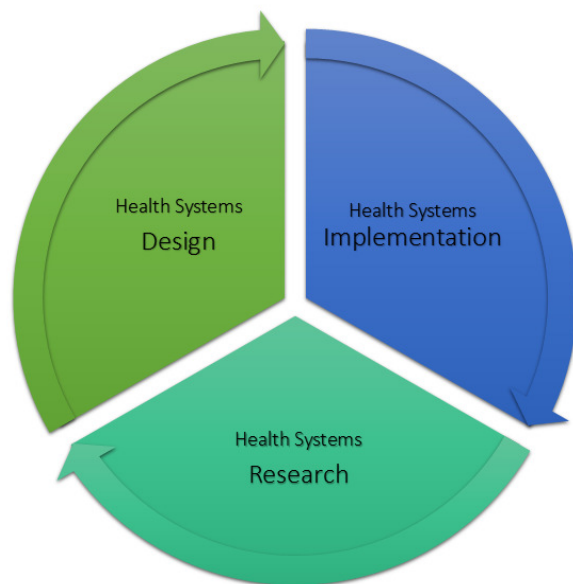


MEAB & Blueprint for Health

June 25, 2018

Discussion & Feedback

- Quick up-dates on Blueprint for Health & DVHA Strategic Direction
- Designing a statewide population health approach for **Screening Brief Intervention & Navigation to Services**
- Early work on chronic pain



- **Patient Centered Medical Homes** strong primary care foundation
- **Community Health Teams** bridge health and social services
- **SASH** for healthy aging-in-place
- **Hub and Spoke** for opioid use disorder treatment
- **Women's Health Initiative** increase pregnancy intention, healthy families

Vermont's All-Payer Goals

- Improved access to primary care
- Reduced deaths from suicide and drug overdose
- Reduced prevalence and morbidity of chronic disease

(Chronic Obstructive Pulmonary Disorder (COPD), Diabetes, Hypertension)



Why? Health Related Social Needs

- Health related social needs such as violence, housing, and food are impacting the healthcare costs ⁽¹⁻³⁾
- Deaths from ‘conditions of despair’ – a combination of suicide, alcohol, opioids and other drugs are on the rise ⁽⁴⁾
- Improving health requires working in collaboration with community services partners

Convergence of Evidence-based Population Health Focused Clinical Interventions Linked to Community Resources

Condition and risk factor specific projects call for similar interventions and embedded staffing necessitating a comprehensive approach in order to achieve the three all-payer goals:

- Zero Suicide
- Screening, Brief Intervention, and Referral to Treatment (SBIRT)
- Accountable Health Communities (ACH) - screening and intervention for health related social risks and navigation to services
- Health Coaching - behavioral health support for chronic disease management and enhanced self-management

Common Approach

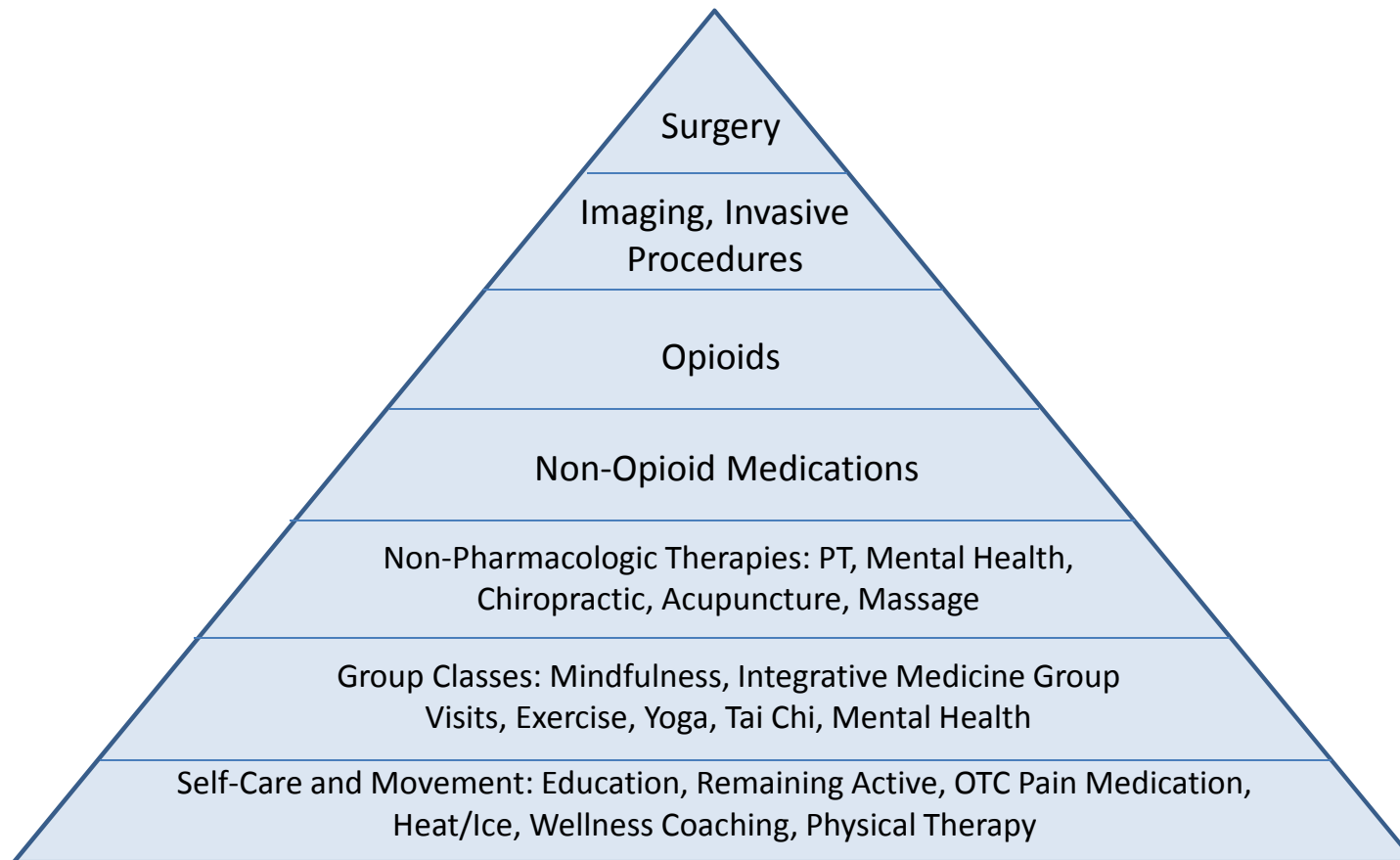
Systematic population screening, brief interventions, appropriate referrals, and assistance navigating access to service using evidence based patient and family centered behavioral health techniques fully integrated within medical practices delivering primary care and acute health services.

- Primary Care Practices & Community Health Teams
- Hospital Emergency Departments

Discussion

- How can we forge strong connections with community partners?
- What are the most effective approaches to elicit engagement for people with risk factors?
- What are we missing?

Pain Management: Comprehensive, Guideline-based, and Interdisciplinary



Discussion

- Our cultural expectation is that a pill or a surgery will “make” us better- How can we support “patient activation?”
- How can we help bridge between traditional medicine and alternative treatments?
- What should a health insurer pay for?
- What are we missing?

Future Discussions:

- The Opioid Epidemic?
- Consult on implementation challenges for chronic pain, SBINS?