

## ***New Connections for Community Mental Health*** **Executive Summary**

***New Connections for Community Mental Health*** is a statewide program in Minnesota to solve chronic problems faced by rural Minnesotans to obtain access to appropriate health care, starting with mental health. The New Connections Program is designed to be the first phase of a major reform effort to bring innovation in communication and information management to health care consumer and provider organizations throughout Minnesota, but first and foremost in rural Minnesota.

The New Connections Program will leverage the leadership and resources of more than 80 community-based mental health clinics and programs and link them through virtual presence communication technologies. The establishment of this statewide network of nonprofit Mental Health Centers and clinics will demonstrate cooperative leadership focused on solving severe problems of access to care in mental health, using appropriate tele-health technologies. Simultaneously, the project will improve services to people and also provide a foundation of increased demand in the market for broadband technologies. The absence of such widespread demand has deterred rural telecommunication providers from expanding facilities and services in rural markets.

This first phase of connectivity in community mental health will position healthcare consumer and provider organizations throughout Minnesota to advance to the second phase where expanded, broad-based leadership and cooperation in the health, education, and human services communities at large – hospitals, clinics, nursing homes, schools, group homes – will increase interconnectivity through secure, broadband linkages and enable collaborative care to become a new standard. The technological keys to this are easy, high quality communications and information management. The leadership vision of the New Connections Program is based on: ***inclusion, connectedness, innovation, and sustainability.***

The applicant for the USDA grant is an association of 32 private, community-based non-profit/citizen-sector mental health organizations, providing services to people throughout Minnesota and acting together through the Minnesota Association of Community Mental Health Programs, Inc., formed in 1969. All participating organizations are well-established and respected providers of mental and related behavioral health services. All have extensive business linkages with private and public organizations within their respective service areas and work in collaboration with such organizations to overcome problems faced by rural people to obtain essential services.

The applicant Association is requesting \$475,021.63 to acquire equipment to enable tele-mental health consultations to occur between and among psychiatrists, physicians, and other clinicians and persons needing services. In addition, as described in the full proposal, twenty-seven uses of virtual presence communication technologies have been identified for the initial phase of the New Connections Program and are detailed in the full proposal. Among these are: continuing professional education, crisis services, psychological assessment, clinical supervision, family psycho-education, etc. The Association and members are pledging at least \$247,357.38 in qualifying match and \$1,649,488 of non-qualifying matching resources to place the program on a solid foundation. Additional pledges of match may be included in the final proposal budget as they are confirmed.

The New Connections Program is based on extensive investigation and pilot project work which has occurred from 2002 – 2005 to identify and establish the pre-conditions essential for success and sustainability. During this period, the largest private health insurance provider in rural Minnesota – Blue Cross and Blue Shield, completed the work necessary to change corporate policies that will now allow reimbursement of tele-health/tele-medicine consultations. It is a priority of Blue Cross and Blue Shield of Minnesota to help solve the problems of access to care for rural Minnesotans, and Blue Cross and Blue Shield is a partner in the New Connections Program. Similarly, the project leaders worked with the Minnesota Legislature and Department of Human Services regarding supportive reimbursement policies for Medicaid and MinnesotaCare.

Investigation of Minnesota's telecommunications infrastructure and of technology issues and solutions occurred between 2002 – 2005 and included the launching of six pilot projects using the resources of the coalition members. This investigation and pilot project work positions the coalition to have a sound basis of experience to understand what is required for program success and long-term sustainability.

Intensive work began under the leadership of MACMHP, Inc. in April, 2004, with the creation of the Task Force on Tele-Mental Health. Comprised of and led by CEO's of Mental Health Centers representing all of Minnesota,

the Task Force met weekly via videoconference using facilities borrowed mainly from county governments through January of 2005. Information and planning assistance were provided by Blue Cross Blue Shield – MN, the MN Department of Human Services Office of Tele-Community Development, and United Behavioral Health.

### **Strategic Vision and Purpose resulting from the work of the Task Force:**

***Vision:** Minnesota Statewide community-based mental health services, coordinated and tele-connected with people, providers, and partners of Association programs.*

***Mission:** Provide Minnesotans with high quality, efficient and effective mental health services, on demand, their own communities near their natural supports of family and friends.*

***Value Proposition:** Combined resources of the Association and its public and private partners +  
Leadership, management, and capacity building +  
Tele-mental health connectivity +  
Electronic medical/health records +  
Inter-organizational scheduling/practice management system = **Mission***

### **Goals and Community Impact:**

- *Connect persons to services*
- *Connect all MN Assoc. of Community Mental Health Program clinics statewide*
- *Connect mental health and healthcare communities via virtual presence communication*
- *Overcome disparities in access for persons served based on community of residence*
- *Enhance quality of services and efficiency of resource utilization*
- *Foster private/public cooperation statewide through tele-mental health and e-Health innovations*

Because of the large scale and scope of the New Connections for Community Mental Health Program, management of this program will focus on the most important community impacts and on gathering data on which to base systematic monitoring and documentation of outcomes. Beyond the goal statements above, here are selected impacts that the program designers expect to achieve:

- **Crisis services.** Enable rural hospitals and other sites to receive 365/24/7 urgent diagnostic evaluation, consultation, and crisis counseling services through virtual presence communication;
- **Healthcare provider capacity development.** Strengthen and sustain the behavioral health provider infrastructure for added responsibilities resulting from policy changes that result from development of new community-based mental health services and state hospital downsizing;
- **Primary Care Access.** Enable rural healthcare consumers to access primary care providers who will be better prepared to care for patients living with mental illness and emotional disturbance;
- **Healthcare disparities.** Reduce health care disparities based on geography and cultural background, making equitable access and culturally competent services a possibility statewide;
- **Expert Specialty Services.** Provide expert specialty services to patients/clients with low incidence disorders where due to population density, it is not viable to locate highly trained professionals.
- **Earlier Access to Services.** At great human cost, thousands of people suffer with mental health disorders for years prior to seeking help or receiving appropriate standard of care. Often they receive help late in the process, in a crisis or emergency. This project is part of the solution.

**Number of People Affected.** This broad, comprehensive proposal will enhance existing capacity and productivity of mental health providers already serving an estimated 125,000 children, adults and families per year. The technologies will enable productivity improvements of clinical care providers that can be used to improve access and quality. Through improved “New Connections” and administrative efficiencies derived from use of these technologies, we estimate that this project will improve the standard quality of care for these clients plus serve additional clients (estimate 75 hours/year per participating clinician) through “collaborative care” arrangements with other health, education, or human service providers. Finally, the tele-health capabilities will shorten wait time to access services, improving outcomes and avoiding costly consequences of delayed treatment for those in crisis and those contemplating seeking help.