

# Michigan Care Access Referral Exchange (MiCARE)

## Network Standards & Guidelines

*Reviewed by LARA and MDHHS\* as of February 16, 2022*

### Background

In Fiscal Year 2019, the Michigan Department of Licensing and Regulatory Affairs (LARA) was appropriated nearly \$1.2M to build an opioid treatment locator. The Department expanded upon their existing relationship with Bamboo Health, formerly known as Appriss Health, to deploy their OpenBeds® platform statewide. In partnership with the Michigan Department of Health and Human Services (MDHHS), the goal is to create a comprehensive network of treatment, referring, and social support resources that will provide the capability to link those in need of treatment to appropriate, available care. The network, known as the Michigan Care Access Referral Exchange (MiCARE) is designed for use when the patient is ready to receive care, or as crisis responders and other professionals identify an acute need.

Considering the pandemic's effects on the population, we are faced with rising death rates from overdose and an increase in the number of clients seeking support for mental health needs. It is imperative to find new ways to more immediately address the challenges faced by those at risk. MiCARE supports the collective effort to improve access to, increase transparency of, and upgrade the process for referrals to behavioral health care services.

Implementation of this secure referral network will overcome regional boundaries and greatly reduce the frustrating process of manually contacting multiple providers in the pursuit of finding available services. The network will have the ability to quickly locate the most appropriate and available level of care and then create and send a digital referral to a provider, 24 hours a day, seven days a week.

There are three requirements to deploying MiCARE. First, the aforementioned opioid treatment locator that LARA was appropriated in to stand up. The remaining two requirements are legislatively charged to MDHHS. The first legislative requirement charges MDHHS to develop and operate a command center that provides crisis response services through omni-channel methods (e.g. phone, text, chat, email) to support patients in crisis whilst facilitating coordinated access to care to all essential services cited in the Michigan Mental Health Code MCL 330.1206. This system is called the Michigan Crisis and Access Line (MiCAL), and MiCARE will be integrated with that system as both projects progress. The second legislative requirement charges MDHHS with implementing a Psychiatric Bed Registry (PBR), which the MiCARE system will accomplish.

### Network Goals

**Goal 1: Create a statewide, robust network of treatment, referring, and social support resources –** Michigan will deploy MiCARE (OpenBeds) statewide throughout 2022, including inpatient psychiatric facilities to meet the needs of the MDHHS PBR legislation, as well as other behavioral health service types (e.g. outpatient SUD, outpatient mental health).

**Goal 2: Streamline referral process and improve timeliness of behavioral health referrals –** All MiCARE treatment-authorizing entities and referring users will utilize the treatment finder within MiCARE to send referrals for behavioral health services.

**Goal 3: Utilize system to maximum potential, increasing access to care** – All MiCARE users will participate as they are able (sending/receiving referrals, updating availability), to quickly locate and place patients in the most appropriate and available level of care.

**Network Standards and Expectations**

- 1. Digital Referrals and Communications** – All MiCARE users are expected to adhere to the following guidelines to increase the likelihood of a successful system and treatment outcomes:
  - a. Send and receive digital referrals through MiCARE
  - b. Use the OpenBeds referral form to replace faxes with file attachment(s) to digital referrals or subsequent communications
  - c. Referring users will work to ensure all Medicaid patients will be referred into their Managed Care Organization (MCO) network
  - d. All providers will assign and ensure staff are monitoring MiCARE for responses
  - e. All received referrals will be *acknowledged* within 30 minutes of receipt
  - f. Provide feedback regarding referral outcome, including status such as Accepted/Declined and Show/No-show (e.g. client showed up for intake assessment)
  
- 2. Updating Bed and Appointment Availability** – All MiCARE users are expected to update their service availability utilizing the below table as a minimum update frequency:

Service Type	Minimum Update Frequency	Notes
Inpatient Psychiatric	Twice daily	Recommendation: update in the morning and evening. May be updated more often as necessary (e.g. upon patient discharge)
Residential Withdrawal Management	Once Daily	Recommendation: update location comments within network to demonstrate active participation
Inpatient Medication Assisted Treatment (MAT)	Twice daily	Recommendation: update in the morning and evening. May be updated more often as necessary (e.g. upon patient discharge)
Outpatient Medication Assisted Treatment (MAT)	As necessary	Recommendation: update location comments within network to display next available appointment time, or list walk-in hours
Crisis Residential Unit	Twice daily	Recommendation: update in the morning and evening. May be updated more often as necessary (e.g. upon patient discharge)
Subacute Withdrawal Management	As necessary	Recommendation: update location comments within network to display next available appointment time, or list walk-in hours

Partial Hospitalization	As necessary	Recommendation: update location comments within network to display next available appointment time, or list walk-in hours
Intensive Outpatient Treatment	As necessary	Recommendation: update location comments within network to display next available appointment time, or list walk-in hours
Outpatient Substance Use Disorder (SUD)	As necessary	Recommendation: update location comments within network to display next available appointment time, or list walk-in hours
Outpatient Mental Health	As necessary	Recommendation: update location comments within network to display next available appointment time, or list walk-in hours
Recovery Housing	As necessary	Recommendation: update location comments within network to display wait list information
Assertive Community Treatment (ACT)	As necessary	Recommendation: update location comments within network to display next available appointment time, or list walk-in hours
Specialized Residential Supports	As necessary	Recommendation: update location comments within network to display next available appointment time, or list walk-in hours
Telepractice	As necessary	Recommendation: update location comments within network to display next available appointment time, or list walk-in hours

*\*These Standards and Guidelines have been reviewed by LARA and are undergoing MDHHS review.*

*The network rules of governance are subject to change upon review of user feedback and/or data and reporting provided by the OpenBeds Program Staff.*