

# NORTH DAKOTA PROGRAM

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# Behavioral Health Solutions

LEADING BEHAVIORAL HEALTH ACROSS THE NATION

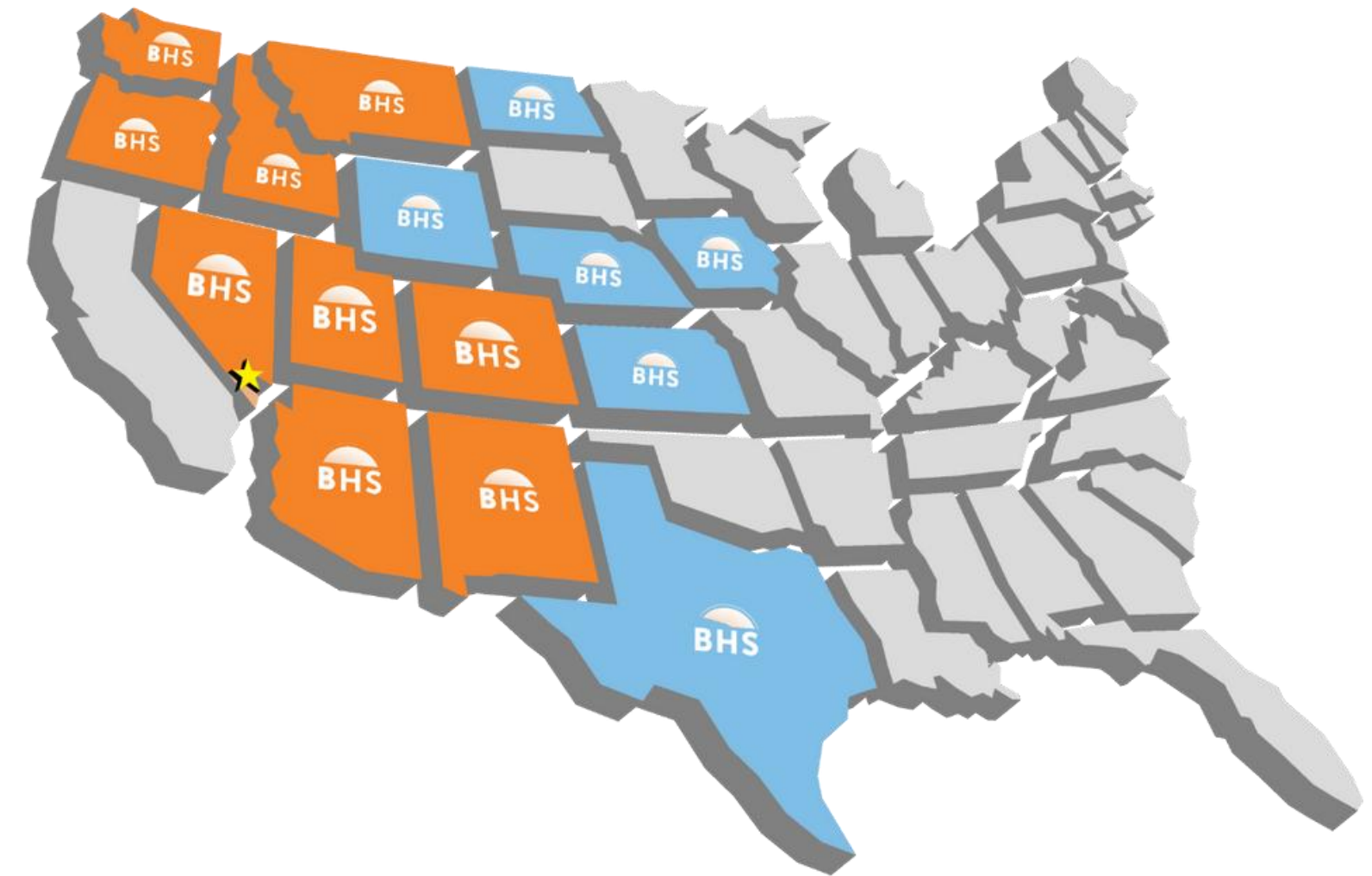
Furthering our expansion, Behavioral Health Solutions (BHS) has rapidly expanded its reach and solidified its position as the foremost behavioral provider group in the western region, **offering comprehensive services that span over 350 Skilled Nursing Facilities in 15 states.** We are committed to providing consistent, high-quality care to diverse populations in every region we serve.

## ✓ Services

- Administration of Behavioral Programs
- Psychiatry
- Medication Management
- Therapy

## ✓ Areas of Expertise

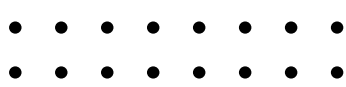
- Behavioral Health Programs in Skilled Nursing
- Skilled Nursing and Long-Term Care Facilities
- Outpatient Behavioral Health Services



# Industry Trends

## UNDERSTANDING BEHAVIORAL HEALTH & FACILITY TRENDS

- 1 Younger demographics** entering facilities due to SUD and conditions
- 2 Increased demand:** for behavioral health services due to the psychological effects of COVID-19, such as social isolation, trauma, and stress
- 3 Complex patient populations** with co-occurring mental and physical health conditions, such as homelessness, substance abuse disorder, dementia, and diseases.
- 4 Using the provider selected CPT:** Using the provider selected CPT code(s), the corresponding time allotment(s) for all services provided during the applicable pay period are summed to calculate the total time spent.
- 5 Regulatory changes** that require SNFs to provide behavioral health services as part of the comprehensive person-centered care plan, and to monitor and report the quality.



# Patient Demographic

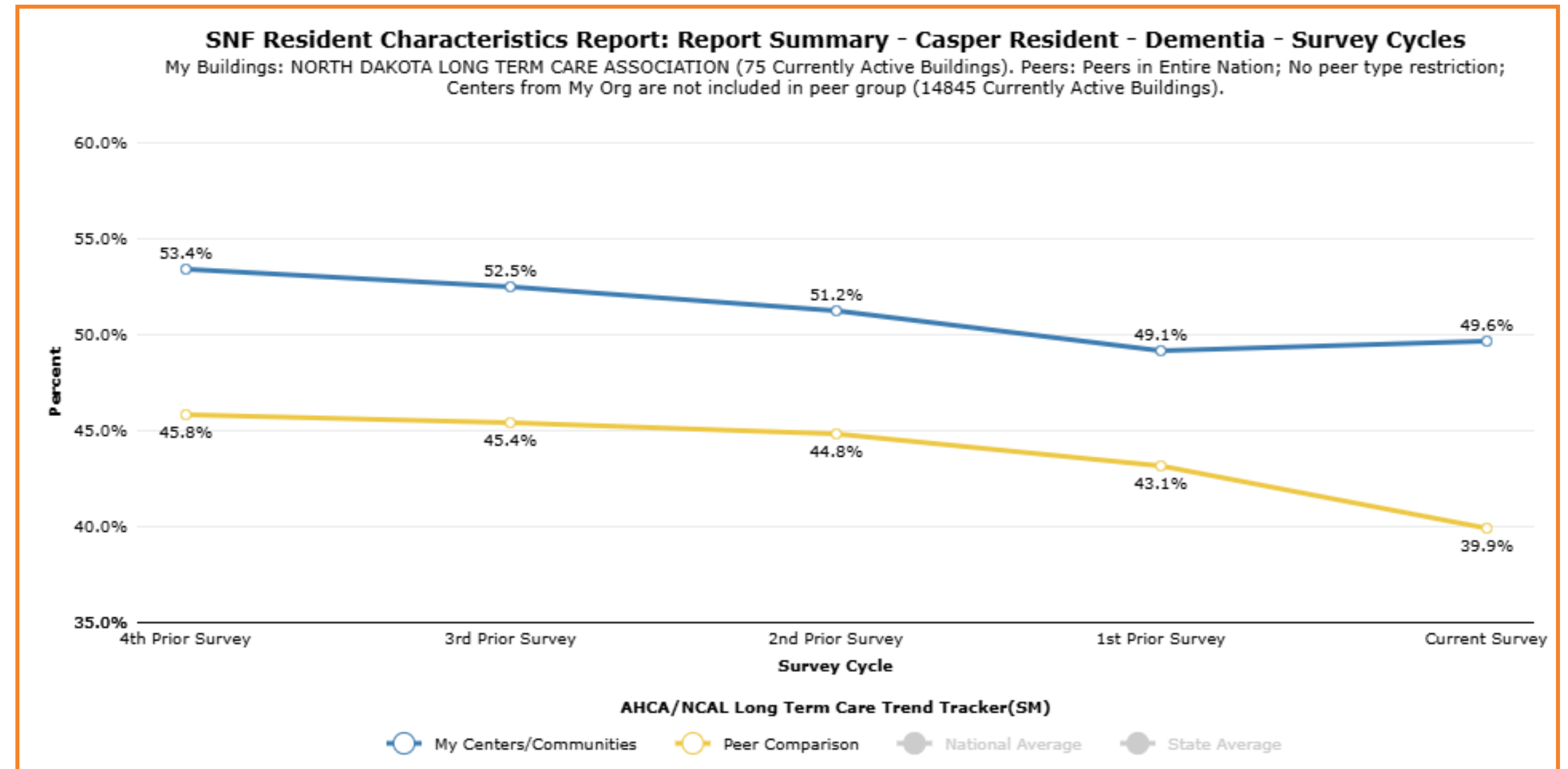
## UNDERSTANDING BEHAVIORAL HEALTH & FACILITY TRENDS

- **Rising Prevalence of Dementia:**
  - With the increasing median age of nursing facility residents, there's a notable surge in the prevalence of dementia at later stages.
  - Residents aged over 85 face a 50/50 chance of developing Alzheimer's disease, underlining the need for specialized care.
- **Impact of State Inpatient Facility Closures:**
  - The closure of state inpatient facilities has led to a shift in the landscape, with nursing facilities now catering to a diverse range of patients, including the Chronically Mentally Ill (CMI).
- **Rehabilitation Trends:**
  - Conditions like traumatic brain injury, stroke, and other rehabilitative needs are increasingly being addressed in long-term care (LTC) facilities rather than hospital-based settings, reflecting a shift in the delivery of specialized care.
- **Psychiatric Disorders on the Rise:**
  - Recent studies illuminate a concerning trend, indicating that over 70% of residents in LTC facilities grapple with various psychiatric disorders or disturbances that demand specialized treatment.
  - A comprehensive study published in the Journal of Long-Term Care revealed that more than 51% of LTC facility residents are prescribed psychoactive medications, emphasizing the critical role of mental health care in these settings.

# NDLTCA Data

## NORTH DAKOTA LONG TERM CARE ASSOCIATION FACTS AND FIGURES

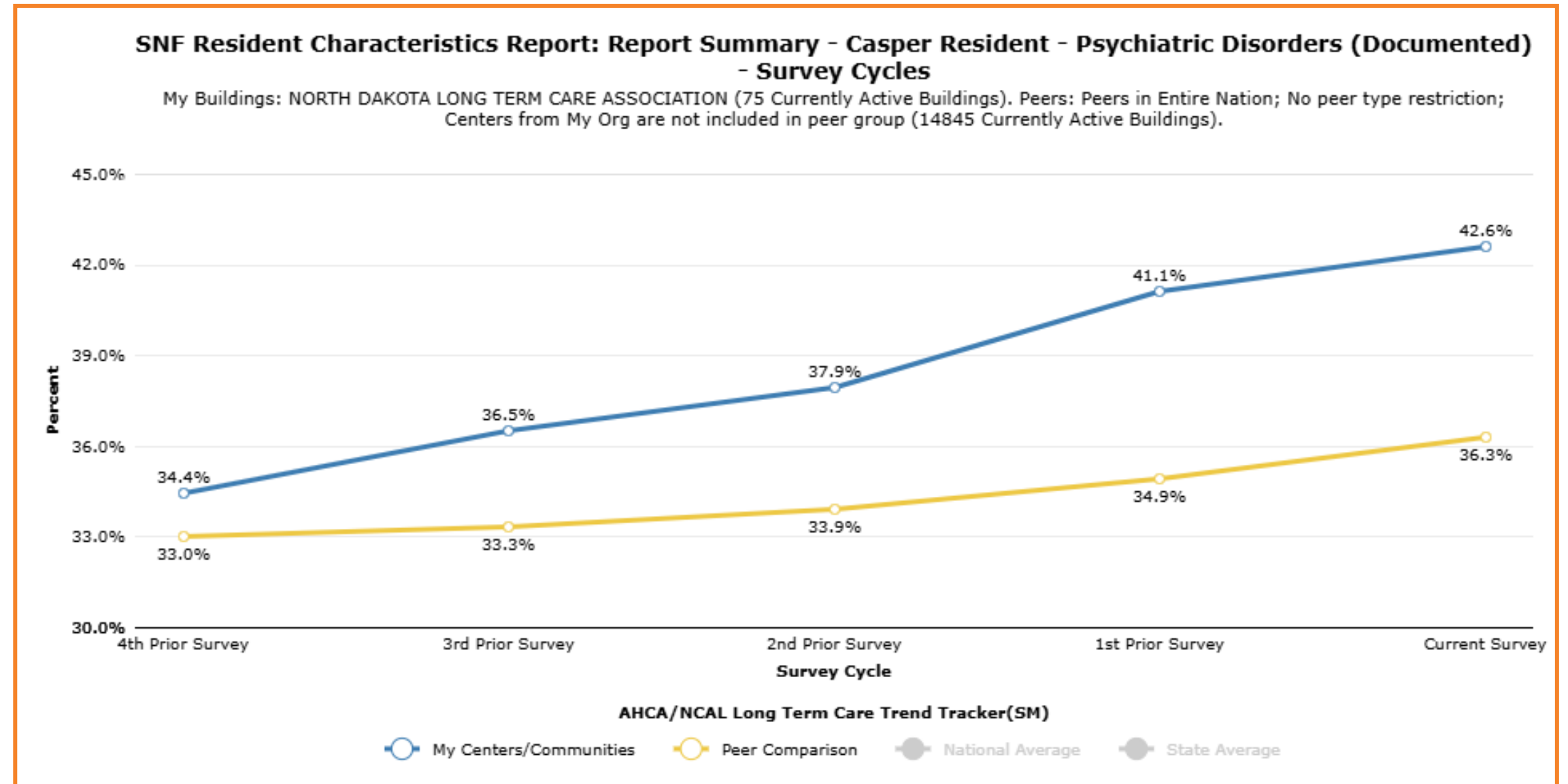
North Dakota nursing facilities care for a higher number of people living with dementia, almost half vs. 40% nationally.



# NDLTCA Data

## NORTH DAKOTA LONG TERM CARE ASSOCIATION FACTS AND FIGURES

North Dakota nursing facilities also care for a higher percentage of people with psychiatric disorders than their peers nationally. 42.6% in ND vs. 36.3% nationally, this likely explains why ND has a higher rate of antipsychotic use than other states.



# NDLTCA Data

## CARE NEEDS OF BASIC CARE RESIDENTS

**Basic care providers report 60% of the residents have impaired mental status and 30% have a mental health diagnosis.**

**60%** of residents have impaired mental status, ranging from early stage dementia to disorientation.

**30%** of residents have a mental health diagnosis.

**12** the number of medications the average basic care resident takes.

**61%** of residents are independent in dressing, with 2% requiring extensive assistance.

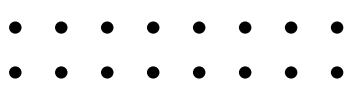
**94%** of residents need full assistance with medication administration.

**50%** of residents receive psychoactive drugs.

**41%** of residents are ambulatory and do not need any staff assistance, 68% use a walker or cane, and 12% use a wheelchair.

**91%** of residents are independent in transferring and 86% are independent with toileting.

**63%** the number of medications the average basic care resident takes.



# Benefits of Behavioral Programs

## EXPLORING THE BENEFITS OF STATE BEHAVIORAL PROGRAMS

Behavioral health funding programs at the state level help to empower skilled nursing facilities (SNFs) to enhance care and partnerships with acute hospitals.

These programs ultimately drive cost savings while improving outcomes across the healthcare system.



- ✔ Allows SNFs to better partner with acute hospitals to address difficult to discharge patients
- ✔ Provides funding to increase resources to behaviorally complex patients
- ✔ Increases staff retention through additional funding, training, and staff resources
- ✔ Reduces acute transfers and decreases acute length of stay
- ✔ Reduces out of state placements
- ✔ Helps to stabilize patients in the lowest care setting
- ✔ Overall savings to the healthcare system

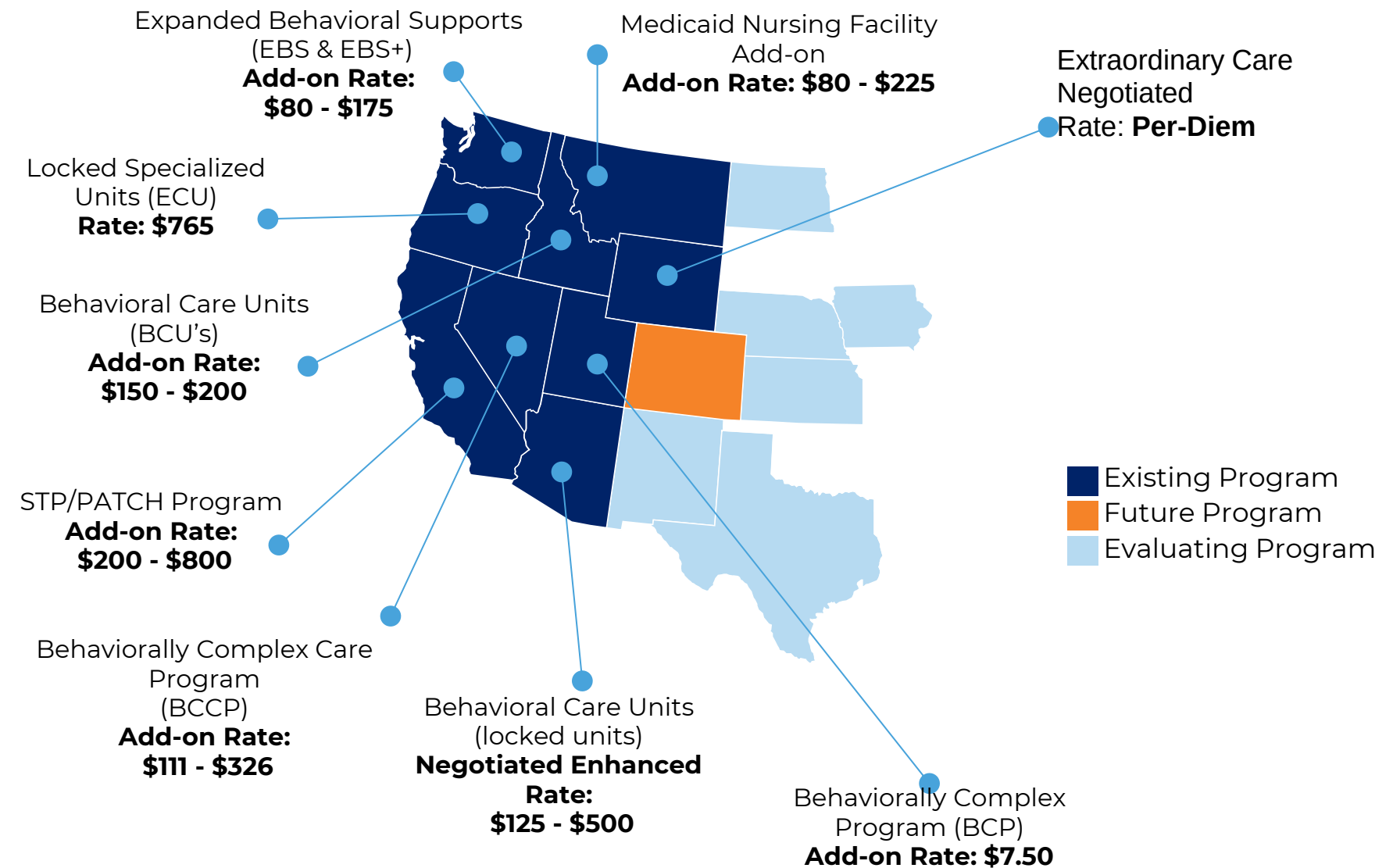


# Behavioral Health Programs

EVOLVING NEEDS CALL FOR COMPREHENSIVE BEHAVIORAL HEALTH PROGRAMS

**Behavioral health funding programs are often created to address and improve key national priorities, including:**

- ✔ Supporting timely and successful patient discharges
- ✔ Expanding access to behavioral care services
- ✔ Providing stability for high utilizers through coordinated care solutions
- ✔ Reducing inpatient length of stays with effective treatment approaches



# \$3M Saved in 12 Months

TRANSFORMING SUD PATIENT CARE IN NEVADA LTC FACILITIES



## Key Highlights

- **\$3,073,379:** Total 12-month savings to the healthcare system.
- **133%:** Increase in SUD patient intake.
- **24%:** Reduction in discharge rate.
- **52%:** Reduction in serious fall risk with decreased antipsychotic use.



## Patient Outcomes

- Reduced the average age of a facility resident by **4 years** over the period
- Improved medication management across **68 facilities**.

**Healthcare System Impact:** Estimated hospital stay cost saved: **\$125,752/site.**

# Reducing ER Visits by 72%

IMPACT STUDY: NOVEMBER 2022 – OCTOBER 2023

**Scope:** 3,899 patients in 9 facilities were reviewed

**Key Findings:**

**ER Admissions:**

- On Program: 2.7%
- Not On Program: 9.5%

**Result:** 72% Reduction in ER visits among BCCP participants



**Program Impact:** Behavioral health issues are managed effectively in facilities, reducing reliance on emergency departments.

# Program Ramp

NORTH DAKOTA

## Cost Savings and Impact:

Effective patient management within the SNF/Basic Care setting reduces expenses related to readmissions and acute care interventions contributing to overall lower healthcare costs.

## North Dakota Behavioral Health Program Analysis

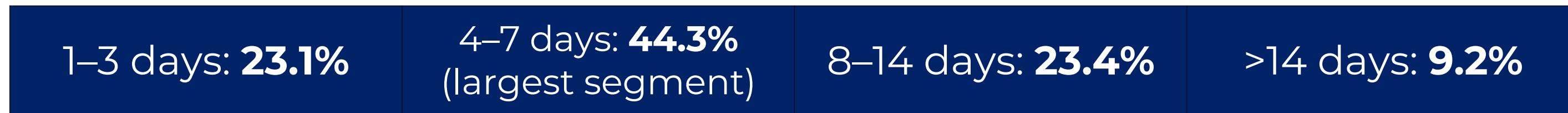
<b>Facilities Served</b>	10
<b>Avg Beds Per Facility</b>	67
<b>LTC Residents Served Per Year</b>	670
<b>Annual Turnover (36%)</b>	241
<b>Total Patients Impacted Across 2 years</b>	911
<b>Estimated number of staff trained</b>	1,000
<b>Number of lives impacted</b>	1,911
<b>Monthly Cost Per Building</b>	\$ 12,500.00
<b>Annual Cost</b>	\$ 1,500,000

# Program Ramp

NORTH DAKOTA

## Length of Stay in Acute Care Settings

- The CMS 2024 Measure Updates and Specifications Report for the SNF Value-Based Purchasing Program highlights prior hospital lengths of stay (LOS) distribution for SNF patients:



- A focus on proactive care seeks to minimize acute care transfers, enabling patients to remain in lower-cost, high-quality SNF settings for the entirety of their care needs.

## Reduction in ER Transfers and Visits

The NV Impact Study (2023) demonstrated a significant reduction in ER transfers, driven by:

- Enhanced care coordination and proactive oversight, particularly for behavioral health needs.
- Advanced patient monitoring and early interventions to address potential acute episodes before escalation.

# Online Education Platform

FOR FACILITY STAFF, IN PARTNERSHIP WITH THE ARIZONA HEALTHCARE ASSOCIATION

**Our comprehensive online training platform is designed to equip facility staff with essential skills and knowledge to improve patient care and enhance workplace well-being. This platform will offer:**

- ✓ Managing difficult behaviors
- ✓ Trauma-informed care
- ✓ Neuropsychological Assessment
- ✓ Psychiatric disorder education
- ✓ Staff burnout prevention
- ✓ De-escalation techniques
- ✓ Applying care-planned behavioral interventions



# Direct Care Services

OUR DIRECT CARE SERVICES FOCUS ON PERSONALIZED, ONE-ON-ONE SUPPORT

## Key Components:

- ✓ 1:1 Behavioral Interventions
- ✓ Coping Skills Coaching
- ✓ Socialization and Companionship
- ✓ Redirection and Engagement
- ✓ Mindfulness and Relaxation Activities
- ✓ Wellness Checks
- ✓ Crisis or Urgent Care Planning
- ✓ Positive Reinforcement and Encouragement

## Employees Included in These Activities:

- ✓ 1 Psychologist (Program Director)
- ✓ 1 Psychiatrist
- ✓ 1 Licensed Clinical Social Worker (Hospital Liaison)
- ✓ 1 Psych NP
- ✓ 5 Behavioral Health Techs (1 per 2 facilities)
- ✓ Wellness Checks
- ✓ Crisis or Urgent Care Planning
- ✓ 3 Activity Coordinators (1 per 3 facilities)

# BHS Services to Support Program

## UNDER CAPITATED MODEL

- Staffing training on topics related to managing difficult behaviors (de-escalation, management of psychiatric disorders, trauma informed care, substance use disorder, etc.)
- Creation of person-centered behavioral support and modification plans
- Creation of crisis plans
- Training individual care givers on behavioral modification plans and interventions for behaviorally complex patients
- 1:1 psychosocial activities and application of behavioral interventions by paraprofessionals
- Group psychosocial activities
- CMS regulatory compliance guidance related to behavioral services (i.e.. schizophrenia audits)
- Assistance with resolving urgent facility, resident, or family concerns related to behavioral complexities





# Our Clinical Services

CLINICAL SERVICES OFFERED TO FACILITY

**We provide comprehensive behavioral health solutions to support skilled nursing facilities in meeting national priorities and improving patient care.**

- ✓ Consistent and available Psychotherapy
- ✓ Routine Psychiatric Care & Medication Management
- ✓ Neuropsychological Assessment
- ✓ Cognitive Care Planning
- ✓ Peer Support Services
- ✓ Collaborative Care Needs
- ✓ Crisis or Urgent Care Planning
- ✓ Monthly Gradual Dose Reduction Meetings



# Data Collection

ENSURING TRANSPARENCY AND SUPPORTING BETTER CARE

## Reporting Data Back:

- We will provide comprehensive data reporting to ensure transparency and demonstrate program effectiveness.

## Current Data Collection Practices:

- Our team is already actively collecting data in multiple states, ensuring we have established processes in place.

## Key Data Metrics:

- Patient outcomes and improvement trends
- Medication adherence and reduction tracking
- Behavioral health interventions and their impact

## Commitment to Quality:

- Our data collection framework is designed to align with regulatory standards and support improved care delivery.



# THANK YOU

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