**Task Force on**

**Behavioral Health Data Policies and Long Term Stays**

**Meeting Summary**

**Date:** Thursday, November 20, 2014

**Time**: 9:00 a.m. – 11:30 a.m.

**Place:** Daley Conference Room| 2 Boylston Street | Boston

**Meeting Attendees**

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| **Task Force Members** | **Contractors and Guests** |
| * Áron Boros (chair) * Terri Anderson * Matt Collins * Karen Coughlin (absent) * Vic DiGravio * Pat Edraos (absent) * Tim Gens * Michael Goldberg * Greg Harris * Melody Hugo * Ann Manton * Laurie Martinelli * David Matteodo * Mark Pearlmutter | * Beth Waldman, Bailit Health Purchasing * Megan Burns, Bailit Health Purchasing * Marcia Fowler, DMH |

**Meeting Summary**

1. **Welcome and Introductions**

Áron Boros provided welcoming remarks and each Task Force member introduced themself providing some history of their experience on prior Task Forces or Commissions. Áron noted that not all of the voices integral to behavioral health data policies and long term stays were appointed to the Task Force and that he will work hard to ensure those voices are heard. He also urged members of the audience to contribute their ideas during the public commenting periods.

1. **Member Responsibilities and Open Meeting Law**

Beth Waldman reviewed the Task Force member responsibilities, including requirements under the Open Meeting law. She urged the Task Force members to actively participate in meeting discussions and review and respond to draft material. She committed that materials for review will be delivered to the Task Force three business days before each meeting.

1. **Section 230: Our Charge and Focus**

Áron Boros discussed section 230 under Chapter 165 of the Acts of 2014. He met with the legislators that created this Task Force and expressed their concern that policy makers do not have accurate, standardized data and metrics about the behavioral health system to inform their policy making decisions. Áron noted that the legislators are receptive to actionable recommendations that can be used immediately, not additional background or advocacy work, nor continued discussions of topics covered by former or existing bodies.

Áron noted that there are two issues that this Task Force must address:

1. Identifying appropriate data needs to measure the behavioral health system performance and critical gaps in performance, and
2. Policy recommendations to address long term stays in the emergency department, DMH continuing care facilities and acute psychiatric units.

He urged the Task Force to choose priorities, given the limited time and scope, in order to give focused and actionable recommendations.

1. **Brainstorming**

Beth Waldman led the Task Force members through a group brainstorming exercise on what are the characteristics of high performing behavioral health system. Notes on the brainstorming session were documented under separate cover.

1. **Information Gathering**

Megan Burns noted that the legislation tasked this group with identifying what are the industry policies on the collection and evaluation of aggregate data. She and Beth will be drafting a survey that will be administered to certain payers and providers to collect information specific to this Task Force’s charge. Megan recognized that many providers and payers are being asked to submit information to the state through various other initiatives and promised to coordinate efforts to eliminate duplication for the purposes of this Task Force.

1. **Public Comment**

Jingying Yang from the Health Policy Commission requested to comment, but given the time, kindly agreed to wait to the beginning of the December 18th meeting to share her thoughts.

1. **Next Steps**

The next meeting will be held on December 18, from 9:30am – 12:00pm in the Daley Conference Room on the 5th Floor of 2 Boylston Street, Boston, MA.