

Massachusetts Special Legislative Commission on Postpartum Depression (PPD)
Wednesday, May 1, 2013, 5:30-7:30 PM
House Members' Lounge, State House, Boston

Minutes

Commissioners present: Representative Ellen Story (Chair); Karen Crowley; Karin Downs; Rep. Kimberly Ferguson; Elizabeth Fluet; Liz Friedman; Mary Elizabeth Gamache; Dr. Janice Goodman; Dr. Gordon Harper; Dr. Julie Johnston; Peggy Kaufman; Dr. Monica Le; Dr. Claire Levesque; Neal Michaels; Rep. Denise Provost; Lisa Waxman; Acting Commissioner Thomas Weber; Dr. Michael Yogman.

Commissioners absent: Sen. Thomas McGee (Chair); Dr. Lee Cohen; Sen. Jennifer Flanagan; Kerry LaBounty; Mary McKendry; Dr. Tiffany Moore Simas; Sen. Richard Moore; Rep. James O'Day; Sen. Richard Ross; Rep. Tom Sannicandro; Dr. Alison Schonwald; Nancy Schwartz; Dr. Jayne Singer; Dr. Joshua Sparrow; Eileen Terlaga.

Subcommittee members present: Beth Buxton; Dr. Claudia Gold; Margaret Hannah.

Special guests present: Dr. John Straus, Director of Special Projects, Mass. Behavioral Health Partnership.

Staff members present: Jessie Colbert, aide to Rep. Story; Taylor Parnham, intern to Rep. Story.

Members of the public and other state employees were also present.

1. Welcome; approval of minutes

Rep. Ellen Story welcomed Commission members and other participants. The Commission approved the minutes from the January meeting.

2. Revisiting Commission goals; discussion to determine next steps

Rep. Story began a discussion to determine the Commission's next steps. She reminded Commission members that our ultimate goal remains the same as it was when she filed the PPD legislation: universal screening, paid for by insurers, followed by treatment for suffering women.

However, because she and Commission members are very aware that screening is not effective on its own (without training, public awareness, referral resources, and help for moms making the connection to treatment), we have focused on addressing all of those issues, including through the subcommittees.

But it is difficult to move forward in all of these areas without any state funding for Commission initiatives, so we have tried to determine helpful next steps. Commission members felt developing a map of PPD services across the state would help with this process, and staff developed this, but it was still challenging for the Commission to narrow its focus.

Because there is strong movement in the pediatric community right now towards PPD screening, Rep. Story suggested supporting this effort in some way might be a good next step for the Commission. Among other developments, MCAAP (the Mass. Chapter of the American Academy of Pediatrics) supports screening; MassHealth is in the early stages of developing a workgroup to address the many issues related to postpartum depression screening and treatment; and MCPAP (the Mass. Child

Psychiatry Access Project), a consultant service on behavioral health issues for pediatricians, has expressed a willingness to expand their services to provide consultation and referral information on PPD.

Dr. John Straus, the Director of MCPAP and a special guest at the meeting, discussed this possibility, as well as the other pieces that would need to be in place for it to be effective.

Dr. Laura Miller of Brigham and Women's Hospital also shared her experience developing and implementing a PPD identification and treatment program in Illinois. Her program had a phone consultation service like MCPAP, and also involved extensive training of pediatricians and other providers, community education, and protocols for screening and follow-up.

Liz Friedman of MotherWoman shared how her organization has put these various components into place in Western Mass. communities, and their plans for expansion.

Members further discussed these pieces and others, including the importance of engaging OB/GYNs as well as pediatricians; developing broad resource lists (not just psychiatrists); engaging the business community; working with Early Intervention; and training in didactic treatment (working with moms and babies together).

The group also discussed training of providers (those screening and treating) extensively. This is an important need for any expansion of pediatric PPD screening, and there is strong capacity among Commissioners, subcommittee members and their organizations for training (which can take various forms, members noted, including online, at grand rounds, etc.). The Commission voted in favor of working to provide PPD training as its next step.

To begin working on this, Rep. Story and others will hold a follow-up meeting with MCPAP about their capacity and how the Commission could support it. Dr. Claire Levesque of Tufts Health Plan also volunteered to follow up with Mass. Medical Society about their contracting to provide PPD training as an option for CMEs (Continuing Medical Education).

3. Reports on new and ongoing initiatives

Rep. Story reported that she was able to secure \$200,000 in the House budget for a pilot program that would allow four community health centers across the state to hire a part-time community health worker to help doctors who screen moms for PPD connect women who screen positive with helpful treatment services. Members discussed the project.

4. Adjournment

The meeting was adjourned.