

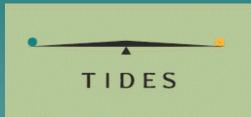
INTEGRATED BEHAVIORAL HEALTH PROJECT

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About Us....

Launched in March 2006 as a project of





to accelerate the integration of behavioral health services into primary care settings

Funded for four years; sunsets 2010

Focusing on California services only

EIBHPE Our goals ...

Increase access to behavioral health services

- Reduce stigma associated with treatment-seeking
- Improve treatment outcomes
- Strengthen the linkage between mental health and primary care

by....

- Identifying, studying and disseminating emerging promising practices
- Establishing a learning community, sponsoring training and designing a resource website
- Advocating for need policy and system changes

DEMONSTRATION PHASE

- Meeting with key stakeholders; visiting clinics; identifying elements, strategies and treatment approaches;
- Developing selection criteria;
- Selecting seven primary care clinics and two clinic consortia;
- Building capacity at demonstration sites to collect and analyze process and outcome data, and to train/mentor other sites;
- Mining data, studying operations and evaluating approaches at these sites;
- Disseminating successful strategies and providing tools to replicate them

CALIFORNIA'S PERFECT FINANCIAL STORM





 Mental Health Services Act (MHSA aka Prop 63)
-From "fail first" to "help first"
-A \$1.8 billion windfall

The California Endowment

CMSP

HRSA

Kaiser



Trying to bridge the gap between the two cultures...

Addressing mutual differences and reservations

Holding training conferences introducing one system to the other

Presenting webcasts: Shasta, San Diego and San Mateo County models of collaboration

Working with policy-makers

But there are miles to go...

-Same day service reimbursement bill (SB 260)

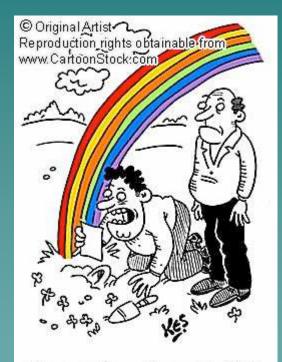


Shot down by Arnold

-No reimbursement for care management, informal consultation

-Reimbursement rules discourage group therapy

But we're getting there...



"It's a note... It says I.O.U. one pot of gold."