BEHAVIORAL HEALTH ADVISORY COMMITTEE

MINUTES Hybrid Meeting

September 1, 2021 10:00 a.m. Region V Systems, 1645 N Street

MEMBERSIrene Duncan, Karen Helmberger, Greg Janak, Corrie Kielty, Stephanie Knight, Lexee Kuhlman,PRESENT:Jill Kuzelka, Rebecca Meinders, Barbara Murphy, Laura Osborne, Darla Winslow

- **MEMBERS** Christine Cooney, Corrine Jarecke, Gale Pohlmann **ABSENT:**
- OTHERSAaron Adams, Division of Behavioral Health; Brenda Muller, Houses of Hope; Patrick Kreifels,PRESENT:Gretchen Mills, Sandy Morrisey, Amanda Tyerman-Harper, Region V Systems

HOUSEKEEPING AND INTRODUCTIONS

Osborne called the meeting to order at 10:01 a.m. followed by rollcall. Brenda Mueller, the new Executive Director of Houses of Hope, introduced herself to BHAC.

ADDITIONS / CHANGES TO AGENDA

There were no changes to the agenda.

OPEN MEETING ACT INFORMATION

Osborne 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, published August 18.

PUBLIC COMMENT

There was no Public Comment.

CONSENT AGENDA ITEMS

Osborne asked the committee for permission to vote by voice vote rather than rollcall to facilitate the meeting format. There was no dissent.

Knight made a motion, seconded by Winslow, to approve the Consent Agenda (Minutes – June 2, 2021, Year-end FY 20-21 Compliance Management Report, RGB Report) as presented.

Motioned Carried

ACTION / PRIORITY ITEMS

Election of Officers for FY 21-22: Tyerman-Harper recalled that in a previous meeting Winslow was elected chair but declined, Osborne agreed to a subsequent chair nomination.

Kielty made a motion, seconded by Kuzelka, to approve Osborne as chair.

Motion carried.

Kuzelka nominated herself for vice chair.

Osborne made a motion, seconded by Knight, to approve Kuzelka as vice chair.

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Motion carried.

Dialectical Behavioral Therapy (DBT) Training Contracts: Kreifels explained that DBT is an evidence-based practice that the Region will implement within its service array. There will be about 10-12 trainings to get providers up to speed, and Josh Smith, of the DBT Institute of Michigan will be contracted with for training and consultation for up to \$170,250 for one year. Kreifels mentioned implementing DBT as an evidence-based practice is a new addition to the Region V Systems' service array. This is one of the ways Region V Systems will reinvest monies that were freed up due to Medicaid expansion. After the first year, financial support will also be offered to providers for adherence to model fidelity and defining outcome metrics for a value-based contract. The modes of DBT are an individual therapist meeting with individuals for therapy, coaching between sessions and a bachelor's level or technician can do a group with this training.

Winslow made a motion, seconded by Meinders, to move the contract forward to the Board.

Motion carried.

Motivate to Communicate LLC: Brenda Jennings, will be contracted up to \$18,000 for Motivational Interviewing. We are offering two tracks: evidence based & informed. Informed is for training participants who attend the training, learning and implement as they feel comfortable. Evidence-based track has higher expectations to conform to the fidelity of the model. There will be support for providers who move forward with the evidence-based track. There will be financial reimbursement to the providers on the evidence-based track. After the first year, financial support will also be offered to providers for adherence to model fidelity and defining outcome metrics for a value-based contract.

Duncan made a motion, seconded by Knight, to move the contract forward to the Board.

Motion carried.

FY 21-22 Risk Management Plan (draft): Kreifels iterated that the Risk Management Plan (draft) is an annual report that the Region completes which identifies a potential loss or risk exposures for our organization, broken down into organizational goals, management, people, and health and safety. An analysis is made on the severity and likelihood of the potential loss happening, and how/if we are prepared. The plan includes ongoing maintenance of what is being done to eliminate or reduce the loss or exposure, along with new action items. The strikeouts in the report are changes, red highlighted font illustrates new additions to the plan. This plan is completed to conform to CARF standards and a part of best practices. Kreifels said that if the goals are struck out from the prior year, they have been accomplished.

Duncan made a motion, seconded by Helmberger, to move the Risk Management Plan forward to the Board for final approval.

Motion carried.

Site Visit Report Summaries: Tyerman-Harper explained that the current summaries include CenterPointe, HopeSpoke, and the Mental Health Association of Nebraska (MHA). Region V Systems conducts annual site visits with contracted providers, with a 2% sampling of all contracted units for billing.

CenterPointe had a Corrective Action of a Payback of \$7,504.50 for the units billed when no current financial eligibility documentation was in the file. A 5% re-audit took place and resulted in 100% compliance. CenterPointe demonstrates substantial compliance with Minimum Standards and contractual requirements. Fiscal audit is pending.

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HopeSpoke had a Medication Management Youth that was determined that insurance was not billed for a client; a Corrective Action Plan and a re-audit of the program will be required. There was also a Medication Management Adult that was determined that the insurance discounted the services to client copay (verses deductible) which the Region cannot pay. Payback was received and verified, a Corrective Action Plan was received, and a re-audit of these two programs will be scheduled. Fiscal audit is pending.

The MHA demonstrated substantial compliance with Minimum Standards and contractual requirements with their milestones of Supported Employment. Fiscal audit is pending.

Kielty made a motion, seconded by Duncan, to approve the report.

Motion carried.

OTHER UPDATES/INFORMATION

Behavioral Health/Legislative Updates:

• Funding Updates – SAMHSA Emergency Grant, State Opioid Response: Tyerman-Harper explained that the SAMHSA Emergency grant just ended, in the amount of \$313,000, which was specific for COVID-19 related services for outpatient, medication management, and peer support. Most providers did not utilize this grant. Integrated Behavioral Health Services did contract for this grant, but they did not experience any draw down of this grant and had no utilization. IBHS concluded that this was due to Medicaid Expansion, and consumers presenting were eligible for Medicaid. The State continues to have this grant available, but Region V doesn't have an award under that. Tyerman-Harper stated that the State Opioid Response Grant, expires at end of September, but will be ongoing, this grant funds Narcan for first responders and treatment providers in the community, and reminded the committee that there has been an increase in overdoses and mentioned that the Region has just received a large supply of Narcan.

Morrissey explained that Prevention works closely with the team at the State and first responders include law enforcement, school nurses, treatment providers, basically anyone who comes into initial contact with someone with a current overdose. The Region does not supply Narcan to individual community members, there are several pharmacies statewide that will give out Narcan, treatment providers cannot give it out. Morrissey reiterated that 911 must be called after Narcan is administered. Send any questions or concerns about Narcan her way. The Prevention team tracks all their Narcan distribution.

Morrissey spoke briefly about the System of Excellence, tied to the Opioid Grant, with participation of five organizations. Kreifels and his CQI team to set up an implementation plan for providers as they move forward. She iterated that the System of Excellence begins once a person enters a treatment program by being assessed for suicide as well as once they've exited the program, with follow-up. There will be an additional training by the UNL Public Policy Center in March 2022.

Morrissey added that they are also pulling together a media campaign with individuals who have been affected by opioid overdose. Stimulant training is also of great importance right now as many of the recent overdoses have involved cocaine, and they are gathering some good speakers for those trainings

- Alternative Service Delivery: Tyerman-Harper reported that the Division of Behavioral Health has extended telehealth and telephonic services through December as an option for service delivery.
- COVID-19 Operational Updates: Tyerman-Harper said that when the Region surveyed the Network Providers, they had started to implement mandatory masking prior to the current Lancaster County mask mandate. There are currently no capacity restrictions.

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• Reinvestment planning: Tyerman-Harper thanked everyone that participated in the planning sessions and said that the Region is processing through the input and still assessing what the needs are for reinvestment dollars. Several proposals have been submitted to the Division, including Supported Employment. A proposal has also been submitted to expand the Professional Partner program for youth case management services, as well as a Supported Housing proposal to add an additional Housing Specialist. Additional proposals include purchasing iPads for Law Enforcement working with the CenterPointe Crisis Response teams, and EHR modifications and enhancements.

Emergency System:

- Lincoln Regional Center Renovation / Staffing Updates: Tyerman-Harper explained that the Division sent a memo about the renovations at LRC, along with staffing shortages which is resulting in an adverse admission flow. Mary Lanning continues to work with Region V when people need acute care on an inpatient commitment.
- 988 Planning: The National Suicide Line number is slated to change to 988 in July 2022, nationwide. All states have an implementation grant and UNL Public Policy is implementing Nebraska's grant by looking at infostructure for 988 services. Morrissey said that all the parking garage signs will be updated with the new number. Kreifels mentioned that there is more work to be done as we integrate with emergency services, and they will be working on that. Tyerman-Harper stated that there are a few outstanding questions regarding the needs, what will be identified as needs, and what additional funding will come down.
- QPR: Morrissey interjected that the Prevention Faith Partner Community will have a press release announcing that 12 churches are hosting QPR Training (Suicide Prevention Training). As always, she encourages people to have the training.

Prevention: Morrissey explained that they are working on contracts and getting them out to coalitions, and they are having their Regional Coalition retreat offsite, connecting for the first time in over a year. She mentioned that Prevention has asked for approval for a Trauma Series to put on the Heart-to-Heart website. It will be a 12-month series/training and having it available on the website will allow for people to come back and use it at any time. They are currently in the research stage of this project.

Agreement of Strategic Intent: DBT and MI EBP Training and Implementation: Kreifels iterated that DBT, and MI is the purpose of this Strategic Intent. This agreement articulates that Region V Systems and DBH are in alignment and recognize that Evidence-Based Practices are important in achieving outcomes and the work that we do to help people in their recovery. This agreement lists responsibilities and expectations of Region V Systems and DBH as well as our commitment to implement and offer support to providers. Kreifels explained that Region V Systems has always supported MI and DBT; however, now they are trying to take it up a notch from an evidence informed practice to an evidence-based practice.

Wellness Initiative Quarterly Report: Kreifels explained that this report is attached for your information, as Wellness Initiative is the Region V Services contracted peer run organization infusing the peer perspective throughout our system.

Network Continuous Quality Improvement: Kreifels gave a brief overview of the following report:

• FY 20-21 Regional Data Overview Report Q4: This report covers the areas of efficiency, effectiveness, access, and satisfaction. It illustrates areas using, stability in living, employment, priority populations, emergency protective custody, discharge noncompliance, service enhancement metrics, observations, and some of the activity's providers are employing to help achieve targets.

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Capacity Utilization Summaries: Tyerman-Harper explained that this is the year-end Capacity Utilization Report. It shows the drawdown for each service that we contract with the Network Providers. With the Medicaid Expansion we did see a significant decline in utilization for Region V funding, not the providers seeing a decline in services. Based on last year's budget, 1.7 million dollars were moved into unallocated line items, and this is where the reinvestment monies will come from, specifically for services that are not Medicaid eligible.

Training: A list was provided for informational purposes.

IMPORTANT DATES

- September 9 9:00 a.m. Regional Prevention Coalition
- September 13 10:30 a.m. RGB Meeting Region V Services
- September 15 1:00 p.m. Level of Care
- September 20 9:00 a.m. Network Providers Meeting
- October 27 10:00 a.m. BHAC Meeting (TBD)

Other Business: Duncan typed this in the chat and Tyerman-Harper read it out loud to the group: "This is a request for another group I am working with and would love to have input from you. Our "Community Conversations" concerning what our Library can do to improve our community with services. My sub-group is for Social Services and one of our priorities is mental health. Thank you in advance for any suggestions/comments." Her email is: iduncan@neb.rr.com. Morrissey suggested becoming part of their committee.

Tyerman-Harper stated that they will let everyone know if the next meeting will be in a hybrid model.

ADJOURN

There being no further business the meeting was adjourned at 11:06 a.m.