

**SAPTA ADVISORY BOARD
MINUTES**

DATE: October 10, 2018
TIME: 9:00 am

| | <i>Meeting</i> | <i>Videoconference</i> |
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| LOCATION: | 4126 Technology Way 2nd Floor, Conf. Room 201 Carson City, NV 89706 | 4220 S. Maryland Parkway Building D, Suite 810 Las Vegas, NV 89119 |

TELECONFERENCE: (888) 363-4735 / Access Code 3818294#

BOARD MEMBERS PRESENT

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| David Robeck, Co-Chair, Bridge Counseling | Lana Robards, Co-Chair, New Frontier |
| Andrea Zeller, Churchill Community Coalition | Leo Magridician, WestCare |
| Patrick Bozarth, Community Counseling Center | Jasmine Troop, HELP of Southern Nevada |
| Jolene Dalluhn, Quest Counseling | Jeff Munk, Frontier Community Coalition |
| Tammra Pearce, Bristlecone | Ester Quilici, Vitality |
| Michelle Padden, proxy for Michelle Berry, Center for the Application of Substance Abuse Technology (CASAT) | |
| Jennifer DeLett-Snyder, Join Together Northern Nevada | |
| Mary Cannizzaro, proxy for Jamie Ross, PACT Coalition | |
| Jared Ovitt, proxy for Denise Everett, Ridge House | |

BOARD MEMBERS ABSENT

Mari Hutchinson, Step 2

OTHERS PRESENT

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| Dona Dmitrovic, Foundation for Recovery | Dana Roscom, Ridge House |
| Linda Lang, Nevada Statewide Coalition Partnership | Laura Oslund, PACE Coalition |
| Dr. Karen Torry Greene, Rural Nevada Counseling | Roxanne DeCarlo, The Empowerment Center |
| Joelle Gutman, Frontier Regional Behavioral Health Coordinator | |

SAPTA/STATE STAFF PRESENT

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| Meg Matta, Substance Abuse Prevention and Treatment Agency (SAPTA) | |
| Auralie Jensen, SAPTA | J'Amie Frederick, SAPTA |
| Bill Kirby, SAPTA | Kendra Furlong, SAPTA |
| Judy Dumonte, SAPTA | Raul Martinez, SAPTA |
| Joan Waldock, SAPTA | |

1. Roll Call, Introductions, and Announcements
Roll was called. Ms. Robards determined a quorum was present.
2. Public Comment
There was no public comment.

3. Approval of Minutes from the August 8, 2018 Meeting
Ms. DeLett-Snyder stated she was uncertain the summary of her comments was accurate. Ms. Robards pointed out that the Co-Chair's report listed Linda Lang as having been at the meeting in Washington, D.C. Ms. Troop moved to approve the minutes with that change. Ms. Padden seconded the motion. The motion passed.
4. Approval of Minutes from the Funding Subcommittee Meeting on September 19, 2018
Ms. Robards said the subcommittee had not yet approved the minutes. She expected they would make changes before the minutes were brought to the Advisory Board. Mr. Martinez suggested postponing approval until after the composition of the subcommittee was determined at the next Advisory Board meeting. Mr. Robeck agreed. He pointed out the Office of the Attorney General provided clarification that membership of subcommittee needed to be approved by the majority of the Advisory Board. Mr. Martinez concurred.
5. Standing Informational Items:
 - Co-Chair's Report
Ms. Robards stated SAPTA provided an attendance record of 2018 SAPTA Advisory Board members. Mr. Robeck asked if it reflected proxies. Mr. Martinez replied proxies would be identified in the minutes; the attendance sheet listed the names of the primary representatives for each agency. Mr. Robeck did not think it was accurate. Mr. Martinez agreed. Ms. Robards said agency board members were encouraged to send representatives in their absence so quorum could be maintained. Mr. Robeck said membership was held by the agency, not by an individual. Ms. Robards suggested going back through previous minutes to verify whether proxies attended meetings.
Mr. Robeck pointed out communication with SAPTA had gotten worse since the announcement of Kyle Devine's transfer. He said he heard about issues that were not well discussed at the Advisory Board meeting that became hard-and-fast policies retroactively, making things more difficult for treatment providers.
 - Substance Abuse Prevention and Treatment Agency (SAPTA) Report
Ms. Furlong said the Division has scheduled interviews for the Bureau Chief position this week and next, so there should be a new Bureau Chief soon. She reported SAPTA was working on grant amendments for treatment for block grant. She explained they were working with central fiscal to close out federal fiscal year 2018 and to add the new funds. Providers should have block grant subgrants to sign soon.
Ms. Furlong announced that a new primary prevention Request for Proposals (RFP) would be released October 19. She said a bidders' conference will take place on October 25. She noted the RFP was for established community coalitions having the 12 sectors represented and having a certified prevention specialist on staff. She added that the funding sources were Partnership for Success (PFS), the SAPTA Block Grant (20 percent), and the State General Fund. She said SAPTA was approved for approximately \$2.2 million over five years, with the priorities being alcohol, marijuana, and amphetamines. The money will go directly to prevention coalitions; 85 percent of those funds must be at the community level.
Ms. Furlong asked for positive stories. Ms. DeLett-Snyder reported her agency had a new bookkeeper start the previous week. She reminded the Board that at the last meeting she spoke of her bookkeeper having a problem with Requests for Reimbursements (RFRs). The Help Desk team got everything set up for the new bookkeeper who was able, on her first day, to look at RFRs and how things had been processed. She was able to quickly get up to speed.
Mr. Munk said the new system of entering RFRs seemed to be working well. He said he liked going into the system and downloading the receipts and invoices. He said he also liked the ability to track—he has had a response with tracking number within 30 minutes. He added the reimbursements were quicker, usually within 25 days of submitting RFRs.

Ms. Robards asked if the treatment side had any positive stories to report. Ms. DeCarlo said she enjoyed the new system of uploading documents and sending an email, and having the system acknowledge receipt. The payments have been expedient. Ms. Robards said she has heard others say that some RFRs were taking longer to process. Ms. Furlong said analysts could pull tracking system reports to identify where slowdowns were and identify whether they related to providers, analysts, or if they involved a specific problem. The tracking system will be used to improve performance. Ms. Robards asked if there was an estimated timeframe between when the RFR was submitted and it when it would be approved. Ms. Furlong said it would usually be 30 days from the time a correct RFR was submitted until payment was cut. The length of time could be affected by the number of times the analyst and the provider have gone back and forth on corrections or if there were problems at the next level. She said their goal was to have correct RFRs approved in 30 days or less. She added there could be slowdowns because of staffing, although analysts have backups. She asked that anyone missing a payment immediately call her, Sara Weaver, Dana Rael or their analyst for help.

Mr. Robeck asked if SAPTA was fully staffed, other than the Bureau Chief position. Ms. Furlong replied there were vacant positions: Grants and Projects Analyst II; Clinical Program Planner I and Psychologist III—positions that should be filled at the end of October; Clinical Program Manager; Bureau Chief; and an analyst to work with Ruth Condray. She noted most of the vacant positions were being filled or close to having a candidate chosen. Ms. DeLett-Snyder asked if any of those positions would interface with prevention. Ms. Furlong replied the Grants and Projects Analyst II vacated by Laurie Gleason would work with prevention, doing monitors. She said there were no vacant program positions.

Mr. Robeck asked who drafted the Requests for Applications (RFAs), as he noticed that CASAT and others have been involved. He asked if SAPTA was outsourcing RFAs and Requests for Qualifications (RFQs) or if SAPTA was overseeing them. Ms. Furlong replied that SAPTA did not have the capacity for the State Targeted Response (STR) and Certified Community Behavioral Health Clinics (CCBHCs), so they were helped by CASAT. She said internal things—specific RFAs for prevention or treatment—were being handled by SAPTA, usually led by Mr. Erickson. She added that when new dollars became available, SAPTA wanted to handle requests in-house but it would depend on SAPTA's capacity to effectively push those dollars into the community. Ms. DeLett-Snyder pointed out there was theory and there was practical application of theory. She suggested those writing RFAs or information should understand how applications were to be completed. If the person who wrote them tried to complete them, an error could be discovered and fixed before the announcement went public. She stated she has written RFAs in the past. She encouraged SAPTA that if they did not have people who had been on both sides of the process, they might want to get feedback from people who had in order to write better RFAs. Mr. Robeck said he asked about SAPTA staffing because it was convoluted to go to different sources to find information. He noted that, at the last Board meeting, the CASAT representative talked about STR funds—where they went, and why people had not gotten funded or been declined. At a recent meeting, he found out there were several providers funded. He was not sure that all of them had even applied. At the same time, there were others that had not yet been notified they were turned down. He suggested the agency should tighten things up. Ms. Furlong replied that she was working closely with Laurie Gleason, the new Management Analyst III. She said they were working with fiscal to transfer into the new reconciliation/declining balance tracking system of all subgrants and funding sources. Once the transition is complete, they should be able to monitor things more closely. She continued that Ms. Gleason was working with STR and overseeing other funding sources to ensure that SAPTA was where it should be. She has been clearing up some of the backlog with closing out the old fiscal year and beginning the new.

- Center for the Application of Substance Abuse Technologies (CASAT) Report
Ms. Padden said the three first-year grantees funded as Integrated Opioid Treatment and Recovery Centers (IOTRCs) through STR would have their first certification site visits in the next six to eight weeks. The Governor's Accountability Taskforce covering all of the opioid funding that comes into Nevada will meet on October 31 at 9:00 a.m. in the Old Assembly Chambers at the Capitol Building in Carson City and in the Grant Sawyer Office in the Governor's Office Conference Room in Las Vegas.

In-person trainings:

- Columbia Suicide Severity Rating Scale—November 17 at the Redfield Campus. She said registration opened this week for the free training.
- Clinical Supervision—October 11 and 12 in Reno and October 18 and 19 in Las Vegas. She said there were still open spots for this training.
- Clinical Supervision Refresher—November 15 in Reno and November 16 in Las Vegas. She said spots were available.
- Suicide Assessment for the Juvenile Population—November 2 in Reno and December 7 in Las Vegas. She said there were open spots.

Webinars are:

- October 15—The New Pediatric Epidemic: How Diet, Inflammation, the Immune System, and Behavior Are All Connected.
- December 17—Suicide Screening and Referral

Other trainings being put on the calendar:

- Adverse Childhood Experiences (ACES)
- Eating Disorders
- Confidentiality and Health Insurance Portability and Accountability Act (HIPAA)
- Promoting Whole Person Wellness
- Adolescent Motivational Interviewing

Trainings in January:

- Suicide Prevention
- On-line Clinical Supervision for Licensed Alcohol and Drug Counselors (LADCs)

Mr. Robeck asked if the trainings were posted online. She replied they were.

Ms. DeLett-Snyder asked if the STR list of funded agencies was made public by SAPTA and if information like that could be sent out by ListServ. Mr. Robeck said he thought that was important because of how small Nevada was. Most providers and prevention agencies know each other. He thought the information should be made available so that SAPTA was transparent. He said it would help agencies put the pieces together so that if they knew an agency received funding, they could refer clients to it. If they did not know, they could not do that.

State Opioid Response (SOR) Grant

Ms. DeLett-Snyder asked if there was any information about the SOR Grant. Ms. Padden said the grants were still being put together. She had no additional information.

- Medicaid Report
No representatives from Medicaid participated in the meeting.
6. Make Recommendation of Agenda Items for the Next Meeting on December 12, 2018
Mr. Robeck said they needed to determine the makeup of the Funding Subcommittee. He reminded the Board that elections were coming and Nevada would have a new governor. He asked if there were things going on that needed to be discussed as a body. Ms. DeLett-Snyder asked if it would be helpful to know the Bill Draft Requests (BDRs) the Behavioral Health Boards would be bringing forward. Mr. Robeck said he knew the boards were meeting and deliberating on issues, but the Advisory Board did not hear much else. He asked if SAPTA could contact the boards and ask them to share or have representatives participate in the next meeting. Ms. Gutman said she was the coordinator for the rural region and would be happy to share all four BDRs with the Board, speaking

on behalf of the four regional boards. They have given presentations to other boards about the BDRs they submitted September 1. Mr. Martinez said he would coordinate with her to have an agenda item for the next meeting. Mr. Robeck said it would be helpful to be able to review those documents prior to the next meeting. Ms. Gutman said they were posted on the Division of Public and Behavioral Health website with their meeting information. Dr. Torry Greene said the Northern Nevada Behavioral Health Board was currently meeting. The schedules for the regional board meetings can be found [here](#). Mr. Robeck was concerned they were still working in silos and not sharing information. Ms. Robards said she participated in workgroup activities that moved up to the Regional Behavioral Health Policy Board, being actively involved in the one that included Churchill County. She would like this as an agenda item so that she could see what some of the other suggestions were. The boards collaborated on putting together one BDR from each of the Regional Behavioral Health Boards. Ms. Gutman said the chairs and coordinators of the boards have met at least monthly. Ms. Robards said it would be nice for this Board to know what the regional boards have been doing and to know what was in the BDRs since that would affect all of them. Ms. Gutman said they needed the support of everybody involved to get the BDRs passed. Dr. Torry Greene said she was on the Behavioral Health Planning and Advisory Council (BHPAC). She stated BHPAC requested that the Behavioral Health Boards present their BDRs at their next meeting, scheduled for November 1 at 1 p.m. at 4150 Technology Way and at the Desert Regional Center. She thought it would be helpful to have a presentation, agreeing that behavioral health and substance abuse were being siloed. She said there were some on the board who did not know anything about the state of substance abuse prevention. She asked if someone from SAPTA could give a presentation. Mr. Kirby agreed with her. Mr. Robeck asked if someone from SAPTA would get information out. Mr. Martinez said he would work with the behavioral health coordinators on an agenda item. Mr. Robeck asked if Mr. Martinez would forward what was sent to him from other bodies or provide a list of websites where the information could be gathered. Mr. Martinez said he would. Ms. DeLett-Snyder said the Legislative Committee on Healthcare voted to give the health districts money per person for substance abuse. Ms. Lang said they voted on a BDR to provide \$5 per capita for behavioral health, but they were not specific. Originally, the money was to be used to support the marijuana funds, but that was not the end result. Now they have to find money in the General Fund to support it. Ms. Gutman said she heard the Washoe board talk about it more than the other boards did because many rural counties do not have Boards of Health or Health Districts. She was not sure where the money would go. She was under the impression it was undecided how and when the money would come. Ms. DeLett-Snyder said the Board needed to know about such things. She pointed out there were silos—whether it was the Health Districts trying to get into the substance abuse game for the first time, or other BDRs. She wondered if they should create a subcommittee or enlist the help of someone who could give them a list of all the BDRs that would affect substance abuse providers. She thought there were bills that would impact them this legislative session and they should be proactive. Mr. Robeck said that sounded like a separate agenda item to him. He had heard that \$5 per capita would go to the Health Departments. He said that was a huge number—he wished providers had \$5 per capita to split up among the existing treatment agencies on the Board. He said it sounded like there were questions about whether the money was committed yet or how it would be committed. Hopefully, it would not all be committed to additional bureaucracy in the State but would get out to clients who needed treatment. Mr. Martinez said he would work with Ms. DeLett-Snyder to get that on the next agenda.

7. Public Comment

Andrea Zeller commented that she had been in attendance for the meeting.

8. Adjourn

Ms. DeLett-Snyder made a motion to adjourn. Ms. Troop seconded it. The motion passed. The meeting adjourned at 9:50 a.m.