



COORDINATED
BEHAVIORAL
CARE

Dear Friends and Supporters of CBC,

As we kicked off a new decade, there were many exciting prospects for CBC and the network of community-based behavioral health providers with whom we partner. CBC was hard at work developing a new Strategic Plan (Sustainability, Quality and Innovations) that would position itself—and the behavioral health sector we represent—on a trajectory of steady growth. And then we were all faced with one of the most staggeringly complex and disruptive global events in living memory.

When the COVID-19 pandemic arrived in New York City, CBC was presented with a definitive challenge to deliver on its vision of “integrated, coordinated, individualized and culturally competent care.” This moment of tremendous uncertainty and despair was (and continues to be) met with clear-eyed innovation and unwavering support from our Board, staff, member agencies and network providers, each of whom played a distinct role to ensure the immediate safety and continuity of care for vulnerable populations in the communities we serve. CBC quickly pivoted to remote work from home offices, as staff were provided the necessary technology and resources to continue business unabated, and fostered ongoing internal communication through weekly Zoom calls, individual check-ins and department-wide meetings. Meanwhile, the network assembled weekly to aggregate and implement dynamic and fluid guidance regarding best practices at the point of service delivery. All parties continue to leverage the network’s shared knowledge to prioritize and expedite the vaccinations of service providers and recipients. Through it all—and this I am most proud of—the CBC team continued to deliver at an exceptional level, and I am thankful for our staff’s ability to adapt in the face of such adversity. Despite the hardships, CBC remained committed as a philanthropic force for good; in May over 20 CBC staff remotely participated in [NAMIWalks](#), virtually raising \$5,888. CBC was also invited to join the [Institute for Healthcare Improvement Leadership Alliance](#)—a group of leading healthcare organizations invested in Renewing, Restoring and Redesigning for the “New Normal”—a further testament to our ever-growing profile in the field.

The public health crisis was not the year’s only hardship. The pandemic also posed a significant financial burden, while a national movement demanding recognition of and corrective action toward ongoing racial injustices and health disparities among people of color and a contentious national election further exposed the deep divisions in our country. So, while we as a nation, state and city still face enormous challenges, CBC will lead behavioral health provider agencies on the path to a healthier New York with an intentional focus on health equity and racial injustice in our system of care. Though nothing about this year has gone as originally planned, it has served as a welcome reminder of how resilient and dedicated we are to serving the communities we do. Thank you to our Board of Directors—which empowered CBC to make rapid and impactful choices—and a membership network that bent to meet the challenges of COVID-19 but never broke. I am incredibly proud to have not merely worked through this fraught period but accomplished as much as we have, together. I look forward to a brighter, healthier, more hopeful 2021.

Kindest Regards,



Jorge R. Petit, MD | President & CEO



COVID-19 PANDEMIC

History will mark 2020 as the year a global pandemic changed life as we know it. When hospitals swelled to capacity and businesses ground to a halt, CBC got to work. Once State of Emergency declarations took hold and New York City began to shelter in place, CBC was delivering timely information and resources to the behavioral health agencies in its network. During the pandemic's nascent days, as the reality of what the city (and the rest of the world) was up against came into sharp focus, governing bodies at the federal, state and local levels were providing timely and essential clinical and regulatory guidance. CBC initiated weekly remote meetings to review rapidly evolving best practices with agency leadership and share lessons learned, best practices and anecdotal triumphs that ensured the safety of service providers and recipients. CBC also created a resource guide for behavioral health agencies and staff on its [website](#) that ranged from recurring information sessions to self-care exercises to parenting tips during a pandemic.

PERSONAL PROTECTIVE EQUIPMENT (PPE) PURCHASES AND DISTRIBUTIONS

As the implications of the novel coronavirus came into sharp focus in the spring, CBC assembled its network to secure personal protective equipment (PPE) at scale, beginning a painstaking process of sourcing, vetting, purchasing and distributing surgical/cloth masks, KN-95 respirators, gloves, gowns and hand sanitizer at quantities sufficient to meet network agency demand. [WellLife Network](#) offered its College Point warehouse as a repository for these bulk purchases, and CBC staff coordinated safe weekly PPE distributions for agency providers in its own network, as well as for those at [Community Behavioral Health Services](#) (CBHS) and [Council of Family and Child Caring Agencies](#) (COFCCA). In sum, CBC distributed over 300,000 surgical masks, 100,000 KN-95 respirators, 300,000 latex gloves, 30,000 disposable gowns, 10,000 cloth masks and 800 gallons of hand sanitizer to nearly fifty different network agencies.

TELEMENTAL HEALTH SOLUTIONS

While telemental health and other technology-assisted care (TAC) solutions had been growing as an adjunct service option in the behavioral health sector for some time (see CBC's 2019 [Behavioral Health and Emerging Technologies Whitepaper](#)), the COVID-19 pandemic swung the door open for telemental health's wider use as a means of adapting to social distancing requirements while still maintaining access to needed services. At the pandemic's height, individuals with behavioral health conditions and/or those impacted by social determinants of health factors experienced greater risk of intensified stress and anxiety, worsening health and economic hardship. The opportunity to speak with therapists and doctors—even via these TAC solutions—created the potential to not only offer solace and encouragement from a mutually safe distance, but essential information and treatment interventions/oversight. Accordingly, regulatory requirements around the use of telemental health have been substantially relaxed since March 2020. The NYS [Office of Mental Health](#) (OMH) and [Office of Addiction Services and Supports](#) (OASAS) quickly developed and distributed guidelines and waiver processes to allow providers to add telemental health to their service delivery options. Additionally, telemental health vendors substantially scaled up production and increased service functionality as a response to growing demand.



IMSNY
INNOVATIVE
MANAGEMENT SOLUTIONS
NEW YORK

[Innovative Management Solutions NY](#) (IMSNY)—a joint venture of CBC and CBHS, two of the largest behavioral health IPAs in New York, that together constitute a network of nearly 100 behavioral health provider agencies across NYC and the lower Hudson Valley region—recognized the potential benefits of leveraging technology to connect with and treat consumers, both in this current COVID-19 environment as

well as a post-pandemic future. Accordingly, IMSNY fast-tracked the rollout of remote/virtual technologies internally via a rigorous and comprehensive evaluation, vetting and procurement process that culminated in the selection of two vendors ([Zoom](#) and [Doxy.me](#)) as preferred partners with whom IMSNY negotiated telemental health licenses for the CBC and CBHS network of providers. Nearly 1,000 practitioners in the CBC and CBHS networks are currently taking advantage of these high quality, discounted solutions, and ensuring their accessibility and promoting their literacy at the recipient level.

TELEMENTAL HEALTH POSITION PAPER

Securely connecting with clients via telephonic and audiovisual means has been invaluable for providers during the pandemic. When regulatory bodies at the Federal and State levels loosened regulations to allow for virtual/remote modalities of care that could ensure safe social distancing between service provider and recipient, CBC boldly stated its belief that such allowances should be considered for permanent adoption, even following the pandemic's eventual end, in its Telemental Health Position Paper, [The Future Of Telemental Health Is Now](#) (also available in [executive summary](#) and [one-pager](#) formats). The Position Paper was based on a data analysis of appointment and billing information derived from CBC IPA network agencies, the CBC Medicaid [Health Home](#) and CBC's intensive care transition program, [Pathway Home™](#).

The analysis compared pre-pandemic service utilization activity to activity following the COVID-19 public health emergency declaration in March to better understand the effects of telemental health during the pandemic. In the Position Paper, CBC made the following **four recommendations** to support the use of telehealth beyond the COVID-19 public health emergency:

1. **Permanent Regulatory Relief for Telemental Health**
2. **Administrative Flexibilities for Telemental Health**
3. **Enhanced Workforce Capacities**
4. **Equitable Payment/Rates**

The behavioral health sector will eventually need to consider the right mix of telemental health versus in-person delivered services and interventions and assess the impact of telehealth on outcomes relative to care-as-usual. However, returning to the pre-COVID-19 status quo will be difficult—for now, the more flexible and accessible telemental health model is delivering on the meaningful connections that many find so vital in this period of uncertainty.

SAMHSA EMERGENCY COVID-19 GRANT AWARD

In April, the [Substance Abuse & Mental Health Services Administration](#) (SAMHSA) created a funding opportunity for states to receive up to \$2 million each to support direct mental health and substance use disorder services to individuals impacted by the COVID-19 pandemic. NYS OMH and OASAS elected to coordinate with CBC and CBHS IPAs in their successful pursuit of these emergency grant funds. Funding is disbursed to specifically target individuals with serious behavioral health disorders, those experiencing behavioral health risk factors due to the pandemic and frontline health care workers. In response to the pandemic, providers in CBC's network found themselves layering on support services for individuals without receiving additional funding, and the SAMHSA award recognized this work as a vital supplement to the valuable services providers already delivered pre-pandemic.

Following announcement of the award, CBC convened a NYC Steering Committee made up of several community behavioral health agency representatives, NYC [Department of Health & Mental Hygiene](#), NYS [Department of Health](#), OMH and OASAS. Together, the Steering Committee developed a project plan for the 16-month initiative. Using its geo-mapping capabilities, CBC targeted five hard-hit COVID-19 "hot-spot" zip codes in each borough to receive these grant funds that ease the cost burden of providing "treatment-adjacent" services. CBHS followed suit in three counties in the lower Hudson Valley. Hot-spot neighborhoods were identified via extensive data analyses of population data ranging from known COVID-19 positive cases to demographics suggesting a heightened risk.

CBC identified providers in key “hot-spot” areas (the Canarsie neighborhood in Brooklyn; the St. George area of Staten Island; the West Queens neighborhood; East Harlem in Manhattan; and Highbridge/Morrisania and Fordham/Bronx Park) operating either an Article 31 or 32 clinic to ensure that funding allocations aligned with meeting the mental health and substance use needs for each community’s hardest-hit members before reaching out to network providers in or near these hot-spot areas to better understand their specific needs and how best to distribute funding. Ultimately, CBC subcontracted with [Interborough Developmental and Consultation Center](#) in Brooklyn, [Project Hospitality](#) on Staten Island, [Catholic Charities Neighborhood Services](#) in Queens, [Association to Benefit Children](#) in Manhattan and [The Jewish Board](#) in the Bronx. By August, these agencies were providing behavioral health services and treatment-adjacent supports for clients who are uninsured and would otherwise not be able to receive needed mental health care services.

The grant has funded \$340,000 worth of services to date, averaging three to four encounters per person served. The grant targets those diagnosed with a serious mental illness (SMI) or substance use disorder (SUD), representing 60% of clients served, as well as those with less acute diagnoses or who are newly engaging in services.

The SAMHSA grant also provided funding for trainings and workshops geared to the behavioral health workforce impacted by COVID-19. Accordingly, CBC has developed its COVID-19 Training Series in collaboration with [The Bridge, Center for Urban Community Services](#), [OHEL](#), [WellLife Network](#) and the [Kripalu Center](#). The trainings aim to deliver and refine professional self-care for frontline staff, as attendees will have the opportunity to master self-care skills, share experiences and collectively process the traumas of this year.

Between January and August of 2021, behavioral health staff will have the opportunity to select from a diverse menu of training options to support their wellbeing, including an

ongoing [COVID-19 Town Hall Q&A](#) with a nationally renowned epidemiologist/physician subject matter expert. The first month of trainings are listed [here](#), and they are available free of charge to the behavioral healthcare workforce throughout NYS.

ROBIN HOOD FOUNDATION GRANT

In July, CBC was the recipient of an additional \$150,000 award from the [Robin Hood Foundation](#). These funds and programming were earmarked to align with CBC’s SAMHSA COVID-19 Emergency Award by bolstering efforts to comprehensively screen for COVID-19 and ensure a link to primary care.

Under the grant, CBC’s agency partners further enhanced the capability to enable COVID-19 screenings for clients and community members. Following the screening process, clients and community members have been linked to concrete services addressing the social determinant of health-focused needs identified from the COVID-19 screening tool. The initiative covers Staten Island, East Harlem and the South Bronx—all hard hit, “hot-spot” areas impacted by COVID-19 due to ongoing social inequities that limit access to care. CBC partnered with [Association to Benefit Children](#) and [Project Hospitality](#) on the grant, and both agencies have implemented a text messaging survey via their electronic health record (EHR) system and through in-person engagement at clinics.

This programming has overseen the screening for over 400 unique and at-risk individuals in Manhattan and on Staten Island since September. Nearly half of those surveyed have underlying health condition(s) that place them at increased risk and over 60% are successfully adhering to a medication regimen. Every survey respondent receives follow-up from CBC’s network agency partners, which has taken the form of COVID-19 education in over 30% of cases, and for nearly one-quarter of respondents it has expedited a COVID-19 viral test.

STATEN ISLAND FOUNDATION FUNDING

In September, the [Staten Island Foundation](#) awarded \$50,000 to CBC as a complementary grant to the Robin Hood Foundation COVID-19 screening project. The grant provided a value-add support to those individuals screened on Staten Island, with at least 150 individuals targeted to receive an intervention for up to three months, aligned with Plan of Care goals. The grant further extended CBC’s revamped [Staten Island Community At-Risk Engagement Services](#) (SI CARES) Preventive Case Management Program, in partnership with [Project Hospitality](#), through March 2021.

HEALTH HOME “ADAPT” SERIES

In response to the COVID-19 pandemic and in recognition of the diligent work done by its citywide care management agencies (CMAs), CBC Health Home (HH) launched the ADAPT Series, empowering CMAs to take the lead in “Applying Dynamic Approaches and Practices Telephonically.”

In the spring months, CMAs had to nimbly adapt their models of community-based care management and care coordination services for the near 18,000 members of CBC’s Health Home Serving Adults (HHSa) and the 3,000+ members of its Health Home Serving Children (HHSC) to be more dynamic, flexible, person-centered and primarily telephonic.

Considering the rapid transitions and other challenges posed by COVID-19 and met by CMAs, CBC HH launched its ADAPT Series in March. This program created an opportunity for CMAs to convene and share innovative interventions during these unprecedented and challenging times amongst themselves. Throughout the year, the ADAPT Series has showcased CMA innovation through their ability to identify and swiftly address technological barriers, transition to managing a remote workforce and establish new norms for care management team communication—all while ensuring member safety and immediate medication, food and shelter needs continued to be met in this period of heightened anxiety and uncertainty.

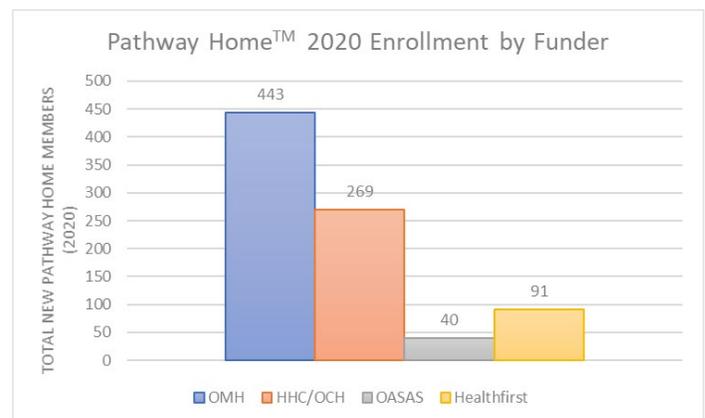
INNOVATIVE PROGRAMS

PATHWAY HOME™

CBC’s signature, award-winning, care transition program [Pathway Home™](#) now operates 16 multidisciplinary teams in partnership with ten provider agencies in its IPA network, having most recently launched two new teams that serve the transient and homeless population residing within the [Metropolitan Transportation Authority](#) (MTA) system. [Community Access](#) and [The Bridge](#) emerged as the network provider agencies to take on these novel teams. Both had already been operating successful Pathway Home™ teams serving complex/high-utilizing individuals discharged from [Bellevue Hospital](#) and Mt. Sinai Hospital and [Healthfirst’s](#) Medicare and/or Medicaid-sponsored rosters, respectively. These MTA teams enroll and connect this high-risk population to housing and other behavioral/social determinant of health services, in an effort to break the cycles that [The Health & Housing Consortium](#) reported on in August:

- 69% of the unsheltered population seeking treatment or services in hospital ERs do not have a regular doctor,
- 76% visit the ED ten or more times annually,
- 22% visit the emergency department every day.

In 2020, Pathway Home™ continued to make an impact by providing care transition services to individuals transitioning from state psychiatric centers, transitional living residences, acute hospital settings, adult homes, jails and other healthcare locations and enrolled an additional 843 members.



Meanwhile, 293 participants graduated from teams funded by CBC’s NYS OMH contract, of which:

- 96% attended a behavioral health appointment,
- 81% attended a physical health appointment, and
- 65% were connected to HH care management while enrolled.

In 2019, Pathway Home™ launched 5 teams in partnership with [OneCity Health PPS/NYC Health + Hospitals](#). Of the 449 participants that have enrolled to date:

- 98% were engaged while inpatient,
- 86% were visited within 72 hours of entering the community (hospital discharge),
- 97% have attended a behavioral health appointment,
- 90% have attended a physical health appointment

Pathway Home™’s promising approach to improving outcomes for high utilizers of psychiatric inpatient services has been further underlined through nuanced data analyses published this year. CBC partnered with NYS OMH PSYCKES to complete a study that examined the impact of Pathway Home™ services for high utilizers of psychiatric hospitalization on inpatient days and outpatient engagement post-hospital discharge. The results showed that Pathway Home™ graduates had significantly fewer psychiatric inpatient days per month during and after enrollment, relative to their pre-enrollment standards, and engage with outpatient behavioral health services with greater regularity during enrollment and sustain this adherence to care on follow-up.

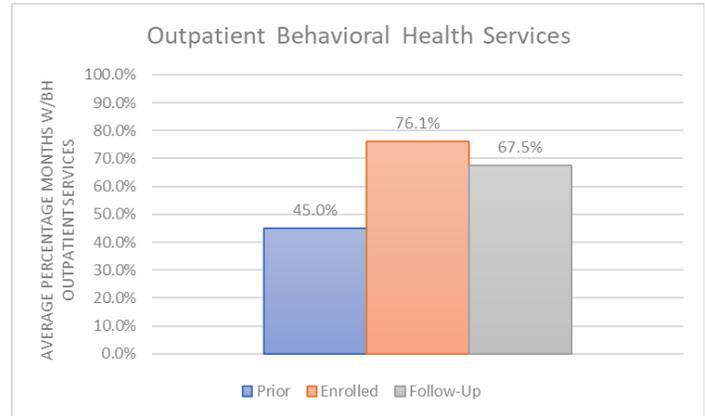
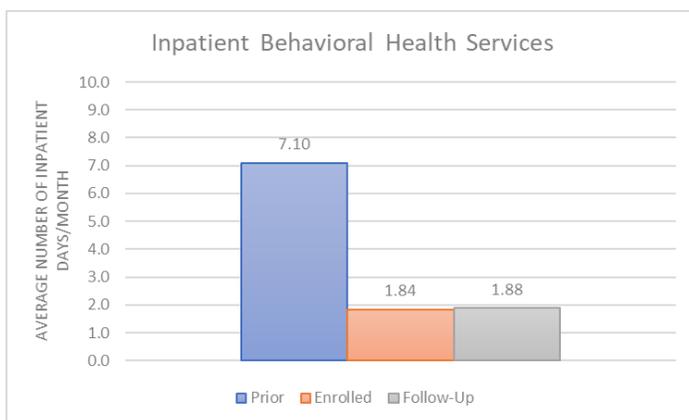


Figure 1 and 2: Behavioral health inpatient and outpatient service use 12 months prior to enrollment vs. during enrollment, and on follow-up among graduates of Pathway Home™ (n = 40)^a

^a Behavioral health inpatient service use represents the average the numbers days hospitalized for behavioral health conditions per month in the 12 months prior to enrollment, during enrollment (M = 7.3 months), during the follow-up period (M = 10.8 months). Outpatient services was measured as the average percentage of months with one more or more behavioral health outpatient service (psychiatric or substance use).

SI CARES

With DSRIP funding from [Staten Island Performing Provider System](#), CBC’s [SI CARES](#) preventive case management program—in partnership with [Project Hospitality](#), [The Jewish Board](#), [Community Health Action of Staten Island](#) (CHASI) and Staten Island Mental Health Society—served more than 7,500 Staten Islanders over four years, with nearly 80% of referred individuals receiving at least one care plan. However, when the [Centers for Medicare and Medicaid Services](#) (CMS) elected to let DSRIP funding expire without renewal in March, it appeared SI CARES would be forced to sunset. Instead, given the program’s tremendous impact on the lives of Staten Island’s most vulnerable populations and the simultaneous challenges these communities faced at the COVID-19 pandemic’s onset, CBC committed to self-fund an additional six months of services with agency partners and sought alternative funding streams. That effort bore fruit when [Staten Island Foundation](#) agreed to fund the program through at least March 2021.

This most recent [SI CARES](#) iteration has adjusted its model to serve smaller caseloads and provide greater engagement on social determinant needs that affect overall health. This

adjusted model will undergo comparable evaluation with respect to services utilization and health outcomes.

COMMUNITY HOTSPOTTING

CBC's Helping, Engaging and Linking to Health Interventions (HEALTHi), an innovative community hotspotting pilot program, ended in April, following the conclusion of DSRIP. Introduced in 2018 and in partnership with [Staten Island Performing Provider System](#) (SIPPS) and [Project Hospitality](#), HEALTHi served 117 high-risk hospital utilizers who lacked access to health and social services in the community. As a result of this intensive, value-add intervention, more than 90% of clients served accessed primary care services, received necessary lab work and medication management and engaged in groups focused on curbing unnecessary hospital use. Previously enrolled clients were transitioned to ambulatory care services as needed.

CBC's Community Outreach for Recovery and Engagement (CORE), a community-based, multi-disciplinary care transition program aimed at serving "super utilizers" of hospital systems, similarly sunset in April, following the conclusion of DSRIP. Introduced in 2018 and in partnership with [Mt. Sinai Performing Provider System](#) and [The Bridge](#), CORE served 110 individuals throughout the Bronx and Manhattan. CORE participants who successfully completed the program had an average length of intervention of 176 days. Initial program data demonstrated a 41% reduction in emergency department visits for these participants—16 percentage points higher than the target goal of 25% utilization reduction. CBC is currently collaborating with Concert Health on publishing a case study, highlighting CORE's impact.

CARE COORDINATION SERVICES

HEALTH HOME EXPANSION, NOW DESIGNATED LEAD CITYWIDE

In May, the NYS [Department of Health](#) (DOH) formally approved CBC's request for permanent expansion of its [Health Home](#) (HH) to include Queens and Bronx counties. This officially renders CBC HH's designation citywide to include all five counties.

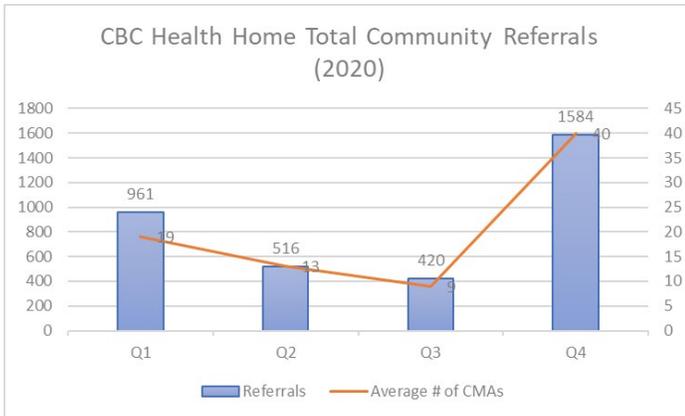
RELEVANT PARTNERSHIP FOR HEALTH INFORMATION TECHNOLOGY PLATFORM

In April, CBC announced a new partnership with [Relevant Healthcare Technologies](#), who has served as CBC Health Home's new Health Information Technology (HIT) vendor since July.

CBC HH staff worked tirelessly to conduct the needed data reconciliation in the spring months to prepare for migration and provided sufficient opportunities for care management, administrative and supervisory trainings that drew nearly 2,000 participants to ensure all were prepared for the transition in advance of go-live. Care management agency (CMA) staff feedback has been resoundingly positive since implementation, and CBC HH staff continues to work with Relevant to further improve the HIT experience for providers.

HEALTH HOME ENROLLMENT

The CBC Health Home continues to maintain steady enrollment for both adult and children, closing the year with over 18,000 enrolled members, including nearly 4,000 in its Health Home Serving Children program. CMAs have continued to rely on the community as a primary referral source, recording close to 3,500 community referrals.



ADULT HOME PLUS (AH+)

CBC continues to operate the largest AH+ program across NYC, including two Pathway Home™ AH+ teams to provide enhanced care transition services and supports to its highest risk class members transitioning to the community in Queens and Brooklyn. CBC has over 300 enrolled class members receiving AH+ care management from 37 trained AH+ care managers across seven participating CMAs. CBC has safely transitioned nearly half of the 800-plus total community transitions since 2015 and led 70 of the 124 transitions (60%) into the community in 2020.

HEALTH HOME PLUS (HH+)

CBC's HH+ program expanded to include over 300 enrolled members. CBC continues to have 18 HH+ providers, 13 of which have attested to serve members under OMH and eight attested via the AIDS Institute.

HCBS

CBC IPA's Behavioral Health Home & Community-Based Services (BH HCBS) Infrastructure contracts with [Healthfirst](#), [Empire BlueCross BlueShield](#), and [EmblemHealth](#) expired in October, ending an 18-month initiative in which CBC's network of eight CMAs and recovery coordination agencies (RCAs) ([ACMH](#), [Catholic Charities Neighborhood Services](#), [The Jewish Board](#), [New Horizon Counseling Center](#), [Postgraduate Center for Mental Health](#), [Samaritan Daytop Village](#), [Services for the UnderServed](#) and [The Bridge](#)) worked diligently to increase the number of

Health and Recovery Plan (HARP) members connected to HCBS. In sum, they completed 1870 HARP Eligibility Assessments, 1070 HARP Plans of Care and connected 370 members to HCBS. These are significant increases from years past for CBC HH HARP members.

Throughout the year, CBC IPA has been at the forefront of discussions with government and payors regarding HCBS strategy and potential service model evolutions. In June, CBC IPA was invited to participate on both [Emblem Health's](#) HARP Advisory Committee and Dr. Ana Stefancic of [Columbia University's Department of Psychiatry](#)'s research regarding the implementation and effectiveness of NYS HARP Program— including HCBS—to inform how these changes have impacted care access, quality and outcomes. Information was provided to the research team on successes and barriers shown by both clients and agencies with respect to HARP and HCBS.

In July, CBC IPA collaborated with two other NYS IPAs ([CBHS IPA](#) and [EngageWell IPA](#)) to submit comments to NYS DOH regarding its Public Notice of proposed changes to HARP away from the existing Behavioral Health HCBS model. In the [resultant paper](#), CBC and its partners recognized that the few who would benefit from HCBS services have been able to do so—the mandated bureaucratic steps necessary to connect would-be participants to services have proved burdensome and kept conversion rates of those assessed for eligibility low.

Therefore, CBC supported DOH's proposed changes and recommended that DOH consider several further changes to BH HCBS:

- Eliminate the requirement for HARP pre-authorization,
- Strengthen HCBS rates to ensure ongoing sustainability,
- Provide bridge funding for HCBS providers,
- Aid Health Home CMAs that have increased staffing to deliver BH HCBS services, and
- Consider expanding eligibility to include HARP look-alikes.

NYS subsequently announced it would be transitioning from HCBS to Community Oriented Recovery and Empowerment (CORE) services which will continue to provide recovery-focused services, while mitigating some current access barriers to care. These changes are awaiting approval from [Centers for Medicare & Medicaid Services](#) (CMS) and are slated to take place in early 2021.

INNOVATIONS

INNOVATIONS CONFERENCE 2020 WEB SESSIONS

Having made the difficult but necessary decision to postpone its Innovations Conference 2020, CBC reimagined and delivered the content previously slated for the March event as a virtual web series—and filtered the program’s content through a mid-pandemic lens. CBC premiered the first two sessions, [“When A Pandemic & Epidemic Collide”](#) and [“Telemental Health: A Pandemic’s Silver Lining”](#) in October and December, to audiences of well over one hundred, with respective keynote addresses from CBC President & CEO Dr. Jorge Petit and NYS [Department of Health](#) (DOH) Director of Strategic Initiatives Brett Friedman. Subsequent panel discussions assembled behavioral health providers and administrators from network agencies in CBC’s IPA, managed care organizations and NYS [Office of Addiction Services and Supports](#) (OASAS). Both sessions are available to stream on [CBC’s YouTube channel](#). A third session is anticipated in early 2021.

OASAS BHCC INITIATIVE

Throughout the 1st half of 2020, CBC continued to work on the OASAS BHCC expansion grant focused on clinical and programmatic workflows and practices that impact access, engagement, retention, care management and Medication-Assisted Treatment (MAT) for populations affected by substance use disorders. In coordination with [CBHS IPA](#), the workgroup began to configure a “MAT payment bundle” and administered a “MAT Readiness Checklist” to provider agencies. CBC and CBHS developed MAT-specific “Target Tracks”—workflows that operationalize and monitor agency

process and outcomes—and invested in a series of MAT for Opioid Use Disorder Learning Collaboratives built on the principles of Project ECHO (Extension for Community Healthcare Outcomes). 162 clinical and non-clinical behavioral health staff registered for at least one of the seven MAT ECHO Learning Collaboratives CBC held in 2020. Each ECHO to date has featured a didactic from CBC’s resident MAT expert, Dr. Bruce Trigg. Didactic subjects have included:

- Buprenorphine 101,
- Methadone 101,
- Naltrexone 101,
- MAT for Alcohol Dependence, and
- Harm Reduction Strategies.

In addition to Dr. Trigg’s didactics, attendees are invited to present complex cases to the group and to collectively strategize on engagement/treatment options. The monthly ECHO series will continue in 2021.

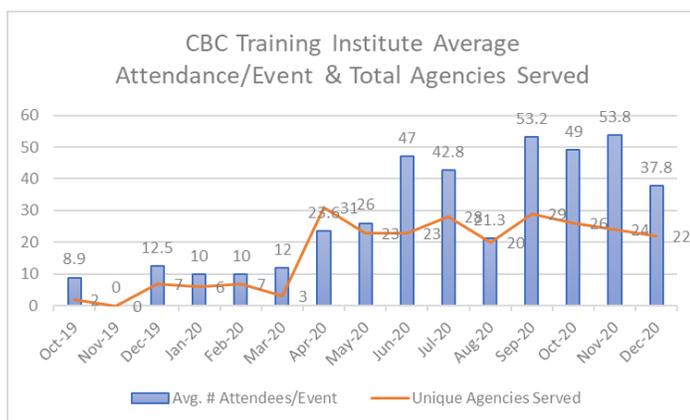


TRAINING INSTITUTE

The CBC Training Institute (TI) enjoyed a banner year of immense growth in terms of both unique attendees and agencies served. In January and February, all trainings were held in person. At the onset of the COVID-19 pandemic, CBC TI quickly pivoted to repurpose all trainings for an online/virtual format, and attendance rose significantly as a result. Substantively, trainings expanded from a shop that primarily delivered trainings geared to CBC’s Innovative Programs (including [Pathway Home™](#)) and [Health Home](#) to a multidisciplinary resource for behavioral health staff and consumers, with a menu of diverse training options for all NYS.

Some training topic highlights included:

- Anti-Racism Training
- HIPAA and Working from Home
- [Innovations In Care: Reflections on the Pathway Home™ Model](#)
- [Interview: This is How I Recovered From Mental Illness](#)
- Medication Management for Non-Prescribers
- Supporting LGBTQIA+ Clients



Meanwhile, [CBC Health Home](#) continued to host weekly Virtual Office Hours (VOH), monthly VOH with its HIT, Quality Performance Management updates and best practices, along with web-based value-add presentations with nearly 2,500 participants across the CBC network.

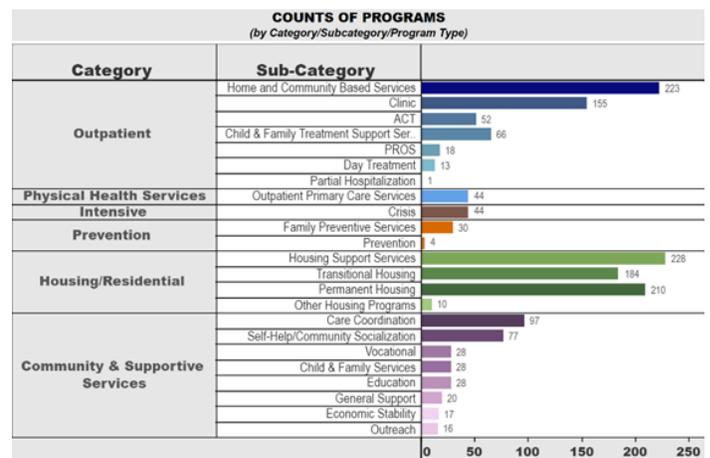
TECHNOLOGY INFRASTRUCTURE & OPERATIONS

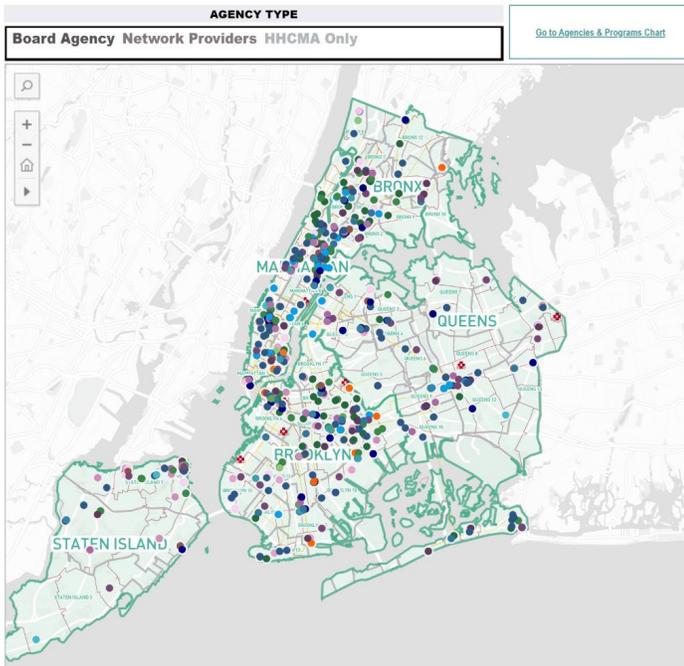
NETWORK PROGRAM SERVICES GEOMAP (NPSG)

Creating a comprehensive resource directory that reflects the diverse array of services offered across the CBC network has been integral to efforts to build out the needed data and technology infrastructure. The geo-mapping project represents a methodology for collecting and displaying the taxonomy of each respective network, with capacity to layer secondary data sets over program location.

In 2020, CBC’s [Network Program Services GeoMap](#) was made freely available to IPA network providers. This interactive tool offers useful and compelling resources to understand the scale and scope of the CBC network by delivering simple access to service-level information. These data help CBC and providers assess network adequacy and offer a window into the programs and services available at other local network agencies. Real-time access to service locations and hours support service care staff efforts to connect clients to services within the network.

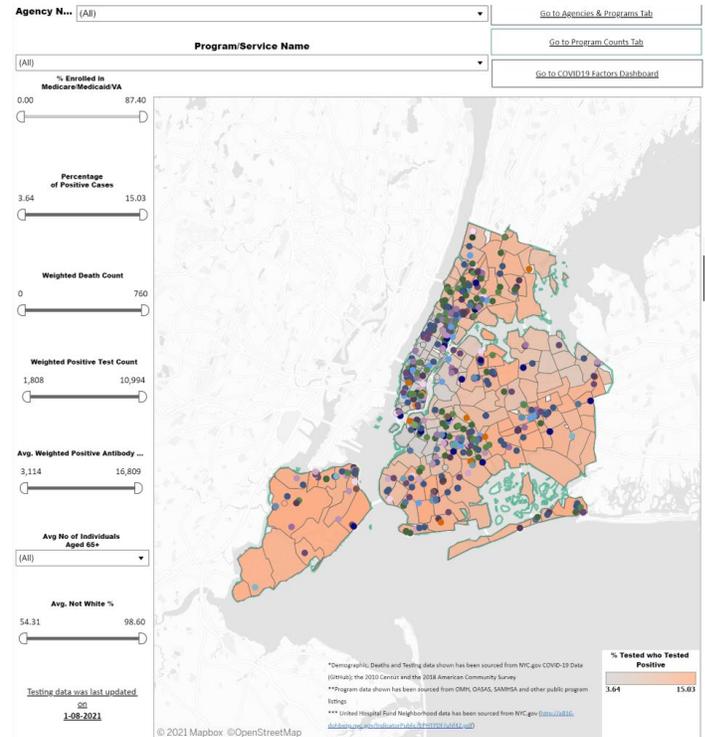
This neighborhood-level visualization of over 1500 programs and services operated by 73 behavioral health network agencies includes proximity to hospitals and public transportation and can be easily exported and shared. This dynamic catalog of CBC’s network specialties provides the necessary framework to function as an integrated network.





Following the COVID-19 pandemic’s arrival in New York, CBC expanded the capabilities of its Network Program Services GeoMap by layering an additional filter that accounted for up-to-date geographic COVID-19 statistics. This added functionality played a crucial role in assessing where to target add-on services in conjunction with CBC’s COVID-19 emergency grant funded programming.

This iteration of the Network Program Services GeoMap is regularly updated to reflect the most recently reported incidence of COVID-19 positive cases across the five boroughs. Users can also search for the distribution of cases by age, Medicare/Medicaid enrollment and other demographic variables. This information is critical to assess the availability of services within hot-spot areas and to effectively target additional resource allocation.



DATA ANALYTIC BUSINESS INTELLIGENCE (DABI) PLATFORM IMPLEMENTATION

Innovative Management Solutions NY (IMSNY)’s Data Analytic Business Intelligence (DABI™) platform—powered by Arcadia—has become a key component of the IPA’s clinical integration and quality performance initiatives and enables a core framework for obtaining grant funding and meaningful contracts with managed care organizations (MCOs), whether they be alternative payment models or true VBP contracts.

In 2020, CBC and partner IPA CBHS spent several months analyzing IPA network provider agencies’ electronic health records (EHR) data and standardizing clinical and data workflows so they could be aligned to the IPA High Priority Healthcare Effectiveness Data and Information Set (HEDIS) measures. This work included individual agency review of how and where data is collected in EHRs and other disparate data sources, as well as network-wide learning collaboratives regarding optimizing EHR utilization for Arcadia connections, quality performance opportunities and best practices across the network.

[IMSNY](#) developed and presented use-case scenarios using 837i claims files to highlight the value of ingesting data into DABI™ to inform clinical, quality and financial data-driven insights that will ultimately translate to downstream savings and increased quality of care provided to members. By summer, CBC and CBHS's joint venture had begun to connect various data sources to the Arcadia system that hosts DABI™, starting with Health Information Exchange (HIE) [HealthConnections](#) ADT (Admissions, Discharge, Transfer) data and the ingestion of 837i billing files. Utilizing a "Master Patient Index" algorithm that enables the network to track a member's network-wide utilization by matching service recipients across different setting and sources, the data were steadily consolidated into DABI™.

Nearly 30 agencies' data have already been processed into DABI™ since starting this process and IMSNY completed data validation testing in December, wherein the accuracy of input data was tested and end-user reports, dashboards and other platform elements were configured to best fit network requirements. On December 30th, 2020, IMSNY was proud to announce platform go-live, signaling the end of the data validation testing process. By counteracting fragmented data and siloed care, the DABI™ platform will function as the backbone of CBC IPA's clinical integration efforts and quality performance initiatives moving forward.

ELECTRONIC HEALTH RECORD LEARNING COLLABORATIVES

In August, [IMSNY](#) launched electronic health records (EHR) Learning Collaboratives (LCs) across its two IPA networks. These are opportunities for network provider agencies to share best practices and build proficiencies with common/shared EHRs.

IMSNY has hosted LCs for [Foothold](#), [Netsmart MyAvatar](#) and [Netsmart MyEvolv](#). Topics have ranged from customer service to new system enhancements and billing system processes. IMSNY has looked into collaborating with agencies to obtain a group-pricing system that offsets EHR price increases. These LCs not only assist IMSNY's DABI efforts to

standardize data across instances of the same EHR but present a value-add to attendees who share knowledge and resources to identify efficient workflows. Because of the popularity of these meetings, IMSNY will continue them in 2021.

QUALITY PERFORMANCE MANAGEMENT

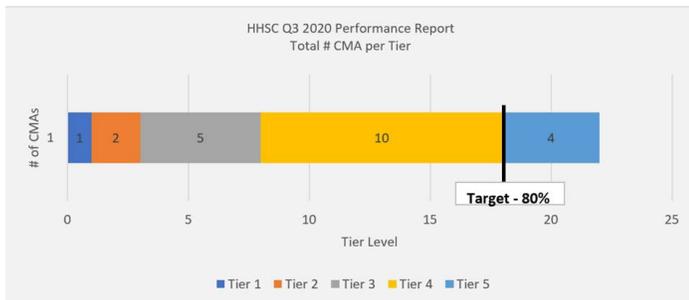
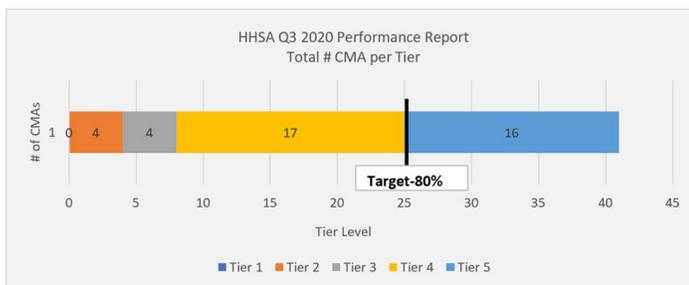
CBC's Quality Performance Management (QPM) team continued to provide critical support through oversight activities designed to monitor established quality indicators and to ensure that network performance continues to meet DOH and other funders' contractual expectations, while supporting the health, well-being and recovery of populations served. QPM oversight activities include network quality meetings, site visits, monthly case record reviews, performance improvement plans, learning collaboratives, training and reporting.

QUALITY MONITORING

CBC's Quality Management Team (QMT) and Children's Quality Management Team (CQMT) to ensure continuous quality improvement and quality of care outcomes for Health Home members. The QMT/CQMT provide oversight of Health Home quality and compliance, investigate barriers to service delivery, develop timely solutions and monitor overall effectiveness of the Quality Management Program (QMP). With a shift to a new HIT Platform that coincided with changes to the state regulatory guidance due to the pandemic, CBC QPM and HH team primarily focused on education and training of the new platform and guidance, collecting and issuing best practice guidance on how to effectively implement these operational changes, and outcomes that demonstrated continuous, high-touch service provision to enrolled members. The QMT/CQMT was also introduced to CBC's IPA High Priority Measures that align with HEDIS measures showcased in the DOH Health Home Serving Adult Performance Dashboard and discussed how care coordinators can impact medical and behavioral health outcomes for

members by closing gaps in care via new functionality in CBC's new HIT Platform.

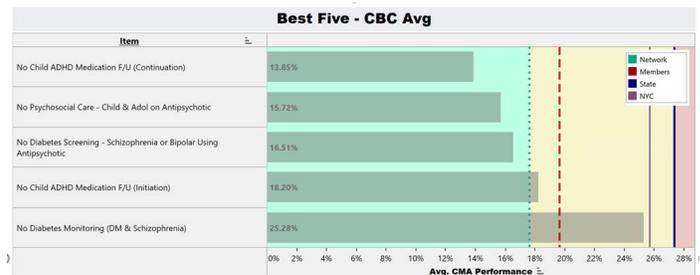
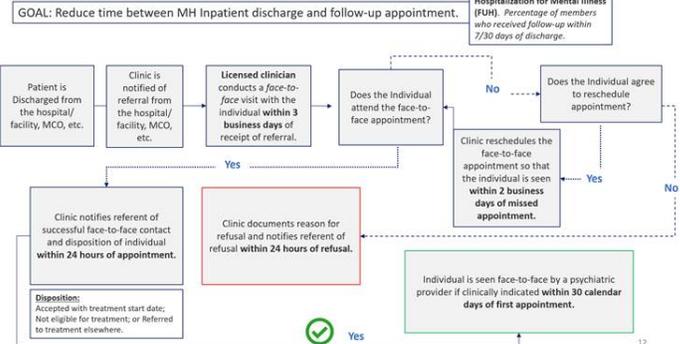
CBC continued to issue a HH CMA Performance Report and Network Analysis Report that provides a quarterly snapshot on key process metrics required by the DOH, in addition to overall network program performance. The measures in the reports were adjusted to accommodate interim DOH guidance.



PERFORMANCE IMPROVEMENT

CBC's Quality Oversight/Clinical Integration Committee (QO/CIC) continued to operationalize and monitor 18 High Priority Quality Measures, having begun to identify the clinical processes and data elements necessary to achieve these outcomes. At the close of 2020, 17 of the 18 (94%) measures are complete, with the lone outstanding pending QO/CIC approval. These Target Tracks were compiled into a DABI Implementation Packet sent to all network provider agencies to assist in determining current capacity to collect, store and report on key data elements that will result in measuring desired outcomes related to these High Priority Measures.

TARGET TRACK PRODUCTION



The QO/CIC also began to explore other behavioral and social determinants of health measures for consideration as part of the High Priority Measures, and additional focus in 2021 will be on selecting and mapping these additional measures.

CONSUMER ADVISORY BOARD

CBC Consumer Advisory Board (CAB) resumed monthly meetings in November. Led by CBC staff, the CAB is comprised of Peer Specialists at CBC IPA network agencies. Non-peer members include a representative of the National Alliance on Mental Illness (NAMI). CAB Peers voice an informed perspective on issues that impact the recovery, resilience and rights of persons with mental illness or substance use disorders, as a resource to CBC and its network.

AWARDS, PUBLICATIONS & EVENTS

PUBLICATIONS:

- Petit, J. & Sasvary, M. "[CBHS IPA and CBC IPA Joint Initiatives to Increase Medication Assisted Treatment \(MAT\)](#)." Winter 2020 *Behavioral Health News* Vol. 7 No. 3, p. 10.
- Dobrer, D. "[Adapting to Respond to COVID-19](#)." Summer 2020 *Behavioral Health News* Vol. 8 No. 1, p. 26.
- Semidey, A. & Martinez, M. "[Care Management Responses to COVID-19: Lessons from CBC Health Home's ADAPT Series](#)." Summer 2020 *Behavioral Health News* Vol. 8 No. 1, p. 28.
- Granek, B. "[CBC's Pathway Home Response to COVID-19 and Future Implications](#)." Summer 2020 *Behavioral Health News* Vol. 8 No. 1, p. 29.
- Kohl-Grant, E. & Petit, J. "[Current Telehealth Expansion in the Behavioral Health Sector](#)." Summer 2020 *Behavioral Health News* Vol. 8 No. 1, p. 29.
- Shah, K. & Kohl-Grant, E. "[Using Data Geomapping for COVID-19 Hotspotting](#)." Summer 2020 *Behavioral Health News* Vol. 8 No. 1, p. 20.
- Petit J, Graham M, Semidey A. (2020) Successful Approaches to Increasing Value. In W.E. Sowers & J.M. Ranz (Ed.). *Seeking Value: Balancing Cost and Quality in Psychiatric Care*. American Psychiatric Pub.
- Jegede, O., Anand Raman, A., Tiongson, B., Garlapati, P. R., Hershberger, J., & Gayam, V. (2020). Clinical characteristics, hospital course, and outcomes among COVID-19 positive patients with mental illness in a community hospital in New York City. *International Journal of Mental Health*, 1-12.
- Usman, M., Maslova, S., & Burgess, G. (2020). Urban informality in the Global North:(il)legal status and housing strategies of Ghanaian migrants in New York City. *International Journal of Housing Policy*, 1-21.
- Wellth & Coordinated Behavioral Care (2020). [Unprecedented Adherence Successes for the Highest Risk Members](#). America's Health Insurance Plans (AHIP).
- Taylor, G. (Host). (2020, November 10). Telemental Health Advocacy with Dr. Jorge Petit [Audio podcast episode]. In *Behavioral Health Today*. Triad Behavioral Health.
- Paradies, M. (2020). Biden's Win Is a Victory for Stammering. Retrieved from <https://stamma.org/your-voice/bidens-win-victory-stammering>.

CONFERENCES:

- **Society for Social Work & Research** *iChoose: The Consumer's Choice*; Presented by Elise Kohl-Grant (CBC) & Juliana Steen (CBC).
- **Healthfirst Spring Provider Symposium** *Men's Behavioral Health: An Overview*; Presented by Dr. Jorge Petit (CBC).
- **Healthfirst Pediatric Panel** *Health Homes: What the General Pediatrician Needs to Know About Services for Medically Complex Children*; Panelists: Amanda Semidey (CBC), Melissa Martinez (CBC), Kathy Rivera (JCCA) & Abby Jeffrey (JCCA).
- **CBC Innovations Conference 2020**, "*When A Pandemic & Epidemic Collide*"
 - Keynote: Dr. Jorge Petit (CBC);
 - Panel: Dr. Carolann Slattery (moderator) (Samaritan Daytop Village), Ericker Onaga (CHASI), Dr. Kelly Ramsey (NYS OASAS), Dr. Sara Lorenz Taki (Greenwich House).
- **CBC Innovations Conference 2020**, "*Telemental Health—A Pandemic's Silver Lining?*"
 - Keynote: Brett Friedman (NYS DOH);
 - Panel: Dr. Jorge Petit (moderator) (CBC), Edward ODowd (Community Access), Donna Taylor (Healthfirst), Manisha Vijayaraghavan (Visiting Nurse Service of NY).

AWARDS:

- **Community Partnership Award** by Federation of Organizations – Dr. Jorge Petit, President & CEO.

Coordinated Behavioral Care (CBC) is a provider-led, not-for-profit organization, dedicated to improving the quality of care for New Yorkers with serious mental illness, chronic health conditions and/or substance use disorders. CBC brings together over 70 NYC community-based health and human services organizations which provide access to quality treatment, housing, employment and a continuum of individualized community-based care management/care transitions services.

CBC operates several related entities and services:

- **Health Home** provides care coordination services to tens of thousands of New Yorkers of all ages, with 45 community-based care management agencies located in all five boroughs.
- **Independent Practice Association (IPA)** includes a citywide network of New York State-licensed primary care, mental health and substance use treatment services, thousands of units of supportive housing, primary medical, recovery and support services, and assistance with concrete needs such as food, employment and housing.
- **Innovations Hub** identifies critical service gaps and responds to them by developing innovative programs that are tailored to address diverse populations' specific needs while continuing to provide comprehensive care including extensive and innovative training offerings for the BH workforce.

MISSION

CBC leverages community partnerships throughout NYC to coordinate integrated medical and behavioral health interventions that, coupled with a specialized emphasis on social determinants of health, promote a healthier New York.

VISION

CBC seeks to create a healthcare environment where New Yorkers—especially those most impacted by social determinants of health—receive coordinated, individualized and culturally competent care that is effective in preventing and managing chronic physical and behavioral health conditions. We help New Yorkers live longer, healthier and more fulfilling lives.

CBC FINANCES FY20

Revenue = \$84.7M:

- 73.8% Care Management Revenues
- 19.0% Grants and Contracts
- 4.8% Provider/CMA Admin Fees and Dues
- 0.7% Health Home Development Funds
- 1.7% Behavioral Health Care Collaborative (BHCC)

Expenses = \$84.6M:

- 73.9% Care Management Expenses
- 14.7% Pass-through to subcontractors
- 5.5% Personnel costs
- 2.8% HIT and Technology
- 3.1% Administrative Overhead and OTPS

CBC BOARD OF DIRECTORS

Donna Colonna - Board Chair

[Services for the Underserved \(S:US\)](#)

Ellen Josem - Secretary

[The Jewish Board](#)

Patricia Bowles - Treasurer

[Catholic Charities Neighborhood Services](#)

Cal Hedigan

[Community Access](#)

Dawn Saffayeh

[HeartShare St. Vincent's Services](#)

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Elliot Klein

[New York Psychotherapy and Counseling Center](#)

Lisa Sheinhouse

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Jacob Barak

[Postgraduate Center for Mental Health](#)

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Mitchell Netburn

[Samaritan Daytop Village](#)

Susan Wiviott

[The Bridge](#)

Neil Pessin

[VNSNY](#)

Sherry Tucker

[WellLife Network](#)

CBC NETWORK PROVIDERS*

ACMH, Inc.

Association to Benefit Children

BMS Family Health & Wellness Centers

Bridging Access to Care, Inc.

Brooklyn Community Services

CAMBA

CASES

Community Health Action of Staten Island

Comunilife, Inc.

Concern for Independent Living

CSEDNY

Damian Family Care Center, Inc.

Diaspora Community Services

Educational Alliance

Family Services Network of NY

Federation of Organizations

Fountain House

Geel Community Services

Goddard Riverside

Goodwill Industries Greater NY & Northern NJ

Graham Windham

Greenwich House

HealthCare Choices

Henry Street Settlement

Hudson Guild

Institute for Community Living, Inc.

Interborough Developmental & Consultation Center, Inc.

Karen Horney Clinic

Lexington Center for Mental Health Services

Lighthouse Guild

Manhattan Psychiatric Center

Mental Health Providers of Western Queens

Mosaic Mental Health

NADAP, Inc.

NAMI-NYC Metro

New Horizon Counseling Center

New York City Children's Center

Northside Center

Puerto Rican Family Institute

Richmond University Medical Center

Ryan Health

Samuel Field YM & YWHA

SCO Family of Services

Service Programs for Older People

Sky Light Center

South Beach Psychiatric Center

St. Dominic's Family Services

St. Joseph's Medical Center

The Child Center of New York

The Door

The Family Center

The Fortune Society

The Osborne Association

Union Settlement

University Consultation Center

University Settlement Society

Venture House

V!brant Emotional Health

CBC AFFILIATE PROVIDERS

Baltic Street AEH, Inc.

Bronx Partners for Healthy Communities

Community Healthcare Network

Family Health Centers at NYU Langone

Maimonides Medical Center / Coordinated

Care of Brooklyn PPS

Mount Sinai Hospital

New York City Health + Hospitals

One City Health PPS

Southwest Brooklyn Health Home

Staten Island PPS

*Network Provider means an agency is contracted with CBC in at least one of the following ways: Health Home CMA, IPA Network Agency and/or BHCC Network Agency