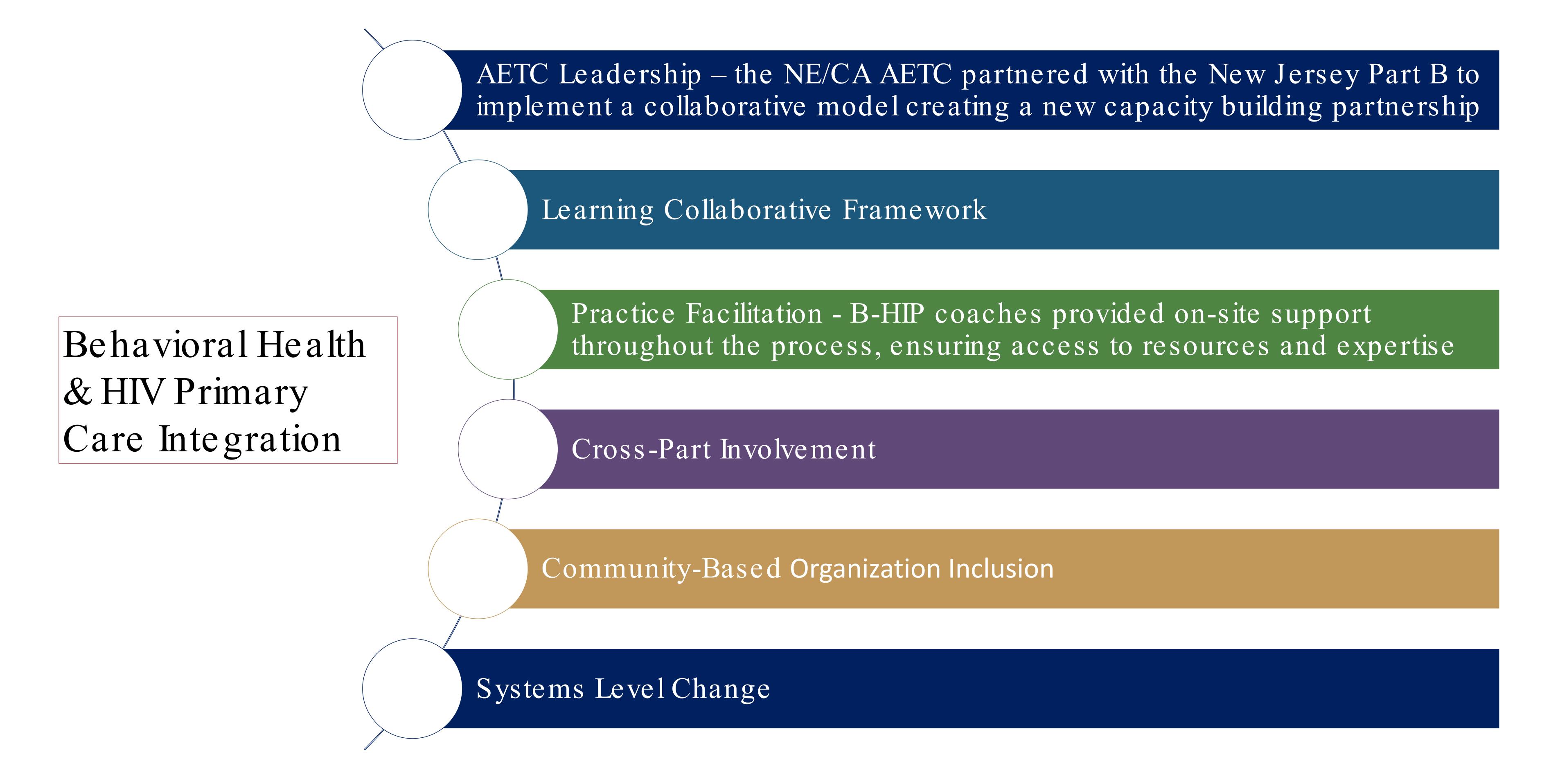
NJ B-HIP

Data Submission Trends



These performance measures allowed New Jersey sites to move past linkage and document actual services provided to their clients whether they were referred within the agency or to outside providers.

B-HP INNOVATION



By leveraging AETC Leadership/Trainings and Practice Facilitation Coaches, sites were able to implement individualized Quality Improvement Projects focusing on their individual clinic's needs to achieve systems level change for their clients.