Behavioral Health Advisory Council Meeting Minutes for March 3, 2017

Members Present: Julie Barron, Ricardo Bowden, Karen Cashen, Mary Chaliman, Sara Coates, Norm DeLisle, Erin Emerson, Deborah Garrett, Greg Johnson, Arlene Kashata, Lauren Kazee, Mark Maggio, Michelle Mull, Chris Flores for Paula Nelson, Malkia Newman, Stephanie Oles, Marcia Probst, Mark Reinstein, Kristie Schmiege, Larry Scott, Jane Shank, Patricia Smith, Sally Steiner, Jennifer Stentoumis, Jean Dukarski for Brian Wellwood, Dani Meier for Mark Witte

Members Absent: Linda Burghardt, Kevin Fischer, Benjamin Jones, Jamie Pennell, Neicey Pennell, Eva Petoskey, Ben Robinson, Jeff Van Treese, Cynthia Wright

Others Present: Kim Batsche-McKenzie, Krissy Dristy, Lorianne Fall, Eric Kurtz, Dr. Debra Pinals, Tom Renwick, Adam Rodeau, Brenda Stoneburner, Jon Villasurda, Lynda Zeller

Welcome and Introductions: Mark Reinstein called the meeting to order and introductions were made.

Review and Approval of Minutes: The Council reviewed the meeting minutes from November 18, 2016. Chris moved and Erin seconded, minutes approved as written.

Election of Officers: Kristie nominated and Chris seconded the nomination to have Mark Reinstein continue another year as chair. The Council voted to keep Mark as chair, with Ricardo Bowden abstaining. Mark will continue as chair of the BHAC. Arlene nominated Eva Petoskey for vice-chair and Erin seconded the nomination. The Council voted Eva for vice-chair, with Ricardo abstaining. Chris moved and Erin seconded, Kristie Schmiege for secretary. The Council voted to keep Kristie as secretary.

MDHHS/BHDDA Updates – Tom Renwick

<u>Governor's Budget Proposals for Fiscal Year 2018</u> – An increase in the direct care wage of 50 cents per hour for behavioral health direct care staff is proposed along with a 72 FTE increase in direct care staff for state facilities. There is also a proposal to replace the Caro State Hospital. There was an additional proposal to continue the 298 process. The Governor's budget proposed the same amount of general funds for the CMHSP system as for FY17.

<u>CHAMPS</u> – There is going to be a big push in the state to enroll all service providers who receive Medicaid in CHAMPS. The hope is to reduce Medicaid fraud and streamline the process for providers who contract with multiple PIHPs and CMHSPs. The deadline for this enrollment is January 1, 2018. This is a huge undertaking and will impact anyone who is paid by Medicaid (behavioral health, healthcare, dental, etc.). <u>SAMHSA Monitoring Visit</u> – A lot of work has been taking place at BHDDA to prepare for this visit and provide SAMHSA with materials prior to the visit. Although this is supposed to be a combined MH and SUD Block Grant visit, the agenda as provided by SAMHSA is very separate and doesn't really mesh with Michigan's combined system. <u>Kevin's Law Changes</u> - There are discussions occurring about obtaining funding to cover training and related cost to CMHSPs regarding implementing the changes. Also the Department is looking at identifying an encounter reporting modifier to track the amount of service being provided under this law to inform future funding decisions. There are currently funding mechanisms in place to cover AOT services but the additional funding is to fill some of the gaps that exist. There is a webinar with more information about the implication of the law on the BHDDA website.

<u>Psychiatric Emergencies</u> - Tom asked the Council for any areas they would like updates on. Chris indicated that the emergency rooms continue to be overrun with psychiatric patients and he just wanted the Department to stay aware. Tom indicated that the Department has been trying to address this issue on multiple fronts for example: there has been movement by Certificate of Need to increase some specialty psychiatric beds. Also, the CMHSP/PIHP system has been involved in planning for additional crisis services like crisis residential, intensive crisis stabilization, and mobile crisis response.

CCBHC and 1115 Waiver Update – Eric Kurtz

<u>CCBHC</u> - Eric Kurtz reported that Michigan was not chosen to move forward with the CCBHC project. SAMHSA indicated in post selection discussions that Michigan due to its history as a managed care state did not demonstrate the overall project impact as other state applicants. The Department is still looking at lessons learned from the process.

<u>1115 Waiver</u> – Eric briefly explained the history of the 1115 Waiver. The 1115 Waiver application continues to be on the BHDDA website. Discussions with CMS have resumed in hopes of continuing to move the application forward for approval. CMS has asked some additional questions which the Department is responding to by early next week. The B/C Waiver extension will be continued until the approval of the 1115 Waiver. The process has been impacted by the change in administration at the federal level. The 1115 Waiver is different than the Home and Community Based Rule Standards but the 1115 Waiver must comply with those standards. A discussion of the HCB Rules continued. Norm, Michelle, and Mark are all on the advisory group for HCB Rules. Anyone who has concerns or questions can contact any of those members to find out how to get their concerns relayed to the advisory group.

Section 298 Update – Mark Reinstein

Mark reported that since the last BHAC meeting the 298 workgroup released a partial report. This report is available on the BHDDA website. The report contained 70 recommendations. This report went to the legislature in mid-January. The Medicaid Health Plans also submitted a minority report to the legislature that disagrees with some items in the initial 298 report. They are also heavily lobbying for some of their proposals with legislators. There is a second report due to the legislature in about 2 weeks on fiscal models. A request for proposals for fiscal models was released to the public at large and 42 proposals (507 pages) were received. They were very different and caused some disagreement in the 298 group. The proposals were grouped into categories for review (i.e., non-finance models, single payer models). The group

decided they would not review non-finance models or single payer models so about 25 models were not reviewed by the group. Single-payer models are not consistent with the workgroup's Recommendation 1.1 made in January. They are attempting to review all the other proposals. The proposals are out for public comment on all of them. All of the proposals will be provided to the legislature as well. The 298 group meets 3 times next week and have to finalize their report on the models plus bench marks for evaluation. Two proposals, Mid State and Blue Cross are good examples of two clearly different approaches to integrated financing models. Lynda Zeller indicated that in the review of the models, some of them directly addressed improving continuity of services across CMHSPs, some through a single PIHP like organization and some through tweaks to the 10 PIHPs for administration and oversight of behavioral health. The group will submit their report to the legislature and then decisions will be made by the legislature. There may be ways to move some policy changes forward without major financial changes. Analysis will have to continue and major changes take a lot of work and a lot of time. Michigan.gov/stakeholder298 is the website where all related materials can be accessed.

SAMHSA Monitoring Visit – Karen Cashen

The SAMHSA Monitoring Visit is March 21st through the 23rd. SAMHSA will be reviewing MH and SUD services as well as fiscal information. Karen shared the agenda for the visit with the BHAC. It is quite an extensive agenda. On March 22nd, from 10 a.m. – noon there is a Behavioral Health Advisory Council discussion. BHAC members who are MDHHS employees are not permitted to participate, but all others are. There is an ability to participate in-person or by phone. Karen will email the particulars of this meeting to the BHAC.

Subcommittee Report on Time & Distance Standards – Norm DeLisle

Norm provided the report from the subcommittee in writing to the BHAC. The group came to the conclusion that one compliance measure or indicator cannot possibly capture the many influencing factors that impact time and distance standards. The group felt that subgroups of providers and consumers for particular services would be able to craft better ideas about time and distance standards for these particular services. Tom Renwick indicated that he would take the information from the report back to the Department for further discussion and will reach back out to the BHAC for further input. BHAC members can also email Tom with input. Please send your input promptly as discussions are continuing.

Youth Peer Support Presentation – Kim Batsche-McKenzie & Krissy Dristy

A PowerPoint handout was provided to the BHAC and they presented their material to the Council.

Public Comment/Announcements from Members

<u>Julie Barron</u> – CEI CMH is having their annual breakfast at the Lansing Center on March 20th starting at 8:00 a.m. Contact CEI for additional information. <u>Stephanie Oles</u> – MSHDA has a new Executive Director, Earl Poleski, and their commitment to ending homelessness and work will continue. <u>Arlene Kashata</u> – There is a Culturally Diverse Perspective of MH & SUD Treatment Conference on Friday, October 20th at the Grand Traverse Resort. Several tribes applied for MHBG funding from MDHHS for mental health system improvement specific to their communities. This was the first time this happened and it is very exciting! <u>Pat Smith</u> – Just started the Zero Suicide Model discussions and planning with federal and local partners. Annual Community Suicide TA 2-day Conference in Roscommon County is coming up. See Pat for more information.

<u>Deborah Garrett</u> – Unite to Face Addiction will occur May 18th from 9:00a.m. to 4:00 p.m. at the Capitol and there will be a Recovery Community Organization Leadership Academy from May 21st - 23rd in Dewitt.

<u>Mary Chaliman</u> – Seeing an uptick in kids in foster care. Child welfare is working with mental health staff to develop strengthened foster care approaches like evidence-based treatment foster care, support for agencies and foster care parents, and working with residential providers to look into exploring providing treatment foster care as well. <u>Jean Dukarski</u> – May 10th is Walk a Mile at the Capitol. May 31st – June 2nd is the Annual Peer Conference at the Lansing Center.

<u>Larry Scott</u> – Updated the Council on the status of some grant applications and projects for SUD services that the Department has submitted and/or are involved with currently.

BHAC Meeting for 2017

Friday, June 16th Friday, August 18th Friday November 17th

Meeting was adjourned