

Michigan Department of Health and Human Services (MDHHS)
Behavioral Health and Developmental Disabilities Administration (BHDDA)
Office of Recovery Oriented Systems of Care (OROSC)
Transformation Steering Committee Meeting (TSC)

MINUTES

DATE/TIME: May 17, 2018; 10:00 am to 1:00 pm
LOCATION: CMH Association of Michigan
426 S. Walnut St.
Lansing, MI 48933

FACILITATOR: Larry Scott
NOTE TAKER: Recorded

ATTENDEES: **In Person:** Sara Coates, Steven Henry, Colleen Jasper, Kimberlee Kenyon, Brittany Leek, Alia Lucas, Lori Mello, Lindsey Naeyaert, Su Min Oh, Kevin O’Hare, Heather Rosales, Marci Scalera, Kristie Schmiede, Larry Scott, Angie Smith-Butterwick, Ronnie Tyson, Jeff Van Treese, Cathy Worthem
Phone: Cindy Eckert, Sam Price, Joseph Sedlock, Joel Smith

TOPIC SUMMARIES

I. Welcome and Introductions – *Larry Scott*

Mr. Scott welcomed the Transformation Steering Committee (TSC); Everyone introduced themselves.

II. Agenda and Minute Review - *All*

The March 15, 2018 minutes were reviewed and approved. An update of the STR Grant has been added to the agenda.

III. BHDDA Updates – *Larry Scott*

A. Mr. Scott discussed changes being made to the Medicare and State Healthcare Program Integrity policy. He indicated that we have until May 22nd to respond regarding contractual provider services. If a provider has been convicted, under Federal or State law, of a felony that occurred after August 21, 1996 relating to the unlawful manufacture, distribution, prescription or dispensing of a controlled substance, they shall be excluded from eligibility as a Medicaid provider. If a provider has a federal or state felony conviction, in the proceeding 10 years of their provider enrollment application, including but not limited to any criminal offense related to murder, rape, abuse or neglect, use of firearms, or any felony that places Medicaid program or its beneficiaries at immediate risk such as malpractice resulting in conviction of criminal neglect or misconduct. Individuals convicted of certain federal or state misdemeanors will also be excluded from employment. This would include extortion, embezzlement, income tax evasion, insurance fraud, or other similar financial crimes that places the Medicaid program and its beneficiaries at immediate risk, such as malpractice resulting in conviction of criminal neglect or misconduct. A request from a Federal health care program for a waiver of the exclusion will be considered only if the Federal health care program administrator determines that (1) The individual or entity is the sole community

- physician or the sole source of essential specialized services in a community; and (2) The exclusion would impose a hardship on beneficiaries of that program. The proposed effective date is July 1, 2018. Mr. Scott indicated there is some discussion that they are going to issue another set of amendments to this policy for that would benefit peer recovery support specialists.
- B.** Mr. Scott discussed syringe support programs. At the National Governor’s Association Conference, our state team came up with a preliminary state plan that was finalized. It included a goal of expanding and enhancing syringe support programs in the State of Michigan. OROSC will be amending the Block Grant application to be able to fund syringe support programs.
- C.** Mr. Scott discussed Block Grant strategic conditions. Funding was allocated in 2017 to PIHPs to implement strategic initiatives related to opioid overdose prevention, opioid overdose recovery, Neonatal Abstinence Syndrome (NAS) treatment services for pregnant women, and drug court recovery support. A lot of the PIHPs have a considerable amount of unspent funds allocated for these projects. Therefore, OROSC is allowing the PIHPs to carry forward those funds to be used into FY19 for these four initiatives. For those PIHPs who have expended all their funding (Block Grant and Community Grant) for these four initiatives, there is an expectation that the PIHP will retain these initiatives with the funding that will be allocated in FY19. In addition, if the PIHP expends or plans to expend all the Block Grant for the strategic initiatives in FY18 and all the SABG Community Grant funding, they may request additional Block Grant funding for strategic initiatives conducted in FY19.

IV. OROSC Updates – Larry Scott and OROSC Staff

- A. Update on Title 42 of the Code of Federal Regulations (CFR) – Angela Smith-Butterwick**
Ms. Smith-Butterwick informed the group that SAMHSA recently released some fact sheets, which was distributed to TSC members, related to confidentiality of substance use disorder (SUD) patient records. The online training will be updated on the “improvingmipractices” website to reflect these changes. Mr. Tyson shared details of an incident that occurred, related to the SUD patient confidentiality issue, with Child Protective Services and local law enforcement trying to gain entry at the Odyssey House. Mr. Price indicated that they have, also, experienced an issue with Michigan State Police trying to gain access to a treatment facility with a search warrant.
- B. State Epidemiological Outcomes Workgroup (SEOW) Infographic on Youth Survey - Su Min Oh**
Dr. Oh gave a presentation on the infographic created from the data collected on the 2016 Michigan Young Adults Survey. She indicated that Wayne State University used Facebook to reach young adults, aged 18-25, to participate in this innovative and creative survey. The survey report and infographic were distributed, via email, to the TSC members, during the meeting. Questions were asked and answered.

Effective June 1, 2018, if a patient’s prescription will exceed more than a three-day supply of opioids, a review of the Michigan Automated Prescription Monitoring System (MAPS) is required. In addition, physicians and dentists cannot prescribe more than a seven-day supply of opioids. Su Min will disseminate a summary of the opioid laws to TSC members.

C. LARA Licensure Rule Revisions– *Larry Scott*

Mr. Scott reviewed the rule definitions and revisions with the TSC members, in the areas relevant to the field of addiction prevention, treatment and recovery. Mr. Scott indicated that rule revisions, as they are currently written, will have a considerable impact our service delivery system and workforce. If members have feedback regarding these rule revisions, submit those in writing to Mr. Scott and he will forward them on to the members of the workgroup. There was some discussion among members, questions asked, and answers provided.

D. GAIN Assessment – *Angela Smith-Butterwick*

Ms. Smith-Butterwick provided an overview of the GAIN assessment implementation history. She provided information and updates on the American Society for Addiction Medicine (ASAM) training and the GAIN training. She, also, provided an update on the status of local GAIN trainers. Questions were asked and answered.

E. Gambling Disorder Prevention Request for Application – *Alia Lucas*

Ms. Lucas communicated that the RFA was disseminated to the PIHP directors on May 16, 2018; it has a due date of July 9, 2018. The anticipated start date is October 1, 2018. As discussed in previous meetings, OROSC is looking to expand prevention efforts for the Gambling Disorder (GD) program. OROSC is seeking applications for the RFA, to enhance prevention services for GD through a number of aspects. It is a non-competitive grant, so funding is available for all 10 PIHP regions. The initial funding period is for fiscal year 2019, but there are multiple year opportunities based upon outcomes and funding availability. The following are target objectives: (1) Increase awareness of GD; (2) Address the prevalence of GD across all populations; (3) Promote the helpline and increase its utilization by parents; (4) Strengthen adult and family services; (5) Equip each region with a prevention coordinator, who will receive 30 hours of training for that position; (6) Train Access Management staff, for the purpose of assessing for Gambling Disorder during at intake, using the National Opinion Research Center DSM IV Screening tool (NODS Assessment). The training would be provided by the North American Training Institute, with technical assistance provided by Health Management Systems of America (HMSA). Lori Mello is the program director at HMSA.

F. Strategic Plan – *Larry Scott*

A copy of the strategic plan was distributed to TSC members. Mr. Scott gave a brief overview of the OROSC strategic plan. Discussions regarding the strategic plan were tabled, due to the meeting's time restraints.

G. STR Grant – *Brittany Leek*

Ms. Leek provided several updates and new developments with the STR Grant. She indicated that grant year two went into effect May 1, 2018 and that OROSC had to submit a revised budget. Some of the stringent regulations around percentages prevention treatment were removed. Four regions requested additional funding, which OROSC was able to provide most of the funding to enhance some of their areas. Mr. Scott indicated that there will be a new funding opportunity announcement coming soon, which he described as a STR lookalike. More information will be forthcoming. July 31, 2018 is the deadline for the carry forward funding application.

V. Announcements/Innovative Practices

Mr. Henry informed everyone of the Peer Conference, being held May 22-24th, and that there is still some spots available.

Ms. Jasper indicated there is a JIMHO directors statewide meeting on May 31st.

VI. ADJOURNMENT

ACTION	PERSON(S) RESPONSIBLE	DEADLINE
Distribute SEOW infographic	Su Min Oh	7/19/18
Distribute summary of opioid laws	Su Min Oh	7/19/18

NEXT MEETING

Date/Time: July 19, 2018; 10:00 am to 2:00 pm

Location: Horatio S. Earle Learning Center
7575 Crowner Drive
Dimondale, MI 48821