SOUTHERN REGIONAL BEHAVIORAL HEALTH POLICY BOARD MEETING MINUTES

DATE: Wednesday, October 9, 2024 TIME: 8:00 a.m.- Adjournment

Meeting Location: Virtual - Online Only

This meeting held via teleconference at: Join Zoom Meeting Login Link (see full details in the notes section below). – check online and links at the bottom.

1. Call to Order and Roll Call (Chair, Dr. Kevin Osten-Garner, and Coordinator)

The meeting was called to order at approximately 8:03AM by Chair Kevin Osten-Garner.

Members Present:

Dr. Kevin Osten-Garner (Chair)
Stacy Smith (Vice-Chair)
Assemblyman Gregory Hafen II
Missie Rowe
Boonn Hem
Chief Scott Lewis
Sarah Dillard
Brenda O'Neill
Dr. Whitney Owens
Jaren Stanton

Members Absent:

Coleen Lawrence

2. For Information and Discussion (Chair and Board): general board updates and announcements regarding events, information, and relevant communication and data.

No updates given.

3. Public Comment

No action may be taken upon a matter raised under the public comment period unless the matter itself has been specifically included on an agenda as an action item. To provide public comment telephonically, dial the number listed below. When prompted to provide the meeting ID, enter the number and password below. Comments will be limited to **three minutes** per person. People making comments will be asked to begin by stating their name for the record and to spell their last name and provide the secretary with written comments.

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Meeting ID: 934 9685 6860 / Passcode: 664346

No Public Comment given.

4. For Possible Discussion and Possible Action (Chair and Board): review and vote on approving the minutes for the August 14, 2024 meeting - https://nvbh.org/pdf-preview?id=5307

Stacy Smith motioned to approve the minutes from the August 14, 2024 meeting. Gregory Hafen/Whitney Owens seconded motion. All in favor, none opposed.

5. For Possible Discussion and Action (Chair/Board): review and potential ratification/vote on board reappointments. Members for consideration: Sarah Dillard, Brenda O'Neil, Dr. Whitney Owens, Coleen Lawrence, and Bonn Hem https://www.leg.state.nv.us/nrs/NRS-433.html#NRS433Sec429

Stacy Smith motioned to approve the reappointment of Sarah Dillard to the Board. Whitney Owens seconded motion. All in favor, none opposed.

Missie Rowe motioned to approve the reappointment of Brenda O'Neill to the Board. Motion was seconded by Boonn Hem. All in favor, none opposed.

Missie Rowe motioned to approve the reappointment of Whitney Owens to the Board. Stacy Smith seconded motion. All in favor, none opposed.

Whitney Owens motioned to approve the reappointment of Coleen Lawrence to the Board. Missie Rowe seconded motion. All in favor, none opposed.

Sarah Dillard motioned to approve the reappointment of Boonn Hem to the Board. Stacy Smith seconded motion. All in favor, none opposed.

6. For Information and Discussion (Chair/Vice-Chair/Board): board review on pending Non-Emergency Behavioral Health Transportation Bill Draft Request (BDR) and Legislative Counsel Bureau (LCB) status update.

Coordinator explained that the Legislative Counsel Bureau (LCB) advised that there is no way to track the BDR status at this time, but that there is a November prefilling deadline. Beyond the November date, there will be the ability to track the BDR. The BDR number is #39-368. The coordinator noted that there was discussion from the LCB with the leadership board about the fiscal component and conducting a cost-benefit analysis, however, the LCB does not have the resources or information to conduct that, and they also cannot assist with the passage of bills. The LCB did say that they would conduct a fiscal note for the Bill, at some point after the Bill is filed, but it would only show costs. In previous discussion with Medicaid, they advised that they may be able to assist with a fiscal analysis once the Bill officially gets in process. The LCB encouraged the Board to work with executive branch agencies as well as local government entities to inquire about other cost-saving opportunities. The LCB also suggested looking at any published cost savings in jurisdictions that have implemented programs like what is being requested by the Policy Board.

Chair Osten-Garner called on the assistance of Assemblyman Gregory Hafen and Chief Scott Lewis to give insight on what the strategy should be going forward as the BDR advances, to inform the legislature on the potential cost savings both on the Bill draft and beyond. Assemblyman Hafen suggested reaching out to the various

Counties and informing them of what the BDR is, and asking them to prepare any costs or savings that they would foresee in advance of them actually getting the BDR, as the counties themselves will get a request for any fiscal impact that the Bill may or may not have. Chief Lewis recommended either a focal point for distribution or an individual distribution for the BDR information, specifically contacting the County managers as they can assist and give direction as to who/where the best information would come from. The coordinator confirmed that the BDR is going to be addressing private vendors with non-emergent behavioral health transportation involving Medicaid reimbursement and not public transport or private pay or insurance.

7. For Information and Discussion: Presentation on Project ECHO and discussion on roles and scope of responsibilities around health and behavioral health workforce issues (Troy Jorgensen, Sr. Program Manager, Project ECHO Nevada). See presentation under *handouts* below:

Troy Jorgensen gave background information on his role and the Project ECHO initiative. Mr. Jorgensen explained that Project ECHO is a form of telehealth, which connects specialists/subject matter experts with healthcare professionals for case consultation and continuing education. Mr. Jorgensen noted that they do offer free CMEs and CEUs for a variety of different disciplines, and some that meet State licensure requirements for renewal. Programs are offered to include Pain Management, Rheumatology, Cardiology, Diabetes Care, Nutrition Education, First Episode Psychosis and more.

Sarah Dillard expressed gratitude for the program and gave positive feedback on behalf of her staff that have utilized it. She also noted the need for fetal alcohol syndrome education for both providers and school staff as well. Mr. Jorgensen explained that that is part of their developmental pediatrics program and wants to do some "one off" sessions regarding this topic.

Joseph Filippi inquired about supporting the Nevada Physician Wellness Coalition. Mr. Jorgensen responded that they show the support of the Coalition through their newsletter.

8. For Possible Information and Discussion: presentation and discussion on rural and frontier behavioral health transportation services (David Roberts, CEO OK Ride Care and Consultant.) See presentation under *handouts* below:

David Roberts gave a presentation on OK (Oklahoma) Ride Care and the services and strategies that are beneficial for them and their recipients. Mr. Roberts gave some background on himself, noting that he had retired from both the US Coast Guard and the Oklahoma City Police Department, where he was heavily involved with the crisis intervention team. Mr. Roberts mentioned Oklahoma law, 434A-1-110.B, is specific to transportation. The Bill initially required law enforcement to provide transportation within a 30-mile distance. If the need were beyond 30 miles, the private sector would step in and transport. In 2021, the law changed (November

1st in Oklahoma), and it removed the 30-mile portion from law enforcement to provide secondary transportation to the higher level of care. However, law enforcement still does provide service. For example, if a 911 call is initiated or they make contact with someone in crisis, they will take care of that initial transportation to either the closest hospital or the closest county crisis unit, but that is where their involvement stops. Any transportation beyond that, OK Ride Care provides transportation to a higher level of care. Mr. Roberts explained that transportation takes place in unmarked vehicles with ununiformed staff so as not to show that they are part of a mental health transport. Mr. Roberts also noted that the passenger is not handcuffed to help decriminalize the stigma with mental health. In fiscal year 2023, there were over 10,000 transports done. In fiscal year 2024, there were just under 12,000 calls that diverted 911 calls to Ride Care-reflecting those cost savings initiatives that were discussed prior. They are currently up to about 1800 transports a month. Mr. Roberts discussed expanded transport services to include substance/addiction treatment, active-duty military for PTSD treatment and connections to social services. Lastly, Mr. Roberts provided contact information and took questions from the Board and the public.

Stacy Smith questioned why the 30-mile distance factor was removed. Mr. Roberts noted that it was removed due to it not being a law enforcement function.

Boonn Hem inquired about the training that the drivers receive. Mr. Roberts explained that all the drivers are trained in TherOps, CPR certification, crisis communication with mental health, de-escalation with mental health, tribal/cultural training, and effective communication. CEU's are available with many recertifications done yearly internally and from the Department of Mental Health.

Chief Scott Lewis inquired about information on the transport vehicles. Mr. Roberts reiterated the solid barriers between the driver and passenger, indoor and outdoor cameras, audio recording, GPS tracking, safety metrics (harsh breaking, speed) and access to communication with dispatch.

Lastly, Mr. Roberts confirmed that this is a private company providing services and then billing out. Mr. Roberts also noted that in the process of accessing transportation, the request must come from someone in the system (mental health facility, addiction facility, a hospital, 988 mobile crisis team), it cannot come from a private citizen or an individual that is needing transportation for crisis services.

Cherylyn Rahr-Wood asked what the furthest number of miles the transport would allow and if they transport out of state. Mr. Roberts confirmed that there is not a limit to the number of miles that they would travel and that they do provide transportation services out of state.

- **9. For Possible Action:** Discussion and Approval of Future Agenda Items (Coordinator/Board)
 - a. Board Opening: "law enforcement representative" with "behavioral health experience/knowledge." (NRS.433.429 (4)). Majority Leader of Senate appointment (ongoing) https://www.leg.state.nv.us/nrs/NRS-433.html#NRS433Sec425
 - Board Opening: "representative of residential treatment facility, transitional housing or other housing program serving persons with mental illness or who abuse alcohol or drugs. Section 3, subsection 8(b). Board appointed. https://www.leg.state.nv.us/nrs/NRS-433.html#NRS433Sec425 (ongoing)
 - c. Possible experts or additional input on LCB review and possible feedback related to legislative priority (BDR) on non-emergency behavioral health transportation.
 - d. Provider presentations on rural and frontier services in Nevada: Silver Summit Health Plans (November) Care Source / Select Health / Other
 - e. Information on lobbying, providing testimony, letters of support, and preparation for legislative process January 2025

Dr. Osten-Garner encouraged Board members to give recommendations on Board openings a and b (above) to fill those seats. Chair Osten-Garner noted that Silver Summit Health Plan will be on the agenda for November and that the LCB review will stay on the agenda as well. Lastly, Dr. Osten-Garner urged the Board members to voice if there were any requests for future agenda items.

10. Public Comment

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No Public Comment Given.

11. For Possible Action: Adjournment (Chair/Vice-Chair)

Handouts:

• OK Ride Care https://nvbh.org/pdf-preview?id=5324

• Project ECHO https://nvbh.org/pdf-preview?id=5323

Chat:

08:28:16 - From Mark Funkhouser, NRHP to Troy Jorgensen, Project ECHO Nevada (direct message): Troy, are you able to stay on?

08:31:07 - From Troy Jorgensen, Project ECHO Nevada to Mark Funkhouser, NRHP (direct message): Yes, no problem!

08:31:24 - From Mark Funkhouser, NRHP to Troy Jorgensen, Project ECHO Nevada (direct message): Great thanks!

09:23:20 - From Troy Jorgensen, Project ECHO Nevada: • Project ECHO Nevada Webpage: https://med.unr.edu/echo

• Sign-up for newsletter: https://unr.us12.list-manage.com/subscribe?u=97a1a73bb5d22f94592b0ec53&id=a0d515f97a

AGENDA POSTED AT THE FOLLOWING LOCATIONS:

Physical Locations:

Nevada Rural Hospital Partners: 4600 Kietzke Lane; Suite I-209, Reno, Nevada 89502, and Division of Public Behavioral Health: 4126 Technology Way, 2nd Floor, Carson City, Nevada 89706.

Southern Regional Behavioral Health Website: https://nvbh.org/southern-behavioral-health-region/. Please refer to the Publications and Reports Section for more information.

Department of Health and Human Services Website:

<u>https://dpbh.nv.gov/Boards/RBHPB/Board_Meetings/Meetings/</u> (here you can find the agendas and minutes for current meetings including an archive of previous meetings and a listing of board members)

Nevada Public Notices: https://notice.nv.gov/.

- We are pleased to make reasonable accommodations for members of the public who are disabled and wish to attend the meeting. If special arrangements for the meeting are necessary, please notify the contact below. Also, if you need supporting documents for this meeting, please use the following contact: Mark Funkhouser, Southern Regional Behavioral Health Coordinator; 4600 Kietzke Lane I-209, Reno, Nevada 89502, or by email at mark@nrhp.org, or by calling (775) 827-4770 ext. 107 as soon as possible.
- If at any time during the meeting an individual who has been named on the agenda or has an item specifically regarding them included on the agenda is unable to participate because of technical or other difficulties, please email Mark Funkhouser at mark@nrhp.org and note at what time the difficulty started so that matters pertaining specifically to their participation may be continued to a future agenda if needed or otherwise addressed.