



# Proactive. Community-Based. Sustained.

## → What is BeyondCrisis?

**Sustained stabilization requires proactive solutions. Go BeyondCrisis.**

**BeyondCrisis** is LifeShare’s alternative to traditional behavioral health crisis interventions. Designed to proactively reduce crisis situations, ED visits and inpatient admissions, and to maintain least restrictive placements, **BeyondCrisis** improves HEDIS measures and reduces unnecessary Health Plan Costs.

- **Triage Call Center:** Our 24/7 Triage Center, in addition to responding to crisis calls, proactively contacts people we support, often connecting with them prior to reaching a crisis stage.
- **Mobile Engagement Teams:** Community-based Mobile Engagement Teams, dispatched based on acuity, respond to, assess, and stabilize emergent situations in-person and provide linkage to wraparound services. Intensive Case Management provided for 30-90 days for the highest at risk population.
- **Ongoing Support:** Ongoing outbound and inbound telephonic support is provided as needed and complements treatment to maintain stabilization.

**BeyondCrisis** fosters long-term recovery from mental illness, substance use disorders, PTSD, and other social, emotional, and physical health factors.

**Reducing unnecessary admissions by increasing person-centered engagement.**

When a person does go into crisis, the **BeyondCrisis** team works with the individual, and when appropriate, their circle of support to:

- De-escalate the crisis
- Maintain community or least restrictive placement
- Link to appropriate resources
- Sustain well-being

**SUPPORTS HEDIS**

- Post Inpatient 7-and 30-Day Mobile Visits
- Mental Health Screenings
- Reduce Inpatient Utilization
- Review Polypharmacy Data as Needed

*Program elements can be tailored to specific HEDIS or plan/program outcome measures*

## → Why Mobile HEDIS Visits?

**BeyondCrisis** supports HEDIS measures with 7- and 30-day mobile appointments following inpatient discharge.

→ **Up to 67% of patients with mental illness fail to attend their first outpatient appointment after hospital discharge\***

**BeyondCrisis Attributed Membership**

- 52% decrease in behavioral health inpatient costs
- Average spending decreased \$131 PMPM post engagement, over controls
- 26% decrease in ED utilization
- Inpatient costs decreased \$275 PMPM; primary care costs up \$170 PMPM due to appropriate use of systems

\*Outcomes data for members engaged with BeyondCrisis during 2016-2017



## → Going Beyond

- **Clinicians:** Doctorate-level, Master's-level, and Licensed Clinicians provide proactive outbound and inbound telephonic support. Mobile Engagement Teams are comprised of Licensed Clinicians and Crisis Intervention Specialists.
- **Inpatient and HEDIS Post-Discharge Visits:** Clinicians meet with individuals in inpatient facilities. Members are educated on plan resources and engaged into outpatient services. Post-discharge, community-based licensed clinicians conduct 7- and 30-day HEDIS required visits.
- **Relational Engagement/Sustained Results:** Clinicians often meet individuals in convenient settings, fostering engagement into care, resource linkage, and appropriate levels of support to create and sustain independence, stability, and well-being.

The program is structured to meet the needs of each entity through Per Member/Per Month, Shared Savings, or other agreed upon rate structure.

## → Whom Does it Help?

**BeyondCrisis** positively impacts persons from diverse populations, often with complex needs.

- Serious mental illness
- Intellectual disabilities
- Developmental disabilities
- Traumatic brain injury
- Post-traumatic stress disorder
- Substance use
- Child welfare
- TANF
- CHIP

**BeyondCrisis** is designed to create a sustained connection to plan and community resources to break the chain of repeat crisis.

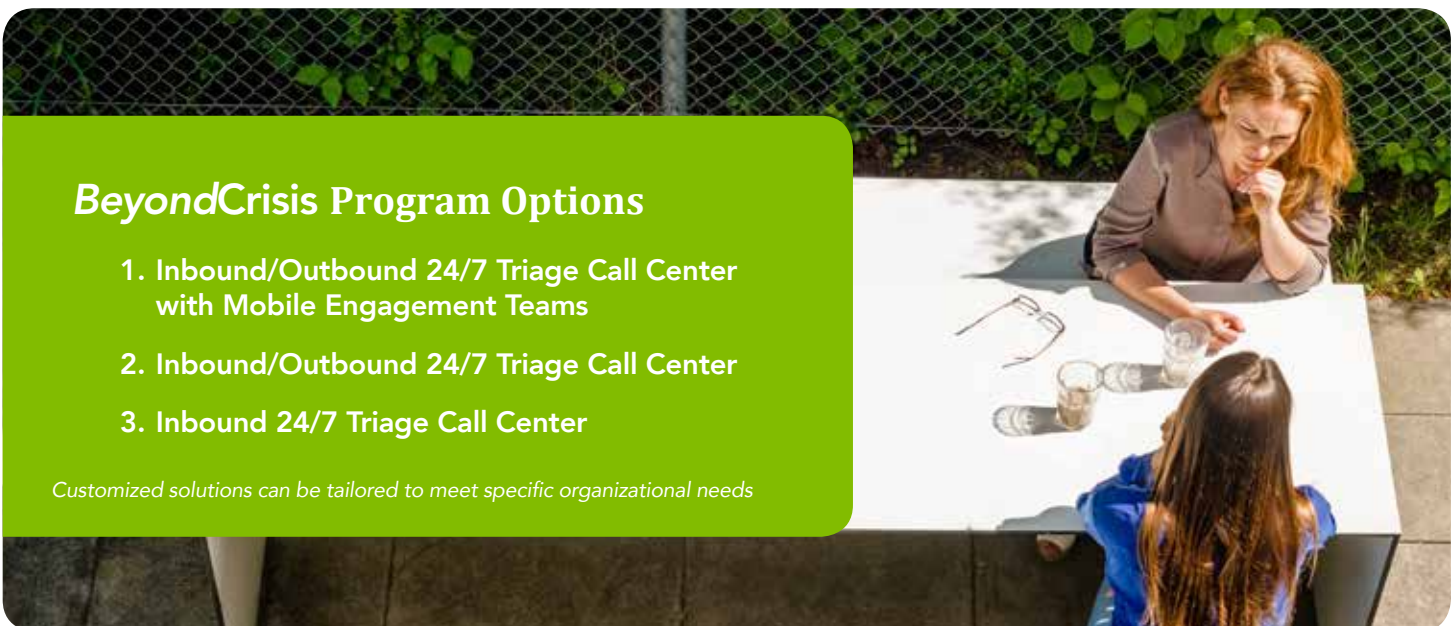
## → When to refer to *BeyondCrisis*:

- Multiple mental health diagnoses
- Two or more prescribed psychoactive medications from the same class
- At risk for placement in either psychiatric residential treatment facility or acute inpatient facility
- Deterioration in functioning from individual's baseline
- Barriers to accessing and/or receiving individualized treatment plan services/supports
- Possible disruption in placement
- Aggression/property destruction
- Communication barriers

### *BeyondCrisis* Program Options

1. Inbound/Outbound 24/7 Triage Call Center with Mobile Engagement Teams
2. Inbound/Outbound 24/7 Triage Call Center
3. Inbound 24/7 Triage Call Center

*Customized solutions can be tailored to meet specific organizational needs*



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[LifeShareUSA.com/BeyondCrisis](https://LifeShareUSA.com/BeyondCrisis)

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\* Kreyenbuhl J, et al. Schizophr Bull. 2009; 35:696-703