

Cherokee Health Systems

A photograph of a modern multi-story building with large glass windows, overlaid with a blue circular graphic. The building is the background of the slide, and the blue circle is a decorative element.

- Real-World Model
- Real-World Experience
- Real-World Training

Cherokee Health Systems



History and Background

For over three decades, Cherokee Health Systems has been a national leader in the blending of primary care and behavioral health care. Cherokee staff have provided technical assistance on integrated care to over 100 healthcare organizations nationwide. We have hosted two national integrated care conferences, and our staff have presented at many national association meetings of health care providers and at integrated care conferences across the country. We have discussed integrated care strategies and solutions with health care providers and state officials in a number of states. Cherokee staff have provided expert testimony and technical assistance to the Federal government on numerous occasions and have consulted with a number of managed care companies.

As a Federally Qualified Health Center (FQHC) as well as a Community Mental Health Center (CMHC), we appreciate the opportunities and challenges facing both the primary care and the mental health sectors. We understand the advantages as well as the complexities when FQHCs and CMHCs choose to work together.

Cherokee is uniquely qualified to provide technical assistance to organizations interested in integrated care implementation and solutions because, as a provider of integrated care ourselves, we are “in the trenches” every day. We know from experience what works and what doesn’t. We have done the clinical, financial and administrative “heavy lifting” ourselves. Our technical assistance is team-based, targeted and solution-oriented. Unlike most consultants, we can actually demonstrate a “real-world” working model at our own facilities, provide shadowing opportunities for primary care and behavioral health providers, facilitate strategic, tactical and business planning with clients’ team members, demonstrate financial models and offer individual case consultations with clients’ integrated care staffs.

Cherokee Health Systems Consultants

Dennis Freeman, Ph.D.

(University of Tennessee, Knoxville, 1970) Chief Executive Officer, Psychologist. Interests: integration of primary care and mental health care systems, health care cost containment, managed care systems, public health policy.

Parinda Khatri, Ph.D.

(University of North Carolina at Chapel Hill, 1996) Psychologist and Behavioral Health Consultant in Primary Care, Director of Integrated Care. Interests: primary care psychology, training, behavioral medicine.

Tom Bishop, Psy.D.

(Wheaton College, 1998) Psychologist and Behavioral Health Consultant. Interests: pediatric psychology, integration, sport and positive psychology, school health psychology and rural practice.

Brian Bonnyman, M.D.

(Emory University School of Medicine, 1990; Residency in Family Medicine, University of Virginia, 1993) Medical Director, Staff Physician. Interests: serving immigrant populations and the underserved.

Joel Hornberger, M.H.S.

(Johns Hopkins University School of Public Health, 1981) Chief Operating Officer. Interests: managed care, business development, management and strategic planning.

Jeffrey Howard, M.A, C.P.A.

(Carson-Newman College, 1987; Southern Baptist Theological Seminary, 1991) Chief Financial Officer. Interests: financial management and analysis, integrated care reimbursement strategies, information systems and technology solutions.



Ken Mays, M.D.

(ETSU, James H. Quillen College of Medicine, 1996; Residency in Family Practice, University of Tennessee, Knoxville, 1999) Director of Primary Care, Staff Physician. Interests: preventive health care, gastroenterology.

Carter Miller, Ph.D.

(Texas A&M University, 1993) Psychologist and Behavioral Health Consultant, Vice President of Psychosocial Rehabilitation Services. Interests: chronic illnesses, paraprofessional training and development, community psychology.

Deb Murph, R.N.

Regional Vice President. Interests: practice management, pediatrics, core lab development and central access scheduling.

Cindy Perry, M.D.

(Meharry Medical College, 1991; Residency in Psychiatry, Bowman Gray-North Carolina Baptist Hospital, 1995) Staff Psychiatrist. Interests: serving the severely and persistently mentally ill, integrated care collaboration.

Gregg Perry M.D.

(Vanderbilt School of Medicine, 1991; Residency in Psychiatry, Bowman Gray/North Carolina Baptist Hospital, 1995) Director of Psychiatric Services, Director of Telemedicine, Staff Psychiatrist. Interests: psychopharmacology, telehealth.

Febe Wallace, M.D.

(Duke Medical School, 1981; Residency in Internal Medicine and Pediatrics, North Carolina Memorial Hospital, Chapel Hill, 1985) Staff Physician. Interests: primary care telemedicine, underserved populations with a special interest in the severely and persistently mentally ill.

Primary Behavioral Care Integration Training Academy

The Training Academy will be organized around three primary goals:

- Change the delivery of community health services in order to expand access and improve the quality of behavioral and medical services provided to our population
- Bring together and create a community of people and organizations who are trying to develop and implement innovative practice systems in primary care
- Provide training to the organizational leadership as well as medical and behavioral clinicians to more effectively practice in an integrated care environment



The Training Academy is designed to provide training and technical assistance in:

- effectively blending primary and behavioral healthcare
- supporting organizational and clinical leadership
- expanding access to care
- improving quality of care
- facilitating financial sustainability

The Academy also provides an opportunity to bring together and create a community of people and organizations who are developing and implementing innovative practice systems in healthcare. Training includes an overview of effective organizational and clinical models of integrated care as well as guidance on the “nuts and bolts” of primary behavioral integration in community health.

Academy Training Topics

Introduction to Clinical and Organizational Model of Integrated Care

Learning Goal: Understand rationale, concepts, and structure of integrated care

Management of Behavioral Health in Primary Care

Learning Goal: Understand prevalence and impact of behavioral, cognitive, and affective factors in health and illness; Acquire knowledge and skill in interdisciplinary team-based behavioral health care

Operational Issues in Integrated Care

Learning Goal: Understand administrative requirements, policies, and procedures underpinning an integrated care program

Behavioral Health Consultation: Core Clinical Competencies

Learning Goal: Enhance primary care clinical practice, practice management, and consultation

Financing, Coding, and Billing

Learning Goal: Understand financing mechanisms, appropriate coding and billing processes

Emphasis is placed on team-oriented training and development. Who should attend:

- Chief Executive Officer
- Chief Operations Officer
- Chief Medical Officer
- Chief Financial Officer
- Lead Behavioral Provider(s)
- Lead Primary Care Provider(s)

Customized Training Options

Integrated Care Staffing

- Recruitment
- Training and Development

Technology and Communications

- Telehealth Operations
- Infrastructure Design and Development

Integrated Patient Record

- Template Design and Development
- Systems Review and Analysis

Financial Modeling for Integrated Care Sustainability

- Contract Review and Negotiations
- Billing and Collections

Operational Planning Facilitation

- Strategic Planning
- Tactical Planning

Clinical Training Experiences

- Behavioral Health Consultant Shadowing
- Psychiatric Consultation

For more information or to schedule your training contact:

Dennis Freeman, Ph. D.
Chief Executive Officer

2018 Western Avenue
Knoxville, TN 38921

Phone: 865-934-6711

Fax: 865-934-6780

Visit online at www.cherokeetraining.com

Request for Information

Organization Name: _____

Primary Contact: _____

Position: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____

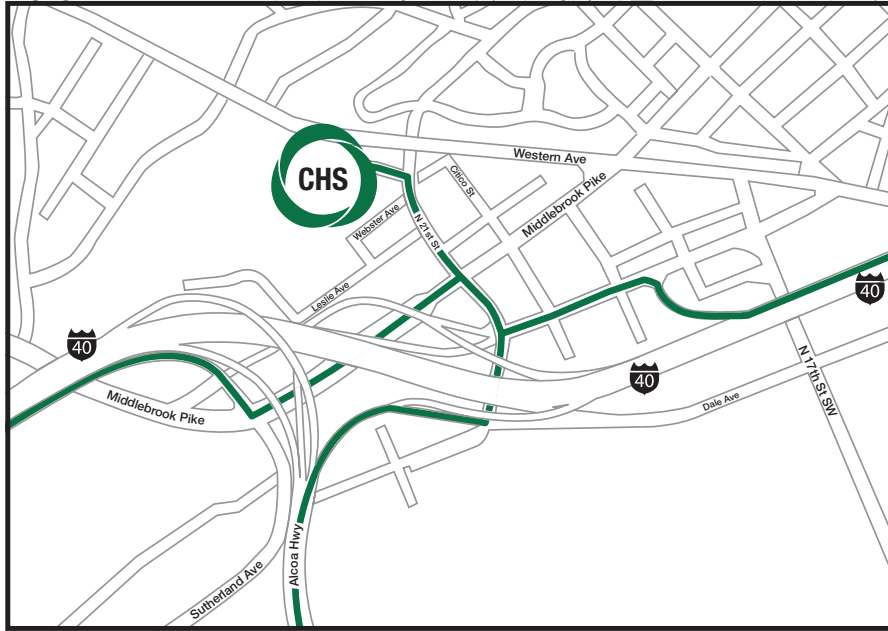
Phone: _____

Email: _____

I want to know more about:

Visit us online at www.cherokeetraining.com.

Directions



From the East:

- Take I-40 West to Exit 387 (Western Ave/17th Street).
- At the end of the exit ramp, turn LEFT onto Ailor Avenue.
- Get into the right lane of Ailor and turn RIGHT at the first traffic light onto 21st Street. You will see the Center City office straight ahead at this point.
- Travel through the first traffic light on 21st Street (crossing over Middlebrook Pike).
- After crossing Middlebrook Pike, get into the left lane and turn LEFT into the parking lot next to the Cherokee Health Systems sign.

From the West:

- Take I-40 to Exit 386A (University Avenue/Middlebrook Pike).
- At the end of a long exit ramp, continue straight ahead to the traffic light, getting into the left turn lane.
- Turn LEFT onto Middlebrook Pike.
- At the first traffic light on Middlebrook Pike, turn LEFT onto 21st Street and then LEFT into the parking lot next to the Cherokee Health Systems sign.

From the South (McGhee Tyson Airport):

- Take Alcoa Highway (Rt. 129) north.
- When you get to the I-40 split, take I-40 East
- Get off at the first Exit (Western Ave/17th Street) without actually getting onto I-40.
- Turn LEFT and go under the overpass. This is 21st Street. Stay in the far right lane until you travel through the second traffic light on 21st Street (crossing over Middlebrook Pike). You will see the Center City office straight ahead at this point.
- After crossing Middlebrook Pike, get into the left lane and turn LEFT into the parking lot next to the Cherokee Health Systems sign.

Endorsements and Acknowledgements

"Thank you again for your gracious hosting of our team from Atlanta. All of us were incredibly impressed by your center and your team. We learned more about the model, but more importantly we caught the enthusiasm and the spirit of your people. Wow!!!"

Dr. George Rust, Deputy Director, National Center for Primary Care, Morehouse School of Medicine

"Behavioral health providers who want to become full-scope healthcare homes for people living with serious mental illnesses should look to the Cherokee model..."
National Council for Community Behavioral Healthcare

"We already have several successful examples of how to provide this kind of integrated care. Health care systems like Cherokee Health Systems, Intermountain Health, and the Veterans Administration have all successfully included mental health into their primary care systems. Now the challenge is to spread these models..."

Secretary of Health and Human Services, Kathleen Sebelius

Cherokee Health Systems: "the grandfather of integrated health among community health organizations"

Evidence Report/Technology Assessment #173, Agency for Healthcare Research and Quality

"One of the best-known and nationally recognized models for primary care and behavioral health integration is found in eastern Tennessee... Cherokee Health Systems has been an instrumental force in driving change toward integrated behavioral health and primary care."

National Academy for State Health Policy

Presented Best Practices in 21st Century Primary Care Award
The National Center for Primary Care



“One of the best-known and nationally recognized models for primary care and behavioral health integration...”