



Connections Health Solutions
Company Overview & Services
Summer 2023



connections
HEALTH SOLUTIONS

Agenda

Description

Connections History and Overview

Connections Approach to Care



About Connections Health Solutions

Connections Health Solutions is a 24/7, immediate-access behavioral health crisis stabilization model. Our model provides a high-quality and cost-efficient alternative to ED visits, ED boarding, and hospital admissions for the high-acuity psychiatric population.



Founded in Arizona in 2009, Connections is the national leader in behavioral health crisis care.



Fully-employed, multidisciplinary psychiatric urgent and emergency care. All patients who meet inpatient criteria are instead treated and stabilized in a 23-hour crisis observation model that prevents an emergency room visit or hospital admission for high-acuity behavioral health populations.



> 40% reduction in behavioral health claims expense demonstrated in Arizona, driven by crisis observation level of care replacing inpatient admissions.



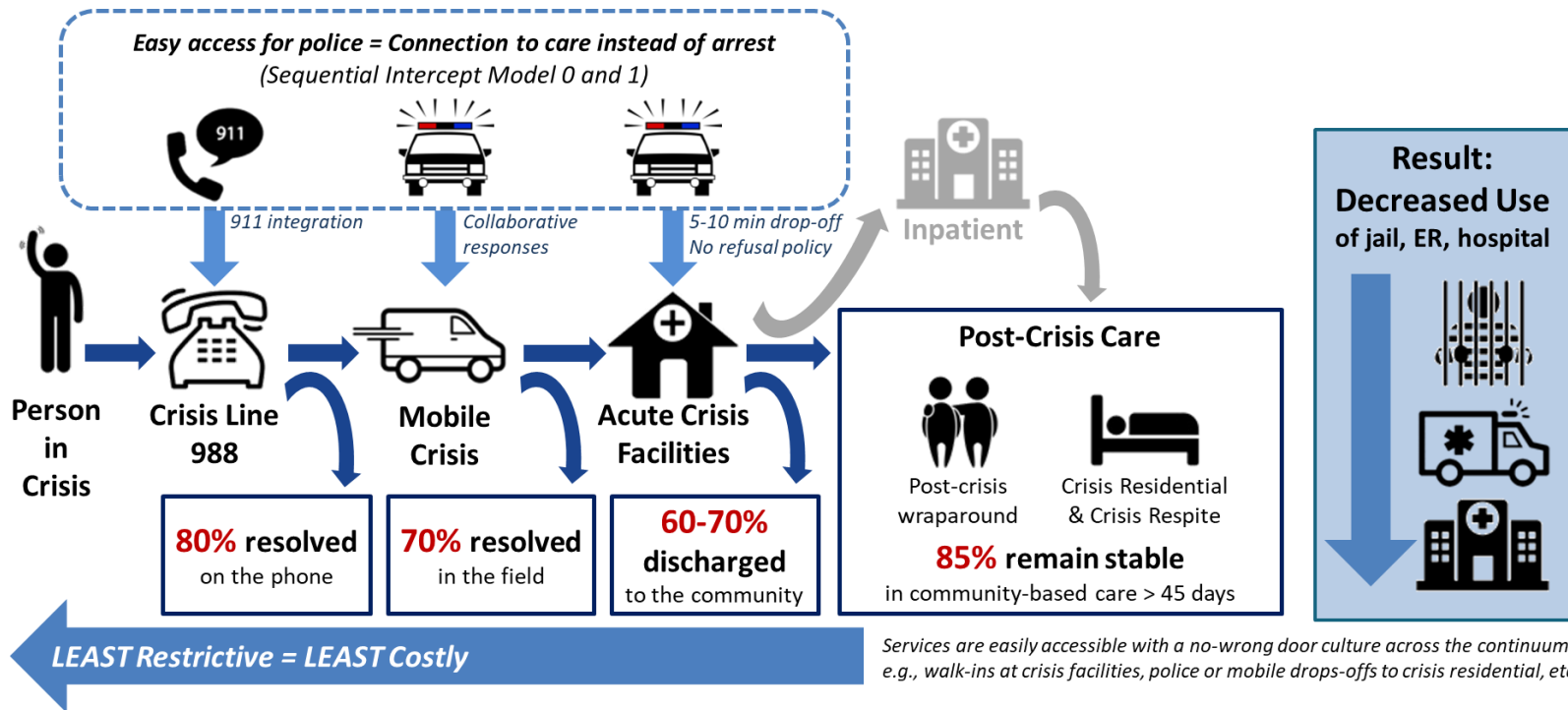
Infrastructure to enable a high-performing behavioral health group, including value-based contracting and analytics, EMR designed to meet our unique crisis care model, and intensive clinical training led by psychiatric crisis experts.



Connections collaborates across the continuum

Connections Health Solutions has played and continues to play a critical role in the development of the crisis continuum in Arizona, and now, Washington

Crisis System: Alignment of services toward a common goal



Note: Adapted from: Balfour ME, Hahn Stephenson A, Delaney-Brumsey A, Winsky J, & Goldman ML (2020). Cops, Clinicians, or Both? Collaborative Approaches to Responding to Behavioral Health Emergencies. *Psychiatric Services*. Epub ahead of print Oct 20, 2021. <https://ps.psychiatryonline.org/doi/10.1176/appi.ps.202000721>. (Community stabilization rates are based on FY2019 from the Southern Arizona region and were provided courtesy of Johnnie Gasper at Arizona Complete Health/Centene)



Connections Health Solutions' Values Deliver Immediate Access Behavioral Health Crisis Care

Connections Health Solutions is widely recognized as a pioneer in behavioral health crisis care, prioritizing access, safety, patient care, and community connection.

**WE PRIORITIZE
ACCESS FOR ALL**



Our patients, inclusive of high acuity, violent, and agitated access a psychiatric provider within **90 minutes**.

**WE BELIEVE IN LEAST
RESTRICTIVE CARE**



65-70% of patients are stabilized and discharged within 24 hours; the remaining 30% in 3 – 4 days.

**WE CREATE CONNECTIONS
AND COMMUNITY**



“Connections” is in our name. We coordinate across the delivery system connecting patients to care and their community.

**WE DELIVER REAL RESULTS
AND REAL IMPACT**



SAMHSA, National Council for Mental Wellbeing, and **national experts have adopted our model as a national best practice.**

Acronyms: SAMHSA = Substance Abuse and Mental Health Services



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Connections Core Service Lines Serve Individuals of All Acuties

Our service lines have evolved to ensure those who need crisis care can access it when they need it, without referral

URGENT CARE
LOCUS 1 - 4

Walk-in access to psychiatric provider within 90 minutes

23-HR OBSERVATION
LOCUS 5 - 6

Rapid assessment, treatment, stabilization and proactive discharge planning within 23 hours, 59 minutes via interdisciplinary engagement

CRISIS STABILIZATION
LOCUS 5 - 6

Continued stabilization beyond 23 hours 59 minutes for those requiring an extended stay

TRANSITIONS
LOCUS 1 - 4

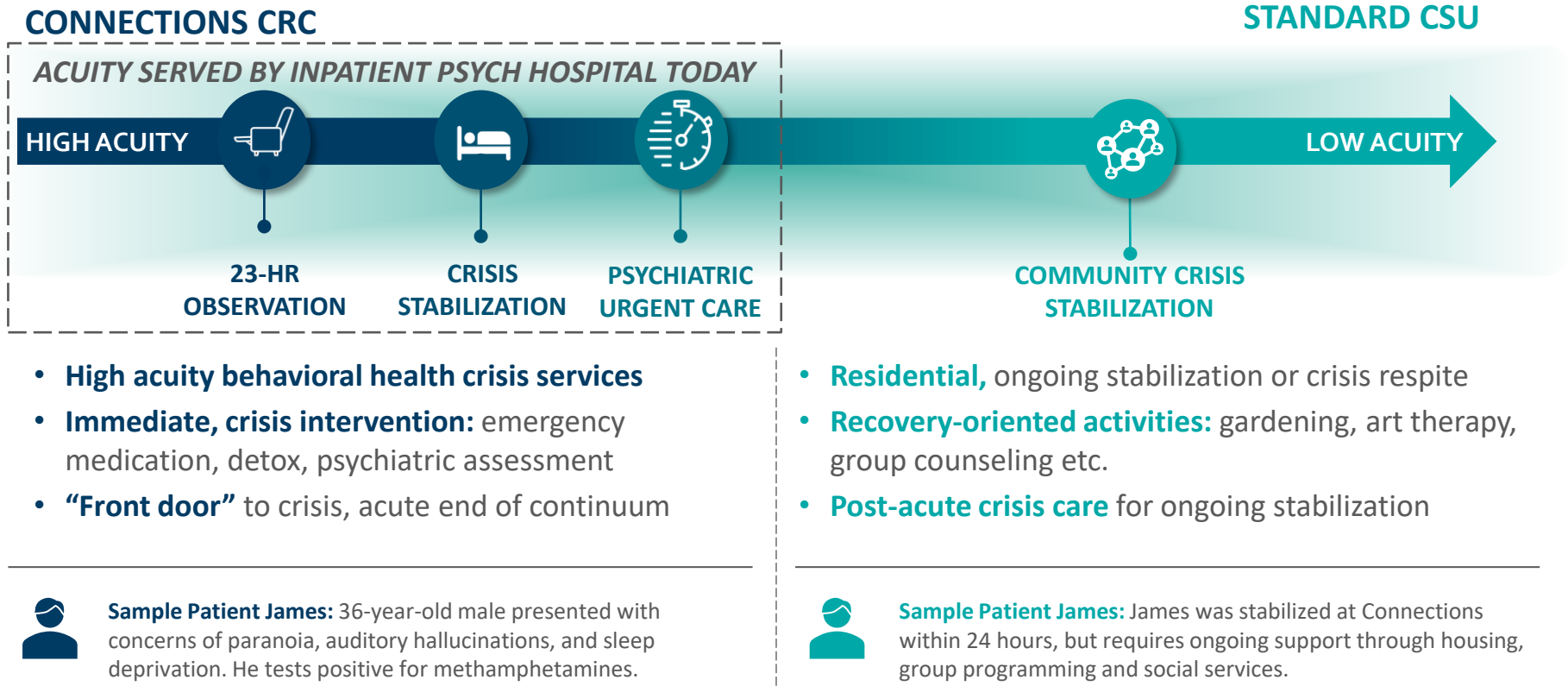
Ongoing follow-up post-crisis and warm hand-off to community care



Connections' Model Serves the Underserved

Connections' programming sees a higher level of acuity to bridge current gaps the current crisis continuum. Without us, individuals end up in an ED or jail.

Illustrative Crisis Continuum



Connections Health Solutions Outcomes

Connections sets the national standard for crisis care via our model and outcomes. Our care model has been lauded in peer-reviewed publications for both adults and children/adolescents.¹⁻⁴

Annual Patients Served (in 000's)



Patient Demographics:



<10 MIN

Law enforcement drop-off time

<90 MIN

Door to Behavioral Health Medical Provider time

65 - 70%

Community Disposition Rate

60-70%

Conversion to Voluntary Rate



<23 HRS

Observation MLOS

3 - 4 DAYS

Crisis Stabilization Unit MLOS

>90%

7-day Outpatient BH Follow-up

<5%

Re-admission rate to Connections

Sources: 1. National Council for Behavioral Health. [Roadmap to the Ideal Crisis System](#): Essential Elements, Measurable Standards and Best Practices for Behavioral Health Crisis Response, pages 105 – 106. 2. Substance Abuse and Mental Health Services Administration. (2020). [National Guidelines for Behavioral Health Crisis Care: Best Practice Toolkit](#), pages 54 - 56. 3. Balfour ME, Zinn T, Cason K, Fox J, Morales M, Berdeja C, Gray J. (2018). [Provider-Payer Partnerships as an Engine for Continuous Quality Improvement. Psychiatric Services](#), 69(6), 623-625. 4. [Pediatric Behavioral Health Urgent Care 2nd Edition](#), Children's Mental Health Campaign, pages 27 -28.



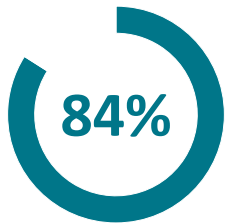
Patient Satisfaction

Connections delivers patient-centric care. When surveyed, > 80% of Connections' patients, who are the highest acuity and presenting in crisis, would recommend Connections.

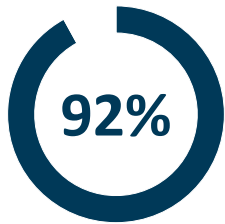
WOULD YOU RECOMMEND CONNECTIONS TO OTHERS?¹



**Psych/BH
Urgent Care**



**Crisis
Observation**



**Sub-acute
Crisis Stabilization**

"The peer support is the best ever. I am a loner and do not trust people but here I feel safe, and I know the people care about my well being. I would like to thank [REDACTED] who is peer support, he never judges and works so hard to help us get help that we need."

- Urgent Care Patient Testimonial

"You understood the situation and didn't make me feel like i was crazy or out of it. I love that y'all take care of your patients."

- Urgent Care Patient Testimonial

"I went to the CRC five years ago and they saved my life. I've been stable on meds and have not been back since. My friend also went there recently, and she said she was treated well there. Keep up the great work."

- Google Review

¹Based on patient definitely/probably yes answers in surveys administered from January 1 to March 31, 2023.



Urgent Care Overview

Urgent care provides patients with immediate access to care in a voluntary office-based setting, without the need for a referral.



Intake at Connections' Crisis Response Center

“You understood the situation and didn't make me feel like I was crazy or out of it. I love that y'all take care of your patients.” – Urgent Care Patient Testimonial

Abbreviations: BHMP = Behavioral Health Medical Provider (i.e., MD, NP, PA), BHT = Behavioral Health Technician. Note: Performance data is TTM for Connections' flagship Urgent Psychiatric Center in Phoenix, AZ.

URGENT CARE OVERVIEW

- Of the 27,401 individuals we triaged in 2021, 10,939 were triaged and stabilized in our walk-in lobby
- Patients stabilized in our walk-in lobby are released within 2 hours having received:
 - Assessment to address patient's immediate needs and creating a successful treatment plan for community-based treatment.
 - Patients receive a psychiatric assessment, psychosocial assessment, medical assessment, and a complete discharge plan with care coordination
- Walk-in patients meeting medical necessity for 23-hour Observation are admitted to that unit.



BHMP



RNs, LPNs



Licensed Case Manager



BHT

<90min

Door to BHMP time

>95%

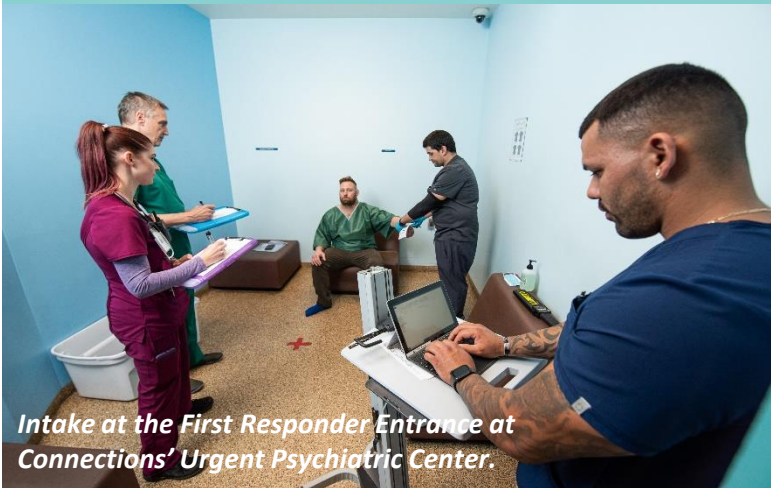
Patient satisfaction



23-hour Observation: First-Responder Entrance

Patients that arrive at our crisis centers via law enforcement, first responders, crisis mobile teams, or EDs/ambulance transfers arrive at a dedicated entrance.

“Connections has a ‘no wrong door’ policy for law enforcement, meaning no matter how agitated or intoxicated or riled up someone is, they still take that patient for us. That’s what makes [the Tucson Police Department] successful. Otherwise, that person would end up in jail.” - Jason Winsky, Sgt. TPD



Intake at the First Responder Entrance at Connections’ Urgent Psychiatric Center.

FIRST-RESPONDER OVERVIEW

- Connections views law enforcement as a critical partner, 50-55% of drop-offs annually come from law enforcement
- Our partnership has been so successful that Connections plays an integral role in Tucson PD’s learning site designation: communities nationwide visit our CRC to learn best practices for police-mental health collaboration

Intake Team:



RNs, LPNs



Licensed Case Manager



BHT



PSS

<10 min

Law enforcement drop-off time

<3%

Transferred to ED for medical clearance

0

Patients turned away annually

Abbreviations: BHT = Behavioral Health Technician, PSS = Peer Support Specialist



23-hour Observation: Treatment

Connections assumes that the crisis can be resolved. We successfully discharge the majority within 24 hours, and yet, 100% of patients admitted to Observation meet inpatient admission criteria.



"[Our] team works closely with Connections across our levels of care. Their team is consistently patient-centered and resolution-focused [in discharge planning]. They think innovatively about the real issues driving psychiatric crisis and think creatively about how to solve these issues." -

Partner Behavioral Health Agency

Abbreviations: BHMP = Behavioral Health Medical Provider, BHT = Behavioral Health Technician, PSS = Peer Support Specialist. Notes: Data shown for Connections' flagship Urgent Psychiatric Center, in Phoenix, Arizona.

OBSERVATION OVERVIEW

- Patients are admitted to an Observation chair, a comfortable recliner under continuous observation from the nursing bay
- The interdisciplinary team provides immediate intervention (medication, detox/MAT, crisis counseling, peer support, safety planning, mindfulness)
- Our team collaborates and coordinates with community and family partners to create a successful discharge plan



BHMP



RNs, LPNs



Licensed
Case Manager



BHT



PSS

10,000

Annual visits per facility

60-70%

Conversion from involuntary to voluntary

<23hr

Length of Stay



Crisis Stabilization Unit Overview

Our crisis stabilization units provide for continued stabilization beyond twenty-four hours for those not stable for discharge.



Connections' new residential crisis stabilization units opening in 2022 in Phoenix, AZ.

CRISIS STABILIZATION UNIT

- Patients are admitted to this unit if they are not stabilized within 24 hours and require 3 – 4 days of additional stabilization
- The same interdisciplinary team continues to monitor, assess and evaluate as on the 23-hour Observation unit. On the CSU, there is enhanced group programming options available.



BHMP



RNs, LPNs



Licensed
Case Manager



BHT



PSS

1,500

Annual visits per facility

3 - 4 days

Length of stay

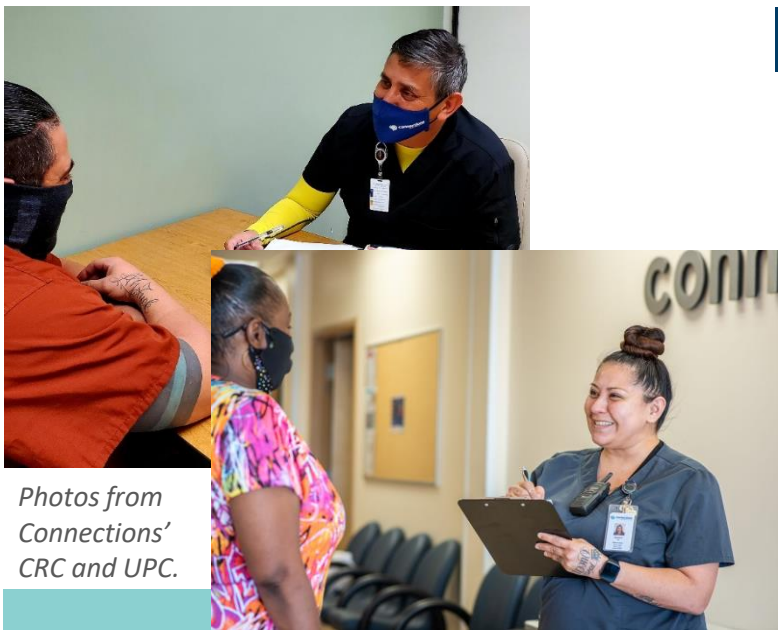
90%

Patient satisfaction



Post-Acute Transitions Overview

Connections discharge planning begins the moment an individual is admitted. Our case managers ensure patients have a follow-up appointment scheduled, if not within the community, with us.



Photos from Connections' CRC and UPC.

“The staff were committed to helping our members in all facets, from housing, to peer support, to clinical services. The programming at Transitions makes a difference. We are glad to partner with Connections to jointly serve our members.” - **Director of System Transformation, Payer Partner**

DISCHARE PLANNING OVERVIEW

- Discharge planning begins at admission. Case managers contact applicable outpatient providers and natural supports, as necessary and appropriate, to notify and coordinate care at registration
- Licensed case managers schedule follow-up outpatient appointments, make referrals, and contact natural and community supports to arrange transportation
- For those requiring more robust aftercare, our programming leverages peers and our multi-disciplinary team to provide outpatient wraparound support to patients coming out of crisis in our walk-in lobby until we can connect patients to longer term outpatient care



>90%	7-day Outpatient BH follow-up
95%	Connected to same-day housing
2x	Increase in PCP engagement



THANK YOU

Core to Connections' values is system collaboration, we would welcome any follow-up questions or feedback.



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