Take Home Points
Thank Christin Veasley and Dr. Ryan

Your setup for the meeting set the tone
The time to act is now

Implement in the classroom
Implement in the clinic
Implement in the community
To RCT, or not to RCT

Answer: YES
Evidence

Dr. Elton

- Enlightening from the payer’s perspective, with claims data

Chou

- By characterizing benefit and taking into consideration risks, thus justifying non-pharm treatment

Herman

- JUTS DO IT! If payers, CMS, etc., are dictating revenue neutral, then it speaks that we need to characterize downstream cost savings
Emerging models: Ready for Prime Time?

Shaw: stepped care
Fritz: first contact matters
Edwards: care for highly complex patients
DeBar: integrative care “harness placebo”
Heapy: technology supported care
Education

We’re behind

There are models

- Simulation
- Classroom to practice environment
- Community versus medical environment
Data needed
- Literature
- Analytics

Threshold for change
- Revenue neutral approaches

Role of patient
- Access
  - “We’re not going to take it anymore”