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THE  
**University of Vermont**  
HEALTH NETWORK

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June 9, 2023

*Delivered electronically*

Sarah Lindberg  
Director of Health Systems Financing  
Green Mountain Care Board  
144 State Street  
Montpelier, Vermont 05602

Dear Sarah:

Thanks for your follow-up call regarding the letter from Vermont Commissioner of the Department of Mental Health Emily Hawes and Dr. Rob Althoff, Chair of the Department of Psychiatry at UVM Health Network, to Chair Foster detailing proposed mental health investments. My understanding is the Board would like us to follow-up regarding the details below, described in their order of March 8, 2023:

- The proposal must include:
  - An analysis showing how the use of funds will reduce the frequency and length of stay for adults, adolescents, and children experiencing a mental health episode who are boarded in EDs; and
  - An analysis showing how the use of funds will increase capacity for mental health services.

We do not have a formal analysis of the impact of our proposed interventions and investments, as that is impossible to produce given available data and the timeline for our required response to the Board. However, we are confident that the proposals are evidence-based and have been shown to reduce the need for inpatient care and will, on their face, increase access to mental health services. In addition, we have data that shows the percentage of total hours of care allotted to psychiatric patients, the average number of psychiatric “boarders” in our emergency departments, and the average time patients are boarding. These data can be used as a baseline for monitoring the impact of our proposed interventions going forward. It will be impossible to establish causation, as this will not be a controlled experiment, but we should be able to detect trends in the outcomes of interest and establish some association with our interventions.

Specific examples of the evidence base for our proposals are provided below.

- **Mental health integration in primary care:** *Kyanko KA, A Curry L, E Keene D, Sutherland R, Naik K, Busch SH. Does Primary Care Fill the Gap in Access to Specialty Mental Health Care? A Mixed Methods Study. J Gen Intern Med. 2022 May;37(7):1641-1647. doi: 10.1007/s11606-021-07260-z. Epub 2022 Jan 6. PMID: 34993864; PMCID: PMC8734538.* This study found that outcomes for patients receiving mental health care from primary care practitioners were not as good as those

for patients seeing specialists, but “Primary care is partially filling the gap for mental health treatment when specialty care is not available. Patient experiences reinforce the need for screening and follow-up in primary care, clinician training, and referral to a trusted specialty consultant when needed.” Our plans contemplate all of these program elements.

- **Suicide prevention:** Mann JJ, Michel CA, Auerbach RP. *Improving Suicide Prevention Through Evidence-Based Strategies: A Systematic Review. Am J Psychiatry.* 2021 Jul;178(7):611-624. doi: 10.1176/appi.ajp.2020.20060864. Epub 2021 Feb 18. PMID: 33596680; PMCID: PMC9092896. This systematic review documents the positive impact of various suicide prevention approaches.
- **Esketamine:** McIntyre RS, Rosenblat JD, Nemeroff CB, Sanacora G, Murrough JW, Berk M, Brietzke E, Dodd S, Gorwood P, Ho R, Iosifescu DV, Lopez Jaramillo C, Kasper S, Kratiuk K, Lee JG, Lee Y, Lui LMW, Mansur RB, Papakostas GI, Subramaniapillai M, Thase M, Vieta E, Young AH, Zarate CA Jr, Stahl S. *Synthesizing the Evidence for Ketamine and Esketamine in Treatment-Resistant Depression: An International Expert Opinion on the Available Evidence and Implementation. Am J Psychiatry.* 2021 May 1;178(5):383-399. doi: 10.1176/appi.ajp.2020.20081251. Epub 2021 Mar 17. PMID: 33726522; PMCID: PMC9635017. This study found mixed results from ketamine and esketamine treatment, but found that it was most effective when provided at a facility where practitioners were well-trained and followed strict protocols for the treatment, which is our plan.
- **Mental health urgent care:** Both the federal Substance Abuse and Mental Health Services Administration (SAMHSA) and the National Association of State Mental Health Program Directors (NASMHPD) cite MHUC as an effective intervention in reducing hospitalizations and meeting patient needs. The Psychiatric Urgent Care for Kids model employed in Bennington in 2020 resulted in a 33% reduction in children and youth presenting at the emergency department for mental health crisis support. In addition, this study found that “Peer-staffed crisis respite services resulted in lowered rates of Medicaid-funded hospitalizations and health expenditures for participants compared with a comparison group. The findings suggest that peer-staffed crisis respites can achieve system-level impacts.”: Bouchery EE, Barna M, Babalola E, Friend D, Brown JD, Blyler C, Ireys HT. *The Effectiveness of a Peer-Staffed Crisis Respite Program as an Alternative to Hospitalization. Psychiatr Serv.* 2018 Oct 1;69(10):1069-1074. doi: 10.1176/appi.ps.201700451. Epub 2018 Aug 3. PMID: 30071793.
- **Transcranial magnetic stimulation:** O'Reardon JP, Solvason HB, Janicak PG, Sampson S, Isenberg KE, Nahas Z, McDonald WM, Avery D, Fitzgerald PB, Loo C, Demitrack MA, George MS, Sackeim HA. *Efficacy and safety of transcranial magnetic stimulation in the acute treatment of major depression: a multisite randomized controlled trial. Biol Psychiatry.* 2007 Dec 1;62(11):1208-16. doi: 10.1016/j.biopsych.2007.01.018. Epub 2007 Jun 14. PMID: 17573044. This RCT showed TMS to be an effective treatment for Major Depressive Disorder.
- **Eating disorder and transgender clinics for youth:** Lapinski J, Covas T, Perkins JM, Russell K, Adkins D, Coffigny MC, Hull S. *Best Practices in Transgender Health: A Clinician's Guide. Prim Care.* 2018 Dec;45(4):687-703. doi: 10.1016/j.pop.2018.07.007. Epub 2018 Oct 5. PMID: 30401350. This study documents the positive effects of well-trained clinicians and high-quality care on transgender youth.

I hope this evidence is sufficient to meet the Board's request for additional supporting information. We look forward to working with you to provide an analysis of the actual impact of our investments over time.

Sincerely,

A handwritten signature in cursive script that reads "Anya Rader Wallack". The signature is written in black ink and is positioned below the word "Sincerely,".

Anya Rader Wallack, PhD  
Senior Vice President, Strategic Communications