#### BEHAVIORAL HEALTH ADVISORY COMMITTEE

#### **MINUTES**

March 27, 2024 10:00 a.m. Region V Systems, 1645 N Street

**MEMBERS** Renee Duffek, Greg Janak, Corrie Kielty, Stephanie Knight, Sarah McEntarffer, Rachel Mulcahy,

**PRESENT:** Laura Osborne, Gale Pohlmann, Melissa Ripley, Kim Schroeder, Evette Watts

**MEMBERS** Jill Kuzelka, Rebecca Meinders, Kelsey Schwab, Michele Vana

**ABSENT:** 

OTHERS Nick Flewelling, Jamie Scott, IBHS; Theresa Henning, Patrick Kreifels, Erin Rourke, Amanda

**PRESENT:** Tyerman-Harper, Marti Rabe, Region V Systems

## HOUSEKEEPING / ANNOUNCEMENTS / INTRODUCTIONS

In the absence of the Chair, Vice Chair Janak called the meeting to order at 10:01 a.m. followed by announcements and rollcall. A quorum was present.

## OPEN MEETING ACT INFORMATION

Janak 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 March 13, 2024.

# ADDITIONS / CHANGES TO AGENDA

There were no changes to the agenda.

## **PUBLIC COMMENT**

There was no Public Comment.

# <u>NETWORK PROVIDER PRESENTATION – NICK FLEWELLING, CHIEF OPERATING OFFICER AND</u> JAMIE SCOTT, CHIEF INNOVATION OFFICER, INTEGRATED BEHAVIORAL HEALTH SERVICES

- Flewelling providing a brief history of IBHS, which began providing services in 2017, and an overview of current programs and activities. The agency is CARF accredited and is currently serving approximately 200 individuals in Lincoln and has recently expanded to a Beatrice office where Psych Res Rehab and Community Support are offered.
- Scott identified her role as helping to educate communities about behavioral health concerns and resources.
- IBHS was approved as the provider for the Voluntary Crisis Response Center (VCRC) and is anticipating a start date in September following some minor rehabilitation of the site. Lancaster County ARPA funding is being used for renovation expenses and the Region is contributing funding for start up costs.

#### **CONSENT AGENDA ITEMS**

• Mulcahy made a motion, seconded by Osborne, to approve the Consent Agenda as presented. (Minutes – February 28, 2024, FY 23-24 Compliance Management Report, RGB Report). There was no further discussion. Voting aye were: Duffek, Janak, Kielty, Knight, McEntarffer, Mulcahy, Osborne, Pohlmann, Ripley, Schroeder, Watts; nays none; absent: Kuzelka, Meinders, Schwab and Vana, Motion carried.

# **ACTION / PRIORITY ITEMS**

# Prevention – Culturally and Linguistically Appropriate Services (CLAS) – Mini-Grants:

- CLAS Grant Applications: Henning reviewed the five applications for CLAS funding briefly describing the activities that that would be funded by these grants. The total request is \$6,574.56. Osborne made a motion, seconded by Knight, to recommend the Board approve the CLAS grant applications are presented. Voting aye were: Duffek, Janak, Kielty, Knight, McEntarffer, Mulcahy, Osborne, Pohlmann, Ripley, Schroeder, Watts; nays none; absent: Kuzelka, Meinders, Schwab and Vana, Motion carried.
- Revision of Prevention Mini-grant Standards: Henning pointed out the one change requested for the mini-grant standards. This addition will stipulate that all media requires a funding statement as well as approval of the media

- piece prior to publication in communities. Mulcahy made a motion, seconded by Pohlmann, to recommend the Board approve the revision to the mini-grant standards. Voting aye were: Duffek, Janak, Kielty, Knight, McEntarffer, Mulcahy, Osborne, Pohlmann, Ripley, Schroeder, Watts; nays none; absent: Kuzelka, Meinders, Schwab and Vana, Motion carried.
- Revision of CLAS Standards: Henning noted a proposed change to the grant criteria. If approved, the limit for CLAS mini-grant funding would increase from \$1,500 to \$3,000. Knight made a motion, seconded by Ripley, to recommend the Board approve the revision to the CLAS Standards Criteria as requested. Voting aye were: Duffek, Janak, Kielty, Knight, McEntarffer, Mulcahy, Osborne, Pohlmann, Ripley, Schroeder, Watts; nays none; absent: Kuzelka, Meinders, Schwab and Vana, Motion carried.

## **Opioid Remediation Settlement Funds Update:**

- Obvious Expenditures Recommendations: Henning discussed two requests for funding for Obvious Expenditures
  which were reviewed and approved by the Steering Committee based on the Blueprint priorities.
  - MyLNK: This funding would provide for management and upkeep of the site MyLNK. MyLNK also provides monthly analytics. There is also a free MyLNK App that can be downloaded to a phone so internet access is not required. The App provides resources available from DHHS and the Center for People. Total requested is \$6,000. Schroeder made a motion, seconded by Vana, to recommend the Board approve this request for funding as presented. Voting aye were: Duffek, Janak, Kielty, Knight, McEntarffer, Mulcahy, Osborne, Pohlmann, Ripley, Schroeder, Watts; nays none; absent: Kuzelka, Meinders, Schwab and Vana, Motion carried.
  - ➢ Opioid Video Series: There are two expenses under this category. The first request, for \$8,500, will pay for the video series that was recently viewed at the Opioid Summit and is now available via a link on the Region V website. The second expense is for promotion of the opioid video series by KidGlov which includes digital marketing, creation of landing pages, and creation of additional clips for utilization on the TalkHeart2Heart website. The cost for this request is \$6,000 for a total of \$14,500 for both requests. Pohlmann made a motion, seconded by McEntarffer, to recommend the Board approve these requests related to the Opioid Video Series for a total of \$14,500. Voting aye were: Duffek, Janak, Kielty, Knight, McEntarffer, Mulcahy, Osborne, Pohlmann, Ripley, Schroeder, Watts; nays none; absent: Kuzelka, Meinders, Schwab and Vana, Motion carried.
- Opioid Summit: The Opioid Summit was a two-day event with the first day focusing on a broad array of topics such as education, data, stigma, prevention, treatment, and others. The second day a provider panel presented information and the rest of the day was spent in strategic planning and identifying priorities based on the Blueprint approved by the BHAC. There was a lot of positive feedback regarding the event. Aggregated information from all the recommendations will be available by Friday. The tentative timeline for issuing grants to move the approved projects forward is around April 15, 2024.

Region V Systems' Revised Mission / Vision / Value Statement: Kreifels described revisions to this document as a "reset" as the Region continues to move forward with the recovery oriented behavioral health system of care. The process of review began in January, and input has been received from the Consumer & Family Advisory Committee (CFAC), Network Providers, and Region V employees. BHAC members were requested to provide input. The document will go to the Board for approval on May 13, 2024, and the Mission / Vision and Value statement will be included in the Strategic Plan. Knight made a motion, seconded by McEntarffer, to recommend the Board approve the revised Statement as presented. Voting aye were: Duffek, Janak, Kielty, Knight, McEntarffer, Mulcahy, Osborne, Pohlmann, Ripley, Schroeder, Watts; nays none; absent: Kuzelka, Meinders, Schwab and Vana, Motion carried.

**2024 Network Provider Survey Results and Comparison**: Kreifels commented that this survey is a part of the Region's continuous quality improvement process, a requirement of CARF, and results are used to improve processes and create efficiencies where possible. Discussion points included:

- Question 3: There was discussion regarding the workforce shortage. Kreifels mentioned that impact of workforce stabilization funds that improved the vacancy rate for providers.
- Question 4: Concerns were expressed about receiving emails outside of business hours. Kreifels commented that at
  times the Region has timelines imposed that require action in a timely manner. Providers are not expected to respond
  to emails or requests outside of business hours.
- Question 5: Concerns were expressed regarding the volume of information the Region produces and suggested that
  the Region might be overstaffed. There was no further feedback from providers regarding this concern. Kreifels
  commented that the Region is always evaluating efficiencies and will continue to do so as the loss of three million
  dollars in funding must be absorbed.

- Question 7: Some responses were" neutral" or "disagree" though there were no negative comments shared. Kreifels
  expressed how valuable this committee is in the decision making process and described a number of vehicles by
  which stakeholder involvement is incorporated in the decision making process.
- Question 11: There was a negative comment related to a contract requirement regarding meeting attendance, which
  is a contract deliverable. It is not the Region's intention to shame anyone but information from the Compliance
  Management Report may require a Quality Improvement Plan if percentages in various categories fall below the
  established thresholds.
- Kreifels commented that it appeared that many of the negative comments came from the same source and noted the
  Region did not remove any of the comments expressed because they were not positive. Information from the survey
  will be evaluated as efficiencies are reviewed. Providers were encouraged to reach out if there were specific areas
  that they felt needed more discussion. Kreifels stated that the Region evaluates all comments and suggestions, and
  uses information gained from the surveys to improve processes and efficiencies.
- Osborne made a motion, seconded by Mulcahy, to recommend the Board approve and place on file the Network Provider Survey results. Osborne, Mulcahy, Voting aye were: Duffek, Janak, Kielty, Knight, McEntarffer, Mulcahy, Osborne, Pohlmann, Ripley, Schroeder, Watts; nays none; absent: Kuzelka, Meinders, Schwab and Vana, Motion carried.

**2024 BHAC Survey Results and Comparison**: Kreifels thanked BHAC members for completing the survey noting that 100 percent of members did so. Overall responses were positive. Individual discussion regarding several questions followed:

- Question 1: Several BHAC members commented that they could not remember how long they have served. The Terms of Service chart will be included in the May 1 agenda packet.
- Question 8: Kreifels stated that the Advisory Committee is required by State statute. The Regions advocated to retain
  the Committee when the statute was being revised because it provides an important perspective and allows the
  Regions to get feedback from a grassroots level. Both Pohlmann and Janak commented that the Regional Governing
  Board relies on the BHAC to be "the experts" where behavioral health is concerned.
- Kreifels discussed the continuum of services available to each county. There was a question regarding whether or
  not BHAC members could attend the BETA trainings. Henning will include BHAC members when sending out
  registration about future BETA trainings. While BETA is free to law enforcement and related positions, there is a
  cost involved for other attendees. There was some discussion regarding the cost for BETA being a barrier for some
  counties and schools to send attendees.
- Question 9: Kreifels commented that the Regional Governing Board Report, included in the Consent Agenda, is an
  attempt to provide feedback regarding motions forwarded to the Board. Board minutes are posted on the website. At
  the next meeting a brief tutorial on accessing the minutes from the website will be presented.
- Schroeder made a motion, seconded by Kielty, to recommend the Board approve and place on file the results of the BHAC Survey. Voting aye were: Duffek, Janak, Kielty, Knight, McEntarffer, Mulcahy, Osborne, Pohlmann, Ripley, Schroeder, Watts; nays none; absent: Kuzelka, Meinders, Schwab and Vana, Motion carried.

**Site Visit Report Summary - Blue Valley Behavioral Health (BVBH)**: Tyerman-Harper presented the site visit report for BVBH noting that the audit reviewed a two-percent sample of the contracted capacity for all services provided. During a unit audit files are reviewed to ensure that documentation substantiates service provision. There was one service where the percentage accounted for fell below the 95 percent threshold and corrective action was requested. Knight made a motion, seconded by Ripley, to recommend the Board approve the Site Visit Report Summary for BVBH. Voting aye were: Duffek, Janak, Kielty, Knight, McEntarffer, Mulcahy, Osborne, Pohlmann, Ripley, Schroeder, Watts; nays none; absent: Kuzelka, Meinders, Schwab and Vana, Motion carried.

**FY 20-FY23 Region V Prevention Programmatic Monitoring**: Tyerman-Harper noted that the BHAC has already reviewed and approved this report in a preliminary state. The final report removed any significant findings following review by the Division. Kielty made a motion, seconded by Pohlmann, to recommend the Board approve the final Programmatic Monitoring report as presented. Voting aye were: Duffek, Janak, Kielty, Knight, McEntarffer, Mulcahy, Osborne, Pohlmann, Ripley, Schroeder, Watts; nays none; absent: Kuzelka, Meinders, Schwab and Vana, Motion carried.

# **OTHER UPDATES/INFORMATION:**

Behavioral Health/Legislative Updates: Kreifels provided updates and information on the following:

• The Nebraska Medical Association is working with DBH to increase the number of behavioral health practitioners and prescribers. Through collaboration with the Community Mental Health Center in Falls City staffing has

increased. Efforts are ongoing in other counties as well. It was observed that a ratio of one behavioral health provider for every three medical practitioners increases efficiencies and is cost effective.

- Kreifels briefly shared information about Lobby Day reporting that a number of individuals, including Pohlmann, spoke during a press conference. Senator Frederickson had submitted a bill to retain 13 million dollars for the Regions and allocate two million dollars to the Lincoln Regional Center. The bill did not get enough votes to pass.
- LB1412, the budget bill, passed and will move forward to the Governor.
- LB388, the tax bill, will move forward to the Governor. The impact of raising sales taxes was noted.
- LB932, the LMHP bill, would ramp up accreditation and licensure requirements for LMHPs.
- LB9322, the Social Worker Compact Bill, would change provisions relating to criminal background checks. There is no fiscal impact related to this bill.
- LB1355, the Opioid Settlement bill, moved to the final reading. This bill would allocate \$3,000,000 to the Regions each year and create a cash care fund.
- LB929, the warm handoff bill, is moving forward and if it passes would increase collaboration between 911 and 988.
- LB1087, the Hospital Quality Assurance and Access Assessment Act, will establishes a partnership between Nebraska hospitals and the Nebraska Department of Health and Humans Services to preserve health care services across Nebraska, improve health care quality, and pursue additional federal reimbursement for Medicaid services.
- LR392, an interim study, would review provider rates in the Medicaid system and set up a provider reimbursement system to adjust Medicaid provider rates regularly.
- LR420, an interim study, would examine the budget needs of and funding sources for the Regional Behavioral Health Authorities.
- LR422, an interim study, would examine the needs, successes, and challenges relating to behavioral health in Nebraska.
- Kreifels spoke briefly about Director Corsi, noting there was some controversy regarding his appointment.
- State auditors are finding concerns related to ARPA, Medicaid, Medicare and behavioral health expenditures.

## **Budget Plan Process and Timeline:**

- Tyerman-Harper explained that initial provider requests for allocation were based on preliminary allocations from DHHS. The Region received the final allocation letter which reduces funding by approximately three million dollars, so the Region has been working with providers to right size the network based on projected capacity utilization as of January 1, 2024.
- Some service enhancements have been left in place though there may be pushback from DHHS as DHHS is pushing to move toward all fee-for-service services. There was brief discussion regarding the impact of losing some of those services. There were reductions in flex funds, CLAS grants, trauma related activities, MI and DBT and other flexible "pots" that the Region was traditionally able to utilize at its discretion. Kreifels commented that the Region is losing flexibility to use its allocation as now service definitions will be required to mirror Medicaid. The Budget Plan is due to be submitted by March 29, 2024.
- There was discussion about the possibility of using private funding. This may be considered in the future; however, Kreifels noted that the Region would not want to appear to be competing with providers for private funding.

**Medicaid Unwind**: Rourke reported that Medicaid is finished with 75 percent of the re-evaluations and 67 percent of those reviewed continue to be eligible. There has been a slight increase in Medicaid enrollment.

# **Emergency System Update:**

- 988 Implementation Team Update: The Stepping Up Steering Committee held its first meeting on March 26. There has been a lot of valuable engagement with this project, and efforts continue to get collaboration among a broad spectrum of stakeholders. Baumeister is hoping to make a quick impact by working with high utilizers.
- Baumeister will be creating a Blueprint similar to the document that is being used by the Opioid Workgroup to set priorities. The document will be presented to the BHAC when completed.
- Focus areas will be rural jails and LRC as it relates to contract deliverables around discharges. LRC has recently
  been able to increase capacity to 200 beds. The benchmark for individuals on a mental health board commitment or
  needing a competency restoration hearing is admission within 30 days.

Regional Prevention Coalition System Update: No further updates.

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**Network Continuous Quality Improvement**: A synopsis of all the CQI reports was provided. BHAC members concurred that they like the idea of the synopsis and in the future the reports can be sent as a separate email rather than be included in the packet. Rourke reported that RQIT met in March and the Region is working with providers to help them develop their implementation plans for Zero Suicide. Rourke also noted that MI and DBT have been added to provider contracts though funding has been reduced for these evidence based practices. Moving forward training will rely on internal trainers to a larger extent. The UNL Policy Center has been engaged to evaluate implementation and will have a report available by this fall. The following reports were provided for your information.

- FY 23-24 Q2 Network CQI Data Synopsis
- FY 23-24 Q2 Complaints, Appeals, Critical Incidents
- FY 23-24 Q2 Ineligibles and Denials
- FY 23-24 Q2 National Outcome Measures
- FY 23-24 Q2 Perception of Care
- FY 23-24 Q1Quality File Review
- FY 23-24 Q2 Recovery Outcomes
- FY 23-24 Q2 Stable Living & Employment at Discharge
- FY 23-24 Q2 Zero Suicide System

**FY 23-24 Capacity Utilization Summaries**: These documents were provided at the meeting. The CAP reports are monitored carefully to ensure Region funds are used in the most expeditious manner to pull down funding. It is anticipated that the Region will pull down between 77 and 85 percent of its allocation this year.

FY 23-24 Training Plan: Provided for your information.

#### **ADJOURN**

• There being no further business the meeting was adjourned at 12:03 p.m.

#### **IMPORTANT DATES**

- April 8 10:15 a.m. Regional Governing Board Meeting at Region V Systems
- April 11 9:00 a.m. Regional Prevention Coalition
- May 1 10:00 a.m. BHAC Meeting
- May 20 Network Provider Meeting / Teams (April meeting cancelled due to conflicts)