

BEHAVIORAL HEALTH ADVISORY COMMITTEE

MINUTES

May 2, 2018
10:00 a.m.
1645 'N' Street
Lincoln, NE

MEMBERS PRESENT: Megan Hinrichs, Sara Hoyle, Corrine Jarecke, Jennifer Jennings, Susan Johnson, Stephanie Knight, Jill Kuzelka, Rebecca Meinders, Tracy Pella, Richard Pethoud, Brenda Tracy, Darla Winslow,

MEMBERS ABSENT: Gene Cotter, J. Rock Johnson, Barbara Murphy, Melissa Ripley, Tammy Sassaman, C.J. Zimmer

OTHERS PRESENT: C.J. Johnson, Patrick Kreifels, Sandy Morrissey, Robin Schmid, Amanda Tyerman-Harper and Marti Rabe, Region V Systems

HOUSEKEEPING AND INTRODUCTIONS

In the absence of the Chair and Vice Chair, Johnson called the meeting to order at 10:02 a.m. followed by introductions. Johnson welcomed three new BHAC members to the Advisory Committee and thanked them for volunteering to serve in this capacity.

ADDITIONS / CHANGES TO AGENDA

There were no additions or changes to the agenda.

OPEN MEETING ACT INFORMATION

Johnson 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 Winslow, to approve the Consent Agenda (March 28, 2018, BHAC Minutes; FY 17-18 Compliance Management Report, February 2018 Discharge / Pre-Admitted Noncompliance Report and RGB Report) as presented.

Roll Call: Yes: Hinrichs, Jarecke, S. Johnson, Knight, Kuzelka, Meinders, Pella, Pethoud, Tracy, Winslow

Absent: Cotter, Hoyle, Jennings, J. Johnson, Murphy, Ripley, Sassaman, Zimmer

Motion carried.

ACTION / PRIORITY ITEMS

FY 19 Strategic Plan: Johnson reviewed the Region's FY 1819 Strategic Plan noting the following:

- Strategic planning is a requirement for Commission on Accreditation of Rehabilitation Facilities (CARF) accreditation.
- The Region attempts to mirror the Division of Behavior Health's (DBH) strategic plan to ensure the Region's focus is on the areas that the Division deems important.
- Johnson reviewed Region V's Mission, Strategic Intent and Values. Among others, those values include embracing a focus on wellness and recovery in behavioral health as well as effective and transparent information sharing. Johnson briefly discussed how the meeting cycle has been changed so that decisions are now made with input from the Consumer / Family Coalition when appropriate, Network Providers and other stakeholders before they are presented to the BHAC and ultimately the Board.

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- The organizational goals and objectives were discussed. These goals focus on those regular and ongoing activities necessary to keep the agency running. Johnson commented that the Regions operate due to Legislative mandate which can make it difficult to plan ahead; however, even with the current budget constraints, Region V has built a strong foundation for the behavioral health network. The availability of data through Region V's Compass and the Division's Centralized Data System (CDS) has allowed for a number of continuous quality improvement initiatives. Hoyle commented that data from Compass has allowed Network Providers to meet reporting requirements more effectively for United Way grants. Johnson also briefly discussed the components of a learning organization – an organizational culture that the Region promotes.
- Three system goals and their objectives were discussed. These goals contain forward-looking objectives which will be incorporated to ensure continued successful performance for the Region. One objective is the use of and implementation of cluster-based planning. Johnson explained that “clustering” a group of individuals allows for response to their history of functioning and needs without diagnoses driving the process.
- The Region is applying for accreditation for Network Management through the CARF review process which will take place May 30 and 31. Anyone with comments or questions about the Strategic Plan is asked to email Tyerman-Harper so any changes can be presented to the Governing Board at their June meeting.

Winslow made a motion, seconded by Knight, to recommend that the Board approve the FY 18-19 Strategic Plan as presented.

Roll Call: Yes: Hinrichs, Hoyle, Jarecke, Jennings, S. Johnson, Knight, Kuzelka, Meinders, Pella, Pethoud, Tracy, Winslow

Absent: Cotter, J. Johnson, Murphy, Ripley, Sassaman, Zimmer

Motion carried.

FY 16-17 Unexpended Revenue: Johnson reminded BHAC members that FY 16-17 Unexpended Revenue in the amount of \$25,352.93 remained following the purchase of all fee-for-service (FFS) overproduced units. Unexpended Revenue is funding that has been pulled down from the State but not utilized as anticipated in the Budget Plan. Following discussion at the Network Provider meeting, providers decided that a prudent and equitable use for the remaining funds would be to allow providers to use a share of this fund to help offset costs for accreditation. Because agency accreditation occurs on a three-year cycle, provider agencies will be able to use these funds in FY 17-18 through FY 19-20. When asked whether these dollars could be used to support consumer services, Johnson noted that allowing providers to use this fund for accreditation costs indirectly provides more funding for services. Hinrichs made a motion, seconded by Pella, to recommend the Board approve this use of FY 16-17 Unexpended Revenue as presented.

Roll Call: Yes: Hinrichs, Hoyle, Jarecke, Jennings, S. Johnson, Knight, Kuzelka, Meinders, Pella, Pethoud, Tracy, Winslow

Absent: Cotter, J. Johnson, Murphy, Ripley, Sassaman, Zimmer

Motion carried.

Site Visit Report Summaries: Tyerman-Harper presented site visit reports for the following:

CenterPointe: A unit audit was performed reviewing a two-percent sample of FFS services. Several concerns were noted:

- The initial two percent audit for Day Rehabilitation fell below 95 percent; a five percent expanded audit was then conducted where the program still fell below the 95 percent threshold. As a result, CenterPointe will pay back the unverified units and submit a plan of correction. The program had begun to address these concerns before the five percent audit took place by making changes to their electronic records system. A follow-up audit will be scheduled within 60 days.
- Medication Management and Outpatient MH (group) also included unverified units which will require payback.
- CenterPointe was registering Supported Living clients on the Support Housing TAD. It was determined that a corrective action plan would not be necessary, but staff was advised to begin using the correct TAD. An administrative clean-up will correct the data entries.

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- For 24-Hour Clinician CenterPointe was not entering 24-Hour Crisis Calls in the CDS as required. The provider is in the process of complying by entering the missing data. Also for that service, it was noted that at times the calls were not answered by a “live voice.” CenterPointe has submitted a corrective action plan which will ensure that calls are answered by a live voice consistent with NBHS service definition requirements.

St. Monica’s: a unit audit was conducted for St. Monica’s services and all units were verified for all programs. There were no findings for the NFFS expense-based audit.

Knight made a motion, seconded by Winslow, to recommend the Board approve the site visit reports for CenterPointe and St. Monica’s as presented.

Roll Call: Yes: Hinrichs, Hoyle, Jarecke, Jennings, S. Johnson, Knight, Kuzelka, Meinders, Pella, Pethoud, Tracy, Winslow

Absent: Cotter, J. Johnson, Murphy, Ripley, Sassaman, Zimmer

Motion carried.

OTHER UPDATES/INFORMATION

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

- Budget cuts over the last couple of years had led the Division to approve shifting funds between a Region that was under-producing to a Region that was over-producing to “increase the spending authority” of a Region. Early indications this fiscal year are that there will not be much flexibility among Regions as most Regions are on track to pull down their allocations. Region V is projecting a shortfall of between \$300,000 and \$400,000 dollars. When the April billing has been submitted and finalized, there will be a clearer picture of the deficit and availability of funding to cover it. Johnson commented that shifting money from one Region to another does not affect either Region’s allocation for the next fiscal year as allocations are based on a formula using population and poverty levels to determine need. Shifts will also be made not only within agencies but between agencies and funds shifted between agencies will not be restored in the next FY.
- The Regions have not been allowed to shift dollars from fee-for-service (FFS) to non-fee-for-service (NFFS) or support services such as Capacity Access Guarantee (CAG). Johnson explained how Blue Valley (BVBH) will be impacted if the shift is not allowed, noting that Day had asked to shift \$105,000 into CAG services. BVBH has 12 offices in rural counties, and staffing challenges and weather can have an impact on utilization. The Region and Day met with the Division on Monday and presented evidence to support the shift, but as of today the Region hasn’t been notified if the shift is approved. It was noted that our urban providers receive ancillary funding (CAG-like in nature) for their programs through fund-raising and other private funding.

Emergency System:

Civil Protective Custody (CPC) at The Bridge Behavioral Health (BBH)

- Tyerman-Harper explained the challenges BBH is experiencing with CPC, a service by which individuals who are intoxicated and a danger to themselves or others due to intoxication, are involuntarily committed. Committed individuals must remain in CPC until their Blood Alcohol Content (BAC) is zero or until a Responsible Party (RP) assumes accountability for them. Average length of stay is eight hours.
- Until Managed Care Organizations (MCOs – three entities collectively called Heritage Health) took over the Magellan contract in January of 2017, this service was paid for as a social detoxification program. Heritage Health refused to pay for CPC claiming that it did not meet the service definition for social detox. Last year the Region was able to provide gap funding in the amount of about \$50,000.
- Meanwhile, Douglas County was engaged in efforts to license their CPC program and has been unable to do so which led to scrutiny for CPC at BBH. BBH is currently licensed as a substance abuse treatment center, but CARF will not accredit a program with locked doors.
- Last year over 3,800 persons were admitted to CPC. Implications of loss of CPC at BBH include significantly increased traffic at the jail, which will not incarcerate intoxicated individuals, and the hospital as law enforcement will have to take these individuals somewhere other than BBH.
- The Executive Director at BBH has invited Regulation and Licensure for a consultative visit to be held this week to determine if there are any changes that could be made to programming which would allow them to become accredited for this program.

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Continuous Quality Improvement: Kreifels briefly reviewed the following reports.

- Network Performance Improvement Summary: Two concerns initiated in February have been resolved. The first concern required an Intensive Outpatient (IOP) provider to begin using a valid effectiveness tool and submit data per contract requirements. Secondly a provider had not submitted their quality improvement plan identifying areas of focus following their Trauma Informed Care (TIC) assessment. This plan has now been submitted.
- SOC Youth Mobile Crisis Response Utilization Report: An update of utilization for the Youth Crisis Response Service was provided through April 4.

FY 17-18 Capacity Utilization Summaries: Capacity reports are provided through March for informational purposes. Johnson reviewed column headings explaining how the form was used to monitor agency spending and project usage for the remaining months of the year. Numbers in the last column in parentheses are services which are projected to over-produce units resulting in a deficit. Those services with projected remaining balances will be subject to shifts the Region will request of the Division as the fiscal year continues. Van De Water briefly discussed “pooled services” noting that these pools of dollars are available to any network provider who provides the relevant service.

Training: Upcoming training information is provided for informational purposes. Two ethics trainings are scheduled, both of which are full. An additional ethics training may be scheduled in August as clinicians require ethics training Continuing Education Units (CEUs) for renewing their licenses.

Level of Care Meeting Updates / Dates:

- May 10 – Regional Prevention Coalition
Prevention Update: Morrissey and Tyerman-Harper discussed the following activities:
 - June Jam, scheduled for June 10-12, is a drug-free youth event held annually at Southeast Community College in Milford. The Youth Action Board is responsible for oversight and facilitation of this annual event. Currently 218 youth have signed up.
 - Over 450 youth attended the Red / White Tailgate.
 - Funding from an opioid grant will provide public awareness events via movie trailers and radio spots. The identified “hot spots” are Lancaster County and a five-county area in southeast Nebraska. Grant funding is being provided to place medsafe[®] containers in hospitals for the disposal of unused patient medication including controlled substances, and placing informational plastic sliders in patient rooms, waiting rooms and offices.
 - A workforce shortage of prescribers for Medication Assisted Treatment (MAT) exists. Statewide efforts are ongoing to provide training to increase the number of individuals willing to prescribe for MAT. There are a number of barriers to increasing this workforce including a stigma attached to MAT, the extra scrutiny involved in providing this service, the limited number of individuals a provider can monitor, as well as financial barriers for clients. Liability is also a serious concern. Knight discussed a recent event where someone came to the Fillmore County hospital to discuss liability concerns. Knight will forward that information to Tyerman-Harper to distribute to BHAC members.
- May 21 – Community Support / Non-Residential / Emergency – no updates
- June 25 – Children’s System of Care – no updates

OTHER BUSINESS

Pethoud commented that the one-day *Moving Towards Recovery* workshop presented by the Consumer / Family Coalition, is scheduled for June 21 at the City Impact Center. The Coalition is seeking presenters.

IMPORTANT DATES

- May 14 – RGB Meeting – 10:30 a.m.
- May 21 – Network Providers Meeting – 9:00 a.m.
- May 30 – BHAC Meeting – 10:00 a.m.

ADJOURN

There being no further business the meeting was adjourned at 11:17 a.m.