









Resilience through Integrated Systems and Excellence

A specialized managed care program for youth with complex behavioral health and multi-system needs



Specialized Managed Care Plan

Aetna Better Health of Ohio will serve as the single statewide specialized managed care plan.



Shared Governance

OhioRISE features multi-agency governance to drive toward improving cross-system outcomes – we all serve many of the same kids and families.



Coordinated and Integrated Care & Services

OhioRISE brings together local entities, schools, providers, health plans, and families as part of our approach for improving care for enrolled youth.



Keep Families Together

OhioRISE will utilize a new 1915(c) waiver to target the most in need and vulnerable families and children to keep families together

OhioRISE Enrollment

- Enrolled in Medicaid (managed care or fee for service)
- ✓ Age 0 20
- ✓ In need of significant behavioral health (BH) service
- Require significant functional intervention, as assessed by the Child and Adolescent Needs and Strengths (CANS)
- ✓ Estimate 50-60,000 children & youth by end of year 1

OhioRISE Services

- ✓ All existing behavioral health services with a few limited exceptions (BH emergency dept.)
- ✓ Intensive and Moderate Care Coordination *NEW*
- ✓ Intensive Home-Based Treatment (IHBT) ENHANCED
- ✓ Psychiatric Residential Treatment Facility (PRTF) NEW
- ✓ Behavioral health respite *ENHANCED*
- ✓ Flex funds to support implementing a care plan *NEW*
- √ 1915(c) waiver that runs through OhioRISE NEW
 - Unique waiver services & eligibility
- Mobile Response and Stabilization Service (MRSS) NEW
 - Also covered outside of OhioRISE (MCO and fee for service)

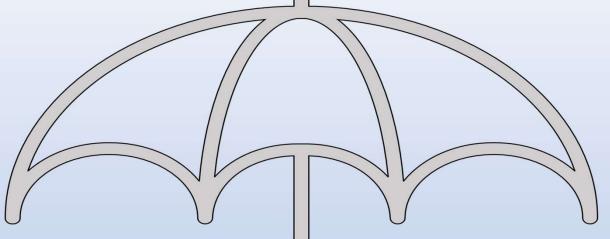
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OhioRISE Care Management Entities Catchment Areas



CME Provider	Counties	Area	
Unison Health	Defiance, Fulton, Henry, Lucas, Mercer, Paulding, Putnam, Van Wert, Williams	Α	
Harbor	Crawford, Erie, Hancock, Huron, Marion, Ottawa, Sandusky, Seneca, Union, Wood, Wyandot	В	
National Youth Advocate Program*	Allen, Auglaize, Champaign, Clark, Darke, Hardin, Green, Logan, Madison, Miami, Shelby	С	
Choices Coordinated Care Solutions	Montgomery, Preble	D	
CareStar	Butler, Clinton, Warren	E	
Lighthouse Youth and Family Services*	Hamilton (West)	F	
Cincinnati Children's HealthVine	Adams, Brown, Clermont, Hamilton (East), Lawrence, Scioto	G	
Integrated Services for Behavioral Health	Athens, Fayette, Gallia, Jackson, Highland, Hocking, Meigs, Pickaway, Pike, Ross, Vinton	н	
Integrated Services for Behavioral Health	Coshocton, Fairfield, Guernsey, Morgan, Muskingum, Noble, Perry, Washington	ı	
Jefferson Co. Educational Service Center	Belmont, Carroll, Columbiana, Harrison, Jefferson, Monroe, Stark, Tuscarawas,	J	
The Village Network*	Franklin (West)	K	
The Buckeye Ranch	Franklin (East)	L	
I Am Boundless, Inc.	Delaware, Knox, Licking, Morrow	М	
Wingspan Care Group	Lorain, Medina	N	
Coleman Health Services	Ashland, Holmes, Richland, Wayne	0	
OhioGuidestone	Cuyahoga (West)	P	
Positive Education Program	Cuyahoga (Central)	Q	
Ravenwood Health	Ashtabula, Cuyahoga (East), Geauga, Lake	R	
Coleman Health Services	Portage, Summit	S	
Cadence Care Network*	Mahoning, Trumbull	т	

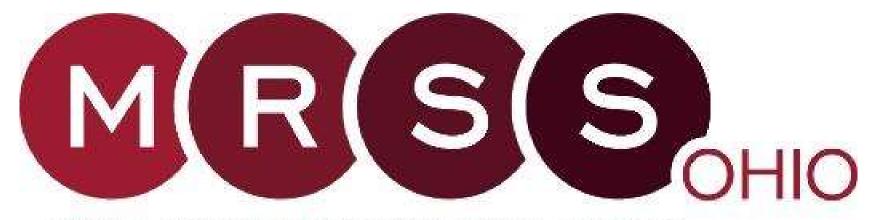




- Care Coordination
- Psychiatric Residential Treatment Facilities (PRTF)
- Mobile Response and Stabilization
 Services (MRSS) *Also covered outside of OhioRISE*

- Behavioral Health Respite
- Intensive Home-Based Treatment (IHBT)
- Primary Flex Funds





MOBILE RESPONSE AND STABILIZATION SERVICES



Child and Adolescent Behavioral Health Center of Excellence

Within Ohio's Crisis Continuum of Care

Crisis Hotlines, Crisis Text Lines, Warm Lines

Crisis Intervention Teams (CIT)

Walk-In Crisis Services

Mobile Response and Stabilization Services (MRSS)

Intensive Home-Based Treatment (IHBT)

Crisis Stabilization Units

Psychiatric Hospitalization



Goals of MRSS:

- Mitigate risk and increase safety
- Improve the abilities of families to manage behavior and prevent or effectively manage future crises
- Prevent/reduce the need for care in a more restrictive setting such as inpatient psychiatric units, congregate care, and detention centers
- Enhance the resiliency and protective factors of families
- Facilitate the young person and caregiver's transition to identified supports, resources, and services



MRSS Overview:

- Home and community-based service available to any young person under the age of 21 and their families
- Family/Caller Defined Crisis
- Phases: 1) Screening & Triage, 2) Mobile Response (up to 72 hrs.), 3) Stabilization (up to 6 weeks)
- Mobile Response: Within 60 minutes to location of youth. Includes crisis assessment, crisis de-escalation and stabilization, and safety planning.
- Stabilization: Individualized services, supports, and wraparound planning are delivered to meet the unique needs and preferences of each family
- Transition: Individualized transition plan with warm hand-off to continuing services and supports



MRSS STATEWIDE CALL CENTER

1-888-418-MRSS (6777)







• Allwell: Muskingum

• Alta Care Group: Mahoning

• Applewood Centers: Lorain

• Bellefaire: Cuyahoga

• Butler Behavioral Health: Butler, Warren, Clinton

• Child Focus: Clermont

Children's Resource Center: Wood

 Coleman Professional Services: Allen, Auglaize, Hardin, Putnam, Trumbull, Stark, Jefferson, Portage, Summit

Family Life Counseling and Psychiatric Services: Huron, Richland

Family Resource Center: Hancock

First Alliance Healthcare of Ohio: Cuyahoga

 Foundations Behavioral Health Services: Mercer, Van Wert, Paulding

Hopewell: Jackson, Hocking, Vinton, Washington

Maryhaven: Union

Nationwide Children's Hospital: Franklin

New Horizons Mental Health Services: Fairfield

Ravenwood: Geauga

Samaritan Behavioral Health: Preble

The Counseling Center (TCC): Wayne, Holmes

Zepf Center: Lucas





Child and Adolescent Behavioral Health Center of Excellence



Resources:

 OhioRISE: https://managedcare.medicaid.ohio.gov/managed-care/ohiorise/00-ohiorise

• MRSS Website: https://mrssohio.org

OhioMHAS MRSS Rule: https://codes.ohio.gov/ohio-administrative-code/rule-5122-29-14





Child and Adolescent Behavioral Health Center of Excellence

Nationwide Children's Hospital Mobile Response & Stabilization Services

Clinical Manager:

Meredith Adams, MSW, LISW-S

Clinical Lead Supervisors:

Sam Schoeppner, MPH, MSW, LISW-S Mollee Nunez, MSSA, LISW-S Jessica Michael, MSW, LISW-S Molly Owens, MSW, LISW-S



What is MRSS?



Behavioral Health Acute Services at NCH

Crisis Intervention Services

- Telecrisis (TCT)
- Outpatient Crisis Therapy (CATC)
- Mobile Response & Stabilization Services (MRSS)

Crisis Assessment Services

- Psychiatric Crisis Department (PCD)
- Extended Observation Suite (EOS)

Crisis Stabilization Services

- Youth Crisis Stabilization Services (YCSU BH3A)
- Inpatient Units (BH7A, BH7B, BH8A)

No Wrong
Door
Approach

MRSS Stateline 270/465 = **58%** NCH Franklin County Youth Psychiatric Crisis Line

190/465 = **42%**

NCH MRSS Team

MRSS Details

Meeting the family where they are provides us with the ability to use interventions to target *real-life triggers* in the environment



Screening & Triage



Mobile Response & De-Escalation

Immediate response within 60 min



Stabilization & Transition

Lasts up to 6 weeks

24/7 Availability

- Crisis line functions 24/7 365
- Family defined crisis—what's going on leading up to MRSS response?
- Triage safety concerns
- Plan response (immediate, nonimmediate, 911)



- Potential Interventions:
 - Risk assessments
 - Standardized screening with ASQ & CSSRS
 - Safety and/or crisis planning & proofing
 - Crisis counseling
 - Psychoeducation
 - Child & Adolescent Needs & Strengths tool (Brief CANS)

- Individualized treatment plan created for child & family focusing on safety & crisis prevention
- Set family goals, building skills, crisis prevention, expansion of natural supports, creation of behavior plans/token economies, continued assessment of environmental safety, identifying supports surrounding educational accommodations like 504s and IEPs, classroom observation and consultation, linkage/referral to resources and ongoing supports/providers
- Coordination of care with specialized services and programs
- Family & treatment team meetings (working collaboratively with current provider or warmhandoff to new providers)

Goal: Keep child safe in the community by building natural supports, identifying, teaching and practicing coping skills, improving communication channels, and creating a safe environment for the child and family by joining along-side them

MRSS at NCH

Monday - Friday 9am - 9:30pm

• Working towards 24/7 availability

Team consists of:

- Clinicians
- Qualified Behavioral Health Specialists (QBHS)
- Parent Peer Support Specialists (PSS)

Initial Crisis Response

- Home/Community visit: team of 2 providers (clinician & QBHS or PSS)
- School visit: clinician can go independently

Stabilization Visit

- Usually, 1 provider
 - Can be any member of the team depending on patient/family needs

MRSS in Schools pt 1

Anyone in school can request MRSS

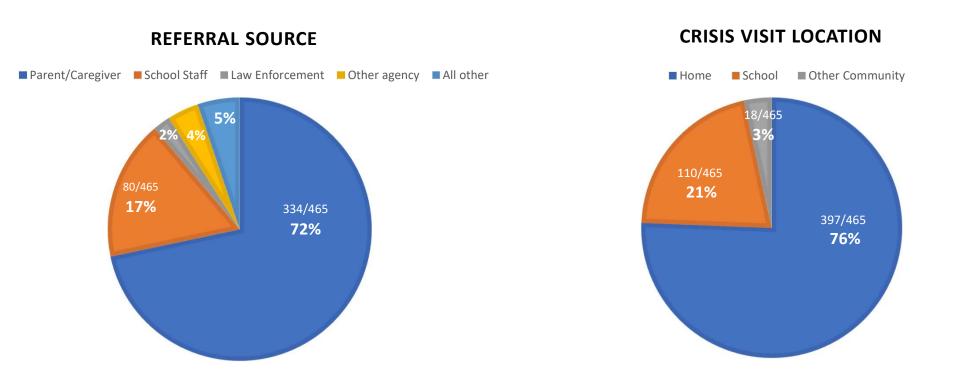
We will encourage SCHOOL STAFF to contact family for consent for treatment (family encouraged to attend)

Families can request crisis visits to schools

Follow up visits can occur in schools (stabilization)

MRSS in Schools pt 2

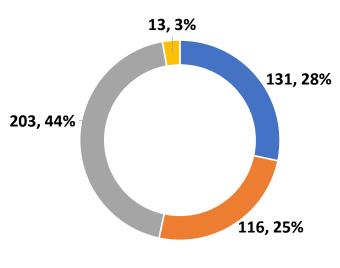
- Most common crises in schools: suicidal ideation, anxiety, depression, school avoidance, & behavioral concerns
- MRSS has responded to crises at ~25 different schools since August 2022



MRSS School Demographic Data

- Families served: 465
- Average days served: 18.89
- 64% of families continue into stabilization
- Gender:
 - 45% of patients identify as female
 - 52% as male
 - 3% as trans-gender or non-binary

AGE AT TIME OF REFERRAL n= 465



17% of MRSS patients have been diagnosed with a developmental disability

■ 10 & Under ■ 11 to 13 ■ 14 to 17 ■ 18+

Some MRSS Interventions in Schools...

- Verbal de-escalation
- Support with lethality and risk assessments
- Development of crisis plans and/or safety plans
- Assessment of environmental safety

Safety

Behavioral Support

- Support with issues related to truancy/school avoidance
- Creation of behavior plans/token economies
- Classroom observation and consultation
- Support planning for academic accommodations like 504s and IEPs
- Skill building and psycho-education

- Placement of referrals and coordination of care with ongoing providers
- Attending and supporting parent/school/provider meetings

Transition

If NCH MRSS is not an option...

(whether unavailable or screened OUT during triage)

- If need is police, fire, EMS, etc., family will be connected to appropriate emergency/911 services
- If medical concern/ingestion/strangulation, family will be directed to the Emergency Department
- If situation is unsafe for MRSS, family will be supported over crisis line and directed to the Psychiatric Crisis
 Department
- If non-emergency situation, NCH Telecrisis team provides crisis interventions as usual for all crisis line calls

In all above situations, MRSS still receives referral and will follow-up with family

NCH MRSS Family Feedback

"Our Clinician was a wonderful human being. She went above and beyond to make my child feel cared for. She even went under the table to play with him to meet him where he was. We are very grateful for the MRSS program."

"Our Parent Support Specialist went above and beyond for me. As a parent, I was not expecting to get the same amount of support that my child did. She made me feel calm during a very chaotic time."

"The MRSS Team made me feel heard. They created a wonderful environment for both me and my child."

Questions?



Samantha.Schoeppner@nationwidechildrens.org



330-704-9316



CME Access & Outreach





THE BUCKEYE RANCA OhioRISE Care Coordination

OHIORISE CARE COORDINATION IS A MEDICAID PROGRAM THAT PROVIDES COORDINATION AND SUPPORT TO CHILDREN, YOUTH, AND FAMILIES. TO QUALIFY, PLEASE SEE BELOW ON HOW TO COMPLETE AN ELIGIBILITY ASSESSMENT CALLED CANS.

Who is Eligible?

- Ohio Medicaid Managed Care Members - Individuals 0 - 20 years old
- Individuals who require specialized behavioral health treatment

Benefits:

- Access to funds and resources to support the youth and family
- Referrals to specialized service providers



How to get Services?

Walk-in to our Buckeye
Ranch locations and
complete a CANS

Assessment OR contact
your Medicaid provider
to schedule a CANS.

SAME DAY ACCESS NUMBER: (614) 384 - 7798



WALK-IN CANS ASSESSMENT:

2865 W. BROAD STREET
COLUMBUS, OHIO 43204
MONDAY & TUESDAY 9AM - 3PM



4653 E. MAIN STREET WHITEHALL, OHIO 43213 WEDNESDAY 9AM - 6PM THURSDAY 9AM - 3PM

Visit www.buckeyeranch.org for more information about our services or visit the OhioRISE wesbite: https://managedcare.medicaid.ohio.gov/managed-care/ohiorise/

Care Management Entities Catchment Areas



CME Provider	Grant	Counties	Area
Unison Health	\$1,010,000	Defiance, Fulton, Henry, Lucas, Mercer, Paulding, Putnam, Van Wert, Williams	А
Harbor	\$910,000	Crawford, Erie, Hancock, Huron, Marion, Ottawa, Sandusky, Seneca, Union, Wood, Wyandot	в
National Youth Advocate Program*	\$950,000	Allen, Auglaize, Champaign, Clark, Darke, Hardin, Green, Logan, Madison, Miami, Shelby	с
Choices Coordinated Care Solutions	\$1,020,000	Montgomery, Preble	D
CareStar	\$1,000,000	Butler, Clinton, Warren	E
Lighthouse Youth and Family Services*	\$970,000	Hamilton (West)	F
Cincinnati Children's Healthvine	\$1,010,000	Adams, Brown, Clermont, Hamilton (East), Lawrence, Scioto	G
Integrated Services for Behavioral Health	\$1,000,000	Athens, Fayette, Gallia, Jackson, Highland, Hocking, Meigs, Pickaway, Pike, Ross, Vinton	н
Integrated Services for Behavioral Health	\$930,000	Coshocton, Fairfield, Guernsey, Morgan. Muskingum, Noble, Perry, Washington	a I
Jefferson Co. Educational Service Center	\$1,110,000	Belmont, Carroll, Columbiana, Harrison, Jefferson, Monroe, Stark, Tuscarawas,	J
The Village Network*	\$990,000	Franklin (West)	K
The Buckeye Ranch	\$990,000	Franklin (East)	L
I Am Boundless, Inc.	\$890,000	Delaware, Knox, Licking, Morrow	M
Wingspan Care Group	\$890,000	Lorain, Medina	N N
Coleman Health Services	\$890,000	Ashland, Holmes, Richland, Wayne	0
OhioGuidestone	\$970,000	Cuyahoga (West)	Р
Positive Education Program	\$1,020,000	Cuyahoga (Central)	Q
Ravenwood Health	\$960,000	Ashtabula, Cuyahoga (East), Geauga, Lake	R
Coleman Health Services	\$1,020,000	Portage, Summit	s
Cadence Care Network*	5970,000	Mahoning, Trumbull	т 📰



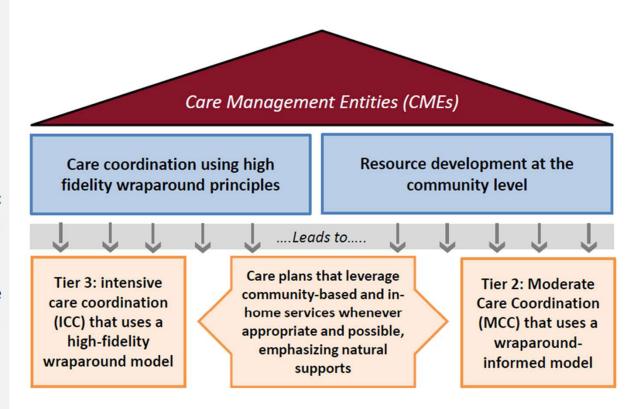






Roles of Care Management Entities (CMEs)

- CMEs will be the OhioRISE plan's collaborative partner, a "go-to" place to help families/caregivers, providers, and other community partners navigate a complex and often confusing multi-system environment.
- In addition to individual work with youth and caregivers, the CMEs will work with community partners (service providers, public child serving agencies and other stakeholders) to develop the local system of care.
- CMEs will be culturally and linguistically competent, with agencies, programs, and care coordination services that reflect the cultural, racial, ethnic, and linguistic differences of the populations they serve to facilitate access to and utilization of appropriate services and supports and to eliminate disparities in care.



Access to Care: Same Day Access

OhioRise eligible youth

CANS Assessments Ohio Rise eligibility & QRTP

Access to TBR programs

Diagnostic Assessments Connection Sessions for Waitlist

Admissions & Engagement - Same Day Access

Mondays @ WB, 9 am - 3 pm Tuesdays @ WB, 9 am - 3 pm Wednesdays @ Crane Center, 9 am - 6 pm Thursdays @ Crane Center, 9 am - 3 pm



Same Day Access: Diagnostic Assessment & CANs

Our Diagnostic Assessment provides a mental health diagnosis for clients based on reported information regarding behaviors and symptoms. Based on the diagnosis, severity of symptoms, and behaviors, clients are referred to ongoing counseling services.

Factors that can impact level of care and services:

- Symptoms/behaviors reported
 - by client, family, caseworker, referral, etc. Violence/Safety Concerns
- Level of Care tools (CANS, DLA 20, etc.)
- Out of home placement
- Caregiver's involvement in treatment

- Out of county placement
- Sexual behaviors
- Severity of Substance Use



The Buckeye Ranch: Continuum of Services

Child Welfare

- Foster Care
- Permanent Family Solutions
 Network
- My Place
- Residential Programming

Community Based

- IHBT Treatment Teams
 - IHBT, MST, FFT
- Intensive Family
 Support Program
- Outpatient Counseling
- Somali Outreach Program

Educational Services

- Bonner Academy
 Day Treatment
- School based Counseling

Integrated Care

- Care Management Entity
 - Care
 Coordination
- Same Day Access
- Medication Management

