NORTH SOUND MENTAL HEALTH ADMINISTRATION ADVISORY BOARD MEETING

Agenda October 1st, 2014 1:00pm-3:00pm

1.	Call to	Order - Introductions, Chair									
2.	Revisio	ns to the Agenda, Chair									
3.	Comme	ents from the Public									
4.	Ombuds Report (Available at Meeting)										
5.	Approv	ral of the September Meeting Minutes		TAB 2							
6.	Executi	ve/Finance Committee Report	(Available at Meeting)	TAB 3							
	> Approval of Expenditures: September										
7.	Standin a. b.	g Board of Directors Committee Reports Planning Committee (No September meeting Quality Management Oversight Committee	;)	TAB 4							
8.	Old Bu	siness									
9.	. Executive Director Report										
	a. b.	Behavioral Health Organization (BHO) Plans Single Bed Certification (SBC) Update	ning Update								
10.	O. Action Items Being Brought To The Board of Directors a. Action Items/ Memorandum (Available at Meeting)										
11.	New Bu	usiness									
12.	Report	from Advisory Board Members									
13.	a. b. c. d. e.	ents from County Advisory Board Representat Island San Juan Skagit Snohomish Whatcom	ives								
14.	Other I	Business									
15.	Adjourn	nment									

NOTE: The next Advisory Board meeting will be November 4th in the NSMHA Conference Room.

North Sound Mental Health Administration (NSMHA) MENTAL HEALTH ADVISORY BOARD September 2, 2014 1:00 – 3:00pm

Present:	Island: Candy Trautman
	San Juan: Peg LeBlanc (via phone)
	Skagit: Joan Lubbe, Jeannette Anderson
	Snohomish: Carolyn Hetherwick-Goza, Greg Wennerberg, Fred Plappert, Jennifer
	Yuen, Marie Jubie, Carolann Sullivan, Joan Bethel
	Whatcom: Michael Massanari, Mark McDonald, David Kincheloe, Larry Richardson
Excused Absence:	Island:
	San Juan:
	Skagit:
	Snohomish:
	Whatcom:
Absent:	Island:
	San Juan:
	Skagit:
	Snohomish: Jeff Ross
	Whatcom:
Staff:	Joe Valentine, Joanie Williams recording
Guests:	

MINUTES

TOPIC DISCUSSION ACTION	
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CALL TO ORDER	R AND INTRODUCTIONS					
Chair	Mark opened the meeting and initiated introductions	Informational				
REVISIONS TO 1	THE AGENDA					
Chair	Chair He asked the group if there were any revisions to the agenda, there were none.					
COMMENTS FR	OM THE PUBLIC					
Chair	None present	Informational				
APPROVAL OF I	MINUTES					
Chair	Motion approved to accept the August minutes as written.					
EXECUTIVE/FIN	ANCE COMMITTEE					
	The August expenditures were reviewed. A motion was made to forward the expenditures to the Board of Directors (BOD) for approval, motion was seconded and approved.	Motion approved to forward expenditures to the BOD				
	Mark addressed the group regarding the conflict in dates of the Co-Occurring Disorders Conference and the next Advisory Board meeting. The Executive Finance Committee asked the Advisory Board if Wednesday, October 1 st , was option for them, verses the original date of October 7th. All were in favor. Joe asked Joanie to send out a reminder of the date change for the October meeting.	Next meeting date moved up one week				

DRAFT not yet app	roved by Advisory Board	
	The group discussed the Pre-Meeting/Conference chart and	
	determined they would like their next site tour to be at Western State	
	Hospital, followed by Lake Whatcom Treatment Center. Joanie will	
	talk with Mark Kipling and identify some available dates.	
STANDING BOARD O	F DIRECTORS COMMITTEE REPORTS	
	Planning Committee (no August meeting)	
	Quality Management Oversight Committee (QMOC) Report	
	The QMOC Brief was included in member binders	Informational
OLD BUSINESS		
Chair	Mark asked the Advisory Board to talk about the priorities identified	Informational
Citali	during the annual retreat:	
	a. Peer Initiatives	
	b. Behavioral Health Organization	
	c. Advocacy	
	d. Diversity	
	The following questions were asked:	
	A) How does the Board want to prioritize the topics?	
	B) What discussions need to occur under each priority?	
	C) What should the frequency of the discussions be?	
	David noted that there were two perspectives of importance related	
	to the role of the Advisory Board, in the context of NSMHA's transformation from a Regional Support Network (RSN) to a	
	Behavioral Health Organization (BHO): That the Advisory Board	
	should focus on the importance of consumers and family members,	
	first, in light of behavioral health integration — the combining of	
	mental healthcare and substance use treatment; and, second, in light	
	of full healthcare integration across all areas of healthcare. He also	
	mentioned that the Advisory Board should focus on cultural relevance	
	or cultural competence, as it's sometimes called, because the North	
	Sound community members are highly diverse (ages, gender	
	identities, levels of recovery, levels of engagement and health-related	
	knowledge, diagnoses, sexual orientation, ethnicities, languages,	
	etc.). He suggested that the Advisory Board should attempt to	
	identify some key initiatives on which they might focus. He suggested	
	using the large graphic from the Retreat to help in the identification	
	of those key initiatives, again with a central focus on healthcare	
	integration.	
	Candy said the Advisory Board's role in advocacy could be a leading	
	force for discussions as the BHO develops. Marie stated the	
	importance of advocating at all levels, including the legislative level and noted consumer voices must be heard.	
	The Advisory Board decided to approach (1) the identification of key	
	priorities as an ongoing discussion at each of the next meetings, in	
	parallel with (2) an educational component presented by Joe	
	Valentine on the structure and functional differences of the new	
	Behavioral Health Organization (BHO) at each of those same	
	meetings.	
	Mark asked each Board member to write about his/her individual	
	advocacy role and representation of consumer perspectives within	
	each of their counties. Joanie will gather and compile the responses	

DRAFT not yet approved by Advisory Board

DRAFT not yet app	broved by Advisory Board									
	for the October 1st meeting.									
EXECUTIVE DIRECT	EXECUTIVE DIRECTOR'S REPORT									
	Joe talked about the Supreme Court's decision regarding single bed certifications. The court issued a stay on implementing the decision until September 4 th . The court will review the State's request for a 120 day stay. He also talked about the grant for Housing and Recovery through Peer Services (HARPS) and gave and update on Crisis Redesign.	Informational								
until September 4 th . The court will review the State's request for a 120 day stay. He also talked about the grant for Housing and Recovery through Peer Services (HARPS) and gave and update on Crisis Redesign. Joe noted he will be giving an overview on the latest developments regarding the BHO during the October Advisory Board meeting. ACTION ITEMS BEING BROUGHT TO THE BOARD OF DIRECTORS Joe spoke about each of the action items. A motion was made to										
ACTION ITEMS BEI										
	Joe spoke about each of the action items. A motion was made to forward the Action items to the Board of Directors for approval. Motion was seconded and approved.	Motion approved to forward action items to the Board of Directors								
NEW BUSINESS										

Chair

NAMI Conference Reports: The members who attended the conference gave a brief overview of the sessions they attended at the NAMI Conference. Jeannette spoke about the ratio of inmates who are mentally ill at the Department of Corrections and the procedures of the Intensive Management Units (IMUs). Jennifer talked about information given regarding the use of pharmacology and herbal medicine. Greg W. spoke about the Comedy group, as well as dinner at the prison. Mark noted the conference was too focused on the prison system. David spoke on some of the seminars he attended and the members engaged in conversation with him.

REPORT FROM ADVISORY BOARD MEMBERS

Mark asked the group if anyone had a county report. Marie asked Carolyn Hetherwick Goza if she would talk about her recent interview with the Everett Herald. Carolyn responded by giving details about her interview and articles in the paper regarding her personal story of tragedy to advocacy.

COMMENTS FRO	OM COUNTY ADVISORY BOARD REPRESENTATIVES	
Island		
San Juan	Peg talked about San Juan County utilizing some of the NSMHA funding to provide education to teachers and others who deliver child and youth services.	
	She noted a presentation and training is being conducted on Adverse Childhood Experiences which affect child development. There are also measures adults can use to promote resiliency.	
Skagit		
Snohomish	Marie said she went to Optum Health in Pierce County. She spoke positively about the discretionary advantages of the building regarding mental health being it's primary focus. She also mentioned the bus shelter/Compass situation. Conversation ensued around the topic. Fred talked about Baily Center and Compass Health in Everett.	
Whatcom		
OTHER BUSINES	SS	
None		
ADJOURNMENT		

Meeting adjourned at 2:39 pm

Informational

North Sound Mental Health Administration

Regional Support Network for Island, San Juan, Skagit, Snohomish, and Whatcom Counties Improving the mental health and well being of individuals and families in our communities 117 North First Street, Suite 8 • Mount Vernon, WA 98273

360.416.7013 • 800.684.3555 • Fax 360.416.7017 • Email nsmha@nsmha.org • Web Site http://nsmha.org

QMOC Brief September 24, 2014

Policy 1701, 1719 and 1724

These policies were updated to incorporate changes from the State. Policy 1701 is for Crisis Stabilization Standards for Adults, Policy 1719 is regarding Utilization of Crisis Stabilization/Triage Beds allowing individuals being discharged from the hospital to have a safe step down before re-entry into the community and Policy 1724 was revised to encompass the progress made around collaboration with law enforcement. All three were approved and will go into effect 60 days after they are sent out to provider agencies.

External Quality Review Organization (EQRO)

Greg outlined some of the highlights of the EQRO review and thanked everyone for their efforts in making the review easy.

Implementation of Relias Training

Margaret Rojas and Jessica Ellis gave a brief update on the processes for uploading and implementation of the Relias Training System. They requested feedback from providers regarding Relias and the development of a new Training Plan. They mentioned NSMHA and providers are working on establishing a new Training Plan and requested feedback for the plan.

Exhibit N

Diana gave a brief summarization regarding the Exhibit N Grievance Report submitted to the Division of Behavioral Health and Recovery (DBHR).

NSMHA Plan of Action and Milestones – Phase 1 Calendar Year 2014
20 2014-20 Overview of North Sound Behavioral Health Organization Proposal Timeline
Thursday, September 18, 2014

ID	Task Name	Start	Finish	Duration	Q2 14 Q3 14 Q4 14 Q1 15 Q2 15 Q3 15 Apr May Jun Jul Aug Sep Oct Nov Dec Jan Feb Mar Apr May Jun Jul Aug Sep Oct
1	Adult Behavior Health Taskforce Convenes See Note*1	4/1/2014	4/1/2016	524d	
2	Present Decision Paper To Each County Councils	4/1/2014	7/1/2014	66d	
3	Create a List/Survey of Existing CD Services in Region and Map Referral & Access Processes	9/2/2014	10/30/2014	43d	
4	Task Force Makes Recommendations On Regional Service Areas	7/18/2014	7/18/2014	1d	I
5	Create A BHO Work Group and Charter	9/1/2014	10/30/2014	44d	
6	Develop A Draft BHO Plan with BHO Work Group	9/1/2014	4/1/2015	153d	
7	Preliminary BHO Rates	11/10/2014	11/10/2014	1d	I
8	Review Preliminary BHO Rates	11/10/2014	11/12/2014	3d	
9	Submit Letter of Intent to Become a BHO to State	12/12/2014	12/12/2014	1d	I

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^{*1 -} State legislation uses the terminology "Adult"; however, this has since been interpreted to be "Adult, Youth and Child"

NSMHA Plan of Action and Milestones – Phase 2 Calendar Year 2015
20 2014-20 OVERVIEW North Sound Behavioral Health Organization Proposal Timeline
Thursday, September 18, 2014

ID	Task Name	Start	Finish	Duration -	Q1 15 Q2 15 Q3 15 Q4 15 Q1 16 Q2 16 Q3 16 Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec Jan Feb Mar Apr May Jun Jul Aug Sep Oct
1	Task Force Submits Preliminary Report to Legislature	1/1/2015	1/1/2015	1d	
2	Revise Inter-Local Agreement/Consider Advisory Board Composition	1/1/2015	9/10/2015	181d	
3	Final Rates Determined	6/1/2015	6/1/2015	1d	l
4	Introduce and Review the Draft BOH Plan to the Board of Directors	6/11/2015	6/11/2015	1d	
5	State Issues Requirements for BHO Detailed Plans	7/1/2015	7/1/2015	1d	
6	Develop Detailed BHO Plan-Finalize-Inter-Local Agreement	7/1/2015	8/5/2015	26d	
7	Review for Approval the Revised Inter-Local Agreement with the Board of Directors	9/10/2015	9/10/2015	1d	
8	Forward Revised Inter-Local Agreement to County Councils for Approval	9/10/2015	10/29/2015	36d	
9	Draft Scope of Work for RFQ for Integrated Services	9/11/2015	11/19/2015	50d	
10	Review for Approval the BHO Plan With Board Of Directors	10/8/2015	10/8/2015	1d	1
11	BHO Detailed Plans Submitted to DSHS	10/29/2015	10/29/2015	1d	I
12	Introduce RFQ for Integrated Services to Board of Directors	12/10/2015	12/10/2015	1d	
13	Taskforce Makes Final Report to Governor	12/15/2015	12/15/2015	1d	

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NSMHA Plan of Action and Milestones – Phase 3 Calendar Years 2016-20
2014-20 OVERVIEW North Sound Behavioral Health Organization Proposal Timeline
Thursday, September 18, 2014

	Task Name	Start	Finish	Duration		20	015			20	016		2017				2018			
ID	r ask ivame	Start	FINISN	Duration	Q1	Q2	Q3	Q4	Q1	Q2	Q3	3 Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
1	Review and Approval of RFQ for Integrated Services to Board of Directors	1/14/2016	1/14/2016	1d		ı														
2	Release RFQ for Service Integration	1/15/2016	1/15/2016	1d					1											
3	RFQ Application Period	1/15/2016	2/12/2016	21d																
4	DSHS Completes Review of BHO Detailed Plan	2/1/2016	2/1/2016	1d																
5	RFQ Evaluation Team and Scoring	2/19/2016	2/29/2016	7d					I											
6	Contracts Released for Signature	3/1/2016	3/1/2016	1d					I											
7	Scoring Selections to Board of Directors	3/10/2016	3/10/2016	1d					l											
8	RFQ Contract Negotiations	3/11/2016	3/31/2016	15d																
9	Contract for Integrated Services Begins	4/1/2016	4/1/2016	1d						1										
10	Contracts For Behavioral Health Organizations Begin	4/1/2016	4/1/2016	1d																
11	Implementation Of The North Sound BHO	4/1/2016	4/1/2016	1d	I															
12	DSHS And HCA Report To Legislature/Governor On Each Regions' Preparedness For Full Integration by January 2020	12/3/2018	12/3/2018	1d																ı

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The Development of the North Sound Behavioral Health Organization

Overview for the:
North Sound ACH Organizing Committee
October 3, 2014
Joe Valentine

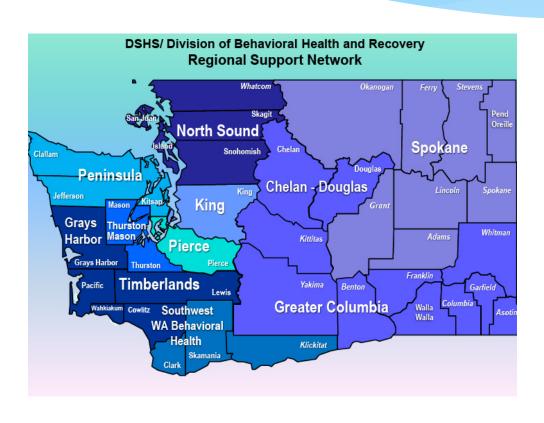
Background

- ESSB 6312 [2014] directed HCA and DSHS to integrate procurement of Mental Health and Chemical Dependency Treatment Services
- * State would contract with either "Behavioral Health Organizations" [BHOs] for integrated behavioral health services OR
- * "Managed Care Organizations" for fully integrated Medicaid funded Health and Behavioral Health care

Background

- * A Legislative Task Force will recommend guidelines for requirements and the boundaries of Regional Service Areas
- The Task Force accepted the recommendations from the Counties for the Regional Service Areas
- * North Sound would remain as its own RSA

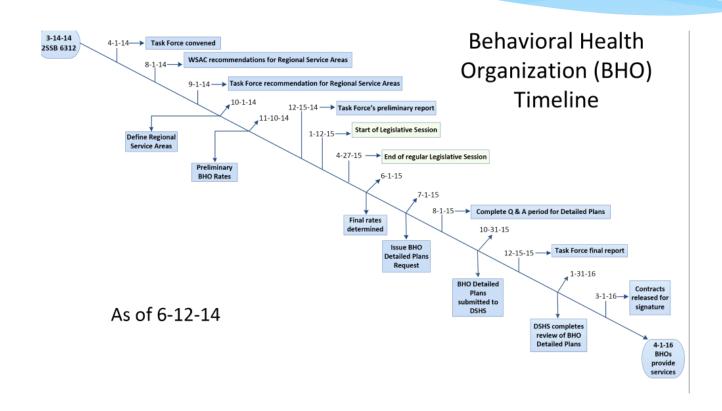
Proposed Regional Service Areas



Counties and BHOs

- * Counties which currently oversee "Regional Support Networks" were given the option of developing and overseeing the new BHOs
- * The 5 North Sound Counties voted to submit a plan to operate the North Sound BHO **provided that** the state would be allocating sufficient funding to assume the risk for a managed care contract for behavioral health services

State Timeline



North Sound Timeline

* handout

North Sound BHO

- * The North Sound RSN [NSMHA] has been asked to take the lead in developing the plan
- * A North Sound BHO Plan Workgroup has been created with representative of the 5 counties and all contracted behavioral health providers
- * Several consultants will be retained including Dale Jarvis for the fiscal model

Transition to Managed Care

- * The state will provide "capitated" payments to the BHOs for all medically necessary MH and CD services for Medicaid enrollees
- * Capitated rates determined by an actuary process factoring in # Medicaid enrollees, projected utilization, and cost of services
- * Rates may not be sufficient to expand services beyond current treatment modalities

BHO Plan Elements

- * Services and Provider Network
- * Performance Measurement
- Health Care Integration
- Cross System Collaborations
- * Financial Management
- * Advisory Board

ACH and Health Care Integration

- * Opportunities to expand "bi-directional" clinical integration
- Increasing access to services through tele-health networks
- Building the foundation for full integration of Health Care/Behavioral Health in 2020

ACH and Health Care Integration

Partnerships to improve services to special populations:

- * Children and youth,
- * Pregnant and parenting women,
- * Seniors
- Limited English Speaking persons,
- * Native Americans, etc.