3/1/2024
CCBHC Steering Committee Meeting Minutes

Present Members: ☐Rep. Daisy Berbeco ☒ Simone Rueschemeyer ☒Cindy Taylor- Patch ☒Rob Mitchell ☒Nicole Valcour ☐Will Eberle ☒ Megan Mitchell ☐Aaron Kelly ☐Saida Mohamed Abdi ☒ Laurie Mulhern ☐Anna Saxman ☐Steve Berbeco ☒Alex Lehning ☐Walt Wade ☐Akira Chateauneuf ☐Layan Alhallak ☐Keelan Boisvert ☐Emily Maikoo ☒Suzanne Tremblay ☐Melinda White ☐Bruce Wilson ☒Mary Kate Mohlman ☐Stephen Devoe ☐Christie Everett ☒Joanne Crawford ☐Anne Donahue ☒ Molly Shriver-Blake ☒ Lee Harrington
DMH/State Staff: ☒Laura Flint ☒Megan Shedaker ☒Lori Vadakin ☐ Samantha Sweet ☒ Eva Dayon
Public: ☒ Victoria Potter ☐Christopher Rotsettis ☐Alison Neto ☐Kim McClellan ☒Peggy Lavin ☐Michelle Denault ☐Cheryl Huntley ☒ Amy Fela ☒ Dan Towle ☒ Jena Trombly (sitting in for Christie Everett)

Agenda
2:45-2:50 Welcome & Agenda Review
2:50-3:30 Follow up from last meeting on survey data/questions
3:30-3:40 CCBHC Name Change Update
3:40-3:55 Value Based Payment and CCBHCs
3:55-4:00 Quick meeting Stipend Overview
4:00-4:10 Public Comment
4:10-4:15 Wrap Up

Agenda Item	Discussion **Facilitator:** Lori Vadakin
Opening Committee Business	Meeting **convened** at 2:50. **Quorum** was met. Agenda was reviewed. Introductions were made for committee members and members of the public.
Survey Data/Questions	**Updates from Lori Vadakin** • Update on survey that was reported on during last meeting. 145 responses, sent out the results to this committee. Department of Health has created a social media post about survey to get more people to take the survey per steering committee's recommendation. • Technical assistance work going on with CMC and RMHS. • Working on PPS rates, establishing payment system. • Solicited support from Rep. Bernie Sanders staff to reach out to the Department of veterans' affairs. • Working with Department of Substance Use (DSU) and Blueprint. DSU integration of services in our CCBHC centers • Submitting our CCBHC application on March 20th, looking to see if that is something we can share with this committee. **What do you desire from this committee?** • Ensure there is varied, choice and options in therapeutic interventions.

	• Certification criteria, where we are, particularly in formalized relationship with FQHCs. • Updates as part of agenda • Continue to brief this committee of work going on, feedback loop • Make sure it is culturally sensitive, especially the Abenaki community
CCBHC Name Change Update	Laura Flint shared survey results with CCBHC Leadership team meeting. • Keeping the CCBHC acronym was important to steering committee and CCBHC leadership team. • Common concern with it being confused with Federally Qualified Health Care Centers (FQHC). They decided on Certified Community-Based Integrated Health Center with a sub-title (tbd) to further explain what this is. Concerns from steering committee members that this model is not integrated and that the name is not accurate with the addition of "integrated." Discussion around what "integrated" means and in what ways a CCBHC is integrated. • A CCBHC will integrate mental health services, substance use services, primary care screenings, among other services. Will need to have formal contracts in the community for services not offered under their roof. CMC and RMHS talked about their increasing nursing services, blood draws, labs etc. Discussion around agencies keeping their current Designated Agency names and not *changing* these names to "CCBHC", as this feels important because the name is recognized to the community in which they provide care.
Value Based Payment and CCBHCs	Eva Dayon from DMH presented. Shared slides with information about Quality Bonus Payment (QBP)/Value Based Payment (VBP) There are certain qualities measures that are reported under CCBHC. There is a QI (Quality improvement) plan that is required, which is above and beyond what we require now. Agencies will also need to complete a needs assessment. • QBP/VBP is when agencies are paid an extra amount when they met such measures such as certain screenings and better off measures. (See slide for details). The state certification of CCBHCs can offer QBP (shared list). DMH still undecided if it will do this, depends on payment structure (there are 4 options) 2 require QBP. Feeling that this is wanted. In DMH experience, these type of payments do help agencies strive for providing these services and they incentive achieving the measures that are listed in the model. (1-7 are required) (8-11 are optional) Do you think we should have QBP? Above and beyond, this would require a legislature ask. ▪ No feedback from members in the moment.
Quick Overview of Meeting Stipends	In order to receive a stipend for these meetings you must be a member, not other wise reimbursed for your time, provide your social security number, fill out a W9 form and have attended the meeting. The stipend is $50 per meeting. Mileage reimbursement is also available. Today is the 5th meeting. Reach out to Lori Vadakin if you have questions.

Public Comment	(What do you desire from this committee?) Could the committee evaluate if the mission/vision is being realized on a practical way? (Comments about integration conversation) • Typically, what "integrated" means is providing physical health, mental health and substance use care. • Bi-directional is often a term used. Rough suggestion of "Certified Community Bi-directionally Coordinated Health Center and then maybe a tag line of "highly coordinated mental health, substance use, and primary care services" or something along those lines...." Discussion/example provided around barriers that exist for meeting some of the QBP such as diabetes monitoring. HCRS is moving in that direction, although there are various barriers that exist. Suggestion for reaching different communities for survey because it seemed that results were skewed for demographics of higher income and higher education level. Extra steps needed to reach certain communities including going directly to them (specifically unhoused population) Discussion around how peers are identified, new agenda item for future meetings to discuss this in more detail. "Nothing about us without us."
Wrap Up	Voted on future meetings ongoing, not meeting on the 11th and meeting monthly once application is sent. 12 hands raised; motion passed. No meeting on 3/11/24 and will meet monthly following application submission.