

Division of Public and Behavioral Health
Substance Abuse Prevention and Treatment Agency (SAPTA)
Advisory Board (SAB)

MINUTES

DATE: February 18, 2015

TIME: 9:30 a.m.

Meeting:

Videoconference:

LOCATION: Truckee Meadows Community College,
Redfield Campus
18600 Wedge Parkway, Room 103
Reno, NV

Desert Research Institute
755 E. Flamingo Road,
Room 182
Las Vegas, NV

Great Basin College
1500 College Parkway,
HTC Room 137
Elko, NV

BOARD MEMBERS PRESENT

Steve Burt (Chair)
Michelle Berry (Vice Chair)
Jennifer Snyder
Diaz Dixon
Frank Parenti
Jamie Ross
Ronald Lawrence
Patrick Bozarth
David Robeck
Debra Reed
Tammra Pearce
Kurt Gunther
Lana Robards

Ridge House
CASAT
Join Together Northern Nevada
Step 2
HELP of Southern Nevada
PACT Coalition
Community Counseling Center
Community Counseling Center
Bridge Counseling
Las Vegas Indian Center
Bristlecone Family Resources
Frontier Community Coalition
New Frontier Treatment Center

BOARD MEMBERS ABSENT

Yolanda Correa
Richard Jimenez
Ester Quilici
Denise Everett

Bridge Counseling
WestCare
Vitality Unlimited
Quest Counseling

OTHERS PRESENT

Dani Doehring
Karen Lutz
Pauline Whelan
Chris Croft
Debra Ridenour

Step 1
Alkermes
Alkermes
Tahoe Youth Family Services
New Frontier Treatment Center

SAPTA/STATE STAFF

Kevin Quint
Betsy Fedor
Carol Schaye
Sara Weaver
J'Amie Frederick
Stephanie Woodard
Agata Gawronski

Bureau Chief
Health Program Specialist I
Health Program Specialist I
Administrative Assistant IV
Administrative Assistant III
Rural Clinics
Board of Examiners

1. Welcome and Introductions:

Steven Burt opened the meeting at 9:50 a.m. Mr. Burt noted there was a quorum present.

2. Public Comment:

None.

3. Approval of minutes of December 10, 2014, meeting:

Michelle Berry motioned to approve the minutes. Jennifer Snyder seconded the motion. The motion carried and the minutes of December 10, 2014, were approved.

4. Presentation by Karen Lutz and Pauline Whelan of Alkermes:

Ms. Lutz and Pauline Whelan of Alkermes gave a brief overview of the medication Vivitrol and the circumstances under which the medication is indicated for patients as well as the benefits and risks. Vivitrol works by reducing cravings and blocking opiate receptors. Vivitrol is administered by injection once per month.

Mr. Burt asked if the long-term outcomes for those given Vivitrol were the same as for those given a placebo and those undergoing long-term counseling. Ms. Lutz indicated that those given Vivitrol had better outcomes than those who were given a placebo. Ms. Lutz stated the presumption is there will be lower recidivism and relapse rates for those who were given Vivitrol than if no medications had been given.

Ms. Whelan also stated that Vivitrol is used throughout the prison community and is covered by insurance. She stated the Federal Bureau of Prisons is paying for two shots while in prison and six shots after the prisoner is released.

Ms. Lutz and Ms. Whelan stated they would welcome the chance to create a program in Nevada.

5. Standing Informational Items:

Mr. Quint stated that SAPTA has a new Administrative Assistant and a new Accounting Assistant beginning the week of February 22. SAPTA has scheduled interviews for the vacant Health Program Specialist II position.

Regarding the requests for reimbursements (RFRs), Mr. Quint stated that all RFRs for December 2014 have been entered in the system. In addition, Mr. Quint stated that SAPTA is reviewing and revising its business processes to make them more efficient.

Nevada Health Information Provider Performance System (NHIPPS) continues to be an issue; however, system issues are being addressed.

Mr. Quint stated that SAPTA has experienced a cut in Medical Marijuana Registry funding. Mr. Quint advised providers that he will be contacting them to see if money they may have can be reallocated.

Mr. Quint indicated the SAPTA budget hearing is on March 11. It is anticipated that SAPTA's budget will be flat; however, there could be cuts to the budget by the Legislature.

Mr. Quint stated the SAPTA block grant is due in September. One issue that has arisen is SAPTA's maintenance of effort (MOE). The MOE is calculated by taking the last two years of spending. If SAPTA

does not meet that level, funding could be cut by the federal government. Diaz Dixon asked if SAPTA funding last year had been cut. Mr. Quint indicated that \$6.4 million had been cut from the block grant over the past two years. SAPTA is also looking to see if Medicaid funds can be used to make the match. Mr. Dixon stated the intention of the block grant is to serve clients. Mr. Quint agreed but added the federal government does not consider that when calculating the MOE. Mr. Dixon stated he thought, with the Medical Marijuana Program in place, funding would grow. Mr. Quint indicated that it is growing; however, providers needed to keep in mind that there are other legislative priorities such the Governor Sandoval's education initiative and Medicaid. Currently, Medicaid is funded, but, in the future, the percentage the State has to fund will increase. Mr. Quint also stated that the Director's Office is not putting forward budget cuts.

Mr. Quint stated that the Avatar rollout has been completed for Quest Counseling. Although the rollout was a challenge, it was ultimately successful.

Mr. Quint stated SAPTA will be working on a needs assessment in the upcoming months since. The last SAPTA needs assessment was performed in 2007. The needs assessment will allow SAPTA to identify gaps in services. The Requests for Applications (RFAs) will be based on the outcomes of the needs assessment. In addition, the needs assessment will drive SAPTA's focus. There will be a one-year extension on the prevention RFA. Mr. Quint indicated that he would be meeting with prevention providers the week of February 22.

Mr. Quint indicated that HIV/Ryan White and Mental Health Planning have been integrated with SAPTA. Although the new Bureau has yet to be named, its charge will be to streamline our processes. For instance, HIV/Ryan White funds some of the same organizations that SAPTA funds. The new Bureau will focus on coordinating these activities so they are not duplicative.

Mr. Quint stated that Stephanie Woodard has been working on a project with Bristlecone and the specialty courts in Washoe County. The project allows people to be assessed and to have better access to treatment. Ms. Woodard stated that one of the goals of the project is to ensure people receive comprehensive evaluations.

Ms. Berry provided the CASAT report. She gave an update on the AADAPTS [Nevada Alliance for Addictive Disorders, Advocacy, Prevention, and Treatment Services] system. In addition, Ms. Berry stated that CASAT has updated its peer review process. There was discussion regarding peer reviews. Mr. Quint advised providers also to comply with 45 CFR.

6. Progress Report of Proposed Amendments to Nevada Administrative Code (NAC) 458:

Mr. Quint stated that SAPTA held its Public Workshop to consider Proposed Amendments to NAC 458 on February 5. SAPTA received valuable input from stakeholders. SAPTA decided not to present the Proposed Amendments to the Board of Health (BOH) during its March meeting. Instead, SAPTA will redistribute the Small Business Impact Questionnaire, develop a more comprehensive Small Business Impact Statement, and hold an additional Public Workshop. SAPTA's intent is to present the regulations to the BOH June 12.

7. Nomination for the Substance Abuse Seat on the Governor's Behavioral Health Commission:

Mr. Quint gave an overview of the Governor's Behavioral Health Commission. He stated the Commission is comprised of providers of various disciplines and that this is an opportunity to have a substance abuse prevention and treatment representative on the Commission. Mr. Burt nominated Ms. Berry and Ms. Snyder nominated Denise Everett to serve on the Commission. Mr. Burt tabled the vote until the March 18 SAB meeting. Mr. Quint noted the nominations would be presented to Governor Sandoval for approval.

8. Legislative Bills Update:

Mr. Quint gave an overview of legislative bills SAPTA is following. In addition, Mr. Quint briefly explained the legislative process for bills.

Mr. Quint gave a synopsis of the bills SAPTA is currently tracking:

- Assembly Bill (AB) 12 and Senate Bill (SB) 136 are essentially the same bill; both provide for the continuation of the diversion program that allows certain probation violators to receive treatment for alcohol or drug abuse or mental illness in lieu of revocation of probation;
- AB 81 is designed to replace the term “facility” with “treatment provider.” Mr. Quint explained that this bill presents challenges since Health Care Quality and Compliance (HCQC) licenses providers and this change would mean an expansion of the numbers and types of providers HCQC would have to license;
- AB 85 revises provisions governing state professional licensing boards;
- SB 31 revises provisions relating to detoxification technicians, facilities, and programs. Mr. Quint explained this bill moves the authority to approve SAPTA regulations from the Division Administrator to the Board of Health;
- SB 84 expands the definition of “provider of health care” to include certain alcohol and drug abuse counselors; and
- SB 114 makes changes relating to prescriptions for certain controlled substances.

Ms. Berry spoke about AB 93. She stated existing law requires certain providers to complete continuing education as a condition to the renewal of their licenses. This bill requires those professionals to receive at least two hours of instruction on suicide prevention and awareness as a condition to the renewal of their licenses.

9. Presentation on Fetal Alcohol Spectrum Disorder:

Canceled.

10. Review Possible Agenda Items for the Next SAPTA Advisory Board Meeting:

Ronald Lawrence stated he would like to discuss the system care for individuals and barriers individuals encounter. Mr. Lawrence stated that the Advisory Board should discuss client access to psychiatric and medical care. He acknowledged that providers are proponents of a recovery system of care; working with individuals with co-occurring disorders is a mandate for providers. Mr. Lawrence stated that the system in place does not provide for a recovery system of care. He spoke about the low reimbursement levels by Medicaid for such services. Mr. Lawrence stated he was concerned that individuals would not receive the level of care they should.

11. Adjourn:

Mr. Dixon made a motion to adjourn; the motion was seconded by Lana Robards. The meeting was adjourned by Mr. Burt at 11:27 a.m.