



# 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

**September 18, 2018**

#### **Maryland Behavioral Health Advisory Council Members Present:**

Barbara L. Allen, Robert Anderson for Michael Ito, Barbara J. Bazron, Dori S. Bishop, Lori Brewster (**by phone**), Mary Bunch, Kathryn Dilley, Lillian Donnard (**by phone**), The Hon. Addie Eckardt, Kate Farinholt (**by phone**), Ann Geddes, Lauren Grimes, Elaine Hall, Shannon Hall, Carlos Hardy, Dayna Harris, James Hedrick, Sharon M. Lipford, The Hon. George Lipman, Dan Martin, Dennis L. McDowell, The Hon. Dana Moylan Wright (**by phone**), Kathleen O'Brien, Luciene Parsley, Mary Pizzo, Charles Reifsnider, Keith Richardson (**by phone**), Kirsten Robb-McGrath, Jacob Salem for Kelby Brick, Dana Sauro, Erin Shaffer for Stephen T. Moyer, Jeffrey Sternlicht, Tracey Webb (**by phone**), Anita Wells

#### **Maryland Behavioral Health Advisory Council Members Absent:**

Makeitha Abdulbarr, Karyn M. Black, John-Pierre Cardenas, Kenneth Collins, Jan A. Desper Peters, Catherine Drake, Robert Findling, Christina Halpin, Rosanne Hanratty, Virginia Harrison, The Hon. Antonio Hayes, Sylvia Lawson, Theresa Lord, Jonathan Martin, Kathleen O'Brien, William Patten, Keisha Peterson, Catherine Simmons-Jones, Clay Stamp

#### **Behavioral Health Administration (BHA) Staff Present:**

Cynthia Petion, Marian Bland, Richard Ortega, Judith Leiman, Brendan Welsh, Melissa Barber, Tsegereda Assebe, Eleanor Dayhoff Brannigan (**by phone**), Lori Mannino, Darren McGregor, Latanya Barnes, Greta Carter

**Guests and Others:**

Julia Jerscheid, Mid-Shore Peer Support Specialist/Consumer Advocate

Jacqueline Pettis, Beacon Health Options Maryland

Ann Walsh, CBH of Maryland

Kimber Watts, Office of the Public Defender

Howard Ashkin, Maryland Association for the Treatment of Opioid Dependence (MATOD)

Amy Woodrum, Maryland Department of Health

Birch Barron, Opioid Operational Command Center

Adrienne Breidenstine, Behavioral Health System Baltimore

Brooks Robinson, Mid-Shore Consumer Advocate

Mary Drexler, Center of Excellence on Problem Gambling

Rose Regan, Healthy Tilghman Consumer Advocate

Ann Ciekot, Public Policy Partners

Robert Canosa, Catholic Charities

Daryl Plevy

Kim Novak

## **WELCOME AND INTRODUCTIONS**

Co-chairs Dan Martin and Barbara Allen opened the meeting and welcomed all members and guests. The minutes of the July 17th meeting were reviewed, approved and adopted. 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**

The Cultural & Linguistic Competency subcommittee is not meeting today. Room assignments for committee meetings have been changed and an updated list can be found on the resource table.

### **Membership Updates:**

Welcome to new member, Dayna Soros who is filling our youth slot on the advisory council. We have several vacancies on the Advisory Council to fill as Governor appointed seats are expiring at the end of September. We are looking to fill a second youth seat, academic and research professional, a family member, a medical professional, an individual who has received or is currently receiving services. Please send names of nominees to Dan Martin, Barbara Allen and Greta Carter.

### **Recovery Month Activities:**

September is Recovery Month and there are many activities occurring. The Fed-Up Rally is coming in October with 3 events (there are flyers on the resource table). A post-card campaign to send stories to our elected officials of those who have lost people to the opioid crisis is underway. Mid-Shore reports many "going purple" activities around opioid awareness and where to go for help. Senator Ben Cardin attended a round table discussion in Cherry Hill – Baltimore prior to voting on an opioid bill later that day.

## **THE DIRECTOR'S REPORT: Barbara J. Bazron, Ph.D., Deputy Secretary, Behavioral Health/Executive Director, Behavioral Health Administration**

### **Behavioral Health Administration (BHA) – Updates**

Dr. Bazron updated the Council on several issues:

- In addition to it being National Recovery Month, it is also National Suicide Awareness month.
- Dr. Bazron will attend and chair the first board meeting of the Maryland Crisis Stabilization Unit at Tuerk House tomorrow. Fellow board members include six appointed by the Governor and four appointed by the Mayor. We are to take a close look at the pilot and harvest the lessons learned as we develop other 24/7 centers. As of the end of August, ninety people have been seen and over sixty percent agreed to connect to care. There will be a new member as Dr. Leana Wen is leaving her post as the Baltimore City Health Commissioner.
- Over the next two years, Maryland will receive \$66 million from the Substance Abuse and Mental Health Services Administration (SAMHSA) to support efforts to fight the

## MARYLAND BEHAVIORAL HEALTH ADVISORY COUNCIL

Minutes of September 18, 2018

Page 4

heroin and opioid epidemic. We need to ensure that the programs we develop are sustainable over time. Secretary Neall is organizing our Department to determine how the State Opioid Response (SOR) grant funds will be targeted. Funding will be used to support 24/7 crisis treatment, naloxone distribution, expansion of SBIRT (screening, brief-intervention, and referral to treatment), public awareness and recovery support and student assistance programs. In addition, we are also coordinating with the OOCC to ensure we don't duplicate services and fill in the gaps.

- BHA received a grant for \$524,000 to provide services to pregnant women and children for MAT services and overdose prevention. Also focusing on jail-based programs.
- Behavioral Health Integration Project - We continue a massive effort to integrate behavioral health and substance use services at the local level. Our consultant Diane Stollenwerk developed and is facilitating a learning community among leadership of local jurisdictions which will share lessons learned and best practices. A website is also being developed to facilitate communication among the members. The BHA will convene an advisory group of diverse stakeholders to focus on implementing the plan. September 19, is the first meeting of the Advisory Group that will provide feedback and recommendations around the integration process.
- The Governor and Legislature passed the Safe to Learn Act of 2018. This was a response to the school shooting that occurred in St. Mary's, and is an opportunity to address the needs of our youth. One requirement is that each jurisdiction needs a behavioral health coordinator that can work with the schools to identify the needs of the children, connect them to services and help their parents navigate the system. There is a safety requirement that schools, including colleges and universities have annual active shooter drills and school safety emergency plans. Also, there is a hotline that has been set up through MEMA to report suspicious activity related to safety. Behavioral health issues will be referred to our 211 crisis line.
- ASAM – 3.1 SUD Residential: The Department is completing the final phase to include Medicaid coverage of ASAM Level 3.1 beginning January 1, 2019. 3.1 programs provide SUD treatment in large or small halfway houses. We are working with providers as they move from grant funding to fee for service.

### **BHA Personnel:**

Melissa Barber is our new director of Maryland Commitment to Veterans.

Anna Barefoot, BHA's Chief of Staff, has resigned and will focus on her new role as a mother. She will be missed. We are recruiting to fill this vacancy.

**Questions/Comments:**

Carlos Hardy inquired about the timeline of the availability of the SOR grant and whether there funds for recovery supports were included.

In response, BHA has not received Departmental approval to post the SOR grant application at this time. Also, there is funding for recovery initiatives.

Dayna Harris from the Department of Housing and Community Development announced that DHCD is now meeting with BHA to coordinate money for rental assistance. Housing is key to recovery.

**UPDATES ON EFFORTS RELATED TO:**

**Opioid Intervention Teams (OIT) - Birch Barron, Deputy Director, Opioid Operational Command Center.**

The OIOC coordinates and ensures communication and information is shared. We work with three primary groups: The Interagency Heroin Council, a State Level Partner group, and Local OITs. OITs exist in all local jurisdictions and are tasked with being the local coordination team for the opioid response. We have a resource hub which is a nonpublic website that includes archives of our monthly webinars, information and data. You can sign up for our monthly webinars for internal stakeholders.

The Opioid Intervention Teams were set up by Executive Order on March 1, 2017 in each county, Baltimore City, Annapolis and Ocean City. Each are led by the local Health Officer and Emergency Manager jointly, and includes local agencies, advocates and community groups. They meet either quarterly or monthly. Prevention, treatment, and recovery are all characterized by representatives from education, social services, hospitals, criminal justice, and private sector treatment providers. The make-up of each OIT is based on each jurisdiction's needs and may have merged with already existing groups such as Overdose Fatality Review Boards, Drug Free Community Coalitions or Local Drug and Alcohol Abuse Councils. On the website, [beforeitstoolate.maryland.gov](http://beforeitstoolate.maryland.gov) each OIT is listed along with their response plans and contact people.

**Parity Act – Ellen Weber, Vice President for Health Initiatives, Legal Action Center**

The Parity Act is now ten years old and Maryland has made a lot of progress to ensure that insurance covers both mental health and substance use services. The Parity Act requires that there be equal treatment across mental health, substance use and medical/surgical benefits, which includes coverage and access. The Affordable Care Act also includes parity requirements and Maryland mandates parity in benefit coverage for both private and public insurance plans. Individuals that you are working with across the State should have equal access and benefits to mental health, substance use and somatic health. We know there are still barriers and continue to work on making Parity a reality. Cost sharing has to be equal, limits on the length of care and the frequency of care. Non qualitative issues such as medical necessity criteria, and limited networks should also be equal. Barriers to the enforcement of the Parity Act usually have to do with a lack of transparency by providers to regulators and to consumers.

We are working on carriers demonstrating compliance with the Parity Act before a plan is offered on the market. Post sale investigations are occurring but take time and have delayed decisions. Medicaid is also trying to address and have found violations. Reimbursement rates are one area that needs to be investigated to ensure that the rules for setting rates are the same across the board. Very often, regulators depend on consumer complaints to determine if there is a violation but this is not efficient as consumers do not have the information they need in order to complain and many are in crisis at the time they are being denied access to services. Also, individual complaints do not address systemic problems.

The Maryland Parity at 10 Campaign has 22 organizations representing a wide range of stakeholders. We are trying to bring more people to the table and provide technical assistance, education, advocacy and communication to consumers, providers and the legislature.

See handout on how to get involved in the Maryland Parity Coalition activities that include data analysis, advocacy, surveys and story banking. We are asking the Governor to designate October as Parity Month and we are doing some voter education as well as asking candidates to provide their position on enforcement of the Parity Act.

## **THE BEHAVIORAL HEALTH ADVISORY COUNCIL (BHAC) COMMITTEE ACTIVITY REPORTS**

### **Cultural and Linguistic Competency Committee - Co-Chair:**

- The final draft of the Cultural and Linguistic Competency Strategic Plan is under review by Dr. Bazron and other key staff. The Committee is awaiting final approval.

### **Criminal Justice/Forensics Committee – Co-Chairs: Kathleen O’Brien and George Lipman**

- Meeting today with Michelle Fleming as our guest.

### **Planning Committee – Co-Chairs: Doris Bishop and Dennis McDowell**

- No updates

### **Lifespan Committee I – Co-Chairs: Ann Geddes and Mary Bunch**

- No updates

### **Lifespan Committee II – Co-Chair: Barbara Allen**

- No updates

**COUNCIL BUSINESS –**

**It was announced that the Council needs several co-chairs for the sub-committees and the following members volunteered for the co-chair positions:**

- The Planning Committee needs one co-chair. Senator Addie Eckardt volunteered
- The Prevention Committee needs two co-chairs
- Lifespan II needs one co-chair. Carlos Hardy volunteered
- CLC needs two co-chairs. Dayna Harris and Jacob Salem volunteered

By-law changes were sent out a few weeks ago and included a name change request from Lifespan II to Recovery Services and Supports Committee (which will include youth, adults and older adults). Also, Lifespan I will now be called Children, Young Adults and Families Committee. The Advisory Council approved the by-law changes.

The next Meeting of the Council is on November 20, 2018.

Meeting adjourned.