

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 8, 2021 – WebEx Virtual Meeting

Meeting Minutes, Agenda and Materials are posted at

<http://dhhs.ne.gov/Pages/behavioral-health-public-participation.aspx>

Meeting Minutes

I. Call to Order/Welcome – 12:09 p.m. CDT

Victor Gehrig, Chair of the State Advisory Committee on Substance Abuse Services called the meeting to order at 12:09 p.m. Gehrig welcomed virtual attendees to the meeting and introduced Chair of the State Advisory Committee on Mental Health Services, Danielle Smith. Gehrig informed attendees that the joint meeting follows the **Open Meeting Act** which can be found on the DBH website identified on the agenda. Smith welcomed virtual attendees. Attendees were informed that both committees will hold elections of 2021 calendar year officers at a future meeting.

Quorum for Committees

Roll call was conducted and a quorum was determined to exist for the State Advisory Committee on Substance Abuse Services (Substance Abuse Committee). There was not a quorum for the State Advisory Committee on Mental Health Services (Mental Health Committee) at roll call, however, a quorum was present for the State Advisory Committee on Mental Health Services at 12:37 p.m.

State Advisory Committee on Mental Health Services

Members in Attendance: Mary Ann Borgeson, Margaret Damme, Laura Hart, CJ Johnson, Wendy Kaiser, Kristen Larsen, Ashley Pankonin, Angela Sattler, Carisa Schweitzer Masek, Danielle Smith, Angie Ludemann, Tamara Gavin.

State Advisory Committee on Substance Abuse Services

Members in Attendance: Ashley Berg, Heather Bird, Kenneth Boryca, Victor Gehrig, Jill Gregg, Jay Jackson, Diana Meadors, Kelli Means, Daniel Rutt, Randy See.

DHHS Staff in Attendance

Sheri Dawson, Tamara Gavin, Martha Burgess, Linda Wittmuss, Betty Jean Usher-Tate, Karen Harker, Bernie Hascall, Lindsey Hanlon, Nikki Suesz, Lisa Neeman, Brenda Moes, Taylor Moore, Mikayla Johnson, Amber Johnson, Jennifer Ihle, Adam Hall, John Trouba, Madelyn Dunn, Brianne Berres, Arnaud Muamba, Aaron Adams, Himani Byregowda.

II. Membership Business:

Substance Abuse Committee Chair Gehrig presented the January 29, 2021 meeting minutes for review. Mental Health Committee Secretary Wendy Kaiser confirmed her review of the minutes and had no corrections. Gehrig asked if there were corrections or comments, hearing none Gehrig asked for a motion to accept the January 29, 2021 meeting minutes as written. Diana Meadors, Substance Abuse Committee, made a motion to accept the January 29, 2021 minutes as written. Randy See, Substance Abuse Committee, seconded the motion. Voice vote of Yeas were unanimous to approve the minutes. The Mental Health Community Chair Smith asked for a motion to accept the January 29, 2021 meeting minutes at 3:38 p.m. Ashley Pankonin, Mental Health Committee, made a motion to accept the January 29, 2021 meeting minutes as written. Angela Sattler, Mental Health Committee, seconded the motion. Voice vote of Yeas were unanimous to approve the minutes.

III. Director's Update:

Sheri Dawson, Director of the Division of Behavioral Health (DBH), opened her remarks by thanking members of the committees for their dedication and service. Dawson provided an update on Nebraska COVID-19 statistics:

- 491 new cases reported over the past 7 days, compared to 344 two weeks ago
- Confirmation of the presence of five COVID-19 variant strains in the state
- 151 patients currently hospitalized
- Total COVID-related deaths over the last year is 2,183

Dawson encouraged everyone to take precautions – get tested, wear a mask, practice social distancing, refrain from attending large enclosed events – and consider getting vaccinated.

Dawson introduced Vanesa Day and C Mallory, both with Myers-Stauffer Consultants, the consultant group DHHS engaged to review the DHHS adult facilities (Norfolk Regional Center, Lincoln Regional Center and the Beatrice State Development Center).

Outpatient Competency Restoration (OCR) is to be implemented July 1, 2021. An informational session was held March 25, 2021 for potential providers. This session will help inform a Request for Information (RFI) targeted for April 2021 with the purpose of developing a cadre of providers to perform OCR services statewide. Approximately 68 participants statewide joined the session.

The Behavioral Health Disaster work coordinated through Regional Behavioral Health Authorities (Regions) provide outreach services to individuals and connect them to services through the SAMHSA Crisis Counseling Assistance and Training Program (CCP) grant. The Behavioral Health Disaster partners put together a training video that SAMHSA will use nationwide in its CCP training. According to disaster recovery science, the largest impact to behavioral health following a disaster will peak 12-18 months post disaster. DBH is working with system partners on finalizing a statewide suicide prevention campaign that includes targeted messaging to youth. Later today is an update on the 9-8-8 planning grant to plan implementation of 988 and review the crisis response system for individuals experiencing a behavioral health crisis.

Nebraska will be receiving \$2.1 million in the first round of settlement dollars from opioid settlements. Nebraska could see upwards of \$20 million from other settlements. The Nebraska Attorney General has formed a workgroup to develop recommendations for fund utilization focused on prevention, treatment, and recovery purposes related to the opioid crisis, substance use and co-occurring needs across Nebraska. There will be a variety of opportunities for input. Dawson asked members to consider the needs in their area and submit those ideas to the DBH email.

The Data team put together a one page FY20 Annual Report At A Glance infographic. It is very informative and nicely done. The report is on the DBH web page URL: <https://dhhs.ne.gov/Pages/Behavioral-Health.aspx>.

IV. Block Grant Priority Areas FY2022 – 2023

Linda Wittmuss, Deputy Director – System Integration and Betty Jean Usher-Tate, Administrator of Quality and Data Excellence, presented a review of and guided discussion on Division planning efforts including but not limited to progress metrics on the 2017-2020 Strategic Plan (which sunset on December 31, 2020), FY20 Annual Report data, 2020-21 Needs Assessment and priority areas identified by stakeholders for the FY2022-2024 Strategic Plan and progress on FY2020-2021 Block Grant activities. DBH planning is driven by the Governor's mission: Create opportunity through more effective, more efficient and customer focused state government.

DBH developed a needs assessment and FY2022-2024 Strategic Plan framework of Influence, Integration, Inclusion, Innovation and better Outcomes and demonstration of value for behavioral health.

Discussion and/or Recommendations:

Discussion about community members' ability to stay engaged with their community during the pandemic and the data trends presented. Interest in more information about the impact of COVID-19 on women that appears to be captured in FY20 substance use disorder service data. Following discussion, Smith and Gehrig asked members for any recommendations. Randy See made a motion to retain current targets for FY2022 and review potential change to targets for stable housing and employment. Daniel Rutt seconded the motion. Gehrig asked for a voice vote: Yeas were unanimous with no Nays. Motion on the recommendation accepted.

V. SAMHSA COVID Supplemental Block Grant Funding

Karen Harker, Deputy Director of Finance and Tamara Gavin, Deputy Director – Behavioral Health Services, presented information on the new supplemental Block Grant funding which provide additional relief based on impact of COVID-19. The additional Block Grants are one-time funds therefore sustainability has to be considered in the budget planning. The same Block Grant regulations also apply.

The Division was awarded \$7,162,196.00 for Substance Abuse Prevention and Treatment Block Grant (SAPTBG). The Community Mental Health Services Block Grant (MHBG) award total is \$3,795,400.00. State and federal spending cannot be reduced to utilize either of these funds. The award period for both Block Grants is March 15 2021 – March 14, 2023.

The plan for obligating funds is due to SAMHSA on April 12th. A high overview of proposed activities to bridge the needs and gaps in funding were presented. With the short timeline, it was not possible to determine costs, feasibility or viability of any activity. All items may not be submitted or funded with block grant funds.

Discussion and/or Recommendations:

Comments provided during the discussion on utilizing the MHBG COVID and SAPTBG COVID supplemental funds for alternate or additional uses identified areas to consider include:

- Expand out-patient services for residents in long-term facilities.
- Workforce resilience, self-care and well-being.
- Support services within the Youth Rehabilitation and Treatment Centers.
- Improve rural web access to support virtual services.
- Create the Complex Care Collaborative Group consultant and treatment planning.
- Funding to blend with Public Health CDC Health Disparities fund to increase critical incident stress management.
- Provide mental health to EMS/First Responders who have been dealing with trauma related to serving those with COVID-19, especially in rural areas.
- Incorporation of services within the criminal justice system or jail facilities.
- ¾ Way Housing as a step down service and remove barriers encountered by providers with data sharing across state agencies. Explore opportunity to adopt National Alliance for Recovery Residences (NARR) standards.
- Education and training initiatives targeting workforce culture and EBPs such as Medication Assisted Treatment (MAT) and Contingency Management, particularly in rural areas. Additionally, train on various MAT options, include implant option.

- Additional outreach to local governments and schools to provide substance use disorder educational programming – reports of increasing IV drug and meth use among youth.
- Leverage opportunities provided by the Health Resources and Services Administration (HRSA) programs (loan forgiveness) supporting provider training and MAT.
- Enhance social detox ability to accept and serve consumers with Benzodiazepine-class of medications.

VI. PUBLIC COMMENTS: 2:45 p.m.

The committees reassembled at 2:45 p.m. after the break for public comment. There was no public comment received.

VII. BREAK (An agenda adjustment was made to move the break to 2:36 p.m.)

VIII. Nebraska Office of Vocational Rehabilitation Acquired Brain Injury Program

(An agenda adjustment was made at 2:36 p.m. to move Item IX. ahead of Item VIII.)

Keri Bennett, Program Director for Acquired Brain Injury, Office of Vocational Rehabilitation (Nebraska VR), Nebraska Department of Education, presented information about brain injury with co-occurring behavioral health issues and shared results of the 2020 Living with Brain Injury Surveys Results: Brain Injury and Behavioral Health.

Building on its 2019 needs and resources assessment, Nebraska VR and the Nebraska Brain Injury Advisory Council administered the 2020 Living with Brain Injury Surveys: Brain Injury and Behavioral Health in order to learn more about this intersection between brain injury and behavioral health. This involved three unique needs assessment surveys of (1) individuals living with a brain injury, (2) their family members, and (3) mental health providers.

The full survey report is available on the Brain Injury Advisory Council website

<https://braininjury.nebraska.gov/sites/braininjury.nebraska.gov/files/doc/2020%20Living%20with%20Brain%20Injury%20Surveys%20RESULTS%20FINAL%202-3-2021%5B3%5D.pdf>

IX. 988 Planning Grant

(An agenda adjustment was made at 2:36 p.m. to move Item IX. ahead of Item VIII.)

Bernie Hascall, System of Care Administrator, presented information on the 988 planning grant. DBH received the National Suicide Prevention Lifeline’s 988 State Planning Grant through Vibrant Emotional Health, the nonprofit administrator of the National Suicide Prevention Lifeline.

This grant provides for DHHS and other system partners to participate in the development of an implementation plan to address projected infrastructure needs, volume growth, and access to the Lifeline’s new 988 number in Nebraska.

The 988 implementation plan will be developed under the leadership of the 988 Implementation Coalition through targeted work sessions and meetings with identified system partners and content experts. Work sessions are anticipated to focus on the areas of financial sustainability, service continuum, quality assurance and public messaging.

Monthly stakeholder meetings will occur virtually to share progress on the planning efforts and gather recommendations.

The initial 988 draft plan is due August 30, 2021, with a final plan due to the Substance Abuse and Mental Health Services Administration (SAMHSA) by December 1, 2021.

To be added to information distribution or to receive an invitation to information meetings, contact Bernie Hascall at Bernie.hascall@nebraska.gov

X. SYNAR Update

Lindsey Hanlon, Behavioral Health Prevention Manager, presented an update on Synar activities. As of October 2020, retailers are prohibited to sell tobacco products to individuals under the age of 21. NE State Patrol and Omaha Police department conduct unannounced annual inspections in a way that provides valid probability sample of tobacco sales to minors. Retailers are issued citations by law enforcement at the time of sale impacting the retailers Retailer Violation Rate (RVR).

RVR% for 2020 was 1.8% as compared to 9.7% in FY19. Report Samples are down in FY20 from FY19 by 154 inspections due to the inability to conduct inspection during the COVID Pandemic quarantine. In FY20, 3 of the eligible 101 inspections sold to minors, resulting in a weighted 1.8% violation rate. This, however, is an anomalous year as we generally have more than 101 inspections completed and our violation rate is generally between 9-10%.

Compliance rates goal remains at 20% or less for products sold to minors.

With the purchase age being 21 now, there are requirements to increase age for youth inspectors. The groups are ages 18, 19 & 20 or 16, 18 & 20. DBH will need to determine how to modify sample methodology.

XI. 206 Regulation Update

Nikki Suesz, Program Manager – Regulations & Contracts, presented background information and process for changes to DHHS DBH regulations. The 206 Regulation had not been updated since 2015. DBH identified recommended regulatory changes and held a Public Hearing on August 12, 2019. The Attorney General approved the revisions/changes from the Public Hearing on February 23, 2021.

The 206 Regulation is now in the Governor's office to be signed. When signed it will be sent on to the Secretary of State to file. Once it has been filed, DBH will have 5 days to implement the regulations.

DBH Regulation Executive Summary:

- The regulations have been reformatted with updated terminology.

- Internal guidance to staff has been removed.

- Peer Support - Chapter 7 has been added.

- All duplicative state statutes and regulations have been removed. Service definition attachment has been removed from regulation; service definitions will be incorporated by reference into provider contracts.

Brenda Moes, Administrator Office of Consumers Affairs, provided an update on Peer Support Chapter 7 of the 206 Regulation.

There were 86 peer support certifications that were due to expire on September of 2021 but, in anticipation of the promulgation of the new 206 Regulation the renewals, these will be waived. New certificates will be mailed to these individuals.

For the current Certified Peer Support Specialist and Certified Peer Support & Wellness Specialist with certification, the regulations identify specific criteria for specialists to apply for grandfather certification.

Upon approval for grandfather certification, the applicant will have 90 days from date of signed approval to take and pass the peer support exam. The applicant will not have to retake the Peer Support (PS) training.

Lisa Neeman, Clinical Services Administrator, provided an update on Service Definition reviews. The review of service definitions was started in anticipation of changes to the 206 Regulation. DBH reviewed all definitions found in the current Lime Book. All changes were open to a public comment period and additional stakeholder webinars will be available. Once the 206 Regulations are promulgated, DBH will formally announce when changes to service definitions will go into effect.

XII. Meeting Wrap Up

Next meeting date is August 12, 2021. Meeting time to be determined. No additional business was identified by members. Suggestions for agenda items can be emailed to dhhs-behavioralhealthdivision@nebraska.gov

XIII. Adjourn – 4:11 p.m.

The meeting agenda having been completed, Chairs Gehrig and Smith declared the meeting adjourned.