

2014 -- H 8189

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LC005673
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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2014

H O U S E R E S O L U T I O N

**RESPECTFULLY REQUESTING THAT THE RHODE ISLAND DEPARTMENT OF
HEALTH PRESENT A PLAN FOR AN INTEGRATED PRIMARY CARE AND
BEHAVIORAL HEALTH AND HEALTH PROMOTION PILOT PROGRAM**

Introduced By: Representatives Bennett, Canario, Hull, Giarrusso, and Ferri

Date Introduced: May 13, 2014

Referred To: House read and passed

1 WHEREAS, Over the past two decades, Rhode Island has made strides in increasing
2 access to healthcare for medical conditions. The Ocean State is recognized nationwide as a leader
3 for its medical healthcare system, especially for children; and

4 WHEREAS, Like many other states, Rhode Island confronts challenges when it comes to
5 ensuring that everyone who needs help for mental health and substance use disorders has access
6 to behavioral health services. According to the National Alliance on Mental Illness (NAMI),
7 behavioral health services fail to reach as many as 60 percent of those individuals in need. The
8 costs associated with this gap are substantial and affect the public at large, as well; and

9 WHEREAS, Rhode Island, with no local health departments and limited community
10 advocacy for behavioral and environmental programs, and with a population of which 20 to 25
11 percent have no regular source of health care, is confronted by additional challenges in providing
12 integrated and comprehensive primary care so as to best improve population health outcomes for
13 all; and

14 WHEREAS, Recognizing the need to strengthen the state's healthcare system to assure
15 that all Rhode Islanders lead healthy, fulfilling lives, the General Assembly in 2013 passed S-834
16 and H-6288, legislation that established the Special Joint Commission to Study the Integration of
17 Primary Care and Behavioral Health in Rhode Island. The commission's purpose was to "make a
18 comprehensive study of the current status of primary care and behavioral health in Rhode Island;
19 of the available research, data and analyses of the impact of primary care and behavioral health

1 service availability and delivery system architecture on population outcomes; and of the
2 advisability of creating a Primary Care Trust or other mechanism to fund and otherwise support a
3 comprehensive integrated primary care and behavioral health system for all Rhode Islanders";
4 and

5 WHEREAS, The legislators, medical and behavioral healthcare providers and
6 practitioners, and insurers who served on the Joint Commission heard expert testimony and
7 reviewed best practices nationally that pointed to the benefits associated with an integrated
8 approach to primary care and behavioral health, and with a primary care delivery system
9 configured to care for the whole population in its service area. The commission members agreed
10 that there is untapped potential in Rhode Island to explore how integrating behavioral health and
11 primary care might improve population-based health outcomes, and recommended that a robust
12 legislative pilot for an integrated, multi-disciplinary primary care, behavioral care and
13 neighborhood-based health promotion and delivery model be created; and

14 WHEREAS, It is critical that a plan for a successful approach to integrated care include
15 the contributions of the key stakeholders that would be involved in implementing and supporting
16 a changed system of healthcare delivery and payment in the state; now, therefore be it

17 RESOLVED, That this House of Representatives of the State of Rhode Island and
18 Providence Plantations hereby respectfully requests that the Department of Health works with key
19 stakeholders in the state to develop a plan for an integrated primary care, behavioral care, and
20 health promotion pilot program at one or more geographic locations; and be it further

21 RESOLVED, That this House hereby respectfully requests that the proposed plan reflects
22 data produced by and for the Health Care Planning and Accountability Advisory Council, to
23 identify the state's existing primary and behavioral health care capacities and to target unmet
24 needs regarding all forms of primary and behavioral health care population outcomes. The plan
25 should be consistent with the Joint Commission's recommendation that it take place in a specific
26 geographic location, feature a payment approach that emphasizes value as opposed to volume to
27 assess the impact of interventions aimed at population-based health outcomes, and be of a scale to
28 generate sufficient data and other information regarding population outcomes and other impacts
29 that can support policy decisions; and be it further

30 RESOLVED, That this House hereby respectfully requests that the Department of Health
31 present a written plan for a pilot program to the General Assembly on or before November 1,
32 2014; and be it further

33 RESOLVED, That this House hereby respectfully requests that the Department of Health
34 present a fiscal impact statement for a pilot program to the General Assembly within (60) days

1 after passage of this resolution; and be it further

2 RESOLVED, That the Secretary of State be and hereby is authorized and directed to

3 transmit duly certified copies of this resolution to the Director of the Department of Health and

4 the Secretary of the Executive Office of Health and Human Services.

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