

Nebraska Division of Behavioral Health – Joint Meeting
State Advisory Committee on Mental Health Services - (§ 71-814)
State Advisory Committee on Substance Abuse Services (§ 71-815)
April 18, 2024
Lancaster Extension Education Center, 444 Cherrycreek Road, Lincoln, NE
9:00 a.m. – 2:30 p.m.
Meeting Minutes **DRAFT**

I. Open Meeting

Call to Order/Welcome – Tim Heller, Chair of the State Advisory Committee on Mental Health Services called the meeting to order at 9:25 a.m. Chair Heller welcomed attendees to the meeting and introduced the Chair of the State Advisory Committee on Substance Abuse Services, Mike Tefft. Chair Tefft welcomed all attendees as well. Chair Heller informed attendees that the joint meeting follows the **Open Meeting Act**, which was posted near the meeting room entrance, and can be found on the Division of Behavioral Health (DBH) website identified on the agenda. Attendees were reminded that there would be two allotted time periods for public comment, one in the morning and one in the afternoon.

Quorum for Committees

Roll call was conducted but quorum was not met for the State Advisory Committee on Mental Health Services (Mental Health Committee). Roll call was conducted but quorum was not met for the State Advisory Committee on Substance Abuse Services (Substance Abuse Committee).

State Advisory Committee on Substance Abuse Services

Members in Attendance: Ashley Berg, Heather Bird, Heather Crawford, Kelli Means, Mike Tefft.

State Advisory Committee on Mental Health Services

Members in Attendance: Verdell Bohling, Margaret Damme, Roger Donovan (late arrival), Victor Gehrig, Timothy Heller, Tracy Jordan, David Kass, Diana Meadors, Jennifer Reyna.

DHHS Staff

In Attendance: Tony Green, Jennifer Ihle, Jeri Keller-Heuke, John Trouba, Betty Jean Usher-Tate, Linda Wittmuss.

II. Membership Business

All attendees introduced themselves.

Because there was no quorum for either committee, the business item of approving the November 16, 2023, meeting minutes could not be addressed.

III. Division of Behavioral Health SFY2023 Annual Report

Dr. Betty Jean Usher-Tate, DBH Data & QI Administrator, presented DBH’s SFY2023 Annual Report. DBH funds and oversees community-based services for four federally recognized tribes of Nebraska: Omaha, Ponca, Santee Sioux, and Winnebago; information included in the report. The 988 Nebraska dashboard is now available on the DBH website; this is updated monthly. Data regarding self-reported primary substances of use at admission to DBH-funded services was reviewed. It was requested that this data be broken down by mental health services vs. substance abuse services, and secondary substances also be included. The 2023 Trauma Informed Care Self-Assessment Tool outcomes were reviewed. Providers who scored low in any domain will be offered additional support to improve performance. Results of the 2023 Annual Consumer Survey were reviewed; the 2024 Annual

Consumer Survey will be sent out by the end of April. The response rate to the 2023 survey was up from the previous year but still a low number. Discussion focused on ways to incentivize participation. Discussion was held on access to services, available services and needs and gaps across the state.

IV. Synar Report

Zack Hicks, DBH Epidemiologist, presented the FFY24 Annual Synar Report for Nebraska. The Synar program conducts annual compliance checks of a random sample of retail tobacco outlets for the sale of tobacco-related products to minors. DBH contracts with the Nebraska State Patrol to conduct the annual random, unannounced compliance checks from May to September; checks are done year-round by other agencies as well. If a retailer is discovered to be selling tobacco products to a minor, law enforcement must cite an individual, (i.e. clerk, manager or owner) for the criminal violation. For the current annual report, 2023 was the first year that the age range for Cooperating Individuals (CI) was raised to 19 to 20 years old; previously the age range was 15 to 17 years old. This is based on the legal age requirement being raised from 18 years to 21 years in 2021. All neighboring states except Missouri have also raised their legal tobacco age to 21 years as well. There are approximately 2,500 retail outlets in Nebraska. 212 outlets were randomly sampled, with 191 checks completed and 30 violations. Tobacco/Vape stores have the highest violation rate at 22.9%, compared with the overall state violation rate of 15.7%. According to the 2022 Nebraska Youth Tobacco Survey, students are more likely to obtain tobacco products from alternative means, such as family, friends, or parties.

V. Break

VI. Public Comment

There were no public comments received during the morning Public Comment opportunity.

VII. Director's Update

Tony Green, Interim DBH Director, thanked committee members for their attendance, and gave updates on several items occurring in the Division of Behavioral Health.

Mental Health Block Grant Site Visit will be May 14-16. SAMHSA auditors will be on-site at DBH those days and will be traveling to a few randomly chosen providers on May 17. JAC committee members were informed that audit staff may want to speak with some of them as well.

DBH is currently involved in annual budget planning with the behavioral health regional authorities.

Nebraska currently has more behavioral health providers than in the past. Many states are not showing any growth in workforce.

The regional budget shift process has been streamlined so that these can occur easier than in the past. Special permissions will no longer be needed to conduct shifts.

Certified Community Behavioral Health Clinics (CCBHCs) Initiative—DHHS (DBH and Medicaid) are currently in the working stage to establish a process for setting our rates and defining our core services for this project. DHHS will be meeting with behavioral health providers and regions to give an overview of current progress. DHHS will be creating a CCBHC website to track progress. A town hall meeting to discuss CCBHCs will be held by the end of April.

There are two upcoming trainings that are free for providers. The “Person-Centered & Trauma-Informed Crisis Management & De-Escalation” training will be held on Tuesday, April 23rd. “Tribal Standards of Care” will be held on Tuesday, May 28th.

Certified Peer Support Specialists (CPSS)—Office of Consumer Affairs (OCA) has released a process for CPSSs to reinstate their certification provided they are up to date on their CEUs. Details on this process can be found on the OCA webpage.

DBH has been working with Medicaid to match service definitions and rates. There are still a small number of rates that do not match between the divisions.

VIII. Lunch—Lunch & Learn Presentation

Linda Wittmuss, DBH Deputy Director, reviewed the DBH 2022-2024 CY2023 Strategic Plan Updates and Metrics.

IX. Outpatient Competency Restoration (OCR)

Dr. Jennifer Cimpl-Bohn, LRC Director of Forensic and Justice Behavioral Health, and Kristine Pothast, OCR Program Coordinator, presented an overview of the Outpatient Competency Restoration (OCR) program. Statute 29-1823 is a broad statute allowing for competency restoration. In 2019, LB686 passed which allowed for DHHS to enter into contracts with facilities or providers to offer competency restoration (Outpatient Competency Restoration) and went into effect in 7/2021. Prior to 2021, the only option available for competency restoration was in a state hospital or state-operated facility. The outpatient process is more complicated than the inpatient process, as DHHS must make level of care recommendations and referrals to OCR contractors. The outpatient process can be in any setting, including homeless situations. The number of inpatient cases served at LRC will be increasing due to recent construction projects and reassignment of beds. The competency restoration process is available only to county and district courts for anyone 18 years or older. Outcomes of these cases can be restored, not restorable, not competent/not restorable, or civil commitment. 70% to 80% of cases have been restored.

X. Public Comment

There were no public comments received during the afternoon Public Comment opportunity.

XI. Meeting Wrap Up

The next Joint Advisory Committee meeting will be Thursday, August 22, 2024, with location to be determined. Members suggested additional agenda items for upcoming meetings, including Mental Health Block Grant implementation, SAMHSA site visit outcome, opioid settlement updates from Dr. Todd Stull, attendance requirements for these meetings, 1115 demonstration waiver for substance abuse services.

Jennifer Ihle, Program Coordinator with the DBH Office of Consumer Affairs, informed attendees that May is Children's Mental Health Awareness Month. The 2024 Children's Mental Health Event will be Saturday, May 18th at 1:00 p.m. at the State Capitol.

XII. Adjourn

The meeting agenda having been completed, Chair Heller declared the meeting adjourned at 2:18 p.m.