



## ***Behavioral Health Partnership Oversight Council***

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*Co-Chairs: Rep. Phil Miller, Hal Gibber & Jeffrey Walter*  
Meeting Summary: May 8, 2013

Next meeting: **June 12, 2013 @ 2 PM in LOB 1E**

*Attendees: Hal Gibber (Co-Chair), Jeff Walter (Co-Chair), Paul Acker, Dr. Karen Andersson (DCF), Rick Calvert, Terri DiPietro, Howard Drescher, Dr. Ronald Fleming, Robert Franks, Heather Gates, Catherine Foley-Geib, Dr. Steven Girelli, William Halsey (DSS), Peggy Hardy, Jennifer Hutchinson (DMHAS), Mickey Kramer, Steve Larcen, Stephen Merz, Sherry Perlstein, Kelly Phenix, Galo Rodriguez, Maureen Smith, Janine Sullivan Wiley, Lori Szczygiel (CTBHP/VO), and Alicia Woodsby*

### ***BHP OC Administration***

Co-Chair Jeff Walter convened the meeting at 2:07 PM and asked members to introduce themselves and to state who appointed them. He welcomed new Council Member Steve Merz from Yale-New Haven Health System. He has replaced Dr. Sabina Lim who has returned to New York. Steve said that his organization values the work of the BHPOC and he looks forward to being a part of the Council's progression in the line of Behavioral Health issues as were his predecessors, Dr. Sabina Lim and Liz Collins. Jeff asked the Council to approve the March summary since the Council did not meet in April. Hearing no objections; it was unanimously approved without any corrections needed and it will be posted on the BHPOC Website. Jeff announced although there was a bullet point of bills of interest on the agenda, at this time there is no particular bill to be discussed by the Council. Kelly Phenix informed the Council that she was appointed by Representative Larry Cafero to be the Consumer Representative member of the Mental Health Task Force to Study BH Provisions for Young Adults as required in the recently passed legislation now known as PA 13-3. Congratulations went out to Kelly as she will act as the new liaison between the Council and the MH Task force.

### ***Action Items***

No Action Items this month.

## ***Connecticut Behavioral Health Partnership Agency Reports***

### ***Department of Social Services (DSS)***

Bill Halsey spoke to the proposed reduction in BHP services in the Governor's Budget of \$4.1 million for FY '14 and the \$5.1 million that for FY '15. The Appropriations Committee report restores all but \$1 million. DSS is waiting for the conclusion of the budget process before

determining how a reduction will be implemented. The Dual-Eligible Demonstration Health Neighborhood project is moving along and additional information has been submitted, in response to CMS questions. CMS wants the state to elaborate on the model for care coordination and demonstrate that it will not duplicate existing care coordination in the system. Those answers are due back to CMS within the next week.

## **Department of Children and Families (DCF)**

Karen Andersson said that PA13-3 that recently was signed into law had a number of Behavioral Health components that would be affecting DCF and it would probably be of interest to the Council too. DCF is still studying the language to see how it effects both HUSKY and non-HUSKY children. Appropriations were budgeted for enabling primary care providers giving enhanced psychiatric services for children similar to the MCPAP program in Massachusetts. Karen also talked about the Legislature's intent for funding for IICAPS-like services for Non-HUSKY children (with commercial insurance) to receive level of care services. Steve Larcen asked DCF to meet with the Hospital Advisory Group on its evaluation of the IICAPS strategy and asked Value Options to join in to discuss discharge delays and the reasons for discharge delays and what the waits are for IICAPS. Karen said the Department will take him up on his offer. Sherry Perlstein wanted to know what the funding was for IICAPS and could funding be used to develop programs for existing providers? Karen said that Yale must decide on how to expand the program and is the need evidenced based? She added, it is a proposal with caveats with many conversations to come. Maureen Smith pointed out the recent article in the Hartford Courant on children receiving psychiatric services.

## **Department of Mental Health and Addiction Services (DMHAS)**



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Jennifer Hutchins said she will give an update on the budget process but Paul DiLeo would be available next month to answer any specific questions. The Appropriations Committee restored a portion of grant funds that were reduced in the Governor's budget, including \$10 million for Health Homes. They will continue to watch the budget process to see where the department winds with for its budget. DMHAS is working with OPM to mitigate the potential impact of grant reduction for most of its programs. A letter on Federal Sequestration went out from the department to DMHAS providers explaining reductions in the substance abuse and mental health services block grants from that Substance Abuse and Mental Health Services Administration (SAMHSA) (letter attached). Co-chair Jeff Walter asked what would be the total amount that would be reduced from the DMHAS budget. Jennifer said she was not sure but would get back to the Council on the approximate final figure. With all the cuts that have been proposed, Heather Gates expressed her concern that people will lose access to services.

## **Presentation and Discussion**

### **Level of Care Utilization Trends - Lori Szczygiel, CEO CTBHP/Value Options**



See above report. As of April 1, 2011, these data are inclusive of all HUSKY populations. Co-chair Jeff Walter asked if the statisticians could show if there is a way to get the utilization of levels of care that was authorized and was actually used. Lori replied that information will be included in the claims data that will be matched up with DMHAS data in a future report for Intermediate Levels of Care. However, Lori thought this information was previously included in an evaluation of IOP Services. Jeff would like the Adult Quality, Access & Policy Committee to work with DMHAS on this before it comes to the Council. Janine Sullivan Wiley said that she would like to see the DMHAS inpatient data. Terri DiPietro said that there is a national data source for IOP and she can make that information available to Value Options.

## **Committee Reports**

### ***Coordination of Care:*** - Sharon Langer, Maureen Smith, Co-Chairs

Maureen Smith reported that the next meeting will be on Wednesday, May 22, 2013. Topics will include transportation (NEMT) issues and other updates.

### ***Child/Adolescent Quality, Access & Policy:*** – Sherry Perlstein, Hal Gibber, and Robert Franks, Co-Chairs

Sherry Perlstein reported that Jennifer Bogin- DDS Director, Division of Autism and Bill Halsey- DSS, Director of Behavioral Health gave a presentation of the Autism Feasibility Study to the committee. Co-chair Bob Franks, who was not at the meeting, will review the study and will report to the Council at a later date. On Friday, May 17, 2013 at the Child/Adolescent Quality, Access & Policy meeting at Value Options in Rocky Hill, the DCF will give a report on Children 12 and Younger. Deputy Commissioner Gruendel will give a follow-up presentation on feedback and what strategies will be looked at by DCF. Sherry brought up the topic that children need to be included in Behavioral Health Homes. Karen Andersson said DCF made the decision that the Department did not have the resources to include children; however, a provider approached Commissioner Katz and urged the Department to put the child model in the Behavioral Health Home. Preliminary discussions have been held with DSS and DMHAS to include children in the BHH model. She expects this issue will be addressed at the May 17<sup>th</sup> meeting.

Steve Larcen expressed his great concern over access for child and adolescent inpatient care given the disproportionate number of child/adolescent beds in the state between the Solnit Center and the five private hospitals that can admit children for BH issues and treatment. He urged the Council to be more vigilant on this issue. Heather Gates commented on Health Homes that she would like the Executive Committee come up with a policy for the Council on how to structure participation and feedback related to it. Maureen Smith discussed the reduction of beds at the Solnit Center and how the State is going to take care of the children already there. She gets calls every day for child/adolescent beds and struggles to find openings around the state. Steve Merz seconded her comments and echoed Steve Larcen's statement on the increased volume and access issues. So much progress has been made in the last four to five years and he would not like to take a step backwards. Karen said that it would be helpful if it could be figured out

collectively to better understand the entire picture and identify a way a system could be developed to find out what can be done. How many children are on commercial insurance and how many are on HUSKY? Steve replied that five years ago, there were 175 inpatient beds around the state for children and adolescents. Today there are a total of 147 beds, not including Solnit. Beds are shrinking because of inadequate funding. 2/3 of children using beds are HUSKY kids. Lori Szczygiel weighed in and said that VO calls hospitals every day and asks about emergency room delays and how many people are “stuck” in the ED. Many times, hospitals are not reporting accurate information. She added that EDs are overwhelmed and are reactive and it may be a cultural difference that hospitals are not recognizing delay. Perhaps hospitals are not using the resources of the partnership to get people out of the ED because they do not know what resources are available to them. There is an issue with capacity, to mobilize, and to coordinate beds for patients 12 and under. Janine Sullivan Wiley is deeply worried about the same scenarios for adults in the state. Steve Larcen answered that cuts to hospitals reduce the availability for staffed beds for everyone. Steve Merz said that there is also a programmatic dimension too in terms of capacity and the needs of adolescents and the care for children in dually organized pediatric-type organizations. This is a problem across the country and not unique to Connecticut. The comment on that some hospitals may be less aware to what resources are available to them can be brought to the attention of the Connecticut Hospital Association’s ED workgroup and its Mental Health Service’s workgroup on how to address some of these issues.

***Adult Quality, Access & Policy: - Howard Drescher, Heather Gates, and Alicia Woodsby, Co-Chairs***

Heather Gates reported the sub-group continues to work on the Health Home design with DMHAS for provider requirements and other directives. Howard Drescher reported the Value Options gave a report on **PARS** and home health agencies. The initial data on performance is positive in enabling adults to make a more independent recovery. This model makes BH unique in public based practices.

***Operations: – Susan Walkama and Terri DiPietro, Co-Chairs***

Terri DiPietro reported that there is no update on billing for group services related to smoking cessation and for half day or quarter day billing for partial hospital program days. Bill Halsey (DSS) said of the smoking cessation that in order to issue new codes as for group psycho-therapy education, (currently there is only billing codes for individual smoking cessation) there needs to be a fiscal impact note with costing-out. Janine Sullivan Wiley asked for a timeline on this. Bill said there is no timeline set yet. It will come in a State Plan Amendment.

**Other Business and Adjournment**

Co-Chair Jeff Walter informed the Council that the Executive Committee had a very informative meeting with OPM and Terry Edelstein of the Governor’s staff and another positive meeting with the DSS and DMHAS Commissioners and a representative from DCF. Discussions were centered on the relationship of the Council and the Executive branch, including the role of the Council, its history to date, and on ways the Council can work with the administration and agencies on developing agendas more collaboratively. These meetings were held in response to the Administration’s legislative proposal to eliminate the Council. Jeff thanked all the members who gave testimony in support of the Council’s work and said he pledges to make the Council’s

ongoing work more effective in the future. He then asked for further comments, questions, or other business. Hearing nothing, he adjourned the Council meeting at 4:01 PM.

**Next Meeting: Wednesday, June 12, 2013 @ 2:00 PM 1E LOB**