



State of Maryland Behavioral Health Advisory Council

Larry Hogan, Governor – Boyd K. Rutherford, Lt. Governor – Robert R. Neall, Secretary, MDH

THE MARYLAND BEHAVIORAL HEALTH ADVISORY COUNCIL

Minutes

March 19, 2019

Maryland Behavioral Health Advisory Council Members Present:

Barbara L. Allen, Michael Baier, Dori S. Bishop (**by phone**), Lori Brewster (**by phone**), Mary Bunch, Kenneth Collins, Jan A. Desper Peters, Kathryn Dilley, Lillian Donnard, Catherine Drake, Kate Farinholt, Ann Geddes, Kelsey Goering for Jonathan Martin (**by phone**), Shannon Hall, Carlos Hardy, Dayna Harris, Joyce N. Harrison, James Hedrick, Dan Martin, Randall Nero for Stephen T. Moyer, Kathleen O'Brien, Luciene Parsley, Mary Pizzo, Keith Richardson (**by phone**), Kirsten Robb-McGrath, Jacob Salem, Dana Sauro, Sabrina Sepulveda (**by phone**), Nicholas Shearin (**by phone**), Deneice Valentine, Tracey Webb (**by phone**), Anita Wells

Maryland Behavioral Health Advisory Council Members Absent:

Makeitha Abdulbarr, Barbara J. Bazron, Karyn M. Black, John-Pierre Cardenas, The Hon. Addie Eckardt, Lauren Grimes, Christina Halpin, Rosanne Hanratty, Michael Ito, Sylvia Lawson, Sharon M. Lipford, The Hon. George Lipman, Theresa Lord, The Hon. Dana Moylan Wright, William Patten, Keisha Peterson, Jeffrey Sternlicht

Behavioral Health Administration (BHA) Staff Present:

Cynthia Petion, Marian Bland (**by phone**), Kathleen Rebbert-Franklin (**by phone**), Sarah Reiman, Tsegereda Assebe, Judith Leiman, Eleanor Dayhoff (**by phone**), Shenay Curry, Latanya Barnes, Frank Dyson, Steven Whitefield, Lisa Morrel, Greta Carter, Mona Figueroa, Bevin Merles, Kimberly Jones, Lori Mannino

c/o Behavioral Health Administration

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Guests and Others:

Mary Drexler, Maryland Center of Excellence on Problem Gambling
Julia Jerscheid, Mid-Shore Peer Support Specialist/Consumer Advocate
Jacqueline Pettis, Beacon Health Options Maryland
Ann Walsh, CBH of Maryland
Brooks Robinson, Mid-Shore Consumer Advocate
Vicki Scofield, Stepping Stones
Sandi Hart, Recovery Centers of America
Rod Kornrumpf, University of Maryland, Upper Chesapeake
Rose Regan, Healthy Tilghman Consumer Advocate
Cathy Howard, Anne Arundel County Department of Health
Catherine Gray, Anne Arundel County CSA
Kelly Moshogianis, Anne Arundel County CSA
Pamela Llewellyn, University of Maryland, Upper Chesapeake
Keli Harris, Building Healthy Military Communities
Tina Backe, MDH, Office of Population Health Improvement
Karen Pereira, MDH, Office of Population Health Improvement
Joy Ashcraft, Maryland Army National Guard
Debby Glunt, Walden Pyramid
Roy Jordan, Gaudenzia
Jason Barth, Frederick Memorial Hospital
Carol Zappe, Healthy Tilghman
Leo Yates, DORS-WTC
Diana Seybolt, University of Maryland
Elizabeth Vaidya, MDH, Office of Population Health Improvement
Kim Novak, Intern Samford University (Senator Addie Eckardt's Office)
Sharon MacDougall, On Our Own of Maryland
Adrienne Breidenstine, Behavioral Health System Baltimore
Lisa Lowe, F.A.C.E. Addiction Maryland
Daniel Jarvis, Behavioral Health System Baltimore

WELCOME AND INTRODUCTIONS

Dan Martin and Barbara Allen opened the meeting and welcomed all members and guests. New members were introduced to the Council. The minutes of the January 15 meeting were reviewed and adopted. Cynthia Petion indicated that there will be technical corrections to the minutes. The Minutes will be posted on the Behavioral Health Administration's (BHA) website at: <https://bha.health.maryland.gov/Pages/Maryland-Behavioral-Health-Advisory-Council.aspx>

ANNOUNCEMENTS AND UPDATES

Dan Martin announced that the new Commission to Study Mental and Behavioral Health in Maryland established through Executive Order 01.01.19.02 will have its Kick-Off Meeting this afternoon and Dr. Bazron will be attending.

There are still 3 vacancies on the Council that need to be filled: Parent of a young child, youth and family member seats. Dan encouraged members to share the information with people they know who will be willing to join and serve on the Council.

Barbara Allen shared with the Council that 3/19 was the 16th anniversary of her son Jimmy's death who was 35 years old at the time he died of addiction. Through time, after losing two more family members to addiction and her work in advocacy, Barbara has learned how the work around behavioral health is complex; how many people are working on it and how many more are coming on board to work on it. She thanked Council members for the work they do to make a difference and encouraged everyone to keep looking for the complexities, "untangle the nodes" and keep pushing for solutions.

Dayna Harris from the MD Department of Housing and Community Development (DHCD) informed the Council about grant funds available to the rural areas of Maryland for distance learning and telemedicine. She also shared a flyer on the USDA Rural Development and Rural Maryland Council's informational workshop, which will take place at the Maryland Department of Agriculture in Annapolis on March 28, 2019.

Also DHCD has additional grant money that could be used for recovery housing for pregnant women or women with children. The Department is looking for people with experience to sit on a focus group to help with planning and disbursement of this capital money as these are a new population group for the DHCD. She invited interested Council members to join the focus group.

Mary Drexler, Program Director of the Maryland Center of Excellence on Problem Gambling, reminded the Council that March is Problem Gambling Awareness month. She indicated that although gambling is not often seen as an addiction, it is a form of addiction. The Center is not for or against gambling but emphasizes the need for responsible gambling. It actively promotes March as National Problem Gambling Awareness month, which has also been recognized by the Governor as such through a State of Maryland Proclamation.

THE DIRECTOR'S REPORT: Cynthia Petion, Acting Director, System Management, Behavioral Health Administration (BHA)

Dr. Bazron is attending a meeting at Wicomico County and she will later attend the first meeting of the *Commission to Study Mental and Behavioral Health in Maryland*. Barbara Allen will also take part in this meeting. There will be follow-up listening sessions throughout the State and reports on the findings of the Commission.

Maryland Department of Health (MDH) and BHA Personnel/Reorganization Updates:

In February 2019, some Opioid response and prevention programs, which were under BHA's Health Promotion and Prevention Division, were reassigned to Public Health Services (PHA).

The following units were shifted from BHA to PHA:

- The Prescription Drug Monitoring Program (PDMP), now merged with the Office of Provider Engagement and Regulation (OPER);
- Prevention Programs, under Office of Population Health Improvement (OPHI); and
- Harm Reduction; all tobacco related services; and the Hospital-based services.

The Health Promotion and Prevention Division (HPPD), under the leadership Kathleen Rebbert-Franklin, is re-titled Service Access and Innovation Division. The Division will continue oversight of the Office of Gambling Services and Family Navigation, Workforce Development/Training, and will assume responsibility for the Office of Consumer Affairs and the Maryland's Commitment to Veterans Program. The Division's purpose will be to improve access and linkages to treatment and recovery services. It will also introduce best practices and innovative programs to improve service quality and effectiveness, which will include technology transfers and telehealth.

Michelle Fleming, the Director of Court Order, Evaluation and Placement has departed BHA to pursue other endeavors. Dr. Beven Merles will be Acting Director for this position. Dr. Merles is currently the Chief Psychologist at Spring Grove Hospital Center.

Judith Leiman of the Division of Planning is retiring at the end of this month. Ms. Leiman has been a team player in the oversight of local and state planning activities as well as key staff support to the Behavioral Health Advisory Council (BHAC). She also worked as one of BHA's fidelity monitors for the evidence-based practice programs. Judith has been with BHA for 10 years and worked for over 38 years in the field of mental health. The Division of Planning and BHAC members thanked Judy for her service.

QUESTIONS/COMMENTS

Q: Will the changes and the move of certain offices to PHA affect the work of the Programs?

A: No, both Administrations will work collaboratively to improve coordination of behavioral health treatment and opioid related services - and enhance the linkages of services in BHA and PHA, especially in addressing opioid related issues.

OTHER BHA UPDATES

Local Systems Management Integration Project:

The MDH Behavioral Health Local Systems Management Integration project has made good progress with activities that promote development of an integrated approach. This has included the development of standardizing policies and procedures using MDH's Acadia platform, convening a Learning Collaborative for all local authorities led in partnership with Maryland Association of Behavioral Health Authorities (MABHA) and BHA, and completion of a self-assessment of each local authority of their systems management integration status. We have entered a phase where the local behavioral health authorities are addressing their roles and responsibilities in systems management. There is also an Advisory Group that meets quarterly to guide the project activities and input to key materials.

State Opioid Response (SOR) Update:

Marian Bland, BHA's Director of Clinical Services, announced SAMHSA's overall budget for SOR has increased from \$1 billion to \$1.5 billion. SAMHSA has reached out to states to offer up to \$17 million supplemental funding for year two of the SOR grant. BHA is excited about this funding opportunity and will be working with the Opioid Command Center, the Secretary's and the Governor's Offices and PHA to develop a strategic plan and budget, and apply for the additional funding. Maryland's current award is \$33 million for 2 years.

Additionally, BHA submitted a no cost extension request for the use of the State Targeted Response/MORR Grant to support some of the activities that started late and could not be implemented by the end of the funding cycle of April 30, 2019. An extension was granted until April 30, 2020.

Recovery Housing

BHA has been working with local jurisdictions and also made selections in response to the recovery housing solicitation that was issued in December 2018. Twelve jurisdictions were selected to receive funds for recovery housing, a list of which was provided.

Another solicitation for proposals was issued for crisis walk-in/stabilization services, which are due to BHA by March 22. Currently, the proposals are being reviewed by the local jurisdictions and they will be submitting their recommendations to BHA by the deadline. The BHA team will review the proposals and make selections.

Community Bonds Funding:

Cynthia informed BHAC members that the application deadline for the FY2021 Maryland Department of Health sponsored “Capital Improvement Grants and Loans for Behavioral Health, Addictions Recovery, Developmental Disabilities and Federally Qualified Health Centers Facilities” (also known as community bonds) is April 17, 2019. Priority areas are for individuals with mental health and substance use disorders. Additionally, the Governor’s budget provided an additional \$1 million for FY2020 specifically for certified recovery residences. The application for this grant is due on May 8, 2019. Information on these applications is located on the Maryland Department of Health Website at: <https://health.maryland.gov/ocpbes>.

Dayna Harris from DHCD added that her Department offers what is called “pre development money,” which could be used for demolition and other needs to get projects off the ground, as well as low interest loans to meet MDH’s community bonds matching fund requirement.

Legislative Update:

Kim Jones, Director, Office of Government Affairs and Communication gave a brief legislative update on some of the major bills of significance to BHA. The legislative crossover was yesterday and many of the bills BHA was following with interest did not crossover. Thus, might not pass. Some of these are:

- Hospital Admissions: HB 306/SB 402 that requires inmates who are certified for involuntary admission be admitted into our hospitals within 12 hours.
- Telehealth: HB 570/SB 178 would eliminate the onsite requirement for a medical director for behavioral health programs in a federally designated health professional shortage area. Currently certain mental health programs require the physical presence of a medical director for at least 20hrs/week. Telehealth or the presence of a nurse practitioner are not considered sufficient to satisfy this requirement.

Legislations that crossed over:

- HB 1122/SB 944: This bill would allow psychiatric nurse practitioners to serve as a medical director for behavioral health programs either onsite or through telehealth.
- HB 783/SB 993. This bill requires that a “Task Force to Study Behavioral Health and Mental Health in Maryland” be established. However, a number of bills calling for the formation of task forces to study behavioral health programs, many of which were duplicative of the broad scope of the *Commission to Study Mental and Behavioral Health* established through an Executive Order, did not cross over or were withdrawn.

QUESTIONS/COMMENTS

Dan Martin asked whether there is any update on BHA’s budgetary approval process. Kim responded that there seems to be no major issues but did not have any details at this time. Another council member gave an update on a couple of bills related to opioid treatment: One is concerning individuals who go into treatment/short term detox program. The bill had an amendment stipulating that a discharge coordinator meet with them and put in place a discharge plan within 72 hrs. The amendment to this bill has been accepted. The other one is related to the establishment of a Task Force to study people being involuntarily discharged based on medical necessity determination.

Dan encouraged Council members to send a link to their tracking system/summary of the various bills they are following so that it could be put in one list/link and shared with Council members. We could also have different groups recap key issues, results and moving forward what the key issues are that all of us should be paying attention to. This could be done at the May meeting of the Council.

PRESENTATION

Needs Assessment for Student School-based Behavioral Health Services

Elizabeth Vaidya, Director, Primary Care Office, Office of Population Health Improvement (OPHI), PHS, Maryland Department of Health (MDH) and her team presented the work her Office has been doing in response to HB 1522 (2017). The bill required the Maryland State Department of Education (MSDE) and MDH to conduct a needs assessment for student school-based behavioral health services (BHS) in consultation with local education agencies and other interested stakeholders. Based on the bill's requirement, various data were collected and analyzed to determine the need for BHS in each school district, the types of school-based BHS already offered to children, the number of children with behavioral health needs; and to identify and remove obstacles to providing BHS to all children who presented a need for such services. But more work needs to be done to collect additional data to have a better picture of existing school-based services and needs. In this regard, OPHI has developed a new survey questionnaire and Elizabeth asked the support of Council members to help with its dissemination.

QUESTIONS/COMMENTS

Several other questions/comments were also discussed regarding what needs were identified; available resources; whether the collection of data included school age children insured through private insurance, home schooled children, children with special needs/disabilities; and how this needs assessment relates to the gap analysis done in response to the Maryland Safe to Learn Act.

OPHI responded that data were only collected with regard to needs of school age children attending public schools. The data were general and are not broken down by population groups, i.e., do not specify special needs or disability status of children. Most of the data were collected through literature review and from data reported to MSDE. Also, most of the data collected are the same or similar to those contained in Maryland Safe to Learn Act gap analysis. The difference will be in the interpretation of data due to the specific requirements of HB 1522.

OPHI hopes the responses to the survey questionnaire will help them tell the stories behind the data and include the perspectives of various stakeholders.

Council members suggested a couple of avenues for distribution of the questionnaire:

- Mary Bunch from Harford County, who is a Parent Representative Member of the Council and the President of the Harford County Mental Health and Addiction Advisory Council, stated she would be happy to share her experience with OPHI from a parent's perspective working alongside the public school system to try to find resources for children with behavioral health and special needs. She also offered to help OPHI with the dissemination of the survey to Harford County Stakeholders.
- Through the Community Behavioral Health Association of Maryland, which members have contracts with counties school systems to provide school-based mental health services; and

- Through local behavioral health authorities. It was also suggested that OPHI conduct a presentation for MABHA at their next meeting.

COUNCIL BUSINESS

Dan reminded members that it is time to elect new BHAC Co-Chairs. The Executive Committee, which will also serve as the Nominating Committee, will meet to outline a plan for the election of the Co-Chairs. BHAC members are welcome to join the Nominating Committee if they are willing to serve. He also encouraged members to put their name forth for election to the Co-chair seats.

COMMITTEE REPORTS

The Cultural and Linguistic Competence Committee reported that it will be working on vision and mission statements for the Committee. In addition, it will discuss strategies to support the implementation of the goals outlined in the BHA Cultural and Linguistic Competency Strategic Plan. The Committee would like to increase its membership and encourages BHAC participants to join.

The Criminal Justice/Forensics Committee also invited BHAC participants to come to its meeting. The focus of the Committee for today will be to update Dr. Merles, BHA's Acting Director of Court Order, Evaluation and Placement on what the Committee has been working on. The group will continue to focus on HG 8-507 residential substance use treatment, and other issues it has been working on. Several progress have been made but difficult issues remain related to access to services for those coming out of the criminal justice system, including bed capacity issues in our State hospitals. The need for wrap around programs and funding could not be more emphasized.

The Planning Committee will discuss the status of the local annual plans, and the upcoming state and federal planning activities that include regional stakeholder meetings to inform the State Plan and the Federal Block Grant application for 2020-2021.

The Children, Young Adults, and Families Committee indicated that they would like to receive an electronic copy of the HB 1517 (2018) which requires BHA to submit a report on behavioral health services for children and young adults and review it. There was a concern about the non-representation for children and young adults' serving systems in the Commission to Study Mental and Behavioral Health in Maryland. The Maryland Children's Behavioral Health Coalition sent a letter to the Governor expressing concern that children and youth's needs will be overlooked and asking for a representation. The updated agenda of the Commission meeting included youth and family representations, which indicated that their concern has been taken into consideration.

The Recovery Services and Supports Committee was pleased to see BHA's draft report on the listening session it did around developing a menu for peer services, which will hopefully lead to peers being reimbursed by Medicaid. They are also very excited about Maryland's resources being allocated to recovery support services, especially recovery housing.

The Prevention Committee is on hold until after discussion at the BHAC retreat.

Meeting adjourned.

The next Meeting of the Council is on May 21, 2019.