# Eating Disorder Working Group Agenda – 9/26/22

10:00 -	Working Group Overview:
10:15am	Review of task/charge put forth by legislature:
	Introduction of Members Joining Today – Kelley Klein (DMH), Haley McGowan (DMH), Laurel Omland (DMH), Alexandra Karambelas (DMH), Laura Lyford (DMH), Kim Swartz (VDH), Jen Smith (VCP), Annie Valentine (Higher Ed), Aubrey Carpenter (Higher Ed), Sarah Binshadler (Higher Ed), Erica Gibson (VT Medical Society), Elaina Efird (AND), Tom Wiegel (BCBS), Danielle Bragg (DVHA)
10:15 – 10:20am	<ul> <li>Recap Outlook:         <ul> <li>Meeting #1 (8/29): Introductions and inventory. In addition to introducing the working group and its members, we'd like to keep the main focus today on creating an inventory of what exists for Vermonters and Vermont families struggling with eating disorders, as well as determining what else we need to know in order to make that inventory comprehensive.</li> <li>Meeting #2 (9/26): Wrap up inventory and spend much of the meeting identify and discussing what it reveals about gaps/needs.</li> <li>Meeting #3 (10/24): Work in small groups then reconvene; begin drafting the recommendations to the legislature</li> <li>Meeting #4 (11/28): Reflect on where we've been and finalize the recommendations. Haley and Kelley will draft formalized recommendations and send them back to the group for feedback before final submission in early 2023 (due to legislature by February 1, 2023).</li> <li>Meeting #5 in December: optional, TBD</li> </ul> </li> </ul>
10:20- 10:30	a. Eating disorder workgroup page on DMH website is up. b. Spreadsheet of programs was shared last week. c. 4 buckets: i. Education: UVM Learner College of Medicine sent a document to search a curriculum for key words. Disordered eating and other related eating. Erica Gibson will forward this document to the group. Pediatric residency training spend time in the eating disorder consult clinic. Nutritional deficiency pathway training is available to pediatric residents and child psychiatry fellows. Kelley and Haley can reach out to family medicine. Psychiatry program has didactics in PGY1 and PGY2 for assessment, management, and pharmacotherapy. ii. Providers (therapists/physicians) iii. Programs iv. Navigation

## 10:30 – 10:50am

## Hear from New Members and Follow up on action items by category:

#### Education:

- o Dietetics and public health majors: needs more exploring
- o Looking into courses to see where more training can be built in.
- Reaching out to leadership of UVM training programs: RN, NP, RD, SW, Health sciences tracks.
- Eating disorder support group: present on campus. Much effort into creating groups in the past, but then not heavily utilized. Many facilitators feel they need more training.
  - https://www.nationaleatingdisorders.org/learn/help/coaches-trainers
- Clinical psychology program with potential for specialized doctoral level training in eating disorders. Impasse between hospital and training program around requirement that student practicums be paid positions/rotations. Newly accredited internship program.
- Many trained people end up leaving VT. How do we get people interested in doing this work?
- Need training for counseling teams for people returning to school/home communities from treatment programs.
- Different philosophies between athletic coaches about when students are not healthy enough to participate in athletics; lots of opportunity for training here.
- Intersection with ASD.

#### Providers:

- Update given by Danielle Bragg:
  - Suellen Bottiggi, who is the Director of Member and Provider Services at DVHA shared
    that at this time there is no way for VT Medicaid to identify a provider who treats
    eating disorders specifically. Identification of providers is based on the license or
    board certifications rather than specialized interest or training. We do have the
    ability to find provider types on our provider look up
    <a href="http://www.vtmedicaid.com/#/providerLookup">http://www.vtmedicaid.com/#/providerLookup</a>
  - Example: registered dieticians we have 184 enrolled (this information is updated daily). We also can look at licensed providers in the state of Vermont through the OPR portal (The roster of registered dieticians is attached above).
  - Also, we had discussed telehealth in regards to out of state providers. Here is some information regarding telehealth: Telehealth, Out-of-State & Expired License Registration (vermont.gov) On May 9, 2022, ACT 107, which enacts permanent telehealth registration and licensing in Vermont was signed into law. This law states "Interim Telehealth Registrations are available from April 1, 2022, through June 30, 2023. These Interim Telehealth Registrations expire on June 30, 2023. A health care professional, who is licensed in good standing in another state and wishes to provide healthcare in Vermont via telehealth after June 30, 2023, will be required to obtain a Telehealth Registration or Telehealth License". Someone may say they're experience/comfortable, but perhaps only in their approach and there could be multiple approaches depending on the individual.
- o Nutrition: Update given by Elaina Efird.
  - There are very few nutritionists who work with eating disorders. Training for nutritionists in this particular specialty is out of state. Cost is often prohibitive to getting certification. The most skilled providers in VT may be RD's.
  - http://www.iaedp.com/certification-overview/

### Programs:

- Nutritional Deficiency Pathway at UVVMC (medical admission for nutritional deficiency in setting of eating disorder). Most patients require inpatient or residential placement following stabilization; some go home to await placement, some with prolonged hospital admissions despite being medically stabilized.
- Navigation (no action items yet)

Commented [KK1]: Who is doing this exploring?

Commented [KK21: Is this us?

**Commented [KK3]:** What was the impasse? I remember something about payment?

10:50 -	
11:10am	1. Continue "inventory" discussion
	2. What information is needed to give a full inventory either in VT or accessible to Vermonters?
	3. What other questions/goals arise for this workgroup? For example, what levels of care can/should VT support, and should we be discussing regional resources?
	<ul> <li>When waitlists become long at some programs, they will restrict access to their state residents.</li> </ul>
	- Working with Medicaid to do single case agreements and contracts, but many programs are
	reluctant when it's possible/likely that VT will send notably few patients in a year's time.  - MEDA: <a href="https://www.eatingdisorderhope.com/information/help-overcome-eating-">https://www.eatingdisorderhope.com/information/help-overcome-eating-</a>
	disorders/meda#:~:text=The%20Multi-
	Service%20Eating%20Disorders%20Association%20%28MEDA%29%20is%20a,resource%20for %20clinicians%2C%20educators%2C%20and%20the%20general%20public.
	- WithinHealth (Eating disorder telehealth treatment) only just started serving VT in July; no
	data or anecdotal experience yet, but should be explored further.
11:10 -	Identify and assign action items for next meeting
11:15am	<ul> <li>Review spreadsheet and send back additions or any corrections.</li> </ul>
	<ul> <li>Capture/add to spreadsheet the educational opportunities discussed thus far.</li> </ul>
	<ul> <li>Education for families and youth/health education for families and schools.</li> </ul>
	After reviewing what Vermont has, start thinking about ideal state – if you were to  "drawn his " what would the system include?"
	"dream big," what would the system include?  • Would still like to enlist more participation from those with lived experience.
	• Would still like to endst more participation from those with lived experience.
11:15 -	Public Comment (none present)
11:30am	
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