

BEHAVIORAL HEALTH ADVISORY COMMITTEE

MINUTES

January 27, 2021

10:00 a.m.

Via Zoom

MEMBERS PRESENT: Christine Cooney, Gene Cotter, Irene Duncan, Karen Helmberger, Greg Janak, Corrine Jarecke, Corrie Kielty, Stephanie Knight, Rebecca Meinders, Lucinda Mesteth, Laura Osborne, Darla Winslow

MEMBERS ABSENT: J. Rock Johnson, Jill Kuzelka, Barbara Murphy, Richard Pethoud

OTHERS PRESENT: Lexee Kuhlman, Juvenile Probation; Tami DeShon, Theresa Henning, C.J. Johnson, Patrick Kreifels, Sandy Morrissey, Amanda Tyerman-Harper, Gretchen Mills, and Marti Rabe, Region V Systems

HOUSEKEEPING AND INTRODUCTIONS

Knight called the meeting to order at 10:01 a.m. followed by rollcall. Knight asked the committee permission to vote by voice vote rather than rollcall to facilitate the meeting format. There was no dissent.

ADDITIONS / CHANGES TO AGENDA

There were no changes to the agenda.

OPEN MEETING ACT INFORMATION

Knight referenced that Open Meeting Act information is posted as required by the Open Meetings Act at Region V Systems. 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

Helmberger made a motion, seconded by Janak, to approve the Consent Agenda (October 28, 2020 minutes, FY 20-21 Compliance Management Report and RGB Report) as presented.

Motion carried.

ACTION / PRIORITY ITEMS

Contract Amendments: DeShon explained the only January Network Provider shift based on utilization was a shift of dollars from acute to secure and secure room/board in the amount of \$ 28,000. Johnson mentioned that historically there has not been a mechanism to use Division money to pay for the price of a bed in a private hospital when the Crisis Center is full. DeShon followed up by explaining that \$26,000 was shifted into EPC billing for these instances. Johnson clarified that the remainder of the contract shifts are for Prevention, money needs to be moved between strategies so it can be drawn down under the appropriate strategy in the Electronic Billing System.

Suicide Prevention Grant Contracts: Schmeekle Research, Inc. (\$20,000) for data analysis and reporting, LMEDP (\$600) to develop community/youth partnerships, Osborne (increase in 50%) for TIPS Training (training about the responsible provision of alcohol), Thompson (25% decrease) to assist with administrative functions of Faith Partners.

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Petrzilka Coding: Andy Petrzilka is a former Region V Systems IT employee and this contract with him will help the Region evaluate his position and needs of the Region for a coding and database expert. Jon Kruse is still responsible for the overall IT infrastructure and security.

Mental Health First Aide Training: Francisca Peterson will contract as a bilingual Mental Health First Aide Trainer.

Duncan made a motion, seconded by Janak to approve the January Network Provider Amendments and contracts.

Motion carried. For the record, Osborne abstained.

Legislative Bill 464: Johnson mentioned that it isn't very often that legislative bills are brought to the Committee and Board to approve support. LB464 (and LB465) have been supported by the Nebraska Association of Regional Administrators, so it is being brought for Committee approval of support. LB464 asks for intent language for this year and ongoing, regarding behavioral health aid funding. The intent language would give permission, during any fiscal year, to shift funding that is not being used and was appropriated for a specific reason by DBH and the Regional Behavioral Health Authorities.

Duncan made a motion, seconded by Meinders to approve support of LB464.

Motion carried.

Legislative Bill 465: Johnson explained that current legislative language doesn't allow for state-wide use of funds for landlord risk mitigation and LB465 would allow for use of Stamp Tax money for damages. Region V Systems has had a pot of money to use for this type of mitigation, none of the other Regions do. Landlord mitigation funds are used in many other states.

Duncan made a motion, seconded by Winslow to approve support of LB465.

Motion carried.

FY 19/20 Management Report: Kreifels summarized the management report, which is used as a report card in conjunction with the Annual Report for CARF Accreditation and reporting to the public. The Management Report includes the Annual Performance Improvement Plans, Network Services (capacity/waitlist/ineligibles/denials/critical incident reports), Continuous Quality Improvement concerns/requests, the Professional Partner Program, and the Rental Assistance Program information.

Janak made a motion, seconded by Osborne to approve the FY 19/20 Management Report as presented.

Motion carried.

Professional Partner Program – DHHS Unit Audit Verification Report: The included page for this report was incorrect, a corrected page was emailed by Marti Rabe on 1/27/21. This report shows that the Professional Partner Program was in with 100% compliance with all units.

Meinders made a motion, seconded by Jarecke to accept the Professional Partner Program Audit Verification Report.

Motion carried.

BHAC Member at Large: Zimmer is no longer a member at large. Cooney volunteered to be the Member at Large *. Johnson requested to add Janak on to this agenda item, Janak was on the Regional Governing Board, but no longer is a county supervisor and would like to remain on BHAC.

Duncan made a motion, seconded by Winslow to approve Janak as a BHAC member (with appropriate application) and to approve Cooney as Member at Large.

Motion carried.

*Motion amended: Tyerman-Harper noted that after checking the members' list, Cooney was already a Member at Large. Bylaws call for two Members at Large. Janak volunteered to be an additional Member at Large. Duncan made an amended motion, seconded by Winslow to approve Janak as a Member at Large.

Amended motion carried.

OTHER UPDATES/INFORMATION

Behavioral Health/Legislative Updates: NABHO has support to get a bill introduced that would allow for a three (3) percent increase in Medicaid rates for behavioral health providers. Senator Arch has introduced a bill in support of expansion of telehealth. The last year has given providers an idea of where gaps lie in the distribution of telehealth (for example: internet connectivity or access to technology).

Covid 19 Impact: Since March 2020, providers have had access to Covid Gap Funding. For example, if they were contracted to produce 100 units but could only produce 80 units due to the pandemic, Covid Gap Funding would fill in the 20 units. It has been very helpful, and it is extended through January. Next week Johnson will meet with DBH who have a titrate down proposal for this funding.

Medicaid Implementation Impact: Individuals who are becoming Medicaid eligible have created some challenges, especially with inpatient programs. Medicaid doesn't pay for room and board. There are some consumers who are in treatment on a sliding fee scale, and are eligible for Medicaid, but Medicaid won't pay for their room/board. Providers have expressed concern about rate differences between Region programming and Medicaid programming. Legislation is being introduced to increase rates specifically for behavioral health services. It will not increase Region funding; it increases the funding that providers get for their Medicaid rates.

Emergency Systems: Tyerman-Harper reported that Kristin Nelson is planning for a BETA training, it will be in person and remote. Nelson is partnering with LPD to expand the BETA curriculum. MHA is submitting a grant to expand BETA. Crisis Center admissions are down. The Lincoln Regional Center is still hard to get into with waitlist, reduced beds, and construction. Kreifels mentioned that the High Utilizer Review Team (HURT) continues to meet every Thursday and that IBH Secure Residential is open and have already moved in patients.

Prevention: Morrissey gave an update on Zero Suicide and the intent to get organizations and institutions invested looking at how they are addressing suicide management. It is a yearlong commitment, with monthly TA calls and a component for each organization's individual staff. A System of Excellence has been developed. Johnson mentioned the success they have had with a Letter of Strategic Intent, which is a great way to develop partnerships where there may be some resistance to sign letters of agreement. The Letter of Strategic Intent essentials says that partners are committed to the intent of the grant, not committed to funds or time. Morrissey stated that because of the Strategic Intent they don't want to make Zero Suicide a cookie cutter for each organization. The strategic intent will make it unique for them and respect individual rights, not mandate protocols. They intend to provide structure and framework to enhance what organizations are already doing. Morrissey iterated that QPR training will continue to be provided at no cost.

Annual Opinion Survey: Tyerman-Harper indicated that Kim Michael will be sending the Annual Opinion Survey to all Committee members (and to all Region V stakeholders) in February. Please participate.

Network Continuous Quality Improvement: Kreifels gave a brief overview of the Multi-Year Ineligibles and Denials Report, which highlights where consumers went and why they were denied and proves helpful to providers to see the flow of services. The FY21Q1 Region V CACI Report summarizes all the appeals and critical incidents. It is a good dialog and has been a great starting point for information sharing. The FY 20-21 Q1 Consumer Recovery Outcomes report looks at every consumer and compares their intake score with their discharge score. A discussion

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was had about the impact of the pandemic on the incident reports. One example brought up was reporting all communicable diseases, for instance, if someone comes in with Covid, you must report that. There was an uptick in leaving against medical advice in residential programming, as it became harder to stay in a program when you cannot leave to look for work or engage in the community with visitors.

Johnson mentioned some of the positive aspects of the learning curve during the pandemic including a decrease in no show rates, especially in outpatient services. People were more likely to get on a telephone call or do telehealth, there has been better contact. Many day rehabs were able to continue to provide services, some were not, mostly due to facility availability. Cotter suggested future trainings on telehealth.

BHAC Attendance Report: Included for informational purposes.

BHAC Membership: Motion was amended to include Janak as a Member at Large.

Capacity Utilization Summary Reports: Included for informational purposes.

Training: Provided for informational purposes.

Zoom: Johnson reminded everyone that the Executive Order allowing committees and boards to meet via Zoom was extended through April and BHAC meetings will very likely remain via Zoom to respect social distancing and keep everyone as safe as possible over the next few months.

IMPORTANT DATES

- February 8 – 10:30 a.m. – RGB Meeting – via Zoom
- February 22 – 9:00 a.m. – Network Providers Meeting – via Zoom
- February 24 – 10:00 a.m. – BHAC Meeting – via Zoom

ADJOURN

There being no further business the meeting was adjourned at 11: 29 a.m.