



## **Behavioral Health Partnership Oversight Council**

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[www.cga.ct.gov/ph/BHPOC](http://www.cga.ct.gov/ph/BHPOC)

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*Co-Chairs: Rep. Mike Demicco, Sharon Langer & Beresford Wilson*

*Meeting Summary: March 8, 2016*

**2B LOB**

**Note Change: Next Meeting is April 19, 2017 @ 2 PM in 1E LOB**

*Attendees: Sharon Langer (Co-Chair), Beresford Wilson (Co-Chair), Dr. Lois Berkowitz (DCF), Dr. Eliot Brenner, Sean Cronin (OCA), Rick Calvert, Jessica Deflumer-Trapp (DMHAS), Terri DiPietro, Ted Doolittle (OHA), Dr. Andrew Feller, Dr. Alice Forrester, Dr. Frank Fortunati, Jr., Heather Gates, William Halsey (DSS), Peggy Hardy, Colleen Harrington (DMHAS), Dr. Chuck Herrick, Jill Holmes-Brown, Susan Kelley, Marie Mormile-Mehler, Kim Nystrom, Ann Phelan (Beacon), Kelly Phenix, Pat Rehmer, Julie Revaz (DOJ), Galo Rodriguez, Joseph Sullivan, Janine Sullivan-Wiley, and Susan Walkama*

### **BHP OC Administration**



MAPOC2-10-17 DSS  
- Health Quality Meas

Co-Chair Sharon Langer convened the meeting at 2:02 PM, asked members to sign the attendance sheet, and the Co-Chairs introduced themselves as did the members. Sharon explained that Co-Chair Representative Mike Demicco could not make the meeting due to the concurrent legislative session that day. Sharon then asked for a motion to accept the February 2017 meeting summary. A motion was made by Dr. Eliot Brenner. All members voted unanimously to approve the summary as written.

Sharon also talked about the Health Quality Measures Sets Report that was presented last month at the Council on Medical Assistance Program Oversight and sent out to Council Members. She asked the state agency partners and Beacon staff if the report should be discussed at the Council meeting. Bill Halsey (DSS) said that it should first be discussed at the committee level and then at the Council. He finished by saying that this would fit very well with the health equity lens that the Council is trying to focus on.

### **Action Items**

None

***Connecticut Behavioral Health Partnership Agency Reports:***  
**Department of Mental Health and Addiction Services –Colleen Harrington**

Colleen Harrington gave the update from the department. The Commissioner of DMHAS would be testifying before the DMHAS Work Group of the Appropriations Committee the next day, and based on the Governor's budget, DMHAS proposes to take the following steps:

**PROGRAM RELATED:**

- **Relocate 21 detox beds** currently on the Blue Hills campus of CVH to the Middletown campus of CVH
- **Privatize 21 rehab beds** currently on the Blue Hills campus, a portion of these beds will remain in Hartford. The remaining beds will be located in other areas across the state
- **Relocate 16 Mental Health Inpatient beds** from the Capitol Region Mental Health Center to the Middletown campus at CVH
- **Privatize services** currently provided at the **Danbury and Torrington** sites of Western CT Mental Health Network
  - Services at the Waterbury locations are not affected
  - **Waterbury will retain the LMHA function** with the new affiliates in Danbury and Torrington
- **Privatize** three Young Adult Residential Programs located in **Torrington, Hartford and Portland**
- There are **no layoff options for state staff** who will be redeployed to existing vacancies
- DMHAS anticipates these changes to occur in the **next fiscal year**
- At this time, the plan is to issue Requests for Proposals (RFP) for some services while sole sourcing others
  - The **timing of the RFP process is to be determined**

**NON-PROGRAM RELATED:**

- Consolidate Regional Action Councils/Regional Mental Health Boards Reflects the reorganization of behavioral health boards and councils
  - RMHBs budget reflects a reduction of \$584,673
    - Remaining funding = \$86,920
  - RACs budget reflects a reduction of \$620,352
    - Remaining funding = \$1,673,596
  - Consolidation with total remaining: \$1,760,516
- CT Legal Rights Project: Program provides legal help and other assistance to low-income individuals with mental health issues living in institutions or the community. Reduce funding the consent decree level of \$415,948

## **IMPLEMENTATION:**

- The DMHAS proposed budget to the Governor is intended to protect core services that are in place by adding funds for caseload growth and baseline adjustments for several accounts, but will also realign resources to assure identified critical service system components are sufficiently funded
- This proposed budget aligns with the DMHAS mission and vision by continuing to focus on funding for community services as the agency advances its recovery-oriented system of care
- The Department will continue to work on the details and will keep stakeholders informed as more information becomes available

## **Discussion**

Kelly Phenix was concerned with the number of residential beds being moved out of Hartford and into the suburbs, and asked whether people have transportation and still have access to these beds. Regarding the consolidation of five Regional Mental Health Boards with the Regional Action Councils (RACs), Janine Sullivan-Wiley's commented that "Based on the money savings, consolidation is extermination not consolidation!" Her region, "The Northwest Region will suffer the most". Co-chair Sharon Langer asked if the Council would have any oversight in these decisions and Colleen answered, it would not. Co-Chair Beresford Wilson asked Colleen to keep the Council informed of any changes on the outcome of the DMHAS budget. Heather Gates said that the legislative process gives both the Council and the public the opportunity to comment. She added, however, that the BHPOC oversight is specific to Medicaid and that DMHAS's budget is funded with grant money. There needs to be a more innovative and provocative approach in the way the state does business (budgeting), rather than as in the last five years the state has cut community-based programs. Cutting services to people who could least ill-afford it is unacceptable. Sharon said that if you are a consumer, you do not care if it is Medicaid or grant money, you just want to know that there is a service out there that could help you. Dr. Fortunati asked Colleen about the net level of beds that were relocating from Hartford to Middletown and wanted to know if there will be changes in the way patients are admitted into the program and if there will be different standards in the way people have access to programs. If so, the Council should have discussions about new changes. Colleen said that the department has a very long history of having terrific investment in providing consumer and individual based-services to people who typically do not have a voice and will continue to do so despite the challenges this year's budget may have. Despite being in a period of limited resources, levels of care will remain the same for all services and programs.

## **Department of Children and Families – Dr. Lois Berkowitz**

Dr. Lois Berkowitz reported that this is the first step of a longer process in enacting the Governor's proposed budget. Actually, the Governor's budget provided DCF over and above funding for what the department requested. The budget includes extra funding for community kid care (coordination of care and community collaboratives), substance abuse treatment, support for recovering families, additional funding for psychiatry out-patient clinics, extended day treatment, and regional behavioral health consultations. The Commissioner has testified

before the Appropriations Committee and no final decisions have been made yet by the Department.

## **Department of Social Services-Bill Halsey**

Bill Halsey reported no significant update on Non-Emergency Medical Transportation (NEMT) contract. The department is in the process of evaluating the bids for the new NEMT contract. In terms of the Governor's budget, the department is receiving less federal monies than in the previous budget year; Under the Affordable Care Act the amount of federal reimbursement for the Medicaid expansion - (HUSKY D – low income adults in Connecticut) decreases from 100 percent beginning in 2017. The decreased federal funding does not take into account what other changes may occur as a result of Congressional and administrative actions in Washington, D. C. The governor's budget proposes to reduce eligibility for the Medicare savings programs to levels in place prior to fiscal year 2010. Connecticut is one of only five states whose income limits exceed federal minimums and one of only eight states without an asset test (QIMBY and SLIMBY cohorts). The proposed budget also reduces income eligibility for parents or other relative caregivers on HUSKY A to 138% of the Federal Poverty Limit, aligning it with the income limit set by most other states. Bill noted that there is no reduction in income eligibility for pregnant women and children. The budget also proposes an annual cap of \$1,000 on adult dental benefits in Medicaid although exceptions will be made based on "medical necessity". The proposal also includes moving the Birth to Three program to DSS, and adding \$250 million to the hospital supplemental pool.

## **Discussion**

Kelly Phenix discussed the proposed reduction to the Medicare Savings Program (MSP) (The Medicaid MSP pays for certain out-of-pocket costs for low-income Medicaid enrollees who also participate in Medicare). Kelly noted if the income limit for MSP is reduced from 211% FPL to 138% FPL, it will affect an estimated 40,000 residents in Connecticut. Rick Calvert reported that School Based Health Centers (SBHCs) will receive a 10% cut in the Governor's proposed budget on top of a 7% cut implemented in each of the last two budget years. This is a big concern to low-income families. Co-Chair Beresford Wilson said that while all the gains (within the behavioral health system) for the last 35 years are good but is still not yet satisfactory. "Let's do more, let's share more, let's be brave." Co-Chair Sharon Langer informed the Council that the Finance Committee will be holding a public hearing the following day and urged members, both providers and consumers to voice their concerns to the legislative Committee on Finance about the need to fund programs they care about.

## **Behavioral Health Home Update Report: Jessica Deflumer-Trapp and Colleen Harrington (DMHAS)**



BHPOC3-8-17BHHPresentation FINAL.pptx

Colleen Harrington introduced Jessica Deflumer-Trapp (DMHAS) who gave the report on Behavioral Health Homes (BHH). Jessica thanked the members for the opportunity to speak before the Council. Jessica said that Behavioral Health Homes (BHHs) was established by the Affordable Care Act (Section 2703) for people with at least two chronic conditions that include

one of the following specified conditions: mental health condition, substance abuse disorder, asthma, heart disease, obesity, and diabetes. BHHs began in Connecticut in October 2015 and this is the first report of its kind to the BHPOC. The cost of the program for two years is around \$20 million but the savings is expected to be twofold. For the full report, see the icon above.

## **Discussion**

There were questions about the breakout of data by age and if children are included in the initiative. Although children are eligible for the BHH program, the enrollment number for children is low because they have yet to exhibit the conditions and diagnoses more typical of adults. Heather Gates said that when the program is reviewed next year, the comparison to the baseline will show the improvement in people's lives. Individuals may refer clients to BHHs and are urged to do so. Jessica said that it will be three to five years before a big difference is seen in the lives of the enrollees. Marie Mormile-Mehler said that there are positive changes already being seen in the BHH population.

## **BHP Consumer Family Advisory Council (CFAC) Update**

Kelly Phenix gave the update from the Consumer Family Advisory Council (CFAC). She explained to Council Members that Beacon Health Options developed the CFAC ten years ago for consumers who wish to be a part of the process and it meets once a month. Along with the liaison (Kelly) to the BHPOC, they have identified liaisons for the BHPOC's four committees. They are currently working on their by-laws and they have completed a new brochure for members of the public. Late last September they had their third annual I-CAN Conference which is held for consumers, providers, agencies, and advocates in the community. Some of the CFAC workgroups include Care of Coordination, Recruitment and Orientation, and Transitioning Young Adults.

## **Committee Reports: Coordination of Care: - Janine Sullivan-Wiley, Co-Chair, Benita Toussaint, Co-Chair**

Janine Sullivan Wiley told Council Members that the next meeting will be on Wednesday, March 22, 2017 at 1:00 PM. There will be a room change to 1A LOB. A follow-up regarding Pharmacy data questions will be discussed as well as a vote for a new Consumer Co-Chair.

## **Child/Adolescent Quality, Access & Policy: – Steve Girelli and Jeff Vanderploeg, Co-Chairs**

Co-Chairs of the committee were not present. Dr. Lois Berkowitz (DCF) said the committee met last month and heard a presentation on Health Equity by Bert Plant (Beacon). (Editor's Note: The March meeting was canceled and the next scheduled meeting is a date change and will be on Friday, April 21, 2017 at 2:00 PM in the Hartford Conference Room on the third (3<sup>rd</sup>) floor at Beacon Health Options in Rocky Hill, Connecticut.)

**Adult Quality, Access & Policy:** -Heather Gates, and Pat Rehmer, Co-Chairs

Heather Gates said the next meeting will be on Tuesday, March 14, 2017 at 3:00 PM at the CCNA Office in Rocky Hill, CT. Bert Plant (Beacon) will present a report on Health Equity for Adults. (Editor's Note: Due to inclement weather, the meeting was canceled and the next scheduled meeting is a date change to Thursday, April 13, 2017 at 3:00 PM at the CT Non-Profit Alliance office, 35 Cold Spring Road, #522, Rocky Hill, CT.)

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

Co-Chair Susan Walkama said the committee did not meet in March. The next meeting will be held Friday, April 7, 2017 at 2:30 PM in the Hartford Conference Room (third floor) at Beacon Health Options in Rocky Hill, CT.

**New Business/Meeting Announcement/Adjournment**

Co-Chair Sharon Langer thanked Jessica for her presentation and the agencies and members for their participation in the Council meeting. She asked Julie Revaz about the Court Support Services Division (CSSD) budget for Department of the Judiciary. Julie replied that she does not have any final answers since it is still early in the budget process but given the annualization of cuts that began last year, the department was pretty much spared in the current budget.

Sharon then announced a date change for the next meeting to April 19, 2017 at 2:00 PM in **1E** LOB. Hearing nothing else, she adjourned the meeting at 3:52 PM.

**NOTE: Date Change of Next Meeting: Wednesday, April 19, 2017 @ 2:00 PM 1E LOB**