
**SUBSTANCE ABUSE PREVENTION AND TREATMENT AGENCY ADVISORY
BOARD BIMONTHLY MEETING
DRAFT MINUTES**

DATE: June 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.

Link to join by personal computer: <https://us02web.zoom.us/j/7756845906>

Call in number: 669 900 6833

Meeting ID: 7756845906

1. Roll Call and Announcements

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

Members absent: Frontier Community Coalition, Community Counseling Center
Mr. Robeck determined a quorum was present.

Staff and Guests Present: Mark Disselkoen, Michelle Padden, CASAT; Brook Adie, Tracy Palmer, Dawn Yohey, Bill Kirby, Joan Waldock, Division of Public and Behavioral Health (DPBH); Linda Lang, Statewide Coalition Partnership; Rachel Mack, Dignity Health; Trey Delap, Group Six Partners

2. Public Comment

There was no public comment.

3. Approval of Minutes from the Bimonthly Meeting on April 8, 2020

Ms. Quilici moved to approve the minutes with changes. Ms. Troop seconded the motion. The motion passed without abstention or opposition.

4. Standing Informational Items

- Co-Chair's Report

Ms. Robards commended Nevada agencies for their resilience in attacking COVID-19 issues. Most providers remained open since their services are essential.

Mr. Robeck said he was disappointed that a for-profit SAPTA-certified agency has been approaching members of his staff. One was recruited and had his salary doubled. Ms. Quilici said the same thing happened at her agency.

- Substance Abuse Prevention and Treatment Agency (SAPTA)

Ms. Adie said there were addenda for the Notice of Funding Opportunity (NOFO) for the Mental Health Block Grant (MHBG) and the Substance Abuse Block Grant (SABG) that includes State Opioid Response (SOR) funding. Addendum 2 is available for the SABG and SOR. The new deadline for application submission is July 6. The second round of questions must be submitted on or before June 12. There is also a second addendum for the Mental Health Block Grant. The new deadline for applications is Monday, June 29. The second round of questions must be submitted on or before June 12.

Bureau of Behavioral Health Wellness and Prevention program staff continues to telecommute while fiscal and support staff are working in the office.

- Jail Diversion Grant will allow Carson-Tahoe Hospital to expand its Assertive Community Treatment (ACT) team to increase capacity to serve individuals in Carson City, Lyon, Douglas, Washoe, and Nye Counties.
- The Federal Emergency Management Agency (FEMA) COVID-19 Emergency Response Grant of \$1.9 million must be spent in 16 months. Subawards were given to Reno Behavioral and Desert Parkway to expand children's mobile crisis and crisis stabilization centers; another award was given to establish a warm line for health care professionals.
- Crisis Counseling Assistance and Training Program (CCP) Grant awarded Nevada \$654,640 for 60 days. It is a two-part grant; one is for a short period of time, the second extends the grant for six to nine months. It provides early triage, intervention, and referral to services for individuals to reduce the risk of mental health disorders impacted by COVID-19.
- Suicide Prevention COVID-19 Emergency Response Grant—the application for this grant is pending.
- Centers for Disease Control Suicide Prevention Grant—DPBH will apply for the five-year grant that offers up to \$700,000 per year for planning and implementation.
- Zero Suicide Grant—DPBH should hear by the end of June whether they will receive this grant.
- PATH Grant—DPBH's application is pending.

Regulations for Assembly Bill (AB) 85 regarding mental health crisis were passed at the Board of Health meeting on June 5.

Ms. Yohey said the Suicide Prevention COVID-19 Emergency Response Grant will go to request for application (RFA) upon receipt of a notice of grant award.

Mr. Robeck expressed concern that for-profit agencies can apply for Substance Abuse Prevention and Treatment Agency (SAPTA) funding. Ms. Adie could not answer questions regarding the grants because they are competitive. All questions must be sent to Sheila Lambert at slambert.health.nv.gov.

Ms. Dalluhn stated Quest Counseling submitted their application for the Mental Health Block Grant before answers were given to the first set of questions. Mr. Robeck pointed out that applications submitted prior to receiving answers could be based on incorrect information. Ms. Yohey pointed out that only the date changed for the Mental Health Block Grant.

Ms. Dalluhn did not understand how to apply for the SOR. Ms. Adie replied the NOFO was for SABG and SOR. Ms. Adie said DPBH wanted to solicit providers and which services agencies provide to determine the best funding source.

Ms. Quilici asked if the State budget deficit would affect funding. Ms. Adie said the Nevada Department of Health and Human Services was asked by the Office of the Governor to create scenarios for cuts to the general funds budget. They have not received feedback from the Governor's Office. General funds impact treatment, prevention, and problem gambling. Currently, other budget accounts do not face reductions. There have been no reductions in federal grants. Ms. Quilici asked if DPBH had for-profit partners chosen as subawardees before they received applications or if they were chosen after the grant was awarded, noting both Reno Behavioral Health and Carson-Tahoe are for-profit. Ms. Adie said some grants require DPBH to identify providers based on the scope of services before DPBH applies. With some, DPBH applies and then does a competitive RFA. Many grants are specific and allow for-profit agencies to receive funds. Ms. Yohey explained DPBH had been working with two of the providers for the past 18 months. Because the COVID-19 Emergency Response Grant crisis services funding was specific, funding was awarded to those providers. Many of the new grants will go to RFA for compliance with state guidelines. Mr. Robeck asked if for-profit organizations were competing for the funds the nonprofits had been sharing. Ms. Adie replied the SABG does not allow subgrants to for-profit agencies; SOR grants can go to for-profit and nonprofit entities. The RFA that established a pool of eligible providers that could be subgrantees expired; DPBH must ask for competitive bids through the NOFO.

Ms. Tillman stated the Board has spoken of challenges facing SAPTA agencies as they provide services to the working poor who do not qualify for Medicaid but cannot afford to pay for insurance. Many providers expected to see flexibility in billing outpatient services to SAPTA, but it is not in the NOFO. The Board has discussed deficits SAPTA providers have covering the services they can cover. Rate increases are not in the NOFO. Ridge House worked with SAPTA to expand services over the past two years and opened more residential treatment beds in northern Nevada. The NOFO cap of \$750,000 would put them at just over 50 percent capacity. She is looking for other grants to fund bed nights and treatment that have traditionally been funded through SAPTA, using grants and foundations to pay for services SAPTA will not fund. Her agency does not bill SAPTA for outpatient services because their clientele is not eligible for SAPTA funding for

clinical treatment; bed nights is the only area where they can get assistance. The cap will cut her capacity to operate in the next fiscal year. She feels that SAPTA providers have not been heard.

Mr. Robeck read from the NOFO that the purpose is ". . . to fund priority treatment and support services for individuals without insurance, underinsured, or whose coverage is terminated for short periods of time." "Underinsured" could mean people who do not qualify for Medicaid or whose copays and/or deductibles are too high. He expects these people to be funded now. Ms. Tillman was told that nothing regarding eligibility had changed. Mr. Robeck said he views the grant as a contract. If he applies for that contract, he expects it to be fulfilled.

Ms. Hutchinson's agency was pressured to build a bigger residential facility because of the need for residential beds in her area. There are no other funding sources for residential treatment since Medicaid does not pay for it. Her residential program will not be fully funded with the \$750,00 cap.

Ms. Ross pointed out the treatment block grant says prevention, treatment, and recovery are eligible to apply for SOR funding, but the NOFO is 100 percent treatment. Prevention agencies will need guidance the NOFO does not provide.

Ms. Quilici asked who wrote the applications for the new grants Ms. Adie mentioned. Ms. Adie replied Dr. Woodard led the fiscal and program teams on the applications.

Mr. Magridician depends on SAPTA dollars for his residential facilities. His awards have been greater than \$750,000 in the past. At times, there has been a wait list of up to eight months for individuals needing treatment who are in the Clark County Detention Center. Residential programs will have to cut their numbers. A 50- or 40- or 30-bed facility will not be able to operate. If the criminal justice population is a priority, it will increase the wait list. Mr. Magridician's agency is planning budgets for next year based on the full award amount. They will have to cut staff to continue to operate, impacting the substance use disorder population and the livelihood of current staff members. Ms. Tillman faces the same challenge. Mr. Robeck noted money is going to the courts and that SAPTA dollars are going to for-profit companies. Some of their owners are on the New York Stock Exchange. Smaller for-profits' net profits are put back into their communities.

- Center for the Application of Substance Abuse Technologies (CASAT) Report
 - Certification site visits have been done via Zoom. They hope to start doing on-site visits in late June or early July.
 - Certified Community Behavioral Health Clinics (CCBHCs) site visits are being done via Zoom, but will move to on-site CCBHC reviews in July.
 - Prevention Specialist Advisory Committee has received 16 applications for committee membership in the past month. Four candidates were chosen to be interviewed. They are working on pilot endorsements for prevention specialists and other certifications related to trauma, crisis, and suicide

prevention. They received 31 new applications and now have 53 individuals who are certified.

- Community Health Workers Certification Board is seeking applications for membership. They plan to add an early childhood education endorsement. To date, they have received 147 applications, certifying 45 individuals.
- Peer Recovery and Support Specialist Advisory Committee is looking for one additional member to begin serving in the fall. They have received 179 applications and have certified 159 individuals.
- SOR 2.0 should be receiving \$16.5 million in September. The Board of Examiners will approve its use. A no-cost extension for the current SOR award will result in concurrent SOR awards. Current subawardees and new applicants should apply for the SAPTA NOFO.
- There are 108 new hub-and-spoke clients receiving medication-assisted treatment (MAT) and 53 receiving peer recovery services. In April, CASAT distributed 118 naloxone kits purchased through the state targeted response (STR) no-cost extension. They also distributed naloxone kits to opioid treatment providers for take-home medication-assisted treatment.
- Mobile opioid recovery teams have reached more than 1,000 individuals.
- They have been working with the MAT re-entry program in Las Vegas to provide transitional housing and residential treatment participants.
- Neonatal abstinence syndrome (NAS) services are being provided by the Empower Program at Dignity Health, Quest Counseling, and Renown.
- Office of Continuing Medical Education at University of Nevada, Reno provides training in opioid-prescribing guidelines for physicians; continued education concerning the Controlled Substances Act and updates to the Controlled Substances Act; and suicide prevention and continued medication-assisted treatment and screening, brief intervention, and referral to treatment (SBIRT) training for prescribers.

5. Review and Possible Approval of SAPTA Advisory Board Bylaws

Ms. Tillman moved to table this item to another meeting. Ms. Quilici seconded the motion. The motion passed without abstention or opposition.

6. Public Comment

There was no public comment.

7. Adjournment

The meeting was adjourned at 10:06 a.m.
