

BEHAVIORAL HEALTH ADVISORY COMMITTEE

MINUTES

August 29, 2018
10:00 a.m.
1645 'N' Street
Lincoln, NE

MEMBERS PRESENT: Gene Cotter, Megan Hinrichs, Sara Hoyle, Corrine Jarecke, Jennifer Jennings, Susan Johnson, Stephanie Knight, Jill Kuzelka, Barbara Murphy, Richard Pethoud, Melissa Ripley, Darla Winslow

MEMBERS ABSENT: J. Rock Johnson, Rebecca Meinders, Tracy Pella, C.J. Zimmer

OTHERS PRESENT: C.J. Johnson, Tami DeShon, Phyllis McCaul, Kim Michael, Joe Pastuszak, Amanda Tyerman-Harper, Paul Van De Water and Marti Rabe, Region V Systems

HOUSEKEEPING AND INTRODUCTIONS

Hoyle called the meeting to order at 10:05 a.m. followed by introductions.

ADDITIONS / CHANGES TO AGENDA

Johnson clarified that Motion Agenda Item 6.B should refer to FY 18-19 rather than FY 17-19 and asked to add discussion of contract shift amendments following Agenda Item A under "Other Updates / Information."

OPEN MEETING ACT INFORMATION

Hoyle pointed out that Open Meeting Act information is posted as required by the Open Meetings Act. Notification of this meeting and information regarding availability of the agenda was provided through a legal notice in the Lincoln Journal Star.

PUBLIC COMMENT

There was no public comment.

CONSENT AGENDA ITEMS

S. Johnson made a motion, seconded by Cotter, to approve the Consent Agenda (May 30, 2018, BHAC Minutes; Year-end Compliance Management Report, Year-end Discharge / Pre-Admitted Noncompliance Report and RGB Report) as presented.

Roll Call: Yes: Cotter, Hoyle, Jarecke, Jennings, S. Johnson, Knight, Kuzelka, Murphy, Pethoud, Ripley, Winslow

Absent: Hinrichs, J. Johnson, Meinders, Pella, Zimmer

Motion carried.

ACTION / PRIORITY ITEMS

Contract – Nebraska Children and Families Foundation: This contract, in the amount up to \$4,038 is for the purpose of providing professional services, technical assistance and consultation regarding Cluster Based Planning for youth which is being explored on a statewide basis. Johnson explained that funding from this grant was used to support expenses which allowed Region V staff to present information and train on Cluster-Based Planning in several other Regions as well as prepare a webinar. Knight made a motion, seconded by S. Johnson, to recommend the Board ratify this contract as presented.

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Roll Call: Yes: Cotter, Hoyle, Jarecke, Jennings, S. Johnson, Knight, Kuzelka, Murphy, Pethoud, Ripley, Winslow

Abstain: Hinrichs

Absent: J. Johnson, Meinders, Pella, Zimmer

Motion carried.

Draft FY 18-19 Risk Management Plan: Michael presented the FY 18-19 Risk Management Plan noting that this type of plan is a CARF requirement. Michael reviewed the headings to explain how the process worked explaining that the plan is written in a negative way. Headings include: assessing risks, severity, likelihood of occurrence, loss exposure analysis score, preparedness assessment, ongoing maintenance and new action steps (where applicable). Michael reviewed each domain that is measured and pointed out where new action steps have been incorporated. Cotter suggested that language regarding confidentiality (Domain C3c) be amended to say that policy/procedures are “implemented and enforced” rather than “established.” Data was found to be missing in one field which will be restored. Cotter made a motion, seconded by Winslow, to recommend the Board approve the FY 18-19 Risk Management Plan with the recommended revisions.

Roll Call: Yes: Cotter, Hinrichs, Hoyle, Jarecke, Jennings, S. Johnson, Knight, Kuzelka, Murphy, Pethoud, Ripley, Winslow

Absent: J. Johnson, Meinders, Pella, Zimmer

Motion carried.

One Time Only (OTO) Funding Report: Johnson briefly reviewed the backdrop of these funds noting that these dollars are a result of funds that were originally allocated to bring up services to support individuals moving from the Regional Center to a lower level of care as the system moved to a community-based system as a result of behavioral health (BH) reform. In 2008 the Division announced BH reform was completed and that 3.1 million dollars remained. Region V challenged that amount and following review by the HHS Legislative Committee, led by Senator Jensen, it was determined that 15.2 million was actually available. Legislation was written which required that the funds be disbursed to the Regions. At that time Region V received 4.2 million dollars in one-time funding. Over the ten years the Region has managed these dollars, funds have been used for a variety of programs, grants, initiatives, etc., with \$561,007 remaining. Johnson then reviewed the current line items and amounts allocated. Ripley made a motion, seconded by Knight, to recommend the Board approve the OTO report as presented.

Roll Call: Yes: Cotter, Hinrichs, Hoyle, Jarecke, Jennings, S. Johnson, Knight, Kuzelka, Murphy, Pethoud, Ripley, Winslow

Absent: J. Johnson, Meinders, Pella, Zimmer

Motion carried.

Site Visit Report Summary – Mental Health Association of NE (MHA):

- Tyerman-Harper explained changes of the last couple of years relating to the funding of the Supported Employment program. Funding of the program was moved from NFFS to FFS paid on a milestone system. Vocational Rehabilitation (VR) pays for Milestones 1, 3, and 4 (intake, 30 days employed, 90 days employed). Region V pays for Milestones 2 and Milestone 5 (job search and follow-along supports). Under this arrangement, VR now serves as the gatekeeper for referrals and the trend has been a steady decline in referrals to the SE program.
- VR is also currently has no funding. Because access to the program is limited by the referral process, the fiscal viability of the program is at risk, and the current system presents a barrier for individuals who express a desire to become employed.

- There is also concern regarding Milestone 5 which is a follow-along / ongoing support service for individuals who have found employment and how long, and under what circumstances, support can remain in place. Concerns also exist due to the fact that MHA was developed using evidence-based practices including fidelity models, which VR does not use. This disparity has compromised MHA's ability to meet their program standards. A meeting with a national consultant has been scheduled for September when it is hoped that some resolution for these concerns can be achieved. The Region has \$70,000 in unallocated funds which will allow MHA to take other referrals if that door is opened for them.
- All units in the unit audit were verified. Ripley made a motion, seconded by S. Johnson, to recommend the Board approve the MHA site visit report as presented.

Roll Call: Yes: Cotter, Hinrichs, Hoyle, Jarecke, Jennings, S. Johnson, Knight, Kuzelka, Murphy, Pethoud, Ripley, Winslow

Absent: J. Johnson, Meinders, Pella, Zimmer

Motion carried.

OTHER UPDATES/INFORMATION

Behavioral Health / Legislative Updates: Johnson provided the following updates:

- **CARF Accreditation:** Johnson announced that the Region received a three-year accreditation from CARF, including a new accreditation for Network Management. The Division had requested that the Region pursue that course. CARF reviewed over 2,000 standards and only identified one area of improvement. Johnson credited Michael for her significant contribution to that achievement.
- **Cost Model Study / Rates:** Over the past several years DHHS has been doing cost model studies to determine the actual cost of providing services that the Region funds. Initially the focus was on Medication Management (MM) and Half Way House. The study indicated that these two services were severely under-funded and additional funds were made available to increase the service rate for MM and Houses of Hope (Half-way House). The studies of all services have revealed similar underfunding for Medicaid services, Juvenile Justice and other Region-funded services. Johnson commented that the overall impact of raising rates to cover actual costs would be anywhere between ten and twenty million dollars.
- The Division has been positioning itself over the last two years to request additional funding from the Legislature by maximizing the system. As a result the Division no longer pays for any program that is not a service and / or for any non-fee-for-service (NFFS) service that would be eligible for Medicaid funding.
- To that end, the Division anticipates moving from a NFFS payment structure to a FFS structure by January 1. One program that will be affected is Peer Support. Concerns are that some of the smaller peer-run programs do not have the clinical support required by the service definition for this service. Another service impacted is the Crisis Response Team. TASC has always been funded entirely on an expense-based (NFFS) basis and does not have the infrastructure in place to bill Medicaid. It was also noted that when an individual is in a crisis, it is not in the best interest of that individual to have to get a pre-authorization and ask for paperwork and Medicaid information.
- **Civil Protective Custody (CPC):** The Bridge did get written confirmation that they will be receiving their license. Hoyle explained that the \$150,000 budget deficit resulting from Medicaid and the Division's inability to continue paying for CPC as an unaccredited service will be made up by Lancaster County (\$100,000) and LPD and State Patrol (\$50,000). CPC came under scrutiny when it was observed that they did not meet the Service Definition for reimbursement for Medicaid.
- **Secure Residential at Telecare:** Telecare provides Secure Residential treatment for a number of individuals who are in need of treatment in a secure facility. Average length of stay is three to six months. In the past the Region had been allowed to pay for the gap between what Medicaid paid and what the cost of the service actually was. Region V is no longer able to pay for any expenses for Medicaid eligible consumers. Telecare is an important part of the emergency system in Region V, and there are concerns that the program may close because of this change in the ability to provide gap funding for these individuals.
- **System of Care (SOC) Grant:** One of the purposes of the SOC grant was to integrate efforts between Child Welfare, Probation, Medicaid and the Regions which have historically been siloed. Johnson commented that it has been a challenge to bring these various groups together. A meeting was held this week among these

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entities where barriers to collaboration were discussed. Additional conversations are planned. One point of contention arose when Senator Synowiecki introduced a bill that would provide funding for Juvenile Justice / youth probation that would run through the Regional system. The bill was amended and the dollars went to Probation, which ended up creating a separate voucher system. Probation has also indicated a desire to bring up Multisystem (MST) treatment for youth. Given the challenges with providing behavioral health services in the more rural areas of the state, MST may not be economically efficient and may not allow for maximization of dollars.

Contract Shifts: DHHS has limited the number of times the Region can request contract shifts and has specified the dates when those requests are due (October 22, January 21, April 22 and end of year). Because of the timing of these requests, the Region will not be able to move these requests through the meeting cycle as the meeting schedule currently exists. The Region will be requesting pre-approval from the Board to make these shifts. In order to be able to provide feedback / input from the BHAC, the Region will send these shift requests out to the BHAC via email. Any feedback will be relayed to the Board. BHAC members were in consensus with this process, and a motion will be included on the October agenda to indicate acceptance of this practice.

Emergency System: Annual Behavioral Health Threat Assessment (BETA) training is scheduled for Jan 28 – 31.

Continuous Quality Improvement:

- Quality File Review – Target / Threshold: RQIT set a minimum threshold for Quality File Review at 80 percent. Areas falling below that threshold would be required to submit an action plan in an effort to improve that score. The goal will be to achieve 100 percent.
- Network Performance Improvement Summary FY 18-19: One QI issue was reported. The concern was regarding a DLA-20 score which fell below the threshold. A resolution is pending.

Year-end FY 17-18 Capacity Utilization Summaries: Capacity reports are provided through year-end for informational purposes. The Region was able to purchase all over-produced FFS units; when the audit is completed there may be unexpended revenue to bring forward to disburse. There was brief discussion regarding carry-over of unallocated funds. The Regions are unable to carry funds into the next fiscal year though that fiscal model is being adopted in other states and entities. The theory for using that model is that it would encourage entities to more efficiently and effectively manage their budgets.

Level of Care Meeting Updates / Dates:

- September 17 – Community Support / Non-Residential / Emergency
- September 24 – Children’s System of Care
- November 8 – Regional Prevention Coalition

OTHER BUSINESS

Johnson introduced Lee Heflebower, who has replaced John Turner as the Housing Director. Johnson commented that Heflebower came to the Region with over 25 years of experience in housing related activities, has developed relationships with many individuals involved with housing, and has already written a grant to increase funding.

IMPORTANT DATES

- September 10 – RGB Meeting – 10:30 a.m.
- September 17 – Network Providers Meeting – 9:00 a.m.
- October 24 – BHAC Meeting – 10:00 a.m.

ADJOURN

There being no further business the meeting was adjourned at 11:20 a.m.