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## SUBSTANCE ABUSE PREVENTION AND TREATMENT AGENCY ADVISORY BOARD BIMONTHLY MEETING MINUTES

DATE: February 10, 2020 TIME: 9 a.m. to Adjournment

This meeting is being held in compliance with Declaration of Emergency Directive 006 as extended by Emergency Directive 021.

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### 1. Roll Call and Announcements

**Members Present:** David Robeck, Bridge Counseling, and Lana Robards, New Frontier, Co-Chairs; Mary Beth Chamberlain, Churchill Community Coalition; Dani Tillman, Ridge House; Ester Quilici, Vitality Unlimited; Jamie Ross, PACT Coalition; Jasmine Troop, HELP of Southern Nevada; Jolene Dalluhn, Quest Counseling; Jennifer DeLett-Snyder, Join Together Norther Nevada; Leo Magridician, WestCare; Mari Hutchinson, Step 2; Michelle Berry, Center for the Application of Substance Abuse Technologies (CASAT); Wendy Nelson, Frontier Community Coalition; Lena Hatzidopavlakis, Bristlecone

**Members Absent:** Patrick Bozarth

**Staff and Guest Present:** Brook Adie, DPBH; Tracy Palmer, BBHWP; Kim Garcia, BHWP; Kim Riggs, DPBH SAPTA/SOR; J'Amie Webster-Frederick; Ben Trevino SAPTA; Sheila Gustavson, SAPTA; Stacy McCool, SAPTA; Barrett Evans; Elyse Monroy and Miranda Branson, OpenBeds; Sean O'Donnell, Foundation for Recovery; Robert Wilkes; Sheri Haggerty, Office of Information Technology, DPBH; Michelle Berry and Mark Disselkoen, CASAT; Sydney Banks, Nevada Psychiatric Association; Diane Anderson and Randall Colquitt, CARE Coalition; Miranda Branson, Misty Vaughn Allen, Michelle Padden; Holly Reese, LGBTQ+ Center of Southern Nevada

2. Public Comment: No public comment
  
  3. Approval of Minutes: Minutes to be corrected and tabled until next meeting
  
  4. Standing Informational Items
    - SAPTA- Brook Adie: We did receive CARES funding to support activities through the pandemic and we are focusing on suicide prevention and Nevada Resilience. We (DPBH) applied and received a planning grant for the 988-phone number that will take us through September, this will help us get the line up and going.
    - WITS Update – Sheri Haggerty/Robert Wilkes: Treatment has been going pretty smoothly, (muted) prevention is working on trying to get plans into the data base.
    - OpenBeds Update – Elyse Monroy: We are seeing a higher volume of referrals coming through the system, with the deployment of 988 we see a roll with OpenBeds being used as a deployment tool for mobile crisis. Hopefully by next board meeting we will have data to share in a presentation.  
David: We are a little concerned with the referral through OpenBeds being competitive, is the customer getting the best care?  
Elyse: Miranda and I will do some work on this to see what we can do.
    - The Resilience Project Update – Kendall Holcomb- Not here due to federal site visit
    - CARE Coalition- Randall Colquitt: We are implementing a drug and alcohol early intervention for youth and teens, We are also working on a syringe exchange program to reduce the prevalence of Hepatitis C and AIDS in the LGBTQ community, we have noticed there is very little data in Clark county regarding substance and alcohol misuse in the LGBTQ community so we are adding more data to help with future programs in the area.
    - Evidence-Based Practices Update – Tracy Palmer/Cyndy Gustafson: Evidence Based Practice has put together a workgroup of a very diverse group of people to focus on program and policy, we are working on moving from a foundation level to a sustainable and systemic element. They will be looking at what is happening in Nevada and to see how EBP are put together and how are they being applied in comparison to data. You can find lots of information on reports and grants with this link <http://dpbh.nv.gov/Programs/ClinicalSAPTA/dta/Grants/SAPTAGrants/>
    - Prevention Coalitions/ Healthy Communities Coalitions Update – Jasmine Troop/ Wendy Madson- \*CARE Coalition spoke for this item earlier
    - Center for the Application of Substance Abuse Technologies (CASAT) Report- Michelle Berry and Mark Disselkoen: SOR (State Opioid Response) funding is being delayed. The no cost extension has been retro'ed to October 1<sup>st</sup>, the
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majority of the awards have been executed. For SOR 2 there were two rounds of funding, one group will be retro October 1<sup>st</sup>, the second group will be January 1<sup>st</sup>, those are in the process of being executed now. We are contacting those of you that need to provide GPRA's, 100% may not be feasible but you will be required to provide at least 80%. We have been working with Asto Omni workgroup and two tool kits have been made available; One is an outpatient guide and one is inpatient tool kit for medical providers based around SBIRT.

Kim: SOR funded individuals can attend an AATOD conference which will be from April 10<sup>th</sup> through April 14<sup>th</sup>. The deadline to register is March 10<sup>th</sup>, please contact Kim Riggs.

Michelle: Carry forward; We are looking at potential mobile MAT units and we are requesting permission from SAMHSA to retrofit the units. The second piece we are looking into is recovery housing. If we get approved the funding will be available October 2021.

Mark: I did a two-part privacy training in November and December relating to updates on 42 CFR part 2. April 19<sup>th</sup> I will be having a three-hour webinar for those of you who were not able to see the two-part original. We have also been working with Medicaid to reviewing provider type 17215 policies trying to find areas of flexibility.

- Office of Suicide Prevention – Misty Vaughan Allen (presentation)
  - Nevada has the 7<sup>th</sup> highest rate of suicides
  - Nevada is at 54% for deaths by firearms
  - 1st leading cause of death for youth 12-19 years of age
  - Veteran age 20+ suicide rate is three times higher
  - CARES Act funding- we were able to invest in training, Lethal Means Safety and BIPOC Town Hall
  - We are working on a Social Media Campaign aimed at parents and youth

5. Discuss Problem Gambling Integration – Mark Disselkoen – **Informational**
  - We are looking at developing division criteria for a gambling treatment endorsement that will have no funding or requirements for providers.
  - This will allow providers to market themselves with expertise in gambling treatment. This would be voluntary and flexible.

6. Discuss Residential and Transitional Living Rate Adjustment – Brook Adie – **Informational**
  - In 2016 a rate study was conducted by Myers and Stauffer for residential and transitional services; several different factors were looked at to determine what the new rate should be. Since the shift in Medicaid and the SOR dollars now is a good

time to make the adjustment. We are still gathering data on cost and determining a timeline; we are working with staff to look at claims that we have received by level of care, and TEDS data. We would like to have this implemented by the next grant cycle. We will work with individual providers that we are funding to assess their budget and to see if the programs can be sustained with block grant dollars or if we need to add additional SOR dollars. The rate adjustments were talking about would be:

For level 3.1 facilities, old rate \$87.28, new rate \$124.92

For level 3.2 facilities, old rate \$152.74, new rate \$135.82

For level 3.5 facilities, old rate \$141.83, new rate \$184.98

Transitional living, old rate \$43.64, new rate \$102.76

This would be a good time to have a discussion about the rate adjustments and the impacts it will have.

Ester: This is going the wrong way for Detox

Brook: I will take this information back to the group for discussion.

Lana: I agree with Esther on the drop-in rates for Detox. The Myers and Stauffer rates are 4 years old, so there may be some increase in Detox for today's cost.

Leo: Being a provider of this service, the old rate already left us below what we could adequately provide services that are required, with the rate going down would pose a big risk in the way we would have to staff it and the services that would be required. We are already struggling to provide this level of care.

#### 7. Review and possible approval Updated Bylaws – ***For possible action***

David: I don't believe an action is required for this

Brook : I added this on because I wanted to make sure the bylaw change is clear

Lana: Page 2 of 9 under terms, section 4.3.2 says "An organization will lose representation on the Board 2) if the organization ceases to receive SAPTA funding", I believe that should be eliminated.

David: Based on the last meeting it will have to be, good catch. Brook if you could go back and take a look at that.

Brook: I also wanted to add that in the bylaws it says the SAB is been established in the NRS, and I can't find anything regarding that. I think we need to have a discussion about possibly changing some of the language to make sure we are direction the establishment to the right place.

Lana: Jennifer Delett-Snyder had brought to the table quite a while ago, Im not sure what happened to that on the agenda.

David: You are correct Lana; it looks like there a couple of pieces we need to go back and look at.

Ester: Can we have the Attorney General look at this?

Brook: We did reach out to them and they can't find it either, I think the next step is to formulize the language to make sure were reflecting it correctly. I'm not sure which direction we need to go.

David: I think a good idea would be to talk to the AG again and ask for their suggestion, this was put in the language years ago, before all of us, it makes sense that our bylaws make since. If you can ask them Brook about what needs to take place.

8. Discuss and Recommend Agenda Items for the Next Meeting – ***For possible action***

Ester: We have not been looking at what legislation affects us; I think we should be more aware as a body.

Tracy: I just want to let everyone know that Ben Trevino put the link to DPBH for the grants into the chat.

Brook: I want to piggyback on what Esther was saying about the different bills, each one of our Regional Behavioral Health Boards has a BPR they are being presented, if you would like I can invite the coordinators to our next meeting to talk about what they're doing.

David: It's a good suggestion so we can look at that in six weeks are so.

9. Public Comment (*Action may not be taken on any matter brought up under this agenda item until scheduled on an agenda for a later meeting.*)

Ester: I would like to bring up legislation and the efforts of New Frontier and Vitality Unlimited to achieve some parody from one license to the next, we are trying to bring a little more clarity and we are trying to support the field from a framework stand point. If any of you believe this is a good cause I hope when we call on you for support that you will support us.

David: If you have your piece of legislation with you that you would like to share, we would like to see it, your not alone and we do think of you.

10. Adjournment at 11:27am