Robert Wood Johnson Foundation

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Program Results Report
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Depression in Primary Care: Linking Clinical and System Strategies

An RWJF national program

SUMMARY

Depression in Primary Care: Linking Clinical and System Strategies—a $12 million national program funded by the Robert Wood Johnson Foundation (RWJF) from 2000 to 2007—aimed to spur health care organizations to use a chronic care model to recognize and treat depression, and to develop financial and other incentives to support the use of the model.

The program responded to a 1998 RWJF-funded study suggesting that most health care practices face financial and organizational barriers to screening and treating patients for depression. For example, health plans often do not pay primary care physicians to treat depression.

Key Results

- Numerous primary care practices adopted the chronic care model for treating depression. It included screening for depression; providing resources to providers and patients; and creating chronic illness registries to track their progress.
- The majority of sites were less successful in sustaining new payment methods to pay for such care, but some elements of economic models were incorporated or adapted into the operations of several of the sites, and were incorporated into other ongoing collaborative initiatives (e.g., Project DIAMOND in Minnesota).
- Researchers published peer-reviewed articles making the business case for treating depression in primary care settings. For example, an article by a Harvard Medical School researcher documented the workplace costs of untreated depression among employees.
- *Depression in Primary Care* helped close the divide between physical and behavioral health among clinicians, health plans, employers and researchers, according to Harold Pincus, M.D., program director, and Connie Pechura, former senior RWJF program officer.

- The lessons learned from the *Depression in Primary Care* program continue to provide researchers and policy-makers with important information that can be used to inform changes in policy and practice as it relates to better integration of behavioral health and primary care.

  "The program's major message was to eliminate duality of thinking between mental and general health, and between clinical and economic systems," said Pincus. "The program made major advances in providing an evidence base for doing that at a time when many states were debating parity between mental and physical health," Pechura concurred.

Program Management

The Department of Psychiatry at the University of Pittsburgh hosted the national program office of *Depression in Primary Care*, directed by Harold Pincus, M.D. Jeanie Knox-Houtsinger served as deputy director.

Funding

The RWJF Board of Trustees authorized the program for up to $12 million in January 2000.

CONTEXT

If people seek treatment for depression, they usually do so in primary care settings. Although clinician researchers have developed effective models for recognizing and treating depression in such settings, depression still goes largely unrecognized and untreated by primary care providers.

In 1998, RWJF funded a study suggesting that most primary care practices face barriers to treating patients with depression (see Program Results). Those barriers include:

- *Inadequate training.* Education and training in detecting and treating depression often fails to help physicians translate new knowledge into action. The fast pace of health care practices also means that providers devote less attention to symptoms of depression.
- *Organizational structure.* Managed care plans often contract with outside providers for mental health services. Such "carve-outs" often prohibit primary care physicians from billing for treating mental health problems, and inhibit coordinated care for mental and physical conditions.
- *Access.* Some 72 percent of primary care physicians say they cannot always (or almost always) obtain high-quality outpatient mental health services for their patients.

- *Lack of data.* Health plans and employers lack information on the costs and benefits of treating depression in primary care.

According to Pincus, "People have had a naïve thought that we needed to increase screening for depression. The problem is that the studies show that people would be screened for depression and then their chart was stamped with a big D, but that wouldn't change what doctors did or whether people got help for their depression. Ultimately doctors or other providers need to be paid what is necessary to make sure people get treatment. Primary care providers and managed behavioral health organizations need incentives to work together."

RWJF's Interest in This Area

In the late 1990s, RWJF made improving treatment of chronic illnesses such as depression, asthma and diabetes a priority. RWJF's program *Improving Chronic Illness Care* had developed a chronic care model outlining effective care for such illnesses. For example, the model calls for assigning a care manager to provide follow-up assistance to patients, and for creating a disease registry that tracks their progress.

Based on the 1998 RWJF study and consultation with Pincus, deputy medical director of the American Psychiatric Association and a former RWJF Clinical Scholar, RWJF created *Depression in Primary Care.* RWJF hoped the program would serve as a model for treating chronic illnesses, according to Pechura, former RWJF senior program officer.

THE PROGRAM

Depression in Primary Care: Linking Clinical and System Strategies, a $12 million national program that ran from 2000 to 2007, aimed to spur primary care practices to use a chronic care model to recognize and treat depression, and to develop financial and organizational incentives that encourage physicians to use the model. The program had three key elements:

Realigning Incentives

Health practices, health plans, and purchasers such as employers, academic institutions and others formed partnerships to test the feasibility and effectiveness of applying the chronic care model to depression care. The projects also combined the clinical components of effective treatment for depression with economic incentives and organizational systems to sustain that treatment.

The national program office issued a call for proposals in 2003, and awarded one-year planning grants to the lead organizations of nine partnerships. The office then made two-year demonstration grants to eight of the nine partnerships. (Cornell University withdrew from the initiative because of difficulties in obtaining a Medicare waiver for the project.)

The chosen sites were ethnically, geographically and economically diverse. For example, some worked with Medicaid populations, while others primarily served privately insured populations.

What the Projects Did

The incentives sites typically took the following steps. They:

- Encouraged physicians to use a tool such as the Patient Health Questionnaire-9 to screen patients for depression, especially those at high risk for depression, such as patients with diabetes.
- Chose evidence-based guidelines for treating depression, and created training manuals for use by primary care providers in implementing the guidelines.
- Hired care managers, or relied on existing employees, who provided care management services in a variety of formats (e.g., telephone calls, face-to-face meetings, e-mail) to help patients and families better understand and manage their illness. Care managers also coordinated care between primary care providers and mental health specialists.
- Developed mechanisms such as a disease registry—typically updated by care managers—to track patients with depression, to ensure that they received the care they needed.
- Provided booklets, videos and peer support groups, and suggested community resources, to help patients become more involved in their own care. Some sites developed their own culturally appropriate materials and resources.
- Developed approaches to overcome economic disincentives for implementing the clinical model among primary care and behavioral health clinical groups, health plans (medical-surgical and behavioral) as well as purchasers.
- Tested specific mechanisms for enhancing reimbursement for elements of the chronic care model (e.g., paying for depression assessment, developing and using codes for paying for care management, requiring a quid pro quo of trading primary care services for mental health services).
- Worked with health plans and other payers to analyze the costs and benefits of improving depression care, and to develop strategies for sustaining reimbursement for such care.

Making the Business Case

This component supported research projects that aimed to document the clinical value and economic payoff of improving depression care for patients, health practices, health plans and employers. The national program office issued calls for proposals in April 2002 and September 2003, and funded 26 research projects.

What the Projects Did

Twelve researchers evaluated models combining clinical and economic strategies for treating depression in primary care settings, or assessed barriers to such care and devised strategies for overcoming them. For example, topics included:

- Finding and treating depressed students through school-based health centers.
- Creating employer demand for improved depression care.
- Developing payment methods to reward physicians for high-quality depression care.

Fourteen researchers evaluated the impact of policy changes designed to encourage the screening and treating of patients for depression in primary care settings. For example, the researchers:

- Assessed the validity of systems that measure the quality of depression care.
- Identified tactics by health plans that improved outcomes of depression care.
- Demonstrated the effect on employee productivity of a program integrating primary care for employees with assistance with depression.

Developing Leadership

This component aimed to develop the ability of talented early-career primary care physicians to provide leadership in treating depression as a chronic illness. These physicians worked with senior mentors to pursue research projects that advanced the program's goals. The national program office issued a call for proposals in 2002, and funded four leaders. RWJF opted to redirect resources originally allocated for a second solicitation to engage leaders. Instead, the funds supported additional data collection by the Incentives sites that was needed for the external evaluation.

What the Leaders Did

The funded leaders took courses to gain skills in research and evaluation, and pursued research projects with their mentors. Three out of four of the leaders received National Institutes of Health career development awards that have allowed them to continue their work in this area.

See Appendix 1 for organizations and individuals funded under all three components.

Program Management

The Department of Psychiatry at the University of Pittsburgh hosted the national program office. Harold A. Pincus, M.D., directed the office, and Jeanie Knox-Houtsinger served as deputy director.

The national program office created a website on the program that included resources for treating depression in primary care. It is no longer independently active, but much of the resource information was relevant to another RWJF program targeting integration of behavioral health and primary care led by the Louisiana Public Health Institute and is available at their website.

The national program office also analyzed findings from the 1987 National Medical Expenditure Survey and the 1996 Medical Expenditure Panel Survey, to highlight the clinical and economic challenges of treating depression compared with other diseases. In addition, much of the work was also disseminated via the literature (see below).

The national program office also served in a national leadership role to impact policies in this area as well as encourage other groups to initiate programs based on the strategies piloted in the program through such activities as publishing in major journals such as the *New England Journal of Medicine* and working with the Hogg Foundation, National Business Group on Health and National Committee on Quality Assurance.

National program office staff—along with a clinical expert and an economic expert assigned to each site, a quality improvement consultant and the national advisory committee—provided technical assistance to the sites. The assistance included monthly teleconferences, quarterly reports, topic-specific conference calls, workshops, an e-mail discussion list, annual meetings and site visits. The consultants also helped grantees develop and implement evaluation plans, disseminate information on their work and collaborate with RWJF and other programs.

Separate grants funded the clinical and economic teams (ID# 039960 and 040861). See Appendix 2 for members of the national advisory committee and those two technical assistance teams.

Evaluation

RWJF originally enlisted researchers at the Johns Hopkins University School of Medicine to conduct an external evaluation of *Depression in Primary Care* (ID# 040688 and 045524). However, the researchers did not complete the evaluation. The Foundation then provided a small supplement to the national program office to collect data from the original evaluators, conduct additional research and write a report on program outcomes.

That report, which was submitted to RWJF, focuses on the clinical and financial models developed and analyzed through the program. Its findings will be added to this Program Results report when they are available.

PROGRAM RESULTS

According to a report to RWJF from the national program office, *Depression in Primary Care* achieved the following results:

Overall Results

- ***Depression in Primary Care* helped close the divide between physical and behavioral health among clinicians, health plans, employers and researchers, according to program director Harold Pincus and Connie Pechura, former senior RWJF program officer.** For example:
  - The National Business Group on Health worked with Program Director Pincus to develop and promote the Employer's Guide to Behavioral Health Services, which highlights depression as a chronic illness, its impact on employee productivity and the need to integrate treatment with primary care.
  - In its 2006 report, *Improving the Quality of Health Care for Mental and Substance Use Conditions*, an Institute of Medicine expert committee, of which Pincus was a member, recommended integrating mental health services with treatment for other medical conditions.
  - NCQA worked with the national program office to incorporate telephone-based follow-up with patients with depression into its HEDIS measures. More than 90 percent of U.S. health plans use the HEDIS measures to assess and improve their quality of care, and many report the resulting information to employers.

    "The program's major message was to eliminate duality of thinking between mental and general health, and between clinical and economic systems," said Pincus. "The program made major advances in providing an evidence base for doing that at a time when many states were debating parity between mental and physical health," Pechura concurred.

Realigning Incentives Results

Overall Results

- **Numerous primary care practices adopted the chronic care model for treating depression, which included screening for depression; providing resources to providers and patients; and creating chronic illness registries to track their progress.** The sites were less successful in sustaining economic systems that support such care.

  Brenda Reiss-Brennan, Project Director of the Intermountain Healthcare site in Salt Lake City, noted: "The sites in the RWJF program all struggled with the economic side of it. The financial barriers to link the clinical and the economics were complex,

and I think they are still complex. The individual sites never got far enough along to make significant changes in the markets to link the clinical and the financial."

However, despite those challenges, project leaders cited changes in the attitudes of health care providers and payers regarding treating depression. For example, according to the final report from the Michigan site, the project catalyzed "discussion—and implementation—of depression disease management in clinical and health system settings across Michigan."

"The terms of discussion have changed from 'Why can't primary care doctors do a good job of treating depression?' to 'How can we change the system to support primary care treatment of depression?' This is a major step forward in our collective understanding about how to improve care," according to the Michigan report.

Key Project Results

- **A mental health integration model developed by Intermountain Health Care** significantly raised depression detection rates without corresponding increases in the cost of health care claims. Intermountain Health Care is a nonprofit system of 22 hospitals and 75 clinics serving Utah and Idaho residents.

  In 1999, Intermountain leaders developed a model for making mental health a key component of primary care. Under the model, mental health clinicians at primary care practices provide patients with immediate care for depression and suggest other resources.

  With RWJF funding, Intermountain extended a pilot of the model at one primary care site to seven other clinics. Intermountain also developed a training manual for clinicians, hired a mental health director and developed a registry to monitor outcomes for patients and the costs of treating them.

  Patients at the clinics reported significant improvements in their satisfaction with their treatment, including the sensitivity of primary care physicians to their emotional and mental health. At the end of the project, the Intermountain Healthcare human resources department, which is responsible for 25,000 employees, identified depression and stress-related conditions as its top employee health issues, and endorsed the model.

  Intermountain is now implementing the model in all its practices, and helping community partners in states around the country adopt the model, including Maine (see below), Mississippi, New Hampshire, Oregon and Utah.

- **MaineHealth trained physicians to use a clinical model for depression care,** created financial incentives to encourage them to treat depression and made the collection of follow-up information a routine part of patient care. Specifically, the organization and its hospitals, primary care physicians and specialists:

- Developed and introduced a clinical model for depression care at 22 primary care practices and one health agency. MaineHealth and its managed behavioral health organization trained clinicians to use the model, which includes the Patient Health Questionnaire-9. MaineHealth also developed an online module to train primary care physicians in using medication to manage depression.
- Paid primary care physicians $200 to $300 to complete the training sessions, and $6 to $10 to screen each patient. Physicians also receive financial rewards for using the questionnaire to monitor patients' response to treatment.
- Added 9,170 patients with depression to a chronic illness registry. Primary care providers received monthly reports on the percentage of their patients with various categories of depression and on needed follow-up care.
- Used performance measures related to depression care to drive some funding for physician organizations.

By 2010, MaineHealth had trained 80 percent of physicians in 50 to 60 affiliated practices in using the clinical model for depression care. MaineHealth is now using the mental health integration model piloted by Intermountain to screen and treat patients for a broader range of mental health issues.

Making the Business Case Results

- **Researchers published peer-reviewed articles making the business case for treating depression in primary care settings, and pointing to barriers to providing such care.** For example:
  - In "Effects of Major Depression on Moment-in-Time Work Performance," in the October 2004 issue of *American Journal of Psychiatry*, Philip Wang, M.D., of Harvard Medical School, reported findings from his study of health and productivity among airline customer service representatives:
    - Major depression is more consistently related to poor work performance than chronic physical conditions such as allergies, arthritis, back pain, headaches, high blood pressure and asthma.
    - Employees who are depressed and come to work lose 2.3 days of productivity per month—a much greater shortfall than from sickness, which leads to a loss of one day per month. The lost productivity costs employers about $300 per month per employee.
    - These results suggest that treating depression might be much more cost-effective for employers than previously thought. An earlier study found that treating depression would yield $1,100 to $1,800 in salary equivalent per employee per year of treatment.

According to that study, "the health plans that invested in the intervention didn't save money, but the businesses saved money," observed National Program Director Pincus. "This project helps show what the real savings might be to businesses."

— The National Committee for Quality Assurance (NCQA) found that programs that reward physicians for screening and treating patients for depression will likely not change provider behavior without changes in the larger health care system. NCQA reviews and accredits managed care plans and measures their quality.

  In interviews with 25 primary care physicians testing a pay-for-performance program, NCQA found that:

  - The physicians responded positively to improving the quality of depression care and measuring the outcomes.
  - However, they perceived pay-for-performance requirements as burdensome and difficult, and did not think financial incentives alone would change their approach to providing depression care.
  - They cited the need to improve the health care infrastructure, such as creating a system for following up with patients with depression.

  "The issue is not whether this is a good set of measures, but that there are so many things you have to change that pay-for-performance alone is not enough," commented Sarah Hudson Scholle, assistant vice president at NCQA. "You can't direct performance measures at primary care physicians and expect them to change when there are a lot of other barriers to care."

Developing Leaders Results

- **The four recipients of leadership grants completed research on treating depression in primary care, and three received funding from the federal government to continue their research.**

  — Daniel P. Eisenman, M.D., clinical instructor at the University of California, Los Angles, studied treatment of depression among evacuees from Hurricane Katrina. He received a career-development award from the Centers for Disease Control and Prevention.

  — Sara Swenson, M.D., assistant clinical professor at the University of California, San Francisco, studied the feasibility, outcomes and acceptability among participants in self-managed groups addressing depression.

  — Laura Richardson, M.D., assistant professor of pediatrics at the University of Washington, conducted a pilot intervention aimed at treating adolescent depression in primary care clinics. She received a career development award from the National Institute of Mental Health.

— Christina Nicolaidis, M.D., an internist at Oregon Health & Sciences University, studied the needs of depressed women with a history of intimate partner violence, and developed an eight-week cognitive behavioral therapy program. She received a career development award from the National Institute of Mental Health.

Communications Results

- **Grantees and the national program office disseminated findings on barriers to treating depression in primary care to national audiences.**

  — Participants published more than 130 articles, made more than 200 presentations and sponsored 33 meetings. Some articles focused on the clinical and economic barriers to treating depression gleaned from the analysis by the national program office of the 1987 National Medical Expenditure Survey and the 1996 Medical Expenditure Panel Survey databases.

  — In January 2006, the journal *Administration Policy and Mental Health* devoted a special issue to the *Depression in Primary Care* program.

See the Bibliography for details.

LESSONS LEARNED

1. **To change medical practice, pursue both demonstration projects and research projects.** The combination of on-the-ground efforts and expert analysis expands the number of people working on a problem, and allows a program to target a wide variety of audiences and increase its impact. (Program Officer/Pechura)

2. **When revamping clinical and financial systems, create databases to track and monitor those changes.** The program found registries tracking patient outcomes and costs essential. (Program Director/Pincus)

3. **Bring in experts to work long-term with grantees on difficult goals, such as changing economic incentives for treating depression in primary care.** The national program office engaged experts to suggest complex changes in clinical and economic systems, about which many participants had little knowledge. Providing the experts over an extended period can help strengthen their relationships with grantees. (Program Director/Pincus, Program Officer/Pechura)

4. **Build depth of leadership into a project so that if one person leaves, the project continues.** When a key leader left a site, getting the project back on track took months. (Program Director/Pincus)

5. **To keep projects funded under a national program on track, set firm requirements and deadlines for site leaders, such as for producing regular reports.** That is particularly important when they are working on a challenge outside their comfort zone, such as changing economic incentives for treating depression. By

setting up reporting requirements, the national program office ensured that participants worked toward their goals. The office staff also found it more effective to call rather than e-mail grantees about such products. (Program Director/Pincus)

6. **Insist on face-to-face encounters with grantees in outside venues such as annual meetings.** Most participants need to get away from their daily work lives to concentrate on projects. Annual meetings spurred site leaders to do significant work, and helped build collaborative relationships among the sites. (Program Director/Pincus)

AFTERWARD

The director and deputy director of *Depression in Primary Care* have assisted other RWJF national programs. For example, they helped incorporate depression care into the Diabetes Initiative, which focused on improving self-management among adults with diabetes, to improve outcomes for both conditions. See Program Results for more information on the Diabetes Initiative.

Leaders of *Depression in Primary Care* program sites and the national program office have also helped other organizations incorporate depression into primary care, including the I-CARE program in North Carolina, Project DIAMOND in Minnesota and programs funded by the Hogg Foundation for Mental Health.

In addition, the national program office staff provided advice on a number of other RWJF-funded initiatives including *Aligning Forces for Quality: The Regional Market Project*, the Louisiana Public Health Institute's Collaborative to Improve Behavioral Healthcare Access, and a project on quality improvement training, among others.

National Program Director Pincus has also participated on a number of Institute of Medicine (IOM) committees related to quality issues and chaired committees focusing on quality for the U.S. Department of Health and Human Services, the National Quality Forum, and the World Health Organization, among others.

Pincus also developed procedures that RWJF now uses to orient new staff for national program offices.

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APPENDIX 1

Program Grantees

(Current as of the time of the grant; provided by the grantee organization; not verified by RWJF.)

Incentives Grants

CareOregon (Portland, Ore.)

ID# 045031, 048038 (March 2002 to September 2005): $649,360

Project Director:
David Labby, M.D.
(503) 416-4100
labbyd@careoregon.org

Colorado Access (Denver, Colo.)

ID# 045030, 048042 (March 2002 to June 2006): $649,533

Project Director:
Marshall Thomas, M.D.
(720) 744-5404
marshall.thomas@coaccess.org

Cornell University, Joan and Sanford I. Weill Medical College (New York, N.Y.)

ID# 045029 (March 2002 to March 2003): $100,000

Project Director:
Barbara Pifel
(212) 821-0959
blp2001@med.cornell.edu

Intermountain Healthcare (Salt Lake City, Utah)

ID# 045025, 048040 (March 2002 to July 2006): $649,966

Project Director:
Brenda Reiss-Brenann
(801) 442-3012
Brenda.Reiss-Brennan@imail.org

MaineHealth (Portland, Maine)

ID# 045024, 048041 (March 2002 to June 2006): $650,000

Project Director:
Neil Korsen, M.D.
(207) 662-6881
KORSEN@mainehealth.org

University of California, San Francisco (San Francisco, Calif.)
ID# 0045023, 048170 (March 2002 to June 2006): $649,979

Project Director:
Mitchell Feldman, M.D.
(415) 476-8587
mfeldman@medicine.ucsf.edu

University of Massachusetts Medical School (Worcester, Mass.)
ID# 045026, 048171 (March 2002 to June 2006): $649,965

Project Director:
Linda Weinreb, M.D.
(508) 856-3225
WeinrebL@ummhc.org

University of Michigan Medical School (Ann Arbor, Mich.)
ID# 045028, 048171 (March 2002 to June 2006): $649,585

Project Director:
Michael S. Klinkman, M.D.
(734) 998-7120 ext. 309
mklinkman@umich.org

State of Vermont Department of Prevention, Assistance, Transition and Health Access (Waterbury, Vt.)
ID# 045027, 048039 (March 2002 to June 2006): $620,000

Project Director:
M. Elizabeth Reardon
(802) 879-5938
lizr@path.state.vt.us

Business Case Grants

Boston University School of Medicine (Boston, Mass.)
ID# 051648 (August 2004 to January 2007): $99,687

Project Director:
Emily A. Feinberg, Sc.D.
(617) 414-1425
emfeinbe@bu.edu

Blue Cross/Blue Shield of Michigan (Detroit, Mich.)

ID# 052125 (October 2004 to June 2006): $99,797

Project Director:
Beth Goldman, M.D.
(313) 225-7500
bgoldman@bcbsm.com

Brandeis University, Heller School for Social Policy and Management (Waltham, Mass.)

ID# 051651 (August 2004 to February 2006): $99,998

Project Director:
Constance M. Horgan, Sc.D.
(781) 736-3916
horgan@brandeis.edu

Duke University Medical Center (Durham, N.C.)

ID# 048440 (April 2003 to September 2004): $95,207

Project Director:
John W. Williams, M.D.
(919) 684-5175
willi007@mc.duke.edu

Emory University, Rollins School of Public Health (Atlanta, Ga.)

ID# 052099 (October 2004 to September 2006): $216,911

Project Director:
Benjamin Druss, M.D.
(402) 712-9602
bdruss@emory.edu

George Washington University Medical Center (Washington, D.C.)

ID# 052091 (October 2004 to December 2006): $213,347

Project Director:
Eric Goplerud
(202) 530-2302
goplerud@gwu.edu

Group Health Cooperative (Seattle, Wash.)
ID# 048125 (May 2003 to August 2004): $99,588

Project Director:
Gregory E. Simon, M.D.
(206) 287-2979
simon.g@ghc.org

Harvard Medical School (Boston, Mass.)
ID# 048123 (April 2003 to March 2006): $299,555

Project Director:
Philip S. Wang, M.D.
(617) 432-3396
wang@hcp.med.harvard.edu

HealthPartners Research Foundation (Minneapolis, Minn.)
ID# 051647 (August 2004 to June 2007): $299,996

Project Director:
Leif I. Solberg, M.D.
(952) 967-5017
leif.i.solberg@healthpartners.org

Intermountain Healthcare (Salt Lake City, Utah)
ID# 051649 (August 2004 to July 2006): $99,881

Project Director:
Brenda Reiss-Brennan
(801) 442-3012
Brenda.Reiss-Brennan@imail.org

Kaiser Foundation Hospitals, Kaiser Foundation Research Institute (Oakland, Calif.)
ID# 051654 (August 2004 to July 2006): $299,999

Project Director:
David H. Smith, Ph.D.
(503) 335-6302
david.h.smith@kpchr.org

Kaiser Foundation Health Plan of Colorado (Denver, Colo.)
ID# 048119 (April 2003 to March 2005): $290,162

Project Director:
Arne Beck, Ph.D.
(303) 636-3120
arne.beck@kp.org

Montefiore Medical Center (Bronx, N,Y.)
ID# 051652 (August 2004 to January 2007): $299,245

Project Director:
Gary J. Kennedy, M.D.
(718) 920-4236
gkennedy@montefiore.org

Mountain Area Health Education Center (Asheville, N.C.)
ID# 048128 (April 2003 to March 2006): $299,945

Project Director:
Suzanne E. Landis, M.D.
(828) 771-3425
suzanne1@mtn.ncahec.org

National Committee for Quality Assurance (Washington, D.C.)
ID# 051650, 055816 (August 2004 to August 2007) $374,915

Project Director:
Sarah Hudson Scholle
(202) 955-1726
scholle@ncqa.org

Philadelphia Research and Education Foundation (Philadelphia, Pa.)
ID# 048465 (April 2003 to January 2006): $299,641

Project Director:
Ira Katz, M.D.

katzi@mail.med.upenn.edu

Rand Corporation (Santa Monica, Calif.)

ID# 048121 (April 2003 to December 2004): $99,557

Project Director:

Lisa S. Meredith, Ph.D.

(310) 393-0411 ext. 7365

seidel@rand.org

University of California, San Francisco, School of Medicine (San Francisco, Calif.)

ID# 048233 (September 2003 to February 2006): $99,999

Project Director:

Mitchell D. Feldman, M.D.

(415) 476-8587

mfeldman@medicine.ucsf.edu

University of Chicago, Pritzker School of Medicine (Chicago, Ill.)

ID# 051780 (August 2004 to June 2007): $99,519

Project Director:

Benjamin W. Van Voorhees, Ph.D.

(773) 702-3835

bvanvoor@medicine.bsd.uchicago.edu

University of Minnesota School of Public Health (Minneapolis, Minn.)

ID# 048122 (April 2003 to June 2007): $99,999

Project Director:

Donna D. McAlpine, Ph.D.

(612) 625-9919

mcalp004@umn.edu

University of New Mexico Health Sciences Center (Albuquerque, N.M.)

ID# 048126 (April 2003 to August 2005): $300,000

Project Director:

Steven N. Adelsheim, M.D.

(505) 272-2223

sadelsheim@salud.unm,edu

University of New Mexico Health Sciences Center (Albuquerque, N.M.)

ID# 048127 (April 2003 to September 2005): $298,508

Project Director:

Howard Waitzkin, M.D.

(505) 272-1317

waitzkin@unm.edu

University of Pennsylvania (Philadelphia, Pa.)

ID# 048124 (April 2003 to January 2006): $299,641

Project Director:

Daniel Polsky, Ph.D.

(215) 573-5752

polsky@mail.med.upenn.edu

University of Rochester Medical Center (Rochester, N.Y.)

ID# 048120 (May 2003 to October 2004): $99,917

Project Director:

Yeates Conwell, M.D.

(585) 275-6739

Yeastes_Conwell@umc.rochester.edu

Wayne State University School of Medicine (Detroit, Mich.)

ID# 051646 (August 2004 to January 2006): $94,708

Project Director:

Lori Lackman-Zeman, Ph.D.

(313) 577-8172

lzeman@med.wayne.edu

Yale University School of Medicine (New Haven, Conn.)

ID# 051653 (August 2004 to April 2007): $99,985

Project Director:

V. Robin Weersing, Ph.D.

(619) 594-8892

rweersin@sciences.sdsu.edu

Leadership Grants

Oregon Health & Science University (Portland, Ore.)

ID# 049268 (September 2003 to October 2005): $99,980

Project Director:

Christina M. Nicolaidis, M.D.

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Realigning Incentives Grantees

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Business Case Grantees

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Benjamin Van Voorhees, University of Chicago (Grant ID# 051780)

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David Smith, Kaiser Permanente (Grant ID# 051564)

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Donna McAlpine, University of Minnesota (Grant ID# 048122)

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Emily Feinberg, Boston University (Grant ID# 051648)

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Gregory Simon, Group Health Cooperative (Grant ID# 048125)

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Howard Waitzkin, University of New Mexico (Grant ID# 048127)

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Ira Katz, University of Pennsylvania (Grant ID# 048465)

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John Williams, Duke University (Grant ID# 048440)

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Lisa Meredith, RAND (Grant ID# 048121)

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Mitchell Feldman, University of California at San Francisco (Grant ID# 048233)

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Philip Wang, Harvard University (Grant ID# 048123)

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Robin Weersing, Yale University (Grant ID# 051653)

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Sarah Hudson Scholle, National Committee on Quality Assurance (Grant ID# 051560)

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Suzanne Landis, Mountain Area Health Education Center (Grant ID# 048128)

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Yeates Conwell, University of Rochester (Grant ID# 048120)

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Leadership Grantees

Christina Nicolaidis, Oregon Health & Sciences University (Grant ID# 049268)

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David Eisenman, University of California at Los Angeles (Grant ID# 049267)

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Laura Richardson, University of Washington (Grant ID# 049269)

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Sara Swenson, University of California at San Francisco (Grant ID# 049270)

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Book Chapters

National Program Staff

Pincus HA. "Alcohol, Drug, and Mental Disorders, Psychosocial Problems, and Behavioral Interventions in Primary Care." In *The Future of Primary Care,* Showstack J, Rothman AA and Hassmiller SB (eds). San Francisco: Jossey-Bass, 2004.

Pincus HA. "Alcohol, Drug and Mental Disorders, Psychosocial Problems and Behavioral Interventions in Primary Care: Drowning in the Mainstream or Left on the Banks." In *The Future of Primary Care,* Showstack J and Anderson-Rothman A (eds). San Francisco: Jossey-Bass, 2003.

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Pincus HA, McQueen LE and Elinson LE. "Subthreshold Mental Disorders: Nosological and Research Recommendations." In *Advancing DSM: Diagnostic Dilemmas,* Phillips KA, First MB and Pincus HA (eds). Washington: American Psychiatric Press, 2003.

Tanielian TL, Pincus HA and Goldman HH. "The Influence and Role of Evidence in the United States." In *Evidence in Mental Health Care*, Priebe S and Slade M (eds). Hove, England: Brunner-Rutledge, 2002.

Leadership Grantees

Christina Nicolaidis, Oregon Health & Sciences University (Grant ID# 049268)

- Nicolaidis C and Liebschutz J. "Chronic Physical Symptoms in Survivors of Violence." In *Intimate Partner Violence: A Bio-Psycho-Social Approach*, Mitchel C (ed). Oxford Press. (Unpublished manuscript.)
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Educational Materials

Realigning Incentives Grantees

Colorado Access (Grant ID# 048042)

- Colorado Access and Mental Health Association of Colorado: Depression Resource Directory. (English/Spanish)

Intermountain Healthcare (Grant ID# 048040)

- *Care Manager Tracking (CMT) System.* An access database for tracking patient follow-up interventions. Intermountain Healthcare, May 2003–2005.
- Mental Health Integration Implementation Map, "Diffusion in Utah and Elsewhere."
- Mental Health Integration Treatment Cascade Model.

MaineHealth (Grant ID# 048041)

- *Using the Patient Health Questionnaire.* A training DVD that features interviews with primary care clinicians and staff talking about their experiences using the PHQ-9, incorporating its use into daily practice, and the benefits they have seen as a result of this change. Includes a brief discussion of the role of the care manager.

University of Massachusetts (Grant ID# 048172)

- *Some Things You Can Do for Yourself (Algunas Cosas que Puede Hacer por Usted Mismo).* Massachusetts Consortium on Depression in Primary Care, May 2003.
- *What is Depression? (Que' es la Depresion?)* Massachusetts Consortium on Depression in Primary Care, May 2003.

- *What You Should Know About Your Medicine for Depression (Que' Debe Saber Sobre su Medicacion para la Depresion).* Massachusetts Consortium on Depression in Primary Care, May 2003.

University of Michigan (Grant ID# 048171)

- *M-DOCC (Michigan Depression Outcomes and Collaborative Care).* Depression disease management software application for use by care managers to supplement clinical care. University of Michigan Depression Center.

Business Case Grantees

Arne Beck, Kaiser Foundation (ID# 048119)

- *Improving Evidence-Based Depression Care for Employees.* Report, 2003.

Emily Feinberg, Boston University (Grant ID# 051648)

- *Mother's Views on Assessing the Emotional Well-Being of Mothers During Well-Child Care.* Report.
- *Pediatric Providers' Views on Assessing the Emotional Well-Being of Mothers During Well-Child Care.* Report.
- *Reports to Stakeholders on Assessing Maternal Depression in Pediatric Setting.*
- *Screening for Maternal Depressive Symptoms: Methods and Results. Report.*

Howard Waitzkin, University of New Mexico (Grant ID# 048127)

- *Heying S. References on Promotoras and Other Community Health Workers.* Report. Department of Anthropology, University of New Mexico, Albuquerque, NM, June 2005.
- Padilla DI. *An Ethnographic Study of Promotoras as Mental Health Practitioners.* Report. Undergraduate honors thesis, Department of Psychology, University of New Mexico, Albuquerque, NM, May 2004.

Steve Adelsheim, University of New Mexico (Grant ID# 048126)

- *Evaluating Mental Health Services in Rural New Mexico School Based Health Centers.* Report, University of New Mexico, Health Sciences Center, 2005.

Leadership Grantees

Christina Nicolaidis, Oregon Health & Sciences University (Grant ID# 049268)

- *Cognitive Behavioral Therapy*. Manual.

Presentations and Testimony

National Program Staff

Pincus HA, "The Future of Primary Care," October 3–4, 2001, Glen Cove, NY.

Pincus HA, "Depression in Primary Care: Barriers and Opportunities," at the Fellows Research Seminar, October 23, 2001, Children's Hospital, Pittsburgh.

Pincus HA, "Depression Treatment in Primary Care," at the Surgeon General's Meeting, November 1, 2001, Washington.

Pincus HA, Marino B, Kollar M and Ewing L, "Primary Care Update," at the Western Psychiatric Institute and Clinic, November 9, 2001, Pittsburgh.

Pincus HA, "Interrelationships of Mental Health and Primary Care Services," at the Office of Education and Regional Programming, November 14, 2001, Western Psychiatric Institute and Clinic, Pittsburgh.

Pincus HA, "Developing a National Program to Improve the Treatment of Depression in Primary Care," at the meet the P.I. Lecture, November 16, 2001, Western Psychiatric Institute and Clinic, Pittsburgh.

Pincus HA, National Program Directors' Meeting, November 29, 2001, Robert Wood Johnson Foundation, Princeton, NJ.

Pincus HA, "Depression in Primary Care," at the Healthier Berkshires Conference, November 8–9, 2002, Berkshires Medical Center, Hancock, MA.

Pincus HA, "Depression in Primary Care: Linking Clinical and Systems Strategies," at the Emily Mumford Lecture at Columbia University, December 6, 2002, New York.

P. Pittman and Pincus HA, "Workforce and Mental Illness: Why Employers Should Care About Mental Health and How They Can Make a Difference," at the Advanced Purchasing Workshop on Making the Business Case for Improving Mental Health Care, December 11, 2002, National Purchasing Institute.

Pincus HA, "Economics of Depression," at the Mental Health Policy and Economics: The Value of Research Workshop sponsored by the International Center of Mental Health Policy and Economics, March 28–30, 2003, Venice, Italy.

Pincus HA, "Emerging Models of Depression Care," at the 17th World Congress on Psychosomatic Medicine, August 25, 2003, Honolulu.

Pincus HA, "Psychiatrists Are From Mars: PCPs Are From Venus," at the 17th World Congress on Psychosomatic Medicine, August 27, 2003, Honolulu.

Pincus HA, "Depression and Plastic Surgery" at the University of Pittsburgh School of Medicine, Department of Plastic Surgery Grand Rounds, January 21, 2004, Pittsburgh.

Pincus HA, "Diagnostic Classification Within Psychiatry," at the University of Pittsburgh School of Medicine, February 5, 2004, Pittsburgh.

Pincus HA, "Behavior Health: Policy and Financing," at the National Institute of Mental Health/University of New Mexico Mental Health Mentorship & Education Program (MEPS) Training Institute, March 3, 2004, Albuquerque, NM.

Pincus HA, "Primary Care, Substance Use and Mental Disorders: Strangers in the Night?" at the Substance Abuse and Mental Health Services Administration (SAMHSA) Policy Academy, April 14, 2004.

Pincus HA, "Teaching Health Professionals to Cross the Quality Chasm," at the Northeast Group on Educational Affairs Regional Meeting: Quality Improvement in Medicine: Implications for Medical Education, April 30, 2004, Pittsburgh.

Pincus HA, "Depression in Primary Care: Linking Clinical and Systems Strategies," at the Disease Management Association of American, 1st Annual Integrated Healthcare Leadership Summit: Co-Morbid Depression & Chronic Illness, June 7, 2004, Washington.

Pincus HA, "Integration: Threat or Opportunity for MBHOs?" at the Disease Management Association of American, 1st Annual Integrated Healthcare Leadership Summit: Co-Morbid Depression & Chronic Illness, June 7, 2004, Washington.

Pincus HA, "Depression Care Management and Chronic Disease: Sustainability and Complexity," at the National Institute of Mental Health Complexities of Co-Occurring Conditions Conference, June 23, 2004, Washington.

Pincus HA, "Behavioral Health in Primary Care: Drowning in the Mainstream or Left on the Banks?" at the Children's Hospital of Pittsburgh Grand Rounds, July 1, 2004, Pittsburgh.

Pincus HA, "Anxiety Disorders in Primary Care: Drowning in the Mainstream or Left on the Banks?" at the Anxiety Disorders Association of America Conference, October 19, 2004, Chantilly, VA.

Pincus HA, "Depression in Primary Care: Drowning in the Mainstream or Left on the Banks?" at the Cambridge Health Alliance Grand Rounds, October 20, 2004, Cambridge, MA.

Pincus HA, "Anxiety Disorders in Primary Care: Drowning in the Mainstream or Left on the Banks?" at the Anxiety Disorder Association of American (ADAA) Conference, October 25–27, 2004, Chantilly, VA.

Pincus HA, "Depression in Primary Care: Linking Clinical and System Strategies," at the 2004 Robert Wood Johnson Foundation Depression in Primary Care National Program Meeting, November 18, 2004, Huntington Beach, CA.

Pincus HA, "The Crisis in Behavioral Health Care: Drowning in the Mainstream or Left on the Banks?" at the Improving Health Status of Persons Diagnosed With Mental Illness (Lilly), November 29, 2004, Washington.

Pincus HA, "The Crisis in Behavioral Health Care: Drowning in the Mainstream or Left on the Banks?" at the Improving Health Status of Persons Diagnosed With Mental Illness (CNS), December 13, 2004, Atlanta.

Pincus HA, "The Crisis in Behavioral Health Care: Drowning in the Mainstream or Left on the Banks?" at the Improving Health Status of Persons Diagnosed With Mental Illness (CNS), December 17, 2004, San Diego.

Pincus HA, "Primary Care, Substance Use and Mental Disorders: Strangers in the Night?" at the National Policy Academy on Co-Occurring Mental and Substance Abuse Disorders II—What Works: Primary Health Care, January 11, 2005, Washington.

Pincus HA, "The Future of Behavioral Health Care: Drowning in the Mainstream or Left on the Banks?" at the Vermont Access Grantee Site Visit, January 24–25, 2005, Burlington, VT.

Pincus HA, "The Future of Behavioral Health Care: Drowning in the Mainstream or Left on the Banks?" at a Meeting with Vermont Legislators and Governor Douglas, January 24–25, 2005, Burlington, VT.

Pincus HA and Kilbourne AM, "Translating Research Into Practice: Multi-Component Implementation Strategies," at the Center for Health Equity Research and Promotion, March 8, 2005, Pittsburgh.

Pincus HA, "Depression Care Management: Maximizing Benefit, Reducing Complexity, Assuring Accountability," at the 1st Annual Institute for Health and Productivity Management, Care-Focused Disease Management at Work, March 9–11, 2005, Lake Buena Vista, FL.

Pincus HA, "The Future of Behavioral Health and Primary Care: Drowning in the Mainstream or Left on the Banks?" at the New York University Department of Psychiatry Grand Rounds, March 24–28, 2005, New York.

Pincus HA, "Depression in Primary Care: Linking Clinical & System Strategies," at the Robert Wood Johnson Foundation, Quality Team Meeting, May 9, 2005, Princeton, NJ.

Pincus HA, "The Crisis in Behavioral Health Care: Drowning in the Mainstream or Left on the Banks?" at the Improving Health Status of Persons Diagnosed With Mental Illness (Lilly), May 18, 2005, Chicago.

Pincus HA, "The Future of Psychiatric Education: Six Bridges to Cross," at the National Institute of Mental Health Vestermark Psychiatry Educator Award Recipient Presentation at the American Psychiatric Association (APA) Annual Meeting, May 21–26, 2005, Atlanta.

Pincus HA, "Can Psychiatry Cross the Quality Chasm? Bridges to Build," at the World Psychiatric Association Thematic Conference on Quality and Outcome Research in Psychiatry, June 17–20, 2005, Valencia, Spain.

Pincus HA, "The Future of Behavioral Health Care: Drowning in the Mainstream or Left on the Banks?" at the Integrated Care Learning Summit II, September 19, 2005, Burlington, VT.

Pincus HA, "Depression and Primary Care: Drowning in the Mainstream or Left on the Banks?" at the Burden of Illness: Costs and Consequences of Our Fragmented Mental Health Care System, October 6, 2005, Nashville, TN.

Pincus HA, "Mental Health and Primary Care: Drowning in the Mainstream or Left on the Banks?" at the Mayo Clinic Grand Rounds, October 18, 2005, Rochester, MN.

Pincus HA, "Mentorship and Menteeship,"at the Western Psychiatric Institute and Clinic, Postdoctoral Seminar, October 19, 2005, Pittsburgh.

Pincus HA, "Depression and Primary Care: Drowning in the Mainstream or Left on the Banks?" a teleconference presentation of the General Motors AIM Initiative, November 15, 2005.

Pincus HA, "Mental Health and Primary Care: Drowning in the Mainstream or Left on the Banks?" at the Mental Health Research Showcase, November 27–30, 2005, Banff, Alberta, Canada.

Pincus HA, "Improving the Quality of Health Care for Mental and Substance-Use Conditions: An Institute of Medicine Quality Chasm Report," at the Institute for Healthcare Improvement (IHI) 17th National Forum on Quality Improvement in Health Care, December 11–14, 2005, Orlando, FL.

Pincus HA, "DSM vs. ?" at the Western Psychiatric Institute and Clinic, Resident Grand Rounds on DSM, February 3, 2006, Pittsburgh.

Pincus HA, "Depression in Primary Care: Linking Clinical and Systems Strategies," introduction at the Depression in Primary Care 2006 National Program Meeting, February 15–17, 2006, Amelia Island, FL.

Pincus HA, "Hardball With Harold Pincus M.D.: Fragmentation vs Integration," at the Depression in Primary Care 2006 National Program Meeting, February 15–17, 2006, Amelia Island, FL.

Pincus HA, "Mental Health and Primary Care: Drowning in the Mainstream or Left on the Banks?" at the Medical College of Virginia/Virginia Commonwealth University (VCU) Grand Rounds, February 24, 2006, Richmond, VA.

Pincus HA, "Depression in Primary Care National Program Update," at the Robert Wood Johnson Foundation Health Disparities Meeting, March 13, 2006, Princeton, NJ.

Pincus HA, "Mental Health and Primary Care: Drowning in the Mainstream or Left on the Banks?" at the MEP Institute, March 22–23, 2006, Albuquerque, NM.

Pincus HA, "Science Policy Issues for Health Research," at the Western Psychiatric Institute and Clinic, Postdoctoral Seminar: Mentor-Mentee Relations Part II, March 29, 2006, Pittsburgh.

Pincus HA, "Depression in Primary Care: Linking Clinical and Systems Strategies," at the University of Pittsburgh, Epidemiology of Child Psychiatric Disorders, March 30, 2006, Pittsburgh.

Pincus HA, "Quality Improvement Opportunities in Managing Depression: Measuring Performance Through Benchmarking," at the Bimark Dynamic Center for Medical Education (CME), March 31, 2006, Homestead, PA.

Pincus HA, "Mental Health and Primary Care: Drowning in the Mainstream or Left on the Banks?" at the NIMH Advanced Center for Interventions and Services Research (ACISR): Depression and Aging, University of Pennsylvania, May 1, 2006, Philadelphia.

Pincus HA, "Improving the Quality of Health Care for Mental and Substance-Use Conditions: An Institute of Medicine Quality Chasm Report," at the American Psychiatric Association (APA) Annual Meeting, May 20–25, 2006, Toronto.

Pincus HA, "The Key to Success, Mentorship Matters: A Practical Guide for Trainees and Educators," at the American Psychiatric Association (APA) Annual Meeting, May 20–25, 2006, Toronto.

Pincus HA, "Can We Cross the Quality Chasm in Depression Care? Measurement, Integration, Improvement," at the University of Michigan Depression Center Colloquium Series, September 14–15, 2006, Ann Arbor, MI.

Pincus HA, "Depression Screening for COPD: Public Policy Implications," at the COPD Workshop, September 16, 2006, Chicago.

Pincus HA, "The Crisis in Behavioral Health Care: Drowning in the Mainstream or Left on the Banks?" at the Medicare Modernization Act (MMA) Part D Symposium, September 21, 2006, Teaneck, NJ.

Pincus HA, "Can Psychiatry Cross the Quality Chasm? Improving the Quality of Health Care for Mental and Substance-Use Conditions," at the PsychSIGN Conference, October 7, 2006, New York.

Pincus HA, "What Does Depression Cost Business in America?" at the Depression Care for Women Across the Life Span, October 19, 2006, Pittsburgh.

Pincus HA, "Can Psychiatry Cross the Quality Chasm? Improving the Quality of Health Care for Mental and Substance-Use Conditions," at the Respond We Must! Advancing Quality Improvements in Behavioral Health, October 27, 2006, Minneapolis.

Pincus HA and Baird MA, "A Conversation on Depression in Primary Care: Linking Clinical and Systems Strategies," at the Keynote Plenary Lunch Session, The Collaborative Family Healthcare Association's 8th Annual Conference Best Practices in Collaborative Healthcare, November 2–4, 2006, Newport, RI.

Pincus HA, "(Hit the Ground) Running a National Program: A 12-Step Program From a Recovering Program National Director," at the Robert Wood Johnson Foundation Program Meeting, November 15–17, 2006, Princeton, NJ.

Pincus HA, "Behavioral Health in Primary Care: Drowning in the Mainstream or Left on the Banks?" at the Morgan Stanley Children's Hospital Grand Rounds, January 19, 2007, New York.

Pincus HA, "Mentoring for Patient-Oriented, Inter/Multidisciplinary Research," at the New York-Presbyterian Hospital Research Option Mentoring Seminar, January 31, 2007, New York.

Pincus HA, "Behavioral Health in Primary Care: Drowning in the Mainstream or Left on the Banks?" at the Montefiore Medical Center Grand Rounds, February 1, 2007, New York.

Pincus HA, "Can Psychiatry Cross the Quality Chasm? Improving the Quality of Health Care for Mental and Substance-Use Conditions," at the New York State Psychiatric Institute Grand Rounds, February 16, 2007, New York.

Pincus HA, "Challenges to Academic Psychiatry Circa 2007: Strategically Combining National and Local Perspectives," at the Columbia/Cornell Universities, Panel of Experts, Academy of Medicine, March 7, 2007, New York.

Pincus HA, "Career Paths in Clinical and Translational Research: Bridging Bridges, Instigating Interfaces, or Settling for Silos," at the Columbia University Clinical and Translational Science Awards (CTSA) Meeting, March 27, 2007, Bethesda, MD.

Pincus HA, "Mental Health and Primary Care: Drowning in the Mainstream or Left on the Banks?" at the Institute of Health, Health Care Policy, and Aging Research (IHHCPAR) Post-Doctoral Mental Health Seminar Series, Rutgers University, April 10, 2007, New Brunswick/Piscataway, NJ.

Pincus HA, "Can Behavioral Health Cross the Quality Chasm?" at the New York-Presbyterian Hospital, Department of Public Health Grand Rounds, April 17, 2007, New York.

Pincus HA, "Can Psychiatry Cross the Quality Chasm?" Symposium, at the American Psychiatric Association Annual Meeting, May 23, 2007, San Diego.

Pincus HA, "Quality Measures for Psychopharmacology," at the New Clinical Drug Evaluation Unit (NCDEU) Annual Meeting, June 11–13, 2007, Boca Raton, FL.

Kilbourne A, Doolittle AJ and Brown P, "Establishing the Learning Community Foundation," at the Colloquium of National Leaders in Collaborative Behavioral Health and Primary Care: Taking Collaborative Behavioral Health and Primary Care to the Next Level—Building a National Learning Community, June 16, 2007, Dearborn, MI.

Kilbourne A and Blow F, "Reactions and Reflections," at the Colloquium of National Leaders in Collaborative Behavioral Health and Primary Care: Taking Collaborative Behavioral Health and Primary Care to the Next Level—Building a National Learning Community, June 16, 2007, Dearborn, MI.

Realigning Incentives Grantees

CareOregon (RWJF ID# 048038)

- Ralston R. "Depression Collaboratives: Integration of Depression Care Into Primary Care Settings," at the Rural Health Conference on Depression Collaboratives, October 8, 2004, Portland, OR.

Colorado Access (Grant ID# 048042)

- Waxmonsky JA. "Incorporating Evidence-Based Practices for Depression Treatment Into Integrated Care Management," at the Evidence-Based Medicine Conference, World Research Group, April 18, 2004, Chicago.
- Thomas MR and Pincus HA. "Care Management Models for Working With Primary Care Patients With Depression and Medical Co-Morbidities," at the NIH/NIMH/NIAAA Complexities of Co-Occurring Conditions Conference: Harnessing Services Research to Improve Care for Mental, Substance Use, and Medical/Physical Disorders, June 24, 2004, Washington.
- Thomas MR. "Integrating the MacArthur RESPECT-Depression Model Into Intensive Care Management," at the MacArthur Foundation National Meeting on Depression in Primary Care, October 19, 2004, Chicago.
- Thomas MR. "The Prevalence and Costs of Mental Disorders Within Medicaid Populations: Improving Access to Mental Health Care in Primary Care Settings," at the National Conference of State Legislators, December 8, 2004, Savannah, GA.
- Thomas MR. "The Prevalence and Costs of Mental Disorders Within Medicaid Populations: Improving Access to Mental Health Care in Primary Care Settings," at the Annual Conference of National Council of Community Behavioral Health Annual, March 12, 2005, San Francisco.
- Thomas MR. "Improving Medicaid Disease Management: Focus on Mental Health," at the Predictive Modeling Conference, World Research Group, March 28, 2005, Orlando, FL.
- McKitterick M and McGinnis G. "Going Beyond Administrative Data to Develop and Evaluate Care Management Programs," at the Connection 2005 Medstat Conference, May 2005.
- Thomas MR. "Chronic Illness Care for Complex Patients: Strategies for Addressing the Problem of Depression," at the Plenary Presentation, Vermont Integrated Learning Summit, Vermont State Medicaid Office, September 20, 2005, Burlington, VT.
- Thomas MR. "Collaborative Care for Medicaid and Medicare Recipients and Their Families," at the Plenary Presentation, Collaborative Family Healthcare Annual Conference, University of Washington School of Medicine, October 7, 2005, Seattle.

- Thomas MR. "System Approaches to Improving Mental Health Care," Invited Presentation to the Behavioral Health Track, Institute for Healthcare Innovations Annual Meeting, December 13, 2005, Orlando, FL.
- Thomas MR. "State Medicaid Strategies for Integrated Care: Health Plan Experience," at the Robert Wood Johnson Foundation Depression in Primary Care Annual Meeting, February 16, 2006, Amelia Island, FL.
- Waxmonsky JA. "Integrated Depression and Diabetes Care Management," at the Colorado Community Managed Care Network (CCMCN) Business Meeting, March 1, 2006, Denver.

Intermountain HealthCare (Grant ID# 048040)

- Reiss-Brennan B. "Bryner Clinic versus Sandy Clinic—Cost Trends," at the Institute of Medicine, January 2004.
- Reiss-Brennan B. "Key Levers to Implementing Quality Risk Stratification Guide to Sustaining MHI," at the Robert Wood Johnson Foundation, November 2004, Princeton, NJ.
- Reiss-Brennan B, Briot P and Cannon W. "Mental Health Integration Treatment Cascade Model: Transformation of Delivery and Cost at Intermountain Healthcare," at the Robert Wood Johnson Foundation Depression in Primary Care National Meeting, February 2006, Amelia Island, FL. A quick-reference sheet that outlines to clinicians and others the IHC MHI integration model encompassing the scope of the total process model.
- Reiss-Brennan B, Pomerantz A and Cole B. "Integrating Mental Health Into Primary Care: Dramatic Improvements in Cost and Quality," at the IHI Annual Health Forum, December 13, 2006, Orlando, FL.
- Reiss-Brennan B and Cannon W. "Integrating Mental Health Services in Primary Care Offices: It's More Than Co-Location and It's Affordable," at the American Medical Group Association Annual Meeting, March 2, 2007, Scottsdale, AZ.

MaineHealth (Grant ID# 048041)

- Korsen N. "Improving Depression Care: Applying the Care Model to Primary Care Treatment of Depression," storyboard presentation at the Institute for Healthcare Improvement's 6th Annual Conference on Redesigning the Clinical Office Practice, March 31, 2005, Washington.
- Korsen N, Cartwright C and Robinson G. "Lessons Learned From a Depression in Primary Care Program," at the Collaborative Family Healthcare Association's 8th Annual Conference Best Practices in Collaborative Healthcare, November 2–4, 2006, Newport, RI.

Vermont Access (Grant ID# 048039)

- Reardon ME. "Consumer Self-Management in Chronic Care—Adapting Wagner's ICIC Approach to Low Income Populations With Depression," at the Robert Wood Johnson Foundation Depression in Primary Care Annual Grantees' Meeting, October 2003, Phoenix.
- Reardon ME. "Self-Management of Depression—Lessons Learned and Emerging Trends," at the Robert Wood Johnson Foundation Depression in Primary Care Annual Grantees' Meeting, November 2004, Huntington Beach, CA.
- Battersby M. "Self-Management of Depression," at the Vermont Interactive Television Presentation, December 2004, Waterbury, VT.
- Reardon ME. Testimony to the Vermont Legislature House and Senate Health and Welfare Committees with Harold A. Pincus, January 27, 2005, Montpelier, VT.
- Reardon ME. "Disease Management Strategies in Medicaid—Vermont," at the National Disease Management Congress, September 20, 2005, Orlando, FL.
- Reardon ME. "Integrated Care Strategies," at the New England States Systems Organization Behavioral Health Work Group Regional Meeting, University of Massachusetts Medical School, October 10, 2005, Salisbury, MA.
- Pomerantz and Cole B. "Primary Mental Health Care," at the Interactive Web Grand Rounds Presentation, Southern Vermont Area Health Education Center, UVM School of Medicine, November 2005, Springfield, VT.
- Reardon ME and Edwards B. "Integrating Treatment of Chronic Diseases and Mental Health Conditions," at the National Conference of State Legislatures (NCSL) Fall Forum Meeting, December 4, 2006, San Antonio.

University of Massachusetts (Grant ID# 048172)

- Upshur C and Weinreb L. "Treatment of Depression in Primary Care: Provider Views of Issues and Barriers," at the Research Forum Presentation, Society for Teachers of Family Medicine Annual Conference, September 21, 2003, Atlanta.
- Upshur C, Weinreb L, Norton M and Hanson A. "Recognizing and Treating Depression in Primary Care: Innovations in Behavioral Health Integration," at the Annual Meeting of the American Public Health Association, November 17, 2003, San Francisco.
- Upshur C, Weinreb L, Norton M and Hanson A. "Working With Health Plans and Behavioral Health Organizations to Improve Depression Care for Medicaid Consumers: A Partnership Model," at the Annual Meeting of the American Public Health Association, November 17, 2003, San Francisco.

- Upshur C. "Robert Wood Johnson Foundation Depression in Primary Care Project and Massachusetts Managed Behavioral Health: Findings From the MCDPC Project," at the Brandeis University/Schneider Institute for Health Policy Symposium on Managed Behavioral Health, February 3, 2004, Waltham, MA.
- Upshur C, Weinreb L, Candib L and Rudnick R. "Depression in Primary Care: Benefits and Challenges," at the Department of Family Medicine and Community Health Grand Rounds, University of Massachusetts Medical School, March 2, 2004, Worcester, MA.
- Upshur C. "Working With Primary Care Physicians to Treat Depression," at the Center for Mental Health Services, University of Massachusetts Medical School, April 29, 2004, Worcester, MA.
- Upshur C. "Working With Primary Care Physicians to Treat Depression," American Psychiatric Association Annual Meeting, May 5, 2004, New York.
- Upshur C and Weinreb L. "Robert Wood Johnson Foundation: Depression in Primary Care Initiative: Linking Clinical and Systems Strategies," presentation for Blue Cross Blue Shield on behalf of University of Massachusetts Memorial Health Care, September 9, 2004, Worcester, MA.
- Upshur C. "Challenges of Addressing Depression and Other Mental Health Conditions in Primary Care Patients With Multiple Chronic Conditions," at the Annual Meeting of the American Public Health Association, November 9, 2004, Washington.
- Upshur C, Weinreb L and Norton M. "Implementing a Chronic Care Model for Depression Management in an Adult Medicaid Population," poster, at the Academy Health Annual Meeting, June 26, 2005, Boston.
- Upshur C, Weinreb L and Norton M. "Lessons Learned About Primary Care-Behavioral Health Integration in the MCDPC: Massachusetts Consortium on Depression in Primary Care," at the Vermont Community Depression Project Integrated Care Learning Summit II, September 19, 2005, Burlington VT.
- Upshur C, Weinreb L and Norton M. "Implementing a Chronic Care Model for Depression Management in an Adult Medicaid Population," poster, at the North American Primary Care Research Group, October 27, 2005, Quebec City, Quebec, Canada.
- Upshur C. "Challenges for Medicaid Plans," at the Robert Wood Johnson Foundation Depression in Primary Care National Program Meeting, February 15–17, 2006, Amelia Island, FL.
- Upshur C and Weinreb L. "Internal Evaluation," at the Robert Wood Johnson Foundation Depression in Primary Care National Program Meeting, February 15–17, 2006, Amelia Island, FL.

- Upshur C and Weinreb L. "Final Results of the Internal Evaluation," at the Department of Mental Health Behavioral Health Programs Working Group, July 7, 2006, Boston.
- Upshur C and Weinreb L. "Impact of Primary Care Depression Management on Medical Care Utilization," at the North American Primary Care Research Group, October 17, 2006, Tucson, AZ.
- Upshur C and Weinreb L. "Managing Depression in Primary Care for a Medicaid Population," at the Collaborative Family Healthcare Association's 8th Annual Conference Best Practices in Collaborative Healthcare, November 3, 2006, Newport, RI.

University of Michigan (Grant ID# 048171)

- Klinkman MS. "Integrating Depression Treatment Into Primary Care: What Works, What Doesn't, and What We Don't Yet Know," at the Dean's Health Services Research Symposium Series, University of Michigan, May 28, 2004, Ann Arbor, MI.
- Klinkman MS. "Screening and Primary Care Outreach Programs," at the University of Michigan Depression Center Scientific Advisory Board, September 7, 2004, Ann Arbor, MI.
- Klinkman MS. "Initial Results From the Integrated Depression Management in Primary Care Demonstration," at the Robert Wood Johnson Foundation Depression in Primary Care Annual Meeting, November 18, 2004, Huntington Beach, CA.
- Klinkman MS. "Integrating Depression Treatment Into Primary Care," at the Depression as a Public Health Concern in Michigan Conference, August 11, 2005, Lansing, MI.
- Klinkman MS, Grazier K, Emptage N, Kerber N, Kuebler N, Avripas S and Adman T. "First Results From the Depression in Primary Care Demonstration Project: Integrating 'Disease Management' Into the Primary Care Process," at the 33rd Annual Meeting, North American Primary Care Research Group, October 15, 2005, Ottawa, Ontario, Canada.
- Klinkman MS, Grazier K, Emptage N, Kerber N, Kuebler N, Avripas S and Adman T. "First Results From the Depression in Primary Care Demonstration Project: Lessons Learned," at the University of Michigan Department of Psychiatry Research Conference, December 21, 2005, Ann Arbor, MI.
- Klinkman MS. "Depression in Primary Care: Collaboration, Comorbidity, and Chaos," at the Grand Rounds, St. Joseph Mercy Hospital Department of Psychiatry, March 15, 2006, Ann Arbor, MI.

- Klinkman MS. "Integrating Depression Treatment Into Primary Care Practice," at the Special Meeting, Greater Flint Coalition, Mental Health and Substance Abuse Task Force, May 17, 2006, Flint, MI.
- Klinkman MS, Avripas S and Adman T, Aikens J, Kerber N, Kuebler N. "Does Disease Management Affect Patient Attitudes, Beliefs, or Practices in Chronically Depressed Patients? A Report From the Depression in Primary Care Project," at the 29th Annual Family Medicine Research Day Conference, May 25, 2006, Ann Arbor, MI.
- Klinkman MS. "Integrating Depression Treatment Into Primary Care Practice: Planning Systems Change," at the Special Meeting, Greater Flint Health Coalition, Mental Health and Substance Abuse Task Force, July 19, 2006, Flint, MI.

University of San Francisco (Grant ID# 048170)

- Beale RR, Berenson R, Bernard S, Betts VT, Fassler D, Gelzer A, Hanson A, Lee DL, Levin S and Matthew JD. "Integration of Primary Care and Behavioral Health," at the Bazelon Center for Mental Health Law, September 2004, Washington.
- Ong M, Zhang F, Lee D, Azocar F, Perez-Stable E and Feldman M. "A Pilot Open System Depression Quality Improvement Program: Clinical and Utilization Effects on Patients With Moderate or Severe Depression."

Business Case Grantees

Arne Beck, Kaiser Foundation (Grant ID# 048119)

- Beck A, Rost K and Marshall D. "Robert Wood Johnson Study: Marketing Improved Depression Treatment to Employer Purchasers," at the Colorado Business Group on Health, March 11, 2004.
- Beck A, Rost K and Marshall D. "Marketing Improved Depression Treatment to Employer Purchasers," at the Colorado Business Group on Health, April 15, 2004.

Benjamin Van Voorhees, University of Chicago (Grant ID# 051780)

- Van Voorhees BW. "Translation of a Group Cognitive Behavioral Psychotherapy (CBT) Depression Prevention Intervention Into a Primary Care Model," at the Society of Behavioral Medicine, April 2005, Boston.
- Van Voorhees BW. "Development and Process Evaluation of a Primary Care Behavioral Vaccine for Depression Prevention in Adolescents and Young Adults (Project CATCH-IT)," at the Society of General Internal Medicine 28th Annual Meeting, May 2005, New Orleans.
- Van Voorhees BW. "Pilot Study of a Primary Care/Web-Based Depression Intervention for Young Adults (Project CATCH-IT)," at the Society of General Internal Medicine 28th Annual Meeting, May 2005, New Orleans.

- Van Voorhees BW. "Pilot Study of Project CATCH-IT: A Primary Care/Web-Based Depression Prevention Intervention for Adolescents," at the Society for Prevention Research, May 2005, Washington.
- Van Voorhees BW. "Translation of a Group Cognitive-Behavioral Psychotherapy Depression Prevention Intervention Into a Primary Care Model for Community Dissemination," at the Society for Prevention Research, May 2005, Washington.

Beth Goldman, Blue Cross Blue Shield of Michigan (Grant ID# 052125)

- Goldman B and Shermer JE. "Benefit Change Allows Non-Mental Health Providers to Code Psychiatric Diagnoses," poster presented at the Robert Wood Johnson Foundation Depression in Primary Care Annual Grantee Meeting, November 18-19, 2004, Huntington Beach, CA.

Constance Horgan, Brandeis University (Grant ID# 051651)

- Horgan CM. "Health Plan Performance on HEDIS Antidepressant Medication Management: Relationship With Organizational Characteristics," at the Academy Health Annual Research Meeting, June 28, 2005, Boston.

Dan Polsky, University of Pennsylvania (Grant ID# 048124)

- Polsky D. "Long-Term Risk for Depressive Symptoms After Disease Diagnosis," at the Complexities for Co-Occurring Conditions: Harnessing Services Research to Improve Care for Mental, Substance Use, and Medical/Physical Disorders, June 24, 2004, Washington.

Emily Feinberg, Boston University (Grant ID# 051648)

- Feinberg E. "Detection and Management of Maternal Depression in Pediatric Settings," at the Pediatric Academic Society, Practice-Based Research SIG, May 2004.
- Feinberg E. "Addressing Maternal Depression in Pediatric Settings: Using Health Information Technology," at the American Public Health Association Annual Meeting, November 2004, Washington.
- Feinberg E. "Developing an Evidence-Based Approach to Addressing Maternal Depression in Pediatric Primary Care Settings," at the American Public Health Association Annual Meeting, November 2005, Philadelphia.
- Feinberg E. "Adapting Primary Care Management of Depression to Pediatric Settings," at the Association of Maternal and Child Health Programs, March 2006, Arlington, VA.
- Feinberg E. "Improving Mental Health Outcomes for Young Children: The PNP's Role in Addressing Maternal Depression in Pediatric Settings," at the National

Association of Pediatric Nurse Practitioners Annual Meeting, March 2006, Washington.

- Feinberg E. "Maternal Depression: A Case for Restructuring Well Child Care," at the Pediatric Grand Rounds, Boston Medical Center, April 2006, Boston.
- Feinberg E. "Giving Voice to Immigrant Women: Using Digital Storytelling to Improve Culturally Appropriate Care," at the American Public Health Association Annual Meeting, November 2006, Boston.
- Feinberg E. "The Influence of Maternal Depression on a Child's General Knowledge," at the American Public Health Association Annual Meeting, November 2006, Boston.
- Feinberg E. "Voices From a Cambodian Community About Maternal Depression," poster presented at American Public Health Association Annual Meeting, November 2006, Boston.

Eric Goplerud, George Washington University (Grant ID# 052091)

- Goplerud E. "Health Plan Responses to Alcohol Problems: Lessons From a National Performance Measurement Initiative," at the American Medical Association Medical Briefing, Alcohol Dependence: From Science to Solutions, June 21, 2005, New York.
- Goplerud E. "The Behavioral Health Module of the 2005 eValue8 RFI," at the National Business Coalition on Health 2005 eValue8 Users Meeting, July 28, 2005, Chicago.
- Jacobus-Kantor L. "General Motors: Performance Results of the 2005 eValue8 RFI—Depression," submitted to General Motors, September 23, 2005.
- Goplerud E. "Improving the NYBGH Response to Behavioral Health Problems," at the meeting of the New York Business Group on Health, November 4, 2005, New York.
- Goplerud E. "Practical Data Analysis and Reporting From eValue8: Examples From Behavioral Health," at the National Business Coalition on Health Research and Reporting Meeting, April 20, 2006, Washington.
- Jacobus-Kantor L. "Selected Results From the Chronic Disease Management and Behavioral Health Modules," at the National Business Coalition on Health Steering Committee, June 22, 2006.

Gary Kennedy, Montefiore Medical Center (Grant ID# 051652)

- Kennedy GJ. "Emerging Models of Treatment of Depression in Old Age," at the King Edward Memorial Hospital Grand Rounds, June 21, 2006, Bermuda.

Howard Waitzkin, University of New Mexico (Grant ID# 048127)

- Herbeck Belnap B, Waitzkin H and Green S. "Care Management by Community Health Workers in the Context of Poverty, (Institutional) Racism, and Marginalization," at the Robert Wood Johnson Foundation Depression in Primary Care Annual Meeting, October 29, 2003, Phoenix.
- Waitzkin H and Santos R. "Promotoras as Mental Health Practitioners in Primary Care: Reducing Economic, Cultural, and Linguistic Barriers to the Treatment of Depression in Community Health Centers," at the Robert Wood Johnson Foundation Depression in Primary Care Annual Meeting, October 29, 2003, Phoenix.
- Imelda Padilla D. "A Process Evaluation: Training Promotoras as Mental Health Practitioners," at the 2003 National Institute of Mental Health—Career Opportunities in Research (NIMH-COR) Colloquium, November 2003, Bethesda, MD.
- Getrich C and Waitzkin H. "Reducing Barriers in the Treatment of Depression in Community Health Centers: An Evaluation of Promotoras as Mental Health Practitioners in Primary Care," at the Annual Meeting of the American Anthropological Association, November 2004, San Francisco.
- Waitzkin H. "I Don't Need Therapy—I Need Money! … and a National Health Program," at the Robert Wood Johnson Foundation Depression in Primary Care Annual Meeting, November 18, 2004, Huntington Beach, CA.
- Waitzkin H and Santos R. "Promotoras as Mental Health Practitioners in Primary Care: Reducing Economic, Cultural, and Linguistic Barriers to the Treatment of Depression in Community Health Centers," at the Robert Wood Johnson Foundation Depression in Primary Care Annual Meeting, November 18, 2004, Huntington Beach, CA.
- Santos R. "Overview of a Promotora Intervention for Depression," at the joint meeting of the Robert Wood Johnson Foundation Diabetes Initiative and Pfizer Health Solutions: Lay Health Worker Approaches to Emotional Health and Diabetes Management, January 2005, Dallas.
- Heying S. "Implementing a Promotora Model as an Innovative, Low-Cost Strategy to Identify and Treat Among Patients of Community Health Clinics in Urban New Mexico," at the Anthropology Graduate Student Union Symposium, University of New Mexico, March 2005, Albuquerque, NM.
- Getrich C. "Working Through the 'Noise' in Community Health Clinics: Challenges in Implementing a Promotora-Based Mental Health Intervention," at the Annual Meeting of the Society for Applied Anthropology, April 2005, Santa Fe, NM.
- Heying S. "Promotoras in Primary Care: The Challenges of Implementing a Promotora Model to Identify Depression Among Patients of Community Health

Clinics in Urban New Mexico," at the Annual Meeting of the Society for Applied Anthropology, April 2005, Santa Fe, NM.

- Getrich C, Heying S and Waitzkin H. "Mediating the Doctor-Patient Relationship?: Promotoras as Mental Health Practitioners in Primary Care," at the Annual Meeting of the American Anthropological Association, November 2005, Washington.

John Williams, Duke University (Grant ID# 048440)

- Williams J. "Measuring the Quality of Care for Depression," at the Robert Wood Johnson Foundation Depression in Primary Care Annual Grantee Meeting, October 29–30, 2003, Phoenix.
- Williams J. "The Quality of Depression Care: Are HEDIS Indicators Valid?" at the National Committee for Quality Assurance: Behavioral Health Measurement Advisory Panel, August 20, 2004, Washington.

Lisa Meredith, RAND (Grant ID# 048121)

- Meredith L. "Watchful Waiting for a Subthreshold Depression by Primary Care Providers," poster presented at the Robert Wood Johnson Foundation Depression in Primary Care Annual Grantee Meeting, October 29–30, 2003, Phoenix.
- Meredith L. "Watchful Waiting for a Subthreshold Depression by Primary Care Providers," poster presented at the Robert Wood Johnson Foundation Depression in Primary Care Annual Grantee Meeting, November 18–19, 2004, Huntington Beach, CA.
- Meredith L. "Sustainability of Collaborative Depression Management Programs," at the Robert Wood Johnson Foundation Depression in Primary Care Annual Meeting, November 19, 2004, Huntington Beach, CA.
- Meredith L. "Identifying Effective Clinician Incentives to Improve Depression Care: A Collaboration Between Researchers and the Managed Behavioral Healthcare Community," at AcademyHealth, June 27, 2005.

Lori Lackman Zeman, Wayne State University (Grant ID# 051646)

- Zeman LL, Arfken CL and Johnson D. "Impact of a Performance-Based Incentive to Enhance Depression Care," poster presented at the Robert Wood Johnson Foundation Depression in Primary Care National Program Meeting, February 15–17, 2006, Amelia Island, FL.
- Zeman LL and Arfken CL. "Evaluation of a PCP Performance-Based Incentive Program," poster presented at the Robert Wood Johnson Foundation Depression in Primary Care Annual Meeting, November 18–19, 2004. Huntington Beach, CA.

Mitchell Feldman, University of California at San Francisco (Grant ID# 048233)

- Azocar F, Ciemins E, Kelleher D, Bachman J, Ong M and Feldman M. "Telephone Outreach: Specialty Mental Health Access for Medical Patients," at the Complexities of Co-Occurring Conditions Conference, 2004.
- Ong M, Feldman M, Ciemins E and Azocar F. "Effect of Depression-Targeted Telephone-Based Outreach on Mentally Ill Individuals," at the Bay Area Clinical Research Symposium, 2004.
- Ong M, Feldman M, Ciemins E, Azocar F and Bachman J. "Catching Depression Early: Outreach Services to Medically Ill Patients," at the Society of General Internal Medicine Annual Meeting, 2004.
- Ong M, Feldman M, Ciemins E, Azocar F and Bachman J. "Catching Depression Early: Outreach Services to Medically Ill Patients," at the Society of General Internal Medicine California Regional Meeting, 2004.
- Ong M, Feldman M, Ciemins E and Azocar F. "Effect of Depression-Targeted Telephone-Based Outreach on Mentally Ill Individuals," at the AcademyHealth Annual Research Meeting, 2005.

Philip Wang, Harvard University (Grant ID# 048123)

- Wang PS. "Employer Tools to Make the Business Case for Improved Depression Care," at the Robert Wood Johnson Foundation Depression in Primary Care Annual Meeting, November 18, 2004, Huntington Beach, CA.

Sarah Hudson Scholle, National Committee on Quality Assurance (Grant ID# 051650)

- Scholle SH. "Performance Measurement in Health Care, Now and in the Future," at the AcademyHealth Meeting, June 25, 2005, Boston.
- Scholle SH. "Pay for Performance in Behavioral Health," at the Robert Wood Johnson Foundation Depression in Primary Care Annual Meeting, February 16, 2006, Amelia Island, FL.
- Renner P. "HEDIS—Depression," at the Med-Ed Communications Impact—Slide Development Meeting, February 25, 2006, Washington.
- Scholle SH. "Getting It Right: Application of the HEDIS Depression Guidelines to Improve Outcomes," at the Case Management Society of America Online Conference, June 2006.
- Scholle SH. "Improving Quality in Depression Care," at the American Managed Care Pharmacists Leadership Meeting, June 9, 2006, Alexandria, VA.

- Sampsel S. "Getting it Right: Application of the HEDIS Depression Guidelines to Improve Outcomes," at the Case Management Society of America Annual Meeting, June 14, 2006.
- Bachman J. "Understanding the Managed Care Implications on Compliance and Persistency in the Treatment of Depression," at the Physician Meeting, June 21, 2006, Santa Monica, CA.
- Tulloch W. "Understanding the Managed Care Implications on Compliance and Persistency in the Treatment of Depression," at the Physician Meeting, June 22, 2006, San Diego.
- Leary P. "Understanding the Managed Care Implications on Compliance and Persistency in the Treatment of Depression," at the Physician Meeting, June 27, 2006, Cincinnati.
- Leary P. "Understanding the Managed Care Implications on Compliance and Persistency in the Treatment of Depression," at the Physician Meeting, June 28, 2006, Detroit.
- Leary P. "Understanding the Managed Care Implications on Compliance and Persistency in the Treatment of Depression," at the Physician Meeting, June 29, 2006, Nashville, TN.

Robin Weersing, Yale University (Grant ID# 051653)

- Weersing VR. "Psychotherapy Manuals: A Tool for Many Tasks," at the Issues in the Conduct and Interpretation of Studies of Adolescent Depression (D. Shaffer, Chair). Invited plenary session conducted at the Annual Meeting of the American Academy of Child and Adolescent Psychiatry, October 2004, Washington. Audio taped proceedings available online.

Steve Adelsheim, University of New Mexico (Grant ID# 048126)

- Adelsheim S. "New Mexico School Mental Health," at the McArthur Foundation, McArthur Mental Health Policy Network Meeting, November 4, 2003, Tucson, AZ.
- Adelsheim S. "New Mexico Office of School Health," at the Klingenstein Foundation, School of Mental Health Symposium, December 4, 2003, New York.
- Adelsheim S. "Psychopharmacology and School Based Health Centers," at the Evaluation of Depression Screening and Treatment in Rural New Mexico School-Based Health Centers, University of New Mexico, Health Sciences Center, January 2, 2004, Albuquerque, NM.
- Bolton Oetzel K and Scherer D. "Treating Adolescents With Depression Using Cognitive-Behavioral Techniques," at the Evaluation of Depression Screening and Treatment in Rural New Mexico School-Based Health Centers," at the University of New Mexico, Health Sciences Center, January 21, 2004, Albuquerque, NM.

- Schan S. "Research Issues for Evaluating the Effectiveness of Depression Screening and Treatment in Rural School Based Health Centers/Depression Protocol," at the University of New Mexico, Health Sciences Center, January 21, 2004, Albuquerque, NM.
- Adelsheim S, Kileen M and Schan S."Evaluation of Depression and Screening and Treatment at Rural New Mexico School Based Health Centers," Acoma Pueblo Tribal Council, February 2004, Acoma Pueblo, NM.
- Adelsheim S and Schan S. "New Mexico Depression and Primary Care Project," at the Center for School Mental Health Assistance Ninth Annual Conference, October 8, 2004, Dallas.
- Scherer D. "Anger Management for Adolescents," To'jahilee, NM, February 25, 2005; Silver City, NM, February 28, 2005; and Ruidoso, NM, March 14, 2005. Presentation was videotaped for future use in long-distance training.

Suzanne Landis, Mountain Area Health Education Center (Grant ID# 048128)

- Landis S, Gaynes B and Morrissey J. "PrimeCare: A Randomized Clinical Trial of Generalized Care Managers for Depressed Medicaid Outpatients in Western North Carolina," at the Robert Wood Johnson Foundation Depression in Primary Care Annual Meeting, October 29, 2003, Phoenix.
- S Landis S, Gaynes B and Morrissey J. "PrimeCare: A Randomized Clinical Trial of Generalized Care Managers for Depressed Medicaid Outpatients in Western North Carolina," at the Robert Wood Johnson Foundation Depression in Primary Care Annual Meeting, November 18, 2004, Los Angeles.
- Landis S and Gaynes B. "A Systematic Approach to the Identification and Treatment of Depression in Primary Care," at the Visiting Professors at Wake Forest University Medical Center, December 10, 2004, Winston-Salem, NC.
- Gaynes B. "A Systematic Approach to the Identification and Treatment of Depression in Primary Care," at the 29th Annual Internal Medicine Conference, University of North Carolina School of Medicine, April 14, 2005, Chapel Hill, NC.
- Gaynes B. "A Systematic Approach to the Identification and Treatment of Depression in Primary Care," at the NC AHEC Meeting, April 8, 2006, Chapel Hill, NC.

Yeates Conwell, University of Rochester (Grant ID# 048120)

- Friedman B. "Effectiveness of Depression Care Management in a Multiple Disease Care Management Model," at the Robert Wood Johnson Foundation Depression in Primary Care Annual Meeting, November 19, 2004, Huntington Beach, CA.
- Friedman B. Conwell Y, Ritz Delavan R, Wamsley BR and Eggert GM. "Depression and Suicidal Behaviors in Medicare Primary Care Patients Under Age 65," at the

Robert Wood Johnson Foundation Depression in Primary Care Annual Meeting, November 19, 2004, Huntington Beach, CA.

Leadership Grantees

Christina Nicolaidis, Oregon Health & Sciences University (Grant ID# 049268)

- Nicolaidis C. "Chronic Pain in Abuse Survivors," at the speaker/faculty for precourse "Chronic Pain and Mental Illness: Overcoming Barriers to Effective Management in the General Medicine Setting," at the Annual Meeting of the Society of General Internal Medicine, May 2005, New Orleans.

David Eisenman, University of California at Los Angeles (Grant ID# 049267)

- Eisenman D, Cordasco K, Asch S, Glik D and Golden J. "Leveraging Social Networks for Protecting Vulnerable Communities Health During Disaster," at the Society of General Internal Medicine Annual Meeting, April 2006, Los Angeles.
- Meredith L and Eisenman D. "Primary Care for PTSD and Trauma-Related Mental Health Symptoms in Community/Migrant Health Center," at the Society of General Internal Medicine Annual Meeting, April 2006, Los Angeles.
- Eisenman D, Cordasco K, Asch S, Glik D and Golden J. "Leveraging Social Networks for Protecting Vulnerable Communities Health During Disaster," at the AcademyHealth Annual Research Meeting, June 2006, Seattle.

Laura Richardson, University of Washington (Grant ID# 049269)

- Richardson L. "Improving Primary Care Treatment of Depression for Adolescents," at the Leadership Grantee Meeting, Robert Wood Johnson Foundation Depression in Primary Care Annual Grantee Meeting, October 29, 2003, Phoenix.
- Richardson L. "Strategies to Improve Primary Care Management of Adolescent Depression," poster presented at the Robert Wood Johnson Foundation Depression in Primary Care Annual Grantee Meeting, October 29–30, 2003, Phoenix.
- Richardson L. "Leadership Grant: Improving Primary Care Management of Adolescent Depression," poster presented at the Robert Wood Johnson Foundation Depression in Primary Care Annual Grantee Meeting, November 18–19, 2004, Huntington Beach, CA.
- Richardson L. "Depression in Children and Adolescents: Options for Primary Care," Robert Wood Johnson Foundation Depression in Primary Care Annual Grantee Meeting, November 19, 2004, Huntington Beach, CA.

Sara Swenson, University of California at San Francisco (Grant ID# 049270)

- Swenson SL. "Depression, Diabetes, and Clinician-Patient Communication," at the National Meeting of the Society of General Internal Medicine, May 12, 2005, New Orleans.
- Swenson SL. "Depression Self-Management Groups Can Engage Older Persons With Depression," at the National Meeting of the Society of General Internal Medicine, May 13, 2005, New Orleans.
- Swenson SL, Zandecki J, Gonzales R and Feldman MD. "'I Wasn't the Only One Going Through This': Group Visits for Older Adults With Depression Are Feasible and Acceptable," at the National Meeting of the Society of General Internal Medicine, April 28, 2006.

Sponsored Conferences and Workshops

National Program Office

"Depression in Primary Care: Linking Clinical and Systems Strategies Applicants' Meeting," July 31, 2001, Pittsburgh.

"Depression in Primary Care: Linking Clinical and Systems Strategies Applicants' Teleconference," August 10, 2001.

"Technical Assistance and Direction for Depression in Primary Care: Linking Clinical and Systems Strategies," April 12, 2002, Robert Wood Johnson Foundation, Thematic Synergy Meeting.

"Incentives Planning Grantee Technical Assistance Meeting," April 30–May 1, 2002, Pittsburgh.

"Depression in Primary Care First Annual Grantee Meeting," September 26–27, 2003, Chicago.

"Depression in Primary Care Second Annual Grantee Meeting," October 29–30, 2003, Phoenix.

"Depression in Primary Care: Linking Clinical and Systems Strategies Annual Meeting," November 18–19, 2004, Huntington Beach, CA.

"Depression in Primary Care: Linking Clinical and Systems Strategies National Program Meeting," February 15–17, 2006, Amelia Island, FL.

Realigning Incentives Grantees

Intermountain Healthcare (Grant ID# 048040)

- "IHC Primary Care Clinical Programs Learning Day: Asthma and the Emergency Room & ADHD Update," May 9, 2003, Salt Lake City.

- "IHC Primary Care Clinical Programs Learning Day: Adult Mental Health Bipolar & ADHD Update," April 30, 2004, Salt Lake City.
- "IHC Primary Care Clinical Programs Clinical Learning Day: Depression Update/How to Access Care Management Resources for Depression, CHF, Diabetes & Asthma," May 1, 2004, Salt Lake City.
- "Intermountain Healthcare Mental Health Integration Provider Retreat," November 30, 2004, Salt Lake City.
- "Intermountain Healthcare 2006 Mental Health Integration Retreat," March 31, 2006, Salt Lake City.
- "Intermountain Healthcare Federal Workgroup," May 31, 2006, Salt Lake City.

University of Massachusetts (Grant ID# 048172)

- "Massachusetts Consortium on Depression in Primary Care: Implementation Training II," July 8, 2003, Shrewsbury, MA.
- "Massachusetts Consortium on Depression in Primary Care: Implementation Training III," November 4, 2003, Shrewsbury, MA.
- "Chronic Disease Care Manager Coordination Luncheon," January 6, 2004, Worcester, MA.
- "Massachusetts Consortium on Depression in Primary Care: Implementation Training IV," February 3, 2004, Shrewsbury, MA.
- "Massachusetts Consortium on Depression in Primary Care: Implementation Training V," May 11, 2004, Worcester, MA.
- "Massachusetts Consortium on Depression in Primary Care: Implementation Training VI," September 22, 2004, Worcester, MA.
- "Massachusetts Consortium on Depression in Primary Care: Implementation Training VII," December 1, 2004, Worcester, MA.
- "Massachusetts Consortium on Depression in Primary Care: Implementation Training VIII," June 14, 2005, Worcester, MA.

University of Michigan (Grant ID# 048171)

- "Conference on Depression in Chronic Illness," co-sponsored by Blue Cross Blue Shield of Michigan, UMHS, University of Michigan Depression Center, March 7, 2006.

Vermont Access (RWJF ID# 048039)

- "Vermont Community Depression Project Learning Session," May 19–20, 2003, Grafton, VT.
- "Vermont Community Depression Project Learning Session," September 18–20, 2004, Stowe, VT.
- "Vermont Community Depression Project Learning Session," September 16–18, 2005, Burlington, VT.

Business Case Grantees

Ben Druss, Emory University (Grant ID# 052099)

- "Community Health Center Depression Care Management Partnership Planning Meeting," February 28, 2005, Atlanta.
- "Strategies for Improving Depression Care," September 8, 2005, Atlanta.

Howard Waitzkin, University of New Mexico (Grant ID# 048127)

- "Assessing and Treating Depression in Primary Care Practice: First Choice Settings," July 29, 2003—September 3, 2004, Albuquerque, NM. Presenters: J. Yager, M. Kelly and H. Waitzkin.

Steve Adelsheim, University of New Mexico (Grant ID# 048126)

- "Evaluation of Depression Screening and Treatment in Rural New Mexico School-Base Health Centers: Capacity Development for Care Providers," January 20–21, 2004, Albuquerque, NM.
- "How to Conduct the Children's Functional Assessment Rating Scale," May 18, 2004, Socorro, NM. Presenters: S. Yates and J. Ward.
- "Treating Adolescents With Depression: Cognitive Behavioral Therapy Part 2," September 18, 2004, Albuquerque, NM. Presenter: D. Scherer.

Tools

Realigning Incentives Grantees

University of Massachusetts (Grant ID# 048172)

- Cashman S and Upshur C. *Care Manager Manual*. Department of Family Medicine and Community Health, University of Massachusetts Medical School, May 2003.
- Department of Family Medicine and Community Health, University of Massachusetts Medical School, *Information on Selecting and Using Antidepressant Medications in Primary Care*, November 2003.

Department of Family Medicine and Community Health, University of Massachusetts Medical School and the Commonwealth of Massachusetts Division of Medical Assistance, *Primary Care Provider Manual: How to Implement Evidence-Based Guidelines for Managing Depression in Primary Care*, May 2003.

Massachusetts Consortium on Depression in Primary Care, *Massachusetts Consortium on Depression in Primary Care: Antidepressant Medications for Use in Primary Care* (laminated reference chart), May 2003.

Business Case Grantees

Ben Druss, Emory University (Grant ID# 052099)

- Druss BG, Waters R, Brown L, Griffin J, Rouse A, Wollenzien J, Brooks M, Tiegreen W, Trail M, Rust G, Fry-Johnson Y, Strothers H and Bornemann T. *Identifying and Addressing Barriers to Implementing Evidence-Based Depression Care in Community Health Centers: A Toolkit for Community Health Center Managers.*

Gary Kennedy, Montefiore Medical Center (Grant ID# 051652)

- Kennedy GJ. "Mental Health Services in Primary Care: Critical Roles for Interdisciplinary Aging Professionals; Effective Strategies for Integrating Behavioral Health with Geriatric Primary Care." Presentation.

Steve Adelsheim, University of New Mexico (Grant ID# 048126)

- Bolton Oetzel K and Scherer D. *Treating Depression in Adolescents: A Cognitive-Behavioral Therapy Manual.* University of New Mexico, training provided in January 2004 and implemented in March 2004. Manual, 70 pages.

Leadership Grantees

Christina Nicolaidis, Oregon Health & Sciences University (Grant ID# 049268)

- Nelson HD, Haney E, Humphrey L, Miller J, Nedrow A, Nicolaidis C, Vesco K, Walker M, Bougatsos C and Nygren P. *Management of Menopause Related Symptoms, Summary/Evidence Report/Technology Assessment No. 120.* (Prepared by the Oregon Evidence-Based Practice Center, under Contract No. 290-02-0024.) AHRQ Publication 05-E016-2. Rockville, MD: Agency for Healthcare Research and Quality, March 2005.

World Wide Web Sites

National Program Office

www.depression-primarycare.org (no longer available). Some of the material is available at the Louisiana Public Health Institute's website.

Realigning Incentives Grantees

Intermountain Healthcare (Grant ID# 048040)

- *www.ihc.com/mentalhealth*. A mental health information center that is used to educate patients and the community about a variety of mental health issues. Intermountain Health Care Clinical Education Services, February 2005.
- *www.ihc.com/xp/ihc/physician/clinicalprograms/primarycare/mentalhealth* (no longer in operation). Served Intermountain Healthcare clinicians primarily, providing forms, links and other information relating to mental health integration. Intermountain Health Care Clinical Education Services, February 2005.

MaineHealth (Grant ID# 048041)

- *www.elearn.mmc.org/depression* (no longer in operation). Developed for training materials for primary care clinicians and staff about the components of the Depression in Primary Care clinical program. Caring for ME Depression in Primary Care Program of MaineHealth's Clinical Integration Division. Portland, ME.
- *www.mainehealth.com/clinical_integration/program.php?program_id=3* (no longer in operation). Created to provide a link for patients and families to information about depression produced by MaineHealth Caring for ME program.
- *www.mainehealth.com/clinical_integration/program.php?private=1&program_id=3* (no longer in operation). Created to provide a link for clinicians to clinical tools and other information about depression produced by MaineHealth Improving Depression Care initiative.

University of Massachusetts (Grant ID# 048172)

- *www.mcdpc.org* (no longer in operation). Massachusetts Consortium on Depression in Primary Care. Accessible by public users; password protected for consortium members.

Business Case Grantees

University of Chicago (Grant ID# 051780)

- *www.animateband.com/siteX/untitled-1.html* (no longer in operation).