Medicaid Reform
SUCCESS STORIES

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Michigan Association of Health Plans

Coordinating Community Stakeholders to Address Complex Behavioral Health Needs

William is a 30-year-old adult man with more than 260 hospital admissions, often for suicidal ideation. In 2020, he spent more time in inpatient care than in the community. In conversations with his patient care team, William spoke of tragic losses in his family and the feelings of anxiety, depression and thoughts of suicide.

William had difficulty establishing outpatient services due to the constant emergency department (ED) and hospital stays. The community mental health center (CMHC) connected with William during a behavioral health admission in late summer, and when he was discharged, he was transported directly to the center for assessment and development of a treatment plan. In addition to addressing his clinical needs, the treatment planning process identified that William was also homeless. He was able to secure a room at a group home and maintain his appointments at the CMHC, which dramatically decreased his ED visits and inpatient admissions.

CareSource convened with hospitals and other organizations to analyze a visual journey for William. This statewide team identified that William did not feel safe in his home or while alone and they were also able to learn that he enjoyed working and would like to be more deeply engaged in his community. As a result, CareSource facilitated William's new residence in a group home, a part-time job and community engagement options. William has since had several months of increasing stabilization and has up to 30-day periods with no hospitalizations.

Intersection of Behavioral Health and Criminal Justice

Mary is a 60-year-old woman released in May 2019 after a two-year incarceration. Mary had been incarcerated a total of eight times in her life. She was identified with specific health risks before her release from prison through the Critical Risk Indicator (CRI) program. She has multiple comorbid diagnoses, including hypertension, COPD, fibromyalgia, anxiety disorder, major depressive disorder with psychotic features and cocaine use disorder. The CRI program identifies members with mental health, substance use, pregnancy, HIV and chronic physical health conditions with managed care plans during the transition from prison to the community.

Mary was also linked with the CareSource Community Transition Program (CTP), which provides enhanced reentry services to individuals with a history of substance abuse. She met with a CareSource Care Manager before release allowing for the creation of a transition plan and follow-up care management services after release. Mary was linked with all needed providers, and she is now up to date on all of her screenings and was able to have successful cataract surgery. Mary has been using the CareSource transportation benefit to get all of her medical and behavioral health appointments, and she is taking her medications and adhering to her treatment recommendations.

Mary now has stable housing with family and is currently pursuing independent living with the assistance of her BH Provider. At the last contact, it was determined Mary had met all of her established goals for care management.