Meeting Summary for Committee on Diversity, Equity & Inclusion in Behavioral Health Zoom Meeting

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Quick recap

The Behavioral Health Oversight Council met to discuss challenges in the behavioral health sector, including inadequate Medicaid reimbursement rates, workforce shortages, and the need for legislative action to address high incarceration rates. The council reviewed recommendations for increasing Medicaid rates, explored potential improvements based on a state-commissioned study, and emphasized the importance of maintaining diversity and inclusivity in healthcare services. The meeting also touched on potential changes in healthcare regulations, the importance of workforce development, and the need for systemic changes to address mental health issues and early childhood trauma.

Next steps

Co-Chair Alice Forrester to send the Phase One Medicaid rate study report to the group through David.

Alice to work with Social Venture Partners to refine the recommendation regarding the Health Horizons grant.

Rob Haswell (DNHAS) to look for a presentation on behavioral health, mental health, and diversion programs that could be shared with the group.

Dr. Noel Casiano to send the Connecticut Insider article about the school-based diversion initiative to Alice.

Alice and Co-Chair Bernetta Henry to consider inviting Noel's wife to present on the schoolbased diversion initiative.

Agency representatives to provide ideas for presentations or education that the group could learn from or support.

Summary

Neva Caldwell expressed concerns about mental health services, while Alice and Brenetta shared their positive outlooks for the year. The meeting was covered live by CT-N, and it was noted that the legislative session was about to begin. The meeting was attended by 20 people, and the co-chairs, Alice, and Brenetta, welcomed everyone and expressed their excitement for the year ahead.

Behavioral Health Oversight Council Recommendations

Alice led a discussion about the group's recommendations for the Behavioral Health Oversight Council. The focus was on increasing Medicaid rates for all behavioral health codes in Medicaid, which would be approximately 4.5 million in 2025. The group agreed that inadequate reimbursement rates were a significant issue, limiting the services providers could offer. Brenetta asked for clarification on where the recommendations were coming from, and Alice confirmed they were based on previous discussions. The group also discussed the importance of hiring and affording salaries for clinicians, acknowledging that starting salaries were lower than those in other fields. The conversation ended with Alice preparing to send out a copy of the phase one report for further review.

Behavioral Health Sector Challenges Discussed

The discussion revolved around the challenges faced by the behavioral health sector, including a lack of professionals due to unattractive salaries and the subsequent impact on patient care. The participants highlighted the issue of patients being cycled through the judicial system and ending up in correctional facilities, which they believe is a lucrative business. They also discussed the issue of limited outpatient services and the need for better funding to improve the situation. The participants agreed that the current situation is not only affecting the patients but also the providers who are struggling to make ends meet due to poor reimbursements.

Addressing High Incarceration Rates

In the meeting, Brenetta and Alice discussed the need for legislative action to address the issue of high incarceration rates, particularly among black and brown individuals. They emphasized the importance of providing services through a behavioral health model rather than the criminal justice system. Alice also highlighted the need for cost-of-living adjustments in Medicaid rates and the potential for commercial insurance companies to increase their rates. Howard expressed concerns about making recommendations about commercial insurance, suggesting that the group should focus on Medicaid. Kelly Phenix and Howard Drescher also discussed issues with commercial insurance companies, such as low reimbursement rates and prior authorization issues. Erica Garcia-Young from the Department of Social Services introduced herself and mentioned a report on the Medicaid landscape, which concluded that moving towards a managed care organization model would not be ideal.

Analyzing Study for Behavioral Health Improvements

In the meeting, Howard discussed a study commissioned by the State that highlighted areas for improvement, particularly in behavioral health. He suggested that the Council should analyze the study to identify opportunities for improvement. Alice proposed a presentation on the landscape to better understand the implications of the study. Kelly suggested sharing the full presentation from the MAPOC meeting, which included a detailed analysis of the landscape. Alice also discussed the Health Horizons program, which had seen a significant increase in graduates of color and suggested that the program should be continued. The team agreed to further investigate the program and its funding sources.

Healthcare Industry Changes and DEI Programs

Carlos Blanco discussed the potential changes in the healthcare industry due to the new political party's influence on the ACA regulations. He highlighted the shift from a mandate to a recommendation for healthcare providers to have documentation in the top 15 languages recognized by each state. Carlos emphasized the importance of this change for liability purposes and to ensure patient understanding. He also mentioned the recent announcement by McDonald's about terminating their DEI program. Alice agreed with Carlos' recommendations and expressed her appreciation for his insights.

Diverse Workforce and Systemic Changes

The Behavioral Health Oversight Council discussed the importance of maintaining a diverse and inclusive work group to ensure equitable treatment and access to services for all. They emphasized the need to reflect the community in their services and to address disparities in every system. The group also discussed the importance of workforce development, awareness, and sharing best practices. They highlighted the need for systemic changes and the importance of addressing mental health issues and early childhood trauma. The group also discussed the potential of diversion programs to reduce school arrests and referrals to services in the community. The conversation ended with an invitation for suggestions on presentations or education that could benefit the group.