

Region IV Behavioral Health Board Meeting
October 9, 2014
Room 131, 1720 Westgate Drive, Boise, ID 83704

11:00 AM - 1:00 PM

Time	Agenda Item	Presenter	Notes
11:00-11:10	Call to order; approval of consent agenda Introductions	Laura Thomas; All	
11:10-12:00	Old Business Draft #1 of Bylaws with specific decisions on: Determination of quorum number Determination of officers and executive committee including interpretation of consumer/advocate requirements and duties Nominations for Chair and other officers – vote? Email vote by October 27? At November meeting? Update on Organization Structure Information	Laura Thomas	
12:00-12:10	Brief Break	All	
12:10 - 12:20 pm	New Business Conflict of Interest Declaration Region 4 designee to attend SPC meetings Budget Requests, if any	Laura Thomas or New Chair	
12:20-12:35	Overview of State Funded Behavioral Health Services	Laura Thomas	
12:35-12:50	Behavioral Health Services Medicare Managed Care Contractor – Optum Idaho	Optum Idaho staff	
12:50-1:00	Announcements Next meeting agenda items Wrap-up	Laura Thomas; All	
	Adjournment	All	

**Welcome to
Region 4
Behavioral Health Board**
October 9, 2014

Call to Order

- Welcome
- Introductions
- Approval of consent agenda – approves draft minutes with corrections, agenda for today and accepts report from Optum.
Agenda additions need to conform to public meeting law requirements.

Old Business - Bylaws

- Bylaws – Draft #1 focus on
- Article V Section 3 P4 quorum & voting
- Article III Section 1 P2 Board officers – Duties Executive Comm.
- Article IV P3 Termination
- Quorum & voting
- Officer descriptions in bylaws or attachment?
- Officer Duties
- How to interpret consumer/advocate representation for executive committee

Old Business - Elections

- Are you ready for elections?
- Should qualifications be spelled out?
- Do you want to nominate this meeting and vote before next or at next?
- Chair w/CRDS support
- Vice Chair
- Treasurer
- Secretary – would have support of CRDS
- Fifth member of Executive committee



Regional Behavioral Health Boards

Update on Organizational Structure



Stand up Independently Governmental Entity

- The controller's office is borrowing a page from Amy Winehouse's catalog
- "You say you want to stand up independently and I say **NO, NO, NO, NO!**"
- This option is off the table.



Stand up Independently 501c3

- The legislation doesn't list 501c3 as an option
- Lots of work!!!! Would take 1-2 years
- Has contracting implications; DHW cannot contract with a 501c3 in same manner as another governmental entity – we would have to compete for RFPs



Partner with DHW similar to Developmental Disabilities Council

- This option may be possible
- DHW would have to go to legislature on R4BHB behalf for increases in spending authority for grants/contracts received, approval for additional staff needs, etc.
- This option would have limitations and would have stronger tie to DHW/Legislature; Governor's office
- Would be fastest option possibly

Partner with CDHD

- **Questions have been raised about limitation for grants or contracts related to CDHD structure or governance.**
- **Meeting yesterday 10/8/14**
- **No spending authority or personnel approval issues (if funds available)**
- **This option continues to be explored.**

What is next?

- **Suggestion: Invite Russ Duke from CDHD to next board meeting**
- **More information on each option is under development. Stay tuned.**
- **State Planning Council working on readiness criteria and application/approval process. Stay tuned.**

Break

- **7 minutes please....**

New Business

- **Conflict of Interest Declaration**
- **Region 4 BHB representative to attend State Planning Council Meetings – next meeting is January 5-7, 2015**

Budget Update

- Expenses to date:
Board Supplies \$ 138.47
- In process of figuring out paper work for mileage reimbursement submission; pending expense

Overview of State funded BH

- SUDS
- Block Grant
 - Priority Populations
- ATR IV Grant
 - Targeted Populations
- Contract Management by Business Psychology Associates, BPA

Overview of State funded BH

- SUDS
- Gaps in service are those without private insurance and without Medicaid and are not involved in the criminal justice systems
- Who does that look like? Single people between ages 19-64 with income level in the income gap (for health insurance without Medicaid expansion.)

SUDS Services Partners

- DHW
- Idaho Courts --Drug Courts and other Specialty Courts
- IDJC through each county
- IDOC through districts
- Medicaid is utilized when client is eligible

Mental Health Services

- State Funded AMH
- DHW Region 4
- Mobile Crisis, Assertive Comm. Treatment (ACT/FACT) – MH court, Clinics, Court orders, Under/ no insurance, Clients w/ needs require more supports
- State Funded CMH
- DHW Region 4 Court ordered (majority of workload)
- Voluntary – under or no insurance
- Crisis (w/child prot.)
- Hospitalizations

Medicaid Behavioral Health

- Medicaid contracts with Optum Idaho for behavioral health services
- Medicaid eligible are members of Optum Idaho and have services provided through Optum's provider network

Update from Optum

- Aaron Darpli
- Quarterly Reports
- Discuss Board's questions submitted prior to meeting

Meetings and Events to note Links at www.BHB4.dhw.idaho.gov

Events
Title
10 09 14 R4 Behavioral Health Board Meeting 11 a.m. to 1 p.m.
10 17 14 Public Hearing Adult Mental Health Rule changes Room 142 Region 4, 10 a.m. Link to Oct 1 Admin. Bulletin here, 16.07.33
10 17 14 Second Community Recovery Center Planning Meeting, 3 pm 3rd floor PTC Bldg, 450 W. State Street, Boise
10 18 14 Idaho Federation of Families Advocacy Awards and Workshop RSVP
10 30 14 Reality Party for Parents Event - tours every 45 minutes 4:15 to 7:15 pm RSVP required

Agenda Items and Requests

- Agenda items
- Next meeting requests

Reflections



Next meeting and Adjournment

- November 13, 2014 11 a.m. to 1 p.m.
 - Room 131 and telephone conference option, video conference from Mtn Home
- NOTE: SUDS providers will meet Wednesday November 12, from 9 am to 10:30 am followed by a BPA Meet and Greet until 11:30 here in Room 131

Enjoy October!



The board shall annually elect to a one-year term a Chair, Vice Chair, Treasurer, and Secretary. Officers may be re-elected to office for _____ terms of the same office. Annual election of officers shall include one member whom has lived experience in either MH or SUDS and thus represent the voice of MH or SUDS consumer or advocate. In addition to these officers, a second consumer/advocate representative will be elected to fulfill requirements of the executive committee described in Idaho Code 39-3133.

Duties of Chair: The Board Chair conducts Behavioral Health Board and Executive Committee meetings, prepares the meeting agenda after receiving agenda suggestions from Board and Staff members, assists all Board committees, identifies and monitors Behavioral Health Board agreed upon goals and maintains appropriate communication with Region IV Board Members, Staff and other stakeholders.

Duties of Vice Chair: The Vice Chair shall act as an aid to the chair and shall perform the duties of the Chair in the absence or inability of the Chair to act.

Duties of Secretary: The Board Secretary receives notice from Board members when they are unable to attend Board meetings, keeps track of attendance without cause and notify any member after two such absences. The Board Secretary coordinates with the Board Chair to: maintain a list of current Board Members and their contact information, present the list of Board positions to be filled to the Behavioral Health Board Appointing Committee, monitor corrections to the Board minutes and maintain a file of the approved documents and maintain official Board documents in an electronic and/or hard copy file. The staff will provide administrative assistance to carry out these functions. Minutes are taken at each meeting and shall include all action items and recommendations. Copies of the minutes shall be distributed to Board members. The staff will provide administrative assistance during the meeting and will distribute minutes, agenda and other informational material prior to Board meetings

Duties of the Treasurer: The Treasurer shall keep maintain the financial accounts of the board and will give a financial report to the Board as request, but at least quarterly and shall deliver an annual financial report.

In accordance with Idaho Code 39-3133 this board shall annually elect an executive committee of five (5) members to serve with officers on the Behavioral Health Board. The membership shall include one (1) mental health consumer or advocate and one (1) substance use disorder consumer or advocate. The Executive Committee shall be empowered to make fiscal, legal and business decisions on behalf of the full board. The Regional Behavioral Health Board may join with another governmental entity that can fulfill the same management infrastructure function. The executive committee or partner public entity shall have the power to:

1. Establish a fiscal control policy as required by the state controller;
2. Enter into contracts and grants with other governmental and private agencies;
3. Develop and maintain bylaws as necessary;
4. Employ and fix the compensation, subject to the provisions of chapter 53; title

67, Idaho Code, of such personnel as may be necessary to carry out the duties of the board.

All meetings of the executive committee shall be held in accordance with the open meeting law.

Executive Committee: The executive committee shall be comprised of the four elected officers and one at-large member with consumer/advocacy representation from MH or SUDS (to complement the existing representation of the board officers).

DRAFT

Legal References for Behavioral Health Partners

Introduction:

Transforming the behavioral health service system in Idaho is a collaborative process involving state entities, the Behavioral Health Planning Council and Regional Behavioral Health Boards. There are a variety of legal requirements, both state and federal, that shape the framework from which this system operates. Included in this document are contextual titles and citations to law (and descriptions) that relate to these requirements.

Behavioral Health Planning Council

Composition:

Mental Health Block Grant: Title 42 §300x-3 requires that states have a State Mental Health Planning Council.

- a. The code establishes membership requirements including: state mental health, education, vocational rehabilitation, criminal justice, housing and social services; public and private entities concerned with mental health services/consumers; adults with serious mental illnesses who are or who have received services; families of such adults; and families of children with emotional disturbance.
- b. The code requires that families of children with emotional disturbances be sufficiently represented to ensure their issues are addressed.
- c. The code requires that no more than 50% of the membership be individuals who are state employees or providers of mental health services.

Substance Abuse Block Grant: The Substance Abuse Prevention and Treatment Block Grant does not require states to have a planning council.

Purpose & Function

Mental Health Block Grant: US Code Title 42 §300x-3b establishes three duties for the planning council. They are:

- a. Review mental health block grant plans and submit to the state their recommendations for modification of the plan
- b. Serve as an advocate for adults with serious mental illness and children with emotional disturbance
- c. Annually monitor, review and evaluate the allocation and adequacy of mental services within the state.

Substance Abuse Block Grant: The Substance Abuse Prevention and Treatment Block Grant does not require states to have a planning council.

Block Grants

Public Comment Period

US Code Title 42 §300x-51 of the block grant requires states make the Mental Health and Substance Abuse block grant applications and reports available for public comment.

(This has been done by posting the document on the Substance Use Disorder and Mental Health webpages on the Department of Health and Welfare website.)

Spending Requirements

Mental Health Block Grant: (Section 1911 of Title XIX, Part B, Subpart I and III of the Public Health Service Act)

- a. Requires Idaho to maintain expenditures on children's mental health services at a level of not less than combined State and Block Grant expenditure of \$6,366,200.
- b. Requires Idaho to maintain expenditure of state funds at a level not less than the average of the previous 2 year expenditure periods (currently \$21,003,950).
- c. Prohibits the expenditure of mental health block grant funds on the following: inpatient services; to make cash payments to recipients of services; to purchase, construct, or permanently improve any building or other facility, or purchase major medical equipment; to satisfy any requirement for the expenditure of non-Federal funds as a condition for the receipt of Federal funds; or, to provide financial assistance to any entity which is not a public or nonprofit private entity.

Substance Abuse Block Grant: (Section 1921 of Title XIX, Part B, Subpart II and III of the Public Health Service Act)

- a. Not less than 20% of the award be spent on primary prevention services (approximately \$1,700,000).
- b. Not less than \$635,000 be spent on specialized services for pregnant women and women with dependent children.
- c. Maintain expenditure of state funds at a level not less than the average of the previous 2 year expenditure periods (currently \$18,161,066 - includes DHW, DOC, DJC, ODP and Judicial expenditures)
- d. Prohibits the expenditure of substance abuse block grant funds for the following: inpatient hospital services; to make cash payments to intended recipients of services; to purchase, construct, or permanently improve any building or other facility, or purchase major medical equipment; to satisfy any requirement for the expenditure of non-federal funds as a condition for the receipt of federal funds; or, to provide financial assistance to any entity other which is not a public or nonprofit private entity.

Program Requirements

Mental Health Block Grant (Section 1911 of Title XIX, Part B, Subpart I and III of the Public Health Service Act)

- a. Requires states to establish a comprehensive community-based mental health services system.
- b. Requires states to provide mental health services to children with emotional disturbance.
- c. Requires states to develop community-based services in rural areas.

Substance Abuse Block Grant: (Section 1911 of Title XIX, Part B, Subpart I and III of the Public Health Service Act)

- a. Requires states to continuously improve access to prevention and treatment services.
- b. Requires states to provide primary prevention services utilizing each of the designated strategies listed below:
 1. Information Dissemination;
 2. Parent and Youth Education;
 3. Alcohol/Drug-Free Alternative Activities;
 4. Problem Identification and referral;
 5. Community-based Processes including community coalitions;
 6. Environmental strategies designed to change community norms/values/behaviors.
- c. Requires states to provide specialized services to pregnant women and women with dependent children including medical care for the women and children as specified under the block grant.
- d. Requires states to provide treatment services to intravenous drug abusers including priority access to treatment services.
- e. Requires states to screen on all treatment clients for TB and refer to medical care as indicated.
- f. Requires states to provide pregnant women with access to treatment services within 48 hours of request for services.
- g. US Code Title 42 §300x-53(b), 45 C.F.R. §96.132(e) and 42 C.F.R. Part 2 require states to establish an effective system to protect patient records from inappropriate disclosure.
- h. US Code Title 42 §300x-65 requires that faith-based organizations are eligible for block grant funding. It requires faith-based organizations to serve all persons regardless of their religious beliefs and prohibits them from using block grant funds to support inherently religious activities. It also establishes that treatment participants have the right to request services be provided by a secular agency.

Behavioral Health Authority

Idaho Statute, Title 39, Chapter 3, Alcoholism and Intoxication Treatment Act

1. Identifies the Department of Health and Welfare as the state agency responsible for establishing minimum standards for substance use disorder treatment facilities.
2. Authorizes the Department to certify such facilities.

Idaho Statute, Title 39, Chapter 31, Regional Behavioral Health Services

1. Designates the Department of Health and Welfare as the state's Mental Health Authority.
2. Designates the Department of Health and Welfare as the state's Substance Use Disorder Authority.
3. Establishes the Idaho Behavioral Health Cooperative, identifies membership and duties.
4. Establishes the State Behavioral Health Planning Council, membership composition and duties.

5. Requires Regional Behavioral Health Centers be established throughout the state.
6. Details behavioral health services to be offered.
7. Establishes Regional Behavioral Health Boards, board composition and duties.

REGION 4 BEHAVIORAL HEALTH BOARD (R4BHB)

CONFLICT OF INTEREST POLICY – MEMBERS OF THE BOARD

The members of the Board shall act at all times in the best interests of the Regional Behavioral Health Board (R4BHB) and not for personal or third-party gain or financial enrichment. When potential conflicts of interest arise, members shall identify the potential conflict to the full Board, which shall determine whether a conflict exists and what steps shall be taken to remedy substantive impropriety or to avoid an appearance of impropriety by the RBHB. For this purpose, the term “conflict of interest” means any financial or other interest which conflicts with the participation of an individual in particular decisions of the Board because the interest could significantly impair the individual’s objectivity or could create an unfair competitive advantage for any person or organization. A copy of this policy shall be distributed to each member annually.

I have reviewed, and agree to abide by, the Policy of Conflict of Interest of the Region 4 Behavioral Health Board that is currently in effect.

Signature: _____ Date: _____

Printed Name: _____

1 The members of the R4BHB, as fiduciaries, are under a legal duty to act only in the interests of the Regional Behavioral Health Board and not in their own self interests.

2 A financial interest which may give rise to a conflict of interest includes (1) a material ownership or investment interest in any entity with which the R4BHB has a transaction or agreement, (2) a compensation arrangement with an organization or with any entity or individual with which the R4BHB has a transaction or arrangement, or (3) a potential material ownership or investment interest in, or compensation arrangement with, any entity or individual with which the R4BHB is negotiating a transaction or arrangement.

3 Other interests arise if a member of the R4BHB sits on the governing board of another organization, but he or she is not compensated for this service, with which the R4BHB is considering whether to enter into a program or other relationship with this other organization.

4 Competition with the R4BHB might involve the improper use of an opportunity available to the RBHB, as where a member learns that the RBHB is competing for a particular grant or contract and the member advises another organization with which he or she is affiliated about the existence of the opportunity.

REGION 4 BEHAVIORAL HEALTH BOARD (R4BHB) DISCLOSURE STATEMENT

Name: _____ Date: _____

1. Please list the Region 4 Behavioral Health Board's affiliates with which you are affiliated and the positions in which you serve.

2. Please list other entities (for example, corporations, partnerships, limited liability companies, trusts) with which you are affiliated as an officer, director, or trustee, and the positions in which you serve:

In the following disclosures, I understand that I am providing information regarding myself and members of my immediate family (spouse, child, parent, sibling or similar relative through marriage), members of my household, and/or any organizations with which I am affiliated as an employee, officer, director, trustee, majority owner, or principal beneficiary.

3. Business Relationship: The following describes any business matter (such as the sale, exchange, or leasing of property; lending of money or other extension of credit; furnishing of goods, services or facilities; payment of compensation for non-employee services; and/or transfer of income or assets) in which I am now or have been involved since the date of my last disclosure relating to transactions with the R4BHB, or a R4BHB affiliate. Indicate "none" or provide a brief written explanation:

4. Legal Entity Ownership: The following describes any ownership interest I have in an entity which is also partially owned, managed or otherwise influenced by the R4BHB or with which the RBHB affiliate does business (except ownership of less than a 1% interest in a publicly traded company). Indicate "none" or provide a brief written explanation:

5. Competitive Relationship: The following describes any relationship I have which is in competition with the R4BHB or a R4BHB affiliate. "Competition" or "competitor" means any individual or entity which provides a product or service which is the same as (or materially similar to) a product or service provided by the R4BHB or R4BHB affiliate in the same geographic area, or to clients in the same geographic area. Indicate "None" or provide brief written explanation.

6. Employment Relationship: The following describes any employment or independent contractor relationship I have with the R4BHB or R4BHB affiliate. Indicate "none" or provide a brief written explanation.
