

# **Commission on Mental Health and Substance Use Disorder**

## **Strategy and Planning Subcommittee**

Chair, Secretary Shevaun L. Harris

September 2, 2025

## 2025 STRATEGY AND PLANNING SUBCOMMITTEE



This Committee is responsible for developing and recommending a framework for ongoing planning and evaluation that engages all State of Florida agencies funding behavioral health services, along with key stakeholders, including service providers, managing entities, managed care organizations, funders, advocates, individuals with lived experience, and subject matter experts.

# SUBCOMMITTEE MEMBERS

Name	Title	Agency
Shevaun Harris, Chair, Commissioner	Secretary	Agency for Health Care Administration
Clara Reynolds, Co-Chair, Commissioner	President and CEO	Crisis Center of Tampa Bay
Jay Reeve, Commission Chair	CEO and President	Apalachee Center
Dr. Kelly Gray-Eurom, Commissioner	Emergency Care Physician	UF Health Jacksonville
Bill Prummell, Commissioner	Sheriff	Charlotte County Sheriff's Office
Richard Duggan, Commissioner	Executive Director, Exceptional Student Education	Collier County Schools
Devona Pickle (SME Lead)	Chief of Medicaid Policy	Agency for Healthcare Administration
William Hardin (SME Lead)	SAMH Director	Florida Department of Children and Families
Melanie Brown Woofter	President and CEO	Florida Behavioral Health
Gail Ryder	Vice-President of Behavioral Health	Baycare
Nicole Sharbono	COO	SMA Healthcare
Nancy Dauphinais	COO	David Lawrence Center
Rachelle Burns	MH Coordinator for Representative Michelle Salzman	Caim Consulting
Carali McClean	Executive Director (NAMI Florida)	National Alliance on Mental Illness (NAMI)
Christine Cauffield	CEO and Executive Vice President	Lutheran Services Florida
Dana Gryniuk	President	Simply Healthcare Plan



# **SUBCOMMITTEE RECOMMENDATIONS**

# 1 Complete a gap analysis every three years.



**Background:** In 2025, Florida completed a comprehensive gap analysis that anticipates system needs through 2029. This provides a strong foundation for planning and investment over the next several years. To ensure accountability and continuous improvement, a recurring gap analysis is needed.



**Prospective Impact:** Ensures Florida's behavioral health planning remains evidence-driven, with each analysis providing actionable guidance to inform appropriations, workforce planning, and system design.



**Key Partners:** Department of Children and Families, Managing Entities, Agency for Health Care Administration, Agency for Persons with Disabilities, Department of Juvenile Justice, Florida Sheriff's Association, Florida Hospital Association (FHA), Florida Behavioral Health Association (FBHA).

## 2 Convene a meeting of Health and Human Services' State Agency leaders (open to the public/stakeholders) annually to elevate and address system wide/systemic issues emerging from the regional collaborative meetings.



**Background:** Florida's Behavioral Health Regional Collaboratives unite stakeholders to improve local behavioral health systems and can be leveraged to inform statewide strategy.



**Prospective Impact:** Information gleaned from the regional collaboratives can serve as a springboard for higher level critical discussions around system design/improvements. It also serves as an opportunity for decision-makers to collectively problem-solve systemic gaps/ issues and to consider stakeholder recommendations for improvement.



**Key Partners:** Department of Children and Families and the Agency for Health Care Administration (co-leads), Regional Collaboratives and managing entities, providers, Medicaid managed care plans, the Florida Department of Health, the Florida Department of Juvenile Justice, the Florida Department of Corrections, the Florida Department of Education, local governments, advocacy organizations, and individuals with lived experience.

### 3

**Continue to evaluate opportunities for enhanced integration of primary care and behavioral health into the statewide planning and evaluation framework to improve access and promote coordinated care.**



**Background:** Co-location of behavioral health providers in primary care settings has been shown to improve access to care, reduce stigma, and support early identification and intervention. Embedding this approach in Florida's planning framework ensures alignment across state agencies and partners responsible for funding and delivering services.



**Prospective Impact:** Formalizing co-location within the framework will drive cross-agency collaboration, reduce fragmentation, improve health outcomes, and support sustainability by linking funding and evaluation mechanisms to integrated care delivery.



**Key Partners:** Department of Children and Families, Agency for Health Care Administration, Department of Health, managed care organizations, managing entities, primary care providers, behavioral health providers