

BEHAVIORAL HEALTH ADVISORY COMMITTEE

MINUTES

May 1, 2024

10:00 a.m.

Region V Systems, 1645 N Street

MEMBERS PRESENT: Greg Janak, Corrie Kielty, Rebecca Meinders, Rachel Mulcahy, Laura Osborne, Gale Pohlmann, Melissa Ripley, Kim Schroeder, Michele Vana, Evette Watts

MEMBERS ABSENT: Renee Duffek, Stephanie Knight, Jill Kuzelka, Sarah McEntarffer, Kelsey Schwab

OTHERS PRESENT: Will Schmeekle, Nebraska Medical Association; Catherine Fletcher, Lutheran Family Services; Theresa Henning, Trina Janis, Patrick Kreifels, Sandy Morrissey, Erin Rourke and Marti Rabe, Region V Systems

HOUSEKEEPING / ANNOUNCEMENTS / INTRODUCTIONS

In the absence of the Chair, Vice Chair Janak called the meeting to order at 10:03 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 April 17, 2024.

ADDITIONS / CHANGES TO AGENDA

There were no changes to the agenda.

PUBLIC COMMENT

There was no Public Comment.

PRESENTATION – NE MEDICAL ASSOCIATION, WILL SCHMEEKLE, PROJECT COORDINATOR

- Schmeekle presented a project overview regarding a physician-led, grant-funded project which is focused on assisting rural primary care clinics bring behavioral health providers on site to provide access to whole-person healthcare. Training, technical assistance and startup funding will be provided through this grant. Schmeekle noted that Nebraska is in the bottom tier with less than 25 percent of clinics providing co-located care.
- The grant is statewide and currently in Region V, support is being provided in Falls City. Other sites will be added as providers become available.
- Schmeekle provided information about the three levels of care on a continuum from coordinated care to co-located care to integrated care explaining that the level of collaboration increases with close coordination being the standard in a merged practice. He also explained the difference between Primary Care Behavioral Health and the Collaborative Care model and discussed the advantages of integrated care. Advantages include timely access to behavioral health services, reduced stigma, improved outcomes, greater productivity for physicians, reduction of burnout, and better follow through for persons served.
- The largest barriers are the upfront costs and finding available providers. The PowerPoint slides will be emailed to provide complete information.

NETWORK PROVIDER PRESENTATION – CATHERINE FLETCHER, ASSISTANT VICE PRESIDENT, LUTHERAN FAMILY SERVICES (LFS)

- Fletcher described the eclectic services which LFS offers. In addition to services funded by Region V, LFS also works with children and families, adoption services, foster care, refugees, and immigrants. Region V funded services include Outpatient Mental Health (MH) and Substance Use Disorder (SUD), Intensive Outpatient, Community Support and Peer Support.
- LFS is one of two Certified Community Behavioral Health Clinics (CCBHC) in Lincoln. Fletcher noted that the biggest shift she is seeing with that model is improved connection between the various services and

increased teamwork. Every individual who presents at LFS is screened for depression and suicidality regardless of the reason they are seeking services.

- The coordination allows LFS to support the whole person immediately and meet basic needs in a mindful way. When basic needs are not met, those challenges can be interfering with therapy. Coordinating care allows the therapist to focus on the behavioral health needs of the individual.
- LFS offers Open Access, currently available four days a week from 9:00 a.m. to 3:00 p.m. Fletcher noted that staffing for Open Access has been a challenge as it remains difficult to hire therapists for those positions.
- Fletcher discussed the need to use technology where it is advantageous without losing sight of the fact that some people do not have access to or want to use those options. LFS has used telehealth options when appropriate to increase availability of services for individuals who may have transportation or other barriers.

CONSENT AGENDA ITEMS

- An error was pointed out in the minutes regarding a mis-labeled Legislative Bill number. Osborne made a motion, seconded by Mulcahy, to approve the Consent Agenda with the revision. (Minutes – March 27, 2024, FY 23-24 Compliance Management Report, RGB Report). There was no further discussion. Voting aye were: Janak, Kielty, Mulcahy, Meinders, Osborne, Pohlmann, Ripley, Schroeder, Vana, Watts; nays none; absent: Duffek, Knight, Kuzelka, McEntarffer, Schwab. Motion carried.

ACTION / PRIORITY ITEMS

Contracts / Contract Amendments – Henning presented contracts in the following categories:

- ARPA – Contingency Management and Medication Assisted Treatment: These contract amendments with CenterPointe (increase of \$61,500), LFS (increase of \$16,000), and Houses of Hope (increase of \$22,800) extend their current contracts for Contingency Management and / or Medication Assisted Treatment through September 30, 2025, with the corresponding increase in funding. Ripley made a motion, seconded by Pohlmann, to recommend the Board approve the ARPA Contract Amendments as presented. Voting aye were: Janak, Kielty, Mulcahy, Meinders, Osborne, Pohlmann, Ripley, Schroeder, Vana, Watts; nays none; absent: Duffek, Knight, Kuzelka, McEntarffer, Schwab. Motion carried.
- Prevention: This contract with the Lincoln Police Department, in the amount of up to \$5,000, will increase the number of compliance checks to ensure establishments are not selling to minors. Kielty made a motion, seconded by Vana, to recommend the Board approve this Prevention contract with LPD. Voting aye were: Janak, Kielty, Mulcahy, Meinders, Osborne, Pohlmann, Ripley, Schroeder, Vana, Watts; nays none; absent: Duffek, Knight, Kuzelka, McEntarffer, Schwab. Motion carried.
- Statewide Opioid Response (SOR) Grant: These two contracts provide for approved medication for the treatment of opioid use disorder (BayMark Health Services - \$25,021) and the provision of a four-webinar training series on substance use prevention (J. Chad Professional Training - \$8,800). Mulcahy made a motion, seconded by Schroeder, to recommend the Board approve these SOR Grant contracts. Voting aye were: Janak, Kielty, Mulcahy, Meinders, Osborne, Pohlmann, Ripley, Schroeder, Vana, Watts; nays none; absent: Duffek, Knight, Kuzelka, McEntarffer, Schwab. Motion carried.
- Training: These four contracts provide for the following:
 - Critical Time Intervention (CIT) basic training and consultation – Dr. Carolyn Hanesworth, \$21,500
 - Sequential Intercept Mapping (SIM) training – Policy Research Associates – \$25,000
 - Child-Parent Psychotherapy (CPP) training and supplies – UNL – \$25,000
 - Parent-Child Interaction Therapy (PCIT) training and supplies – UNL – Center on Children, Families and the Law - \$26,598
 - Pohlmann made a motion, seconded by Osborne, to recommend the Board approve these training contracts as presented. Voting aye were: Janak, Kielty, Mulcahy, Meinders, Osborne, Pohlmann, Ripley, Schroeder, Vana, Watts; nays none; absent: Duffek, Knight, Kuzelka, McEntarffer, Schwab. Motion carried.

Opioid Remediation Settlement Funds Update: Janis presented the following Obvious Expenditures noting that the Opioid Steering Committee identified these priorities and approved moving these requests forward to the BHAC and Board:

- Obvious Expenditures Recommendations:
 - Opioid Flex Fund Proposal: These flex funds would be utilized to help obtain resources necessary to meet treatment needs that cannot be provided through other funding. Examples would include transportation and temporary housing that would allow the participant to report to the treatment center for the required seven

days. \$50,000 has been requested for these expenses. Pohlmann made a motion, seconded by Osborne, to recommend the Board approve the Flex Fund Proposal Request as presented. Voting aye were: Janak, Kielty, Mulcahy, Meinders, Osborne, Pohlmann, Ripley, Schroeder, Vana, Watts; nays none; absent: Duffek, Knight, Kuzelka, McEntarffer, Schwab. Motion carried.

- Opioid Needs Assessment: The aim of this project is to collect data from a broad range of constituents across Region V. The resulting report will incorporate all gathered and analyzed data and will highlight strengths, areas of concern, and recommendations for future action. The budget for this project is \$114,575. Mulcahy made a motion, seconded by Vana, to recommend the Board approve these Opioid Remediation Settlement Fund expenditures as presented. Voting aye were: Janak, Kielty, Mulcahy, Meinders, Osborne, Pohlmann, Ripley, Schroeder, Vana, Watts; nays none; absent: Duffek, Knight, Kuzelka, McEntarffer, Schwab. Motion carried.

- Grant Application: Representatives from the BHAC, RGB, the Opioid Steering Committee and Region V will review the grant applications which are due May 6. Results of the review will come to the BHAC on May 29 for recommendations for approval.

FY 24-25 Strategic Plan Draft: Kreifels reviewed the draft Strategic Plan noting that the plan was developed with input from SAMHSA, four community planning sessions, the Consumer-Family Advisory Committee, Network Providers, BHAC, Division of Behavioral Health and Board. The RGB Executive Committee will view the draft and it will be a motion item for the June Board meeting. Kreifels briefly reviewed the goals and objectives contained in the plan. There was brief discussion concerning the barriers to a collaborative relationship with the Division. In general, those barriers are the result of competing priorities. The importance of local control available through the Regions was noted. Mulcahy made a motion, seconded by Kielty, to recommend the Board approve the draft FY 24-25 Strategic Plan. Voting aye were: Janak, Kielty, Mulcahy, Meinders, Osborne, Pohlmann, Ripley, Schroeder, Vana, Watts; nays none; absent: Duffek, Knight, Kuzelka, McEntarffer, Schwab. Motion carried.

FY 22-23 Division of Behavioral Health (DBH) Audit: Kreifels presented the FY 22-23 DBH Audit, which is conducted to ensure that the Region is using its funding appropriately. There were no requests for payback and the few recommendations noted have already been addressed. Kreifels briefly mentioned the various controls that are in place to ensure no fraud takes place. Ripley made a motion, seconded by Pohlmann, to recommend the Board approve and place on file the DBH Audit report. Voting aye were: Janak, Kielty, Mulcahy, Meinders, Osborne, Pohlmann, Ripley, Schroeder, Vana, Watts; nays none; absent: Duffek, Knight, Kuzelka, McEntarffer, Schwab. Motion carried.

OTHER UPDATES/INFORMATION:

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

- Interim studies LR420 and LR422 will be monitored this summer. These bills relate to the budget needs and funding sources for the Behavioral Health Regions and the needs, successes and challenges relating to behavioral health in Nebraska, respectively.
- A report on the concerns and perspectives regarding the need for psych beds will be available in the fall.
- The Governor has announced that 1,000 positions will be eliminated statewide. The rationale is that many of these positions have been vacant for 90 days.
- Kreifels is preparing a succinct document, a Statewide Perspective of the Behavioral Health System of Care, to present to Senators when he meets with them over the summer. The document will briefly describe the history of the Regions via legislation, the unique services provided, various funding sources and collaborations, and a timeline that demonstrates the areas that have had an influence on behavioral health utilization such as Medicaid expansion, the pandemic, and a series of reductions in funding.
- Kreifels noted that he is in the process of attending a meeting for each County Board. Kreifels is meeting with Dr. Corsi on May 7 to learn more about his vision for behavioral health care in Nebraska. A meeting is scheduled with the lobbyist in June to review the Statewide Perspective.

Budget Plan Process and Timeline: Kreifels commented that final documents related to the Budget Plan were due yesterday. The initial allocation was revised because of the loss of funding (\$15,000,000 statewide) so the Budget Plan required extensive revision as adjustments were made creating a short timeline for submission. One change will be that the Region will no longer be funding behavioral health services at the Youth Detention Center. That funding will be directed back to HopeSpoke and also to Wellbeing Initiative for their satellite sites. It is uncertain

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where funding for the Detention Center will come from. Continuation of Capacity Access Guarantee (CAG) is still being negotiated.

Medicaid Unwind: Rourke reported that Medicaid has finished 85 percent of the enrollment reviews, a process which began in March of 2022. The number of individuals on Medicaid has decreased by 12 percent and it is anticipated that some of those individuals will return to Region V / DBH funding.

Emergency System Update:

- A BETA training is scheduled for this summer. The Youth BETA originally scheduled has been cancelled.
- The Region is focusing on getting individuals into the Lincoln Regional Center within 30 days and getting discharge ready individuals out within 30 days. At one time as many as 12-14 persons were waiting for discharge and currently there are eight remaining. It was noted that these individuals have highly complex multiple morbidities and Plans for One are being considered as attempts to serve these individuals in the current array of community-based services have not been successful.

Informational Documents:

- FY 24-25 Meeting Schedule (Draft)
- FY 24-25 Site Visit Schedule (Draft)
- BHAC Terms of Service Chart
- BHAC Attendance Chart
- FY 23-24 Capacity Utilization Summaries: The goal is for utilization by be above 70 percent by June 30.
- FY 23-25 Training Plan

Regional Prevention Coalition System Update: Morrissey reported the following:

- Prevention is wrapping up the Federal Block Grant and conducting programmatic reviews looking at successes, challenges, and upcoming changes.
- The State is requiring mostly evidence-based activities.
- A workplan is being developed and will be presented to the BHAC at the May 29 meeting. The workplan will allow for better data to assess outcomes and the community at large will be able to see what prevention activities are taking place.
- There is one more month for the Suicide Prevention grants but is anticipated funding will continue. The public health districts are also receiving suicide funds.
- Prevention is collaborating with Janis regarding the opioid prevention pieces.
- Morrissey discussed the development of a workgroup in collaboration with Justice in Action regarding how to make resources available to people needing them. Justice in Action is particularly interested in navigation.
- Osborne briefly discussed the Cook Center and free virtual resources that will be available to schools as part of the Zero Suicide effort.

Network Continuous Quality Improvement: CQI Quarter 3 reports will be available at the May 29 meeting, and it is anticipated that the Network Performance Improvement Plan (draft) will be on the agenda. There may be some changes to the measures being monitored as efficiencies are evaluated. The CARF site visit is scheduled for May 16 and 17.

Navigating Region V Systems Website: Rourke provided a brief overview of the Region V Systems website.

ADJOURN

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

IMPORTANT DATES

- May 9 – 9:00 a.m. – Regional Prevention Coalition
- May 13 – 10:15 a.m. – Regional Governing Board Meeting at Region V Systems
- May 20 – Network Provider Meeting / Teams
- May 29 – 10:00 a.m. – BHAC Meeting