

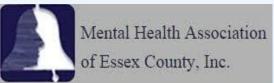
Our Story



Fourteen leading mental health and addiction treatment providers across seven rural Northern New York counties have teamed up to create Northwinds Integrated Health Network IPA, Inc.



































Our Mission



We leverage our extensive network of community-based providers to connect people to essentials for living and high quality care.



Approach



- ✓ Partner with payors and health systems
- ✓ Agree on population served
- √ Agree on measures associated with quality and cost
- ✓ Create a coordinated care model to implement
- ✓ Enter into a VBP Contract by January 2020



State Opioid Response Grant through OASAS

- In the Fall of 2019 Northwinds applied for and was awarded one of several \$250,000 State Opioid Response grants.
- This grant was awarded to better equip providers in northern New York combatting the opioid addiction crisis.
- Our vision is to create a regional, 24/7 crisis line staffed by individuals with specialized training in opioid use disorder, versus the current patchwork system of answering services and over-burdened Mobile Response Teams.
- Our intent of the regional crisis line is to facilitate better access with same-day appointments by connecting patients at the right time to the right provider in the appropriate setting.



The Change team at Northwinds has partnered with several agencies for their support and subject matter expertise. They include representation from:

- LGU's
- Adirondacks ACO
- Fidelis
- OMH



Northwinds will be tracking data on two measurements for this grant:

- The percentage of individuals ages 13 and older newly diagnosed with Opioid Use Disorder (OUD) who did not initiate Medication Assisted Treatment (MAT) within 30 days of the new OUD diagnosis index visit.
- The percentage of individuals ages 13 years and older discharged from inpatient rehabilitation who did not have follow up treatment in a lower level of care setting within 14 days. The percentage of individuals ages 13 and older discharged from inpatient detox who did not have follow up treatment in a lower level of care setting within 14 days.
- Data pulled from PSYCKES will be used to establish the baseline and subsequent increase/decreases of these measurements



Our plan is to utilize the Open Access Center out of St. Joe's as a crisis line. Benefits include:

- By hosting the SOR Crisis Access Line out of the OAC, the IPA is collaboratively utilizing an OASAS-awarded OAC
- Reduces the need of providing any additional staff
- Established phone number that has been circulated and operational since June 2019
- The Change team has also partnered with CVPH using Health Catalyst to create a regional map of current Crisis Services being offered by IPA network providers as well as gaps in service.



 The Change team is also exploring the use of an online/mobile application that will allow us to capture network data outside the two measurements in addition to opportunities around mobile referrals and mobile trainings for providers.





Thank you!

• Questions?

https://nwihn.com/

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