

Behavioral Health Advisory Council

Meeting Minutes for August 23, 2019

Members Present: Arlene Kashata, Becky Cienki, Ben Jones, Brian Wellwood, David Dawdy (Greg Johnson), Dawne Velianoff, Elmer Cerano, Erin Emerson, Jamie Pennell, Jeff VanTreese, Jessica Vail (Stephanie Oles), Julie Barron, Jane Shank, Karen Cashen, Kevin McLaughlin, Kim Batsche-McKenzie, Kristie Schmiege, Linda Burghardt, Malkia Newman, Mark Maggio, Jennifer Hirst (Melissa Potter), Mark Reinstein, Mary Chaliman, Maxine Thome, Michelle Roberts, Norman Delisle, Patricia Smith, Paula Nelson, Sally Steiner

Members Absent: Eva Petoskey, Kevin Fischer, Larry Scott, Michael Leathead

Others Present: Ashley Hill, Brenda Stoneburner, Lorianne Fall, Melissa Rai, Marianne Huff, Katherine O'Hare, Heather Rosales, Lisa Coleman, Glenn Cornish, Ani Turner, Corey Rhyan, Paul Yeager

Welcome and Introductions: Kristie called the meeting to order and introductions took place.

Review & Approval of the June 14, 2019 Meeting Minutes – Malkia requested a motion, Mark moved, Michelle seconded, minutes approved as written.

Section 298 Update – Ashley Hill

- MDHHS and the Section 298 pilot participants announced in June that they are delaying implementation of the Section 298 Initiative until October 1, 2020.
- Saginaw County withdrew from the pilot in May, and this, coupled with the inability of pilot participants to reach consensus on a number of items, led to concerns about the ability to meet an October 1, 2019 launch date.
- Since the announcement to delay, considerable progress has been made on the initiative, including agreement on the definition of integration, the development of a proposed case management workflow, agreement on an option for utilization management, identifying an approach to key public policy needs, and defining key data sharing requirements critical to whole-person care.
- Major decisions regarding several outstanding issues remain, including risk-management, ownership of the specialty provider network, rates, and payment structures.
- Following resolution of these outstanding items, there will still remain significant implementation work and lead time needed to complete all of the technological, regulatory, contractual, and other changes needed for implementation.
- Despite these challenges, the 298 Pilot Partner MHPs and CMHSPs have assured the department of their continued commitment to successfully implementing financial integration pilots.

- The Section 298 Leadership Group, comprised of the CEOs of the pilot Community Mental Health Service Programs and Medicaid Health Plans, continues to meet and work towards an agreement on a more detailed model for full financial integration by October 1, 2019.
- Pending successful agreement on a model, the plan is still to launch the pilots no later than October 1, 2020.

Malkia commented that the council needs to be able to weigh in at the decision making level and not after. Dr. Mellos responded that the letters written by the council and the work that the committee does, deeply impacts the decisions that are made by the Department.

MDHHS/BHDDA Update – Dr. George Mellos

PIHP Status Updates -The Lakeshore contracts are live but there are no other updates at this time.

Funding formula's – Non-Medicaid Mental Health services are being handled by Healthy Michigan. The contractual entity is working closely with the Department and PIHP's to set the rates. Malkia asked about the many people that qualify for Disability funding that were transferred to Healthy Michigan if there have been any corrective measures taken to ensure that those who qualify for would have the Full Medicaid benefit and not just Healthy Michigan. Dr. Mellos said that they were aware of the differentials but at this time that was as much as he could say but if more information becomes available, he would get back to her with a more specific answer.

The waitlist at Caro has dropped from 250 to 191, they will continue working with their partners in the community to get people in and out more quickly. Mark commented that Michigan pales in comparison to most states when it comes to state-operated psych beds, and one of the best recent sources of such info (Treatment Advocacy Center) is comparing states only on adult site-operated beds for mental illness. Mark also commented that statewide advocacy groups have done a report that has been split up into 2 parts: Part 1 is immediate first steps in the Lakeshore Region and Part 2 is statewide. Part 1 was released earlier this month and Part 2 will be released on Monday.

FY20 Block Grant Application – Karen Cashen, Kim Batsche McKenzie, Heather Rosales, Lisa Coleman

In even years SAMHSA requires a large 2-year application for MH and SA block grants. In odd years, SAMHSA requires a mini application (update) just to confirm plans for the second year of the 2-year application. The amount of the SABG has remained consistent over the years and this year is at \$56 million and the MHBG this year is at 20 million. Karen updated the council on the SMI section of the application and updated the council on the history of the application. In order to receive MHBG funds there must be a Behavioral Health Council. The Block Grant Funds are for adults with SMI, children with serious mental health disorders, and adults with SUD issues. The adult priority areas are a baseline measurement of what our priority areas will be over the next two

years when we do the update or mini application and if we hit those indicators and if not, why those indicators were not met. Kim Batsche-McKenzie walked through the Children's section on the application and Lisa Coleman and Heather Rosales reviewed the SABG section of the application. Karen sent the application out to council and it is also available on the website <https://www.michigan.gov/mdhhs> for review and public comment. Sally moved, Malkia seconded, for the Council to provide a letter of support for the MA and SA block grant application. The council unanimously approved this motion. Council letter will be provided.

Altarum: The results of the Behavioral Health Access Study Presentation – Ani Turner and Corey Rhyan – See Power Point Presentation

Public Policy Report – Mark Reinstein

State budgets for FY-20 not yet done, partly because of road funding.

Sen. VanderWall may introduce a bill that would allow physician assistants & 2 types of nurses to do psychiatric hospital certifications and restraint/seclusion evaluations. The bill is controversial.

Advocacy groups and the Department have worked on a Mediation Bill for dispute resolution. Should be introduced in House this fall.

Gov. has signed an Exec. Order for an inter-departmental opioid task force.

New proposed federal rules on substance use disorder privacy just released. Reportedly would lessen some existing protections.

DHHS ORR investigated rights practices at Harbor Oaks psychiatric Hospital. Report was damning.

MDHHS has made known how it wants to proceed with the state psychiatric hospital in Caro. The plan would keep current facility for 84 beds; open 61 new beds at Reuther and/or Kalamazoo; and create 55 slots for community service as an alternative to hospitalization. Gov hasn't signed off yet, and don't know how Legislature would react.

HB 6252 – This Bill is to establish a state suicide prevention, the bill is currently in the Senate. It is expected to pass by Christmas 2019.

This summer there has been legislation that would provide confidentiality protection for suicide death review. There has been a lot of support in recent months from the Governor's office regarding suicide prevention.

Erin Emerson updated the group on Healthy Michigan Plan work requirements. Notice going out to beneficiaries who would be subject to the work requirements. The first set of mailings are going out in early September, the mailings must give the beneficiaries a 90-day advance notice of the requirements. Beneficiaries with an SUD Diagnosis are

not subject to the work requirements, but some will have to complete an exemption form and fill out that they meet SUD exemption requirements. There are 3 versions of the letter and Erin will send them to Karen to send out to the council.

Mark also discussed two bills that passed through the Senate and are expected to move quickly through the House when they return. The first bill would allow the Department to use the data to deem compliance, currently, the Department can only use the data to deem exemption. The second bill would change the reporting deadline.

The council suggested a motion that a letter be written from the council regarding the re-organization. The Council is asking the Department for the to have an input regarding re-organization before any final decision is made. Elmer moved and Malkia seconded, no objections and one abstention for council to write letter on behalf of the council regarding re-organization.

Public Comment

None

Announcements

Mark R.- The last page of the letter sent out was a registration form for a tribute dinner for Congresswoman Debbie Dingell. The dinner will be October 4, 2019.

Pat Smith. – 5-year Suicide prevention grant; \$776,000/year for anyone ages 10-24. This cycle will expand on the work that has already been done: 1) Will be working with general emergency departments to support suicidal youth as well as their parents. 2) will be working with the Foster Care Program screening youth. This year the grant will require the employment of a full-time coordinator.

LifeLine Grant - The grant will have a limited applicant pool, for states that answer less than 70% of their lifeline calls.

Glenn Cornish. – Discussed the need for an expanded scope to more licensed providers and Medicaid assisted treatment.

Mark M. - Concerned the direction the SUD community is taking and asked Kristie for a follow up on any meetings with LARA. Kristie indicated that they had just met with LARA for the 4th time. One of their points of contention is people who do not have a degree. They are still in the process of working through the issues but are making progress.

Kristie adjourned the meeting.