

BEHAVIORAL HEALTH ADVISORY COMMITTEE

MINUTES

August 31, 2022

10:00 a.m.

Region V Systems, 1645 N Street

MEMBERS PRESENT: Greg Janak, Corrie Kielty, Jill Kuzelka, Laura Osborne, Gale Pohlmann, Michele Vana, Evette Watts

MEMBERS ABSENT: Rebecca Meinders, Stephanie Knight, Lucinda Mesteth

OTHERS PRESENT: Rachel Mulcahy, guest; Tami DeShon, Renee Dozier', Patrick Kreifels, Kim Michael, Sandy Morrissey, Amanda Tyerman-Harper, Marti Rabe, Region V Systems

HOUSEKEEPING AND INTRODUCTIONS

- Osborne called the meeting to order at 10:01 a.m. followed by housekeeping announcements. Introductions were made, including our two new members, Michele Vana and Evette Watts, and Rachel Mulcahy, a BHAC applicant.
- Pohlman announced that Regional Administrator, C.J. Johnson, has resigned for personal reasons. As this is a personnel issue, circumstances will be held in confidence. Osborne expressed her appreciation for Johnson's service and guiding hand at the Region for many years.

ADDITIONS / CHANGES TO AGENDA

There were no changes to the agenda.

OPEN MEETING ACT INFORMATION

Osborne noted that Open Meeting Act information is posted at Region V Systems 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, published August 17, 2022.

PUBLIC COMMENT

There was no Public Comment.

CONSENT AGENDA ITEMS

Osborne stated that voice vote will continue to be used unless there is an objection. Kielty made a motion, seconded by Kuzelka, to approve the Consent Agenda (Minutes – June 1, 2022, Year-end FY 21-22 Compliance Management Report, RGB Report) as presented. Voting aye: Janak, Kielty, Kuzelka, Osborne, Pohlmann, Vana, Watts. Nays none. Motion carried.

ACTION / PRIORITY ITEMS

BHAC Applications: Tyerman-Harper briefly reviewed the three applicants for membership on the BHAC noting the applications had been reviewed by the Nominating Subcommittee which recommended moving the applicants forward to the full BHAC. Applicants include Rachel Mulcahy, Kimberly Schroeder, and Kelsey Schwab. Janak made a motion, seconded by Vana, to recommend the Board approve the three applicants. Voting aye: Janak, Kielty, Kuzelka, Osborne, Pohlmann, Vana, Watts. Nays none. Motion carried.

BHAC Exit Interview Results: Tyerman-Harper noted the various reasons these individuals had left the BHAC and stated that there were no significant concerns requiring further action. An observation from one of the surveys

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suggested that the BHAC could be utilized in such a way as to have a greater impact. Pohlmann made a motion, seconded by Kielty, to accept the BHAC Exit Interview Results and place them on file. Voting aye: Janak, Kielty, Kuzelka, Osborne, Pohlmann, Vana, Watts. Nays none. Motion carried.

Site Visit Report Summaries: Tyerman-Harper reviewed the site visit summary reports for Associates in Counseling and Treatment (ACT), HopeSpoke, Integrated Behavioral Health Services and Mental Health Association noting that a two percent sample of services provided is reviewed for these audits. All units were verified, and program fidelity audits were not required this year except for ACT. That program fidelity audit was successful. There were no findings for any of these providers. Janak made a motion, seconded by Kielty, to recommend the Board approve the site visit reports as presented. Voting aye: Janak, Kielty, Kuzelka, Osborne, Pohlmann, Vana, Watts. Nays none. Motion carried.

OTHER UPDATES/INFORMATION:

Behavioral Health/Legislative Updates:

- Kreifels commented that Regional Administrators have been meeting with the Division of Behavioral Health to ensure that Regional roles are understood, deliverables are being met, efforts are focused on a recovery oriented system of care and greater flexibility is possible within the system.
- Tyerman-Harper and DeShon discussed change within the system that is being driven by the implementation of Medicaid expansion and the opportunity to use savings from this system change to ensure there is a safety net in place. An extensive needs assessment was completed in July of 2021 and this document was used to identify gaps and needs in the system as funds are re-directed.
- To maximize ARPA funds collaborations are taking place with counties which allow funding to be braided and used for capital construction costs. Region V is working with Lancaster County to develop a voluntary crisis stabilization service.
- Another collaboration with Lancaster County is designed to establish a Family Resource Center throughout the geographical area of Region V which would provide behavioral health supports for youth and families. Basic tenets would be a place to call, a person to talk to and a place to go. Options would include problem solving, assessment of level of risk, a plan for de-escalation of the crisis, basic needs, transportation, and ongoing support and coordination with 988. Telecommunication and in person communication is available through the mobile crisis service. Dozier commented that this type of support for families has been a goal of Region V for ten years.
- Next steps include revising the service definition, moving forward with an RFP, and taking steps to alleviate workforce issues through collaborations with existing providers. It is hoped the service can be in place by the fall of 2023.
- It was noted that needs assessments across the state have identified the same gaps in the system and workforce shortages exist statewide. Several strategies to address this concern were noted.

988

- Kreifels commented that 988, located at Boys Town, has been receiving between 50-60 calls per day. On four occasions mobile crisis response was activated; three of those events were in Region 6 and one in Region V. Because there is currently a significant amount of confusion regarding 988, efforts are being made to actively market this resource.
- At this time the old 1-800 hotline number is active and will remain so for at least a year. Veterans do not want to see the dedicated VA line deactivated. The number of calls to each number is being monitored and that data will play a part in determining when to phase out the old number. Peak times are also being monitored, and 988 has the option to have more staff available during times of high utilization.
- The service definition for mobile crisis is being revised based on feedback from providers. Traditionally there have been barriers related to training requirements and licensure for respondents that were difficult to achieve. The Division has been open to changes that allow for more flexibility

Prevention / Narcan:

- Morrissey reported that Region V no longer houses Narcan for first responders, which includes law enforcement, EMTs and Fire and Rescue. First responders can go directly to stopodne.com and order Narcan with billing being directed to the State. Network providers must now go to participating pharmacies and can receive four boxes at a time. Participating pharmacies are listed on the stopodne.com website. In rural areas concerns include stigma and pharmacies not being willing to participate which limit access to this remedy.
- The number of individuals using methamphetamines has been increasing and children have been found to have meth in their system. This increased use of meth has been driving the increase in requests for Narcan.
- Pharmacies are tracking utilization but are treating requests for Narcan like any other prescription.
- Opioid use has been decriminalized if there is an overdose and the Good Samaritan law comes into play.
- Animal control officers are also carrying Narcan and at times a police presence is available as these officers can be at risk.
- Legislation is anticipated for the “clean-up” bill. This bill would involve rental houses and would require landlords to clean up known meth houses before they are rented again. The bill would include funding to provide inspectors to ensure the clean up has taken place.

Network Provider Contracts / Budgets: Tyerman-Harper stated that contracts are currently out for signature. Contracts were issued with the preliminary allocation which includes the rate increase but shows a related reduction in capacity because the additional funding has not been allocated. When the Region receives its revised allocation from the State, contract amendments will be issued that will right size contracts to eliminate the reduction in capacity.

Opioid Litigation Settlement Dollars: Kreifels noted that approximately eighty-one million dollars will be available in Nebraska to be used over 18 years. These dollars will rest with the State. A needs assessment was requested and was submitted. The Region will be looking at ways to use these dollars collaboratively as the Regions will partner with DHHS to help direct some of the funding. Currently there is confusion about where the money will flow and what type of approval process will be required. It is anticipated that there will be more clarity once more information is provided.

ARPA Funds: Tyerman-Harper reported on three opportunities for new services using ARPA funding. The funding will be released in two cycles with the first cycle ending in March or 23. There may be an opportunity to extend that initial cycle by a year. The second cycle is scheduled to end September 2025. The following opportunities are:

- Adolescent Substance Use Treatment: This service will enhance the continuum of care by providing additional treatment options for adolescents. Providers have been asked to submit proposals for this service.
- Medication Assisted Treatment (MAT) – Alcohol Disorders: The Region is working with providers regarding extending MAT treatment to include alcohol disorders.
- Contingency Management: The Region has been using this funding to incentivize individuals in the Rental Assistance Program to complete the RentWise training. Individuals who take the training are prioritized on the HUD waitlist and are less likely to lose their housing vouchers. Providers have been asked to submit other proposals with the goal of maximizing this funding.
- Morrissey commented that Prevention is using ARPA funding to produce a series of videos on trauma. The videos are available on the Talk Heart2Heart website. Request for an extension in using this funding has been submitted as additional videos could be made available given more time. It was noted that many people have a general idea of what trauma is, but there is a gap in understanding of Adverse Childhood Events (ACEs), how trauma affects life choices and brain development, and lingers across generations.

Reinvestment Updates: No further discussion.

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Nominating Subcommittee Membership: Kuzelka agreed to serve on the Nominating Committee which is tasked with reviewing applications for the BHAC before they move forward to the advisory committee and Board.

Network Continuous Quality Improvement (CQI):

- Zero Suicide System of Excellence FY 22 Report: This project was initiated with a SAMHSA grant and reflects the aspirational goal of no deaths by suicide. Kreifels presented the data report for FY 21-22. CenterPointe, Lutheran Family Services, Mental Health Crisis Center and Region V's Professional Partner program participated in the initial training.
- Kreifels reviewed data for FY 22 noting that 5,362 individuals were enrolled across all funding streams. Best practice suggests that 100 percent of those entering BH services be screened for suicide risk; the report shows that 82% of the 5,362 individuals were screened. Of those 52% who screened positive, 53% of those individuals were clinically assessed and 93% of those clinical assessments were assessed positive. For those clinically assessed positive, 85% had developed a safety plan, 15% had no safety plan in place, 31% received lethal means counseling and 69% did not.
- For the 192 individuals who were hospitalized or had an ER visit, 73% were contacted within 24 hours and 27% were not. For the 407 persons who were on the Life Worth Living Pathway, 44% missed an appointment and 56% did not. For those missing an appointment, 30% were contacted within eight hours and 70% were not.
- For any area where best practice thresholds of 100% were not met, an opportunity for improvement exists.
- A second academy has taken place and it is hoped that more providers will take the opportunity to join in this initiative. Several hospitals and public health departments have gotten on board. Additional types of suicide training and their target audience were noted.
- Regional Data Overview Report Q4: Kreifels stated this report is a summary of the business activities monitored for the year and was attached for informational purposes. Anyone with questions or comments was invited to contact Kreifels for more information.

Year-end FY 21-22 Capacity (CAP) Utilization Summaries:

- DeShon discussed the CAP summaries and noted that these are end-of-year reports and indicate all contract utilization for each of our Network Providers. DeShon briefly reviewed what each of the columns was used for noting that the last column shows projected utilization. For those providers who are under 100 percent utilization for a service, those dollars are being used for the reinvestment activities that were discussed earlier. Throughout the year these reports are monitored, and contract shifts take place quarterly based on this utilization. Shifts can take place among services for a specific provider or across the network.
- For FY 22-23 contracts were reduced to reflect the reduction in utilization that occurred due to Medicaid implementation as many persons served by Region V became eligible for Medicaid at that time. It was noted that utilization for children's services remained quite high and DeShon commented that Medicaid implementation did not have a significant impact on children's services.

Wellbeing Initiative Quarterly Report: Provided for informational purposes.

FY 22-23 Training Plan: Provided for informational purposes.

ADJOURN

- There being no further business the meeting was adjourned at 11:46 a.m.

IMPORTANT DATES

- September 12 – 10:30 a.m. – RGB Meeting at Region V Services
- September 19 – Network Provider Meeting / Zoom
- September 8 – 9:00 a.m. – Regional Prevention Coalition
- November 2 – 10:00 a.m. – BHAC Meeting