MEETING HIGHLIGHTS
Mental Health/Primary Care Integration Proto-WorkGroup*
Thursday, May 10, 2012

Attendees: Jurgen Korbanka, Randy Bates, Kevin Eastman, Lisa Nichols, John Grima, Janida Emerson, Adam Trupp, Pat Fleming, Rick Hendy, Brent Kelsey, Doug Thomas, Judi Hilman

Background on this Group
Judi & John each gave background from 2 different angles on how this unique collaboration came about.

- In Judi’s narrative the integration team comes out of the nascent Medicaid accountable care process—and the desire to not postpone efforts to improve care delivery and payment strategies for expensive or complex populations.
- In John’s, the momentum came from his discussion over many years with Rep. Dean Sanpei, who has been on the lookout for the best approach to a more coordinated and value-based approach to the delivery of mental health services.

Judi shared that the momentum probably comes from several directions—and that this itself is positive.

Issues Needing Clarification (once workgroup is formalized)

- Is our scope statewide? Judi thought yes, eventually. This could be awkward if the ACOs are starting out on Wasatch Front (Adam)
- Are we talking about Medicaid mental health care or private market or both? Most felt both. Pat wants us to take a holistic approach. Judi mentioned that the Affordable Care Act and mental health parity that’s built into it should motivate us to look at both and with an eye on the coming changes and intersections between.
- Who else needs to be here? To meet the expectations set forth in HB144? (more below)
- Is this the right workgroup? (John: we don’t want to be set up to fail)
- The carve out needs to be on the table (Adam)
- possible conflicts of interest need to be on the table, too (Lisa)

Who Needs to be Here (we brainstormed member beyond the list handed out/in DropBox)

- this work group needs to be as inclusive as possible (Brent)
- Meetings should be open and transparent. To this end, would help to have a government agency leading it or co-leading (the latter was recommended by those present) –Brent
- Need to be able to study and listen to different points of view (John)

Groups to engage:
- groups like NAMI (Judi having lunch tomorrow. Post hoc: they want to join) and PAIMI (Protection and Advocacy for Individuals with Mental Illness, hosted by Disability Law Center) representing people with serious mental illness
- the managed care plans (Adam)
- Dept of Health Bureau of Managed Care, namely Gail Rapp (several)
- Experts and academics (also to pursue grant opportunities. JH to pursue w/Brenda) : BYU faculty Gary Burlingame; Ogden economist V.J. Mathur
- Rural Voices and rural county mental health providers, esp. Kyle of Uintah Basin
- USARA (Utah Support Advocates for Recovery Awareness)
- Clare of HealthInsight (JH)

*workgroup has yet to be formalized. Group will likely be formalized at the Health Reform Task Force Meeting of May 17.
Rep. Sanpei’s Topics to be Addressed by the WorkGroup

1. How are behavioral health services organized by county? What are the demographics of these counties and how do they pertain to the way services are organized today?
2. What are the best models for integrated care delivery? Costs, benefits, measurable outcomes, of each?
3. What is our end goal, including benchmarks and targets along the way? Juergen suggested we support different pathways to achieving the same goal. Judi reminded group that this was axiomatic in the blueprint language that was used to create our content in HB144. To this end, the focus on models makes sense.
4. How are we supporting telemedicine—we should make sure we do. Judi reminded group that this is a prominent feature of the U of U model described by Dr. Kristi Kleinschmit, who could not be here today.

Leadership Structure (recommended)
Attendees nominated a team of co-facilitators representing different sectors who will support Rep. Sanpei, the main facilitator:

- John Grima, Association for Utah Community Health
- Judi Hilman, Utah Health Policy Project (lending staff support)
- Brent Kelsey, Dept of Human Services
- Adam Trupp, Utah Association of Counties (might be able to lend additional staff support)
- Need a point person from Dept of Health Div. of Medicaid

Action or Next Steps
✓ Adam will draft talking points for Rep. S to use Thursday May 17
✓ Judi will draft highlights from this meeting and circulate
✓ Judi will find an example of a charter (like ground rules and guidelines to support the effectiveness of this group)
✓ Judi will lunch with NAMI’s E.D. to recruit (post hoc: Rebecca G will join us & recruit 1-2 individuals)
 ✓ Set up exploratory meeting with the managed care plans (______)
✓ Meetings will be weekly (every other week as full workgroup, off weeks in subcommittees), every Wed. 9:00 AM at Capitol (Rep. S to get a room).

NEXT MEETING: MAY 23 9:00 am at Capitol (Rep. Sanpei to get a room)

Proposed Topics for May 23rd Meeting (Rep. Sanpei to finalize)
- Introductions & Welcome new members or feedback from recruits
- Workgroup formal charge
- Lay of Land: Current Mental Health Delivery Systems and Payment Structures
- Articulating the goal, benchmarks, measures of success
- Workgroup Functioning
  o Sub-Committees needed (+facilitators)
  o Charter draft
  o Drop Box training
Quick related announcement:
NAMI’s open house (“Open Your Mind”) to celebrate their new office is May 17th 3:00-5:00 PM (followed by formal reception 5:00-7:00 PM). Details here.