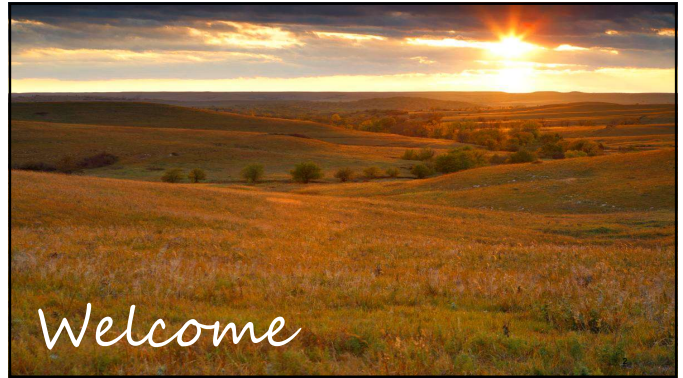



OneCare Kansas Planning Council

October 17, 2019

Helping people live healthier lives by integrating and coordinating services and supports to treat the "whole-person" across the lifespan.



AGENDA FOR THE DAY



- Implementation Timeline
 - Provider Application and Network Development
 - Informational Materials for Members
- New Resources
 - Depression Screen for Adolescents
 - OCK Website Updates
- KFMC Hub Demo
- Target Population Data Sets
- Professional Process Flow

Implementation Timeline

OCK Provider Application

Informational Materials for Providers

OneCare Kansas Provider Information

Providers Interested in Becoming OneCare Kansas Partners


OCK Provider Application

Informational Materials for Providers

OneCare Kansas Forms



OCK Provider Application Updates

- NO deadline – However, for best consideration we encourage early submission of Applications.
- Evaluation of Applications has begun.
- Evaluation will continue through implementation to ensure that the provider network grows with the population opting in.



OCK Provider Application Evaluation


- Two-step process:
 - State Evaluation
 - MCO Evaluation and Contracting
- State is utilizing a five member Evaluation Team
- State is employing a formal, uniform process for evaluating all Applications.

What is the best way to communicate this information to potential providers?

Who will do this?

What steps will you take?





Member Communication


How do we best communicate this with potential providers?

How can your networks support this communication effort with members?

- What does that look like?
- What steps will you take?

Resource Update



PHQ-9: Modified for Teens

Name: _____ Clinician: _____ Date: _____

Instructions: Circle how often you have been bothered by each of the following symptoms during the past 2 weeks. For each symptom, circle an "N" in the box beneath the answer that best describes how you have been feeling.

	Not at All	Several Days	More Than Half the Days	Nearly Every Day
1. Feeling down, depressed, or hopeless?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Little interest or pleasure in doing things?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Feeling tired all the time; feeling slowed or sluggish?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Things don't seem worth it or meaningful?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Feeling bad or having little energy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Feeling bad about yourself - or thinking that you are a failure, or that you have let yourself or your family down?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Trouble concentrating or things like school work, reading, or watching TV?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Moving or speaking so slowly that other people could have noticed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. On the opposite - being so fidgety or restless that you were moving around a lot more than usual?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Thoughts that you would be better off dead or of hurting yourself in some way?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. In the past 2 weeks, how often have you had thoughts of suicide (even if you didn't act on them)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. How often have you had thoughts of suicide (even if you didn't act on them)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How often have you had thoughts of suicide (even if you didn't act on them)?

Circle how often you have had thoughts of suicide (even if you didn't act on them):


None at all, 1-3 times, 4-6 times, 7-9 times, 10 or more times

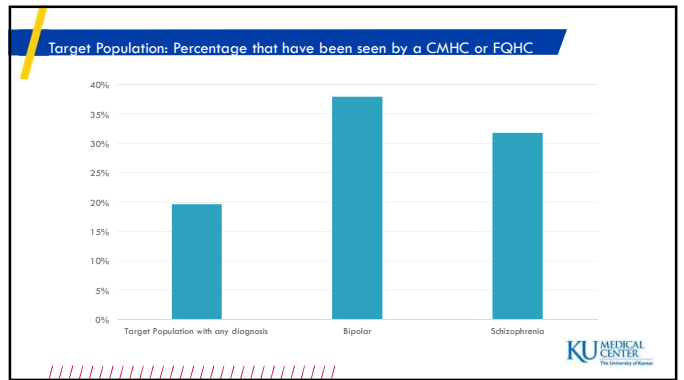
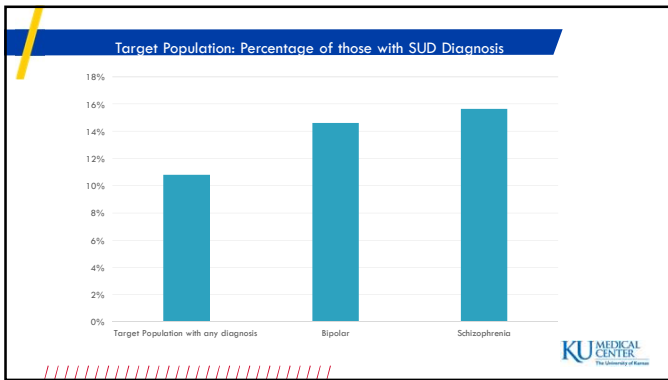
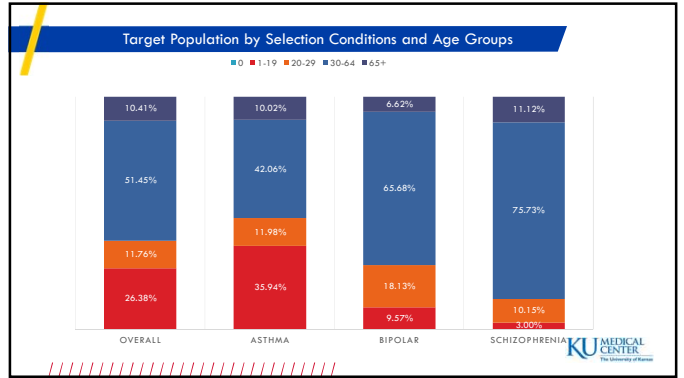
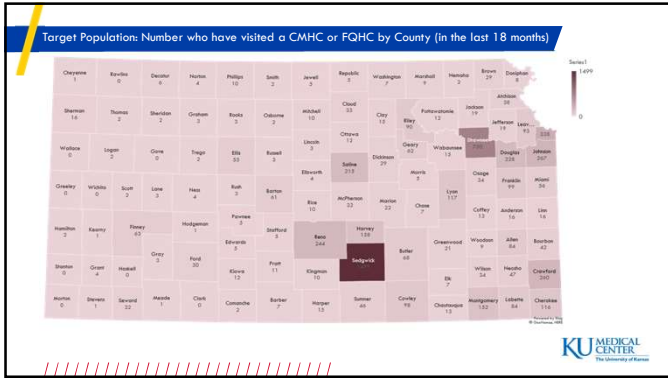
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Codes that comprise individual diagnoses:

Asthma
ICD10 codes that start with J45.J459 (Mild- Moderate persistent asthma)
ICD9 codes that start with 49392 (asthma with acute exacerbation)

Schizophrenia
ICD10 codes that start with F20 (Paranoid schizophrenia)
ICD9 codes that start with 295 (Paranoid schizophrenia)

Bipolar
ICD10 codes that start with F31.F3163 (Bipolar disorder, current episode mixed, severe, without psychotic features)
F3164 (Bipolar disorder, current episode mixed, severe, with psychotic features)
F3123 (Bipolar affective disorder, manic, severe)
F32 (Bipolar affective disorder, manic, severe, with psychotic behavior)
ICD9 codes that start with 29643 (Bipolar affective disorder, manic, severe)
29644 (Bipolar affective disorder, manic, severe, with psychotic behavior)

KU MEDICAL CENTER
The University of Kansas

Substance Use Disorder Codes	ICD-10	Approximate Corresponding ICD-9
Alcohol Use Disorder, Severe (other and unspecified alcohol dependence, unspecified, continuous, episodic)	F10.20	303.90-303.92
Alcohol Use Disorder, Severe, in early or sustained remission (other and unspecified alcohol dependence, in remission)	F10.21	303.93
Opioid Use Disorder, Severe	F13.20	304.00-304.02
Opioid Use Disorder, Severe, in early or sustained remission	F13.21	304.03
Sedative, hypnotic or anxiolytic dependence	F13.20	304.1
Sedative, Hypnotic, or Anxiolytic Use Disorder, Severe	F13.20	304.10-304.12
Sedative, Hypnotic, or Anxiolytic Use Disorder in early or sustained remission	F13.21	304.13
Cocaine Use Disorder, Severe	F14.20	304.20-304.22
Cocaine Use Disorder, Severe, in early or sustained remission	F14.21	304.23
Amphetamine or Other Stimulant Use Disorder, Severe	F15.20	304.40-304.42
Amphetamine or Other Stimulant Use Disorder, Severe, in early or sustained remission	F15.21	304.43
Phencyclidine or Other Hallucinogen Use Disorder, Severe	F16.20	304.50-304.52
Phencyclidine or Other Hallucinogen Use Disorder, Severe, in early or sustained remission	F16.21	304.53
Inhalant Use Disorder, Severe	F18.20	304.60
Inhalant Use Disorder, Severe, in early or sustained remission	F18.21	304.63
Other (or Unknown) Substance Use Disorder Severe	F19.20	304.60-304.62
Other (or Unknown) Substance Use Disorder, Severe, in early or sustained remission	F19.21	304.63


Mental and Behavioral Health Codes		
Description	ICD-9	ICD-10
ADHD (attention deficit hyperactivity disorder), inattentive type	314	F90.0
Attention deficit disorder with hyperactivity	314.01	F90.1
Attention deficit hyperactivity disorder (ADHD), combined type	314.01	F90.2
Bipolar 2 disorder	296.89	F31.81
Bipolar affective disorder, manic, severe	296.43	F31.13
Bipolar affective disorder, manic, severe, with psychotic behavior	296.44	F31.2
Borderline personality disorder	301.83	F60.3
Codeine dependence, uncomplicated	304.2	F14.20
Depressed bipolar disorder	296.5	F31.30
Disruptive mood dysregulation disorder	296.99	F34.8
Impulse control disorder	312.3	F63
Major depression, recurrent, chronic	296.3	F32.9
Major depressive disorder, recurrent episode, moderate	296.32	F32.1
Major depressive disorder, recurrent episode, severe	296.33	F32.2
Major depressive disorder, recurrent episode, severe, psychotic behavior	296.34	F32.3
Mood disorder	296.9	F33.8
ODD (oppositional compulsive disorder)	300.3	F42
ODD (oppositional defiant disorder)	313.81	F91.3
Opioid type dependence, uncomplicated	304	F11.20
Panic disorder without agoraphobia	300.01	F41.0
Paranoid schizophrenia	295.3	F20.0
Personal history of noncompliance with treatment, presenting hazards to health	V15.81	Z91.19
Personality disorder	301.9	F60.9
Psychosis	295.9	F29
PTSD (post-traumatic stress disorder)	309.81	F43.10
Schizoaffective Psychosis	295.7	F25.5
Avoidant/Restrictive Food Intake Disorder	F50.82	6B7.59
Eating disorders	F50	Anorexia- R63 Bulimia nervosa- 307.46

Chronic physical conditions		
Description	ICD-10	Approximate Corresponding ICD-9
Asthma	J45.3-J45.9	Unspecified type, with (acute) exacerbation- 493.02 Obstructive chronic bronchitis without exacerbation- 491.20; Chronic obstructive asthma, unspecified- 493.20; Chronic airway obstruction, not elsewhere classified- 496
Chronic Obstructive Pulmonary Disease (COPD), unspecified	J44	
Cystic Fibrosis, unspecified	E84	277
Type 1 Diabetes mellitus	E10	250.01
Type 2 diabetes mellitus	E11	250
Kidney failure	N19	586
Chronic kidney disease stage I	N18.1	585.1
Chronic kidney disease stage II	N18.2	585.2
Chronic kidney disease stage III	N18.3	585.3
Chronic kidney disease stage IV	N18.4	585.4
Chronic kidney disease stage V	N18.5	585.5
Pulmonary heart disease, unspecified	I27.9	416.9
Hypertensive heart disease without heart failure	I11.9	Malignant-402.00 Benign-402.10 Unspecified 402.90
Hypertensive chronic kidney disease	I12	401
Hypertensive heart and chronic kidney disease	I13	404
Hypertensive heart disease with heart failure	I11	Malignant-402.01 Benign-402.11 Unspecified 402.91
Chronic ischemic heart disease	I25	414.9
Cardiovascular disease, unspecified	I25.10	429.9
Essential (primary) hypertension	I10	Malignant-401.0 Benign-401.1 Unspecified 401.9
Secondary hypertension	I15	401
Morbid (severe) obesity due to excess calories	E66.01	278.01
Metabolic syndrome	E88.81	277.7
Chronic periodontitis	K05.3	523.4
Reflex Sympathetic Dystrophy (RSD) Syndrome	G80.5	Reflex sympathetic dystrophy of the upper limb- 337.21

Thank you


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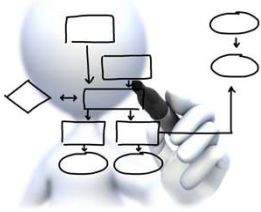
Professional Process Flow

Kasey Sorrell – Clinical Initiatives Nurse | KDHE DHCP




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OCKP Professional Process Flow



- This document is to serve as an example of the types of tasks each professional could do within the Health Home
- One of the goals of this document is to help guide a potential partner through responsibilities for each professional to help determine whether becoming a OCKP would be a good fit.
- This document is NOT intended to be a "must do" prescriptive guide. The responsibilities listed in the document can be shared or switched between professionals, when appropriate.



Are there other situations that we should list in this document that would be helpful for providers?