

## NORTHERN REGIONAL BEHAVIORAL HEALTH POLICY BOARD

### DRAFT MINUTES October 7, 2021 2:00 pm to Adjournment

The meeting was held using remote technology in compliance with *Nevada Revised Statutes 241.023*.

1. Call to order/roll call  
**Members:** Dr. Ali Banister (Vice-Chair), Dr. Robin Titus, Nicki Aaker, Lana Robards, Sheriff Ken Furlong, Dr. Daniel Gunnarson, Erik Schoen, Shayla Holmes, Heather Korbolic, Laura Yanez  
**Members Absent:** Taylor Allison (Chair), Dr. Amy Hyne-Sutherland  
**Staff/Guests Present:** Kristi Robusto, Patrick Ashton, Evette Cullen, Kris Homan, Yesenia Pacheco, Gina Zink, Terry Kerns, Valerie Balen, Alex Tanchek, Ashley Tackett, Ben Trevino, Cody Phinney, Elyse Monroy, Erin Allison, Kadie Zeller, Kim Riggs, Lea Tauchen, Lena Hatzidopavlakis, Michelle Bennett, Monique Normand, Natalie Muñoz, Peter Ott, Valerie Haskin, Wendy Madson, Trey Delap, Sarah Adler
2. Public Comment  
There was no public comment.
3. Review and approval of minutes from September 2, 2021  
Dr. Titus moved to approve the minutes. Mr. Schoen seconded the motion. The motion passed without abstention or opposition.
4. \*\*\*This item was taken out of order\*\*\*  
Presentation by Legislative Council Bureau (LCB) on background and legislative roles of Regional Behavioral Health Policy Boards  
Ms. Robusto and Mr. Ashton reviewed the [History of the Regional Behavioral Health Policy Boards in Nevada](#), from the Governor's Health and Wellness Council's establishment by Executive Order of Governor Brian Sandoval in 2013 to the present. The Council studied mental health issues and provided recommendations. Based on the study, the Legislature created four regional behavioral health policy boards when it passed Assembly Bill (AB) 366 in 2017: Washoe County; Southern Nevada, including Clark, Esmeralda, and Nye Counties; Northern Nevada, including Carson City, Churchill, Douglas, Lyon, Mineral, and Storey Counties; and Rural Nevada, including Elko, Eureka, Humboldt, Lander, Lincoln, Pershing, and White Pine Counties. In 2019, the Legislature passed AB 76, which added a Clark County board and revised the geographic regions of most of the boards.  
Senate Bill (SB) 56, proposed by the Clark RBHPB in 2021, did not pass, but SB 5, a similar bill, proposed by the Patient Protection Commission made changes to

telehealth, including adding audio-only interaction to its definition. It requires health insurers to reimburse telehealth services at the same rate as services provided in person unless they are provided through audio-only interactions. Mental health services provided via telehealth must be reimbursed at an equal rate until June 2023, which gives the 2023 Legislature an opportunity to consider making reimbursement parity permanent for these services. This Board's SB 70 passed, revising aspects of behavioral health practice to address the shortage of mental health professionals in Nevada, establishing education requirements for the issuance of a license or registration by behavioral health licensing boards, revising requirements for an expedited license by endorsement, and modifying requirements for licenses issued by the Board of Examiners for Social Work. The Legislature also passed SB 69, proposed by the Washoe board. At the request of individuals who provide peer recovery support services, it requires they be certified by the Nevada Certification Board. In 2019, the Northern Board proposed AB 85. SB 70 built on that, addressing involuntary and emergency admission of a person experiencing a mental health crisis. The Rural Board proposed AB 47, which was not successful. It would have required the Department of Health and Human Services (DHHS) to establish a pilot program to help respond to people suffering from mental health crises in certain sparsely populated counties. AB 65, proposed by the Washoe Board, authorizes DHHS to issue a crisis stabilization center endorsement for psychiatric hospitals that meet certain requirements.

5. Hear and review presentations for application to the Northern Regional Behavioral Health Policy Board and vote to select applicants for the following vacant positions on the Northern Regional Behavioral Health Policy Board
  - Representative from a community-based organization providing behavioral health services – Taylor Allison reapplied. Ms. Flood Abrass read her letter of interest and summary of qualifications to the Board. No one else was interested in this position. Mr. Schoen moved to reappoint her. Dr. Titus seconded the motion. The motion passed without opposition.
  - Representative of residential treatment facility, transitional housing or other housing program serving persons with mental illness or who abuse alcohol or drugs – Lana Robards shared her background and the qualifications that equip her to fill this role. No one else was interested in this position. Dr. Titus moved to reappoint her. Mr. Schoen seconded the motion. The motion passed without opposition.
  - County health officer or their representative; or similar public health position from city, county, or tribe – Nicki Aaker shared her qualifications and experience. No one else was interested in this position. Sheriff Furlong moved to reappoint her. Dr. Titus seconded the motion. The motion passed without opposition.

- One member who has received behavioral health services in this State, including, without limitation, services for substance use disorders, or a family member of such a person or, if such a person is not available, a person who represents the interests of behavioral health patients or the families of behavioral health patients. This position was vacated by Sandie Draper. Laura Yanez shared her background and experience. Ms. Robards moved to appoint Ms. Yanez to this position. Ms. Holmes seconded the motion. The motion passed without opposition.
  - Private or public insurer representative; if not available, another person who has experience in the field of insurance or working with insurers. Matt Law currently fills this position. Ms. Flood Abrass read his letter of interest. Ms. Korbolic shared her background and qualifications. Mr. Schoen moved to appoint Ms. Korbolic to the seat. Sheriff Furlong seconded the motion. The motion passed. Mr. Schoen stated that he has appreciated Mr. Law's perspective. It is not for a lack of what Mr. Law brings, but for what Ms. Korbolic can bring with her vast experience and relationships that will benefit the Board.
  - Member who represents providers of emergency medical services or fire services and has experience providing emergency care to behavioral health patients; may be a physician or a paramedic – This position was vacated by Dave Forgerson. Ms. Flood Abrass is recruiting for the position.
6. Presentation on the role and duties of a Board of Directors  
Mr. Schoen shared the [Storey County Non-profit Board Training](#) regarding board member responsibilities. The Board is concerned with the effective execution of its strategic plan. The culture on this Board is one of respecting one another, being open to different viewpoints, considering different ideas, and trying to make informed decisions dispassionately.  
The Board will evaluate Ms. Flood Abrass's role, review meeting minutes and materials if unable to attend a meeting, set the strategic plan, and let Ms. Flood Abrass run with that. Ms. Flood Abrass emphasized the richness of this Board comes from having the members being so active and engaged.
7. Review and approve [Northern Regional Behavioral Health Policy Board Next Steps](#) document  
Ms. Flood Abrass reviewed the document. They have had their review of authority in *Nevada Revised Statutes* (NRS) and the LCB presentation. Matching priorities with authority currently in law can be done in another meeting. They want to explore a bill draft request (BDR) to align with their priorities in coordination with other bodies/boards. She will continue to advocate for a data analyst. Ms. Aaker asked if they should advocate for Ms. Flood Abrass's position. Ms. Flood Abrass said Dr.

Stephanie Woodard is trying to formalize and fund the coordinator positions in the next Legislative session. Dr. Bannister suggested adding that to the document. Ms. Riggs noted the State is funding the Regional Behavioral Health Boards with braided funding.

They will have a presentation on affordable and supported housing and other social determinants of health by subject matter experts. Dr. Hyne-Sutherland will serve as liaison with the Carson housing committee. Social determinants of health the Board expressed interested in are food deserts, outdoor places to play, poor water quality, poverty, and homelessness. Dr. Packham could provide insight, and Nevada Rural Housing Authority could make a presentation.

The Department of Education received a 5-year award for schools to continue building a work force that matches population with training opportunities in middle and high school. Representatives from the Department of Education will provide a presentation on that grant. Valerie Cauhape, Rural Regional Behavioral Health Policy Board coordinator, can provide more information on flexibility for supervision of interns. Mr. Schoen is the liaison with the Rural Health Care Network and will provide updates to the Board about sustaining community health workers in Nevada. The Board requested a presentation on community health workers on the Centers for Disease Control and Prevention (CDC) grant funding 50 community health workers to assist seniors. Ms. Flood Abrass pointed out there is a "need" for more clinicians with a specialization for youth and a "want" to build up community health workers. Ms. Yanez suggested clearly defining the peer support specialist role. Ms. Flood Abrass added "advocate for tiered approached for a calibrated health system that includes a robust relationship between clinicians, community health workers, and peer support specialists" to the document. She noted the Board could advocate for community health workers' ability to bill for behavioral health services. Ms. Riggs pointed out that peers can be paid for services. Ms. Holmes explained a community health worker aids in the completion of a care plan; a peer support specialist is part of the care plan. Ms. Yanez stated community health workers and peer support specialists work in partnership to support an individual. Dr. Titus asked how community health workers bill for services. Mr. Schoen explained they are approved under a medical provider for a limited number of services, but not mental health care. The process for peer support specialists would be different under Medicaid. Ms. Riggs recommended having Medicaid provide a presentation. Mr. Schoen said many using community health workers find alternate ways to pay them.

Ms. Flood Abrass suggested research on what is being done nationally to build a clinician workforce. Dr. Packham could provide an update. Ms. Monroy suggested contacting the Office of Science, Innovation, and Technology's task force to expand graduate medical education (GME) fellowships in Nevada. They could report what they have funded and provide insight into other states' work.

The Board is waiting for crisis stabilization unit (CSU) billing rates and looking into assertive community treatment (ACT), and first episode psychosis (FEP). This region has certified community behavioral health centers (CCHBCs), FEP, and ACT. The Board is waiting for an update on building up the community health workers. Dana

Walburn will provide information for counties to develop billing consortia. Ms. Flood Abrass would like to develop a Medicaid billing group for people to learn from Ms. Robards' experience. Ms. Holmes said the county will do a cost/benefit analysis. Ms. Riggs suggested Medicaid participation.

Under increasing access to treatment in all levels of care, Ms. Flood Abrass pointed out there is a gap for people who have jobs but cannot afford insurance. She noted there is youth funding for providing services to uninsured youth.

The CCBHCs will be a critical part of crisis stabilization, but it is hard for some of them to set up a living room model. Ms. Flood Abrass said it is going to take the CCBHCs awhile to grow into their full potential, but eventually they will be a critical component. Ms. Holmes said they have not addressed lack of residential treatment, supported living arrangements (SLAs), and workforce for those systems. When individuals need placement, many are placed out of state while waiting for an SLA to be built and get its staff trained. This Board could advocate for the workforce development and the infrastructure pieces because it would be better to use that money in the state and keep people home. Ms. Flood Abrass added Medicaid billing and advocating for increased residential treatment and supported living arrangements to the document. Dr. Gunnarson noted the Rural Regional Center has been in contact Merakey, a company that provides SLAs for people with difficult behavioral issues; the obstacle to keeping youth in state has been reimbursement. Merakey is in California, but Nevada cannot pay them enough to make it worth their while to operate in Nevada. Ms. Flood Abrass said the Behavioral Health Commission Nevada reported the state cannot hire or staff the facilities we have because of reimbursement rates. Mr. Schoen recommended framing this through a health and wellness lens; the living room model takes on a different picture when viewed that way. Ms. Flood Abrass added "support community centers/peer drop-in centers, living room model." She suggested they look for alternate sources of funding. Ms. Yanez added communities should be putting together their 988 crisis responses. The Board should support what the local communities want.

Ms. Holmes reiterated the need of working on the Behavioral Health Emergency Operations Plan and making it operable. Ms. Aaker said figuring out continuity of care would have helped during the Caldor fire evacuation. Ms. Flood Abrass and Ms. Allison are planning the tabletop exercise by the end of the year. Ms. Holmes said bridging the gap between the discharge planner and the community would result in a reduction in recidivism to the hospital. Ms. Monroy said OpenBeds will help with discharge planning. Ms. Flood Abrass noted other states have used a care coordination billing rate. She added "follow up with DPBH discharge planning group and look into structural solutions to strengthen warm hand offs" to the document.

8. Regional Behavioral Health Coordinator update on current local, regional, and statewide efforts, initiatives, and legislation including Senate Bill 70, the Northern Regional Behavioral Health Emergency Operations Plan, Northern Regional Behavioral Health Communications committee, Statewide Regional Behavioral Health website, and Statewide Crisis Response planning

Ms. Flood Abrass reported conducting an initial crisis planning in Carson; a meeting is scheduled for Douglas County on the vision and values the communities want to bring forward to the state. Churchill is trying to schedule one.

She demonstrated how the [nrbhpb.org website](http://nrbhpb.org) works. It is designed for policy developers and legislators to compare one region to another; for providers to find information and announcements; and for the public to find resources. The data dashboard's information comes from the state epidemiological reports for each region. Ms. Monroy stated she could provide the coordinator with quarterly data.

9. Board member updates on behavioral health concerns, initiatives, and successes in their area of specialty or county

Ms. Aaker reported Carson received a presentation on 988. They completed a strengths, weaknesses, opportunities, and threats analysis and are in the process of developing a new strategic plan and direction.

10. Board member recommendations for future presentation and topics for board consideration

Members will email suggestions to the coordinator.

11. Public Comment

Ms. Adler stated that Vitality Unlimited has a CCBHC in Carson City, one reopening in Dayton, one in Elko, and will open one in Reno. She is serving as their interim outreach and partnership coordinator, but they are looking to fill that position. Positive and negative feedback about their operations can be sent to [sarah@ssgr.us](mailto:sarah@ssgr.us). The CCBHC in Carson will host a grand opening. She agreed with Board comments about the challenge in finding providers. Senate Bill 181 helped with the internship hours. Jay Kolbet-Clausell manages the Community Health Worker Association housed at Healthy Communities Coalition. Nevada National Alliance on Mental Illness is putting in a proposal to Nevada Recovers for supported housing. She hopes to dig into the data dashboard.

12. Adjournment

The meeting was adjourned.