

# **Behavioral Health Partnership Oversight Council**

## Adult Quality, Access & Policy Committee

Legislative Office Building Room 3000, Hartford, CT 06106 (860) 240-0346 Info Line (860) 240-8329 FAX (860) 240-5306 www.cga.ct.gov/ph/BHPOC

#### Co-Chairs: Heather Gates and Alicia Woodsby Meeting Summary May 20, 2016 2:00 – 3:30 p.m. 2<sup>nd</sup> Floor CCNA 35 Cold Springs Road Suite 522, Rocky Hill, CT

## Next Meeting: Friday, June 17, 2016 @ 2:00 PM at CCNA, Rocky Hill

<u>Attendees:</u> Co-Chair Heather Gates, Susan Coogan, Bill Halsey (DSS), Colleen Harrington (DMHAS), Dr. Charles Herrick, Bonni Hopkins (Beacon), Marie Mormile-Mehler, Kim Nelson, Kelly Phenix, Knute Rotto (Beacon), Erika Sharillo (Beacon), Christi Staples, and Dr. Laurie Vander Heide (Beacon)

## **Opening Remarks and Introductions**

Co-Chair Heather Gates convened the meeting at 2:04 PM, welcomed everyone and explained that her Co-Chair could not attend due to family matters. Introductions were then made.

## Follow-up on ED Trend Data- Dr. Laurie Vander Heide (Beacon)



AdultQAP5-20-16ED Adult Trends2012-20

Dr. Laurie Vander Heide (Beacon) gave a follow-up the Adult Emergency Department Trend (Claims) Data report that was presented to the committee at the February meeting.

MethodologyBH ED Visitdefined as ED Visit with a BH Diagnosis (Mental Health or substanceAbuse) in any position on the claim, excluding Nicotine/Tobacco Use Diagnoses

**Dual Eligibility** refers t members with both Medicaid and Medicare coverage. Approximately 25% (~169,000) of the Adult Medicaid members are dually eligible. Medicaid covers ED visits.

<u>Non-Dual Eligibility</u> refers to members with only Medicaid coverage. Approximately 75% (~468,000) of Adult Medicaid members

<u>Visits/1000 members:</u> The numbers visits per 1000 members; measure used to enable comparison of rates across populations of different sizes

For the full report and graphs, see above icon.

### Discussion

Co-Chair Heather Gates asked if the report contained diagnostic data. Dr. Vander Heide replied that it was not in the report and could be obtained but hospital diagnostic data is not very accurate. Dr. Chuck Herrick talked about how new patients are not being seen by certain clinics in the Danbury and Waterbury areas. It stated by Bill Halsey (DSS) that Waterbury will have ECC status by July 1, 2016 and they will have to take in new patients that go to them seeking services. There will be a follow-up at the September committee meeting with ED Trend Data.

## Certified Community Behavioral Health Clinics (CCBHCs) Update -DMHAS/DSS/DCF

Bill Halsey (DSS) and Colleen Harrington (DMHAS) gave a joint update on the Certified Community Behavioral Health Clinics planning grant from SAMHSA/CMS. They will be contacting CMS on May 24, 2016 seeking flexibility in this stage of planning. Co-Chair Heather Gates said that hopefully soon it will be determined where geographically in the state the clinics will be placed. Colleen said that a meeting will be held the first week of June for providers.

## Access to Opiate Dependent Treatment and Support

Colleen Harrington (DMHAS) gave the update taken from her report to the BHPOC earlier in the month.

#### What is DMHAS doing around the Opioid crisis?

Link to the DMHAS website regarding the opioid crisis

http://www.ct.gov/dmhas/cwp/view.asp?a=2902&q=560348

#### **DMHAS Leadership:**

• Developed Commissioner's Policy Statement describing the Department's role in addressing this health crisis

- Created 1-800 number for referrals to walk-in assessment centers (1-800-563-4086)
- SMHA Mobile Crisis and Backus ED have partnered to work with people presenting at the ED for OD
- promoted drop-boxes for unused medications (mostly in lobbies of local Police Departments)
- Commissioner or her designee have been participating in multiple local forums across the state where residents and legislators talk about the health crisis and their local strategies
- Encouraging DMHAS outpatient clinics to incorporate medication assisted treatment for opioid dependence into their menu of services, if possible, by making Suboxone and/or Vivitrol available
- DMHAS-funded Regional Action Councils and their community coalitions have been organizing community events and providing community education

#### DMHAS WEBSITE

- Created a unique "button" labeled **Prescription drug/Heroin Prevention and Treatment** on the DMHAS website which lists the following topic areas, each of which contains relevant links:
  - \*Prevention and Intervention (including videos, public service announcements and posters) \*(Colleen has copies of the video available.)
  - Professional Resources
  - o Overdose information
  - o Treatment directories
  - o Research and Statistics
  - o General
  - o Opioids and Chronic Pain
  - o Related sites

#### ALCOHOL and DRUG PREVENTION COUNCIL (ADPC)

• The Connecticut Alcohol and Drug Policy Council (ADPC) is a legislatively mandated body comprised of representatives from all three branches of State government, consumer and advocacy groups, private service providers, individuals in recovery from addictions, and other stakeholders in a coordinated statewide response to alcohol, tobacco and other drug (ATOD) use and abuse in Connecticut. The Council, co-chaired by the Department of Mental Health and Addiction Services (DMHAS) and the Department of

Children and Families (DCF), is charged with developing recommendations to address substance-use related priorities from all State agencies on behalf of Connecticut's citizens -- across the lifespan and from all regions of the state. The Governor has requested that the ADPC focus on the opioid crisis. The 3 sub-committees are:

- "Prevention, Screening and Early Intervention";
- "Treatment and Recovery Support"; and
- "Recovery and Health Management"

#### NARCAN:

- Providing training and distributing DPH Narcan kits to all DMHAS facilities, substance abuse residential treatment providers and many groups upon request. So far over 1500 individuals trained by Dr. Susan Wolfe.
- Developed and distributed Narcan video
- Participating in the State Police Narcan Advisory Board
- Assisted in the development of the online Narcan training for pharmacists
- Provided training to Chief Probation Officers, Bail Commissioners and Parole Officers on opioid abuse and Medication Assisted Treatment

#### Recent legislation related to opioid health crisis:

- a seven-day cap on initial opioid prescriptions used to treat acute pain
- Require towns and cities to have a policy in place to ensure that first responders have access to naloxone, an opioid overdose-reversing drug, and were able to use it.
- Clarifies language as it relates to licensed health care providers using naloxone, saying they are not liable nor are they violation the professional standard of care.
- The alcohol and drug policy council, which was reformed in past opioid legislation, was required to have in their plan a goal of reducing opioid overdose deaths in Connecticut. Alcohol and drug counseling, seen as integral to effective recovery, was also further defined in scope
- Makes changes to a prescription monitoring program aimed at helping prescribers identify patients who could be misusing drugs
- Charges the state's Alcohol and Drug Policy Council with developing a plan to reduce the number of opioid-induced deaths in the state.

# Impact of State Budget on Adult BH Services and Access

Bill Halsey (DSS) said that notices of reductions have gone out to all agencies and departments. He is unsure of specifics but so far, all projects with DSS are proceeding. Colleen Harrington (DMHAS) said that her department has sustained an additional \$55 million cut. There will be no way to eliminate the impact. With the upcoming election year, revenue income down, and a bad budget year projected for FY 18, it is not looking great to lessen the outlook for extension of services.

## Presentation of IOP Review- Bonni Hopkins (Beacon)

This lengthy presentation (42 pages) and discussion was postponed until the June committee meeting.

## New Business, Announcements, and Adjournment

Co-Chair Heather Gates asked for new business or announcements. At the next meeting, Beacon Health Options will have a report on Adult IOP for the June meeting. Hearing nothing else, she adjourned the meeting at 3:15 PM.

## Next Meeting: Friday, June 17, 2016 @ 2:00 PM at CCNA (formerly CCPA), Rocky Hill, CT