MH Integration Council

July 28, 2021

WorkGroups – these may change/be adjusted as needed Four workgroups/year

Year 1							
Workgroup	Facilitator(s)	Members	Areas of Focus (some ideas, not prescriptive)				
Integration of Levels of	Julie Parker, Blueprint for	VDH	1) Inventory of integration efforts				
Care – Primary Care	Health Sam Sweet, DMH MH Director	VAMHAR Bi-State Vt Psych Survivors Rep FQHC VDH-ADAP VCP	2) What's working?				
Integration of Levels of Care – Pediatric Care	Laurel Omland, Director, DMH Child, Adolescent & Family Unit Dr. David Rettew, DMH CAFU Child Psychiatrist	VT Fed Families Rep AOE Health Care Advocate NAMI Rep Amer Acad of Peds BCBS VAHHS VCP	Children's ER waits				
Integration of Funding & Alignment of Performance Measures Break into subgroups.	Ena Backus, Director HC Reform Nicole DiStasio, DMH	DVHA DCF DAIL DFR GMCB VAHHS – add member to peds as well	 a. Mental Health metrics in ACO b. Ensure equitable funding for any health care component (same coverage/cost-sharing, etc. for anything medically nec) c. Equitable incentives for services delivered – provider reimbursement parity, etc. d. How does reform ensure and incentivize integrated care? 				

Integration of	Alison Krompf, DMH	OneCare MH Care Ombudsman VCP DOC	a. Effect of health equity and integration lenses on workforce
Workforce Development Training and ed Equity issues in provider reimbursement -ties back to funding	Deputy Commissioner	UVM VCP VMS VAHHS Bi-State VT Psychiatric Survivors Rep	 b. Holistic health in university (e.g., nursing, MD, SW/therapist) c. Holistic health in Con't Ed d. Resilient workplaces – organizational structure and culture that are trauma-informed, address issues of burn-out, toxic workplaces, etc. e. Reimbursement equity
Year 2			
Workgroup	Facilitator(s)	Members	Areas of Focus
Integration of Levels of Care - Specialty Care			a. Emergency careb. Orthopedicsc. Cardiac
Integration of Levels of Care – Prevention & Wellness, Health Equity & Implicit Bias			 a. How are these access points seen and developed as integrated components of mind/body health? b. Should every "prevention" program be envisioned and promoted (public health education aspects) within this framework? c. Ensure access to same care continuum whether entry from primary care or MH care services, not differentiated programs? d. provider stigma against patients e. patient/client stigma against professionals f. payment inequities across professions
Integration of Communication and Data Sharing			 a. Electronic Health Records – What are the issues that make it important (for care), but also an obstacle (diagnostic misconception)? How to overcome? Ties in with the Health Equity Commission, and provider training on implicit bias. It could be that EHR questions are a subpart of the larger issue regarding health discrimination; perhaps "health equity" would be a work group that could be identifying how this issue cuts across multiple areas as an obstacle to integration? b. Legal barriers

Integration of Education		
of Providers		