New Jersey Mental Health Planning Council (MHPC) Meeting Minutes

June 12, 2013 10:00 A.M.

Attendees:

Jack Bucher Winifred Chain Lisa Negron (phone)

Karen Vogel Romance Annette Wright (phone)

Donna Hallworth Bruce Blumenthal (phone) Karen Carroll Ron Defeo (phone) Pat Dana Maryanne Evanko Angel Gambone Marilyn Goldstein Connie Greene Joe Gutstein (phone) Renee Ingram (phone) Mike Ippoliti Christopher Lucca Gail Mesavitz Michelle Madiou Joanne Oppelt John Pellicane Ellen Taner

Randy Thompson Robin Weiss

DMHAS, CSOC & DDD Staff:

Suzanne Borys Robert Culleton Geri Dietrich Mark Kruszczynski Donna Migliorino Michelle Schwartz

Dona Sinton

Guests:

Rodney Belle Harry Coe (phone) Bill Cole

Virginia ErazoGreg KarlinRoxanne KennedyLouan LukensPeggy ReiffJudy Strum (phone)Irina StuchinskyGregory ValentAlric Warren

Sally Williams

I. Administrative Issues/Announcements

- A. Review of the May minutes
 - 1. Approved with changes including moving Connie Greene and Ellen Taner to member section and changing page 3 B1 to reflect that the 3% set-aside is applicable to both the mental health and substance abuse block grants whereas the 5% prevention set-aside is only applicable to the mental health block grant since the substance abuse block grant already has a 20% set-aside for prevention
- B. Jack invited all members, especially those with substance abuse backgrounds, to join the multiple subcommittees of the Planning Council that meet before and after the general meeting every month.
- C. Recovery and rebuilding report is in each packet and Dona will email it as well to the members
- D. Announcements
 - 1. Allan Boyer, the Ancora CEO, has resigned
 - 2. Steve Adams and Brian Moss from Central Office Fiscal Unit are retiring in the next few months

II. Subcommittee Reports

- A. Advocacy Subcommittee meets at noon after the regular meeting and did meet in May. There had been discussion regarding the Planning Council advocating for more CIT in the State. However, since DRNJ and NJAMHAA already provided comment to the Interbranch Advisory Committee on CIT this avenue with the subcommittee was dropped.
- B. Membership Subcommittee meets at 9 am before the general meeting. The guidelines for membership selection document continues to be updated.
- C. Nominating committee will vote on Chair and Co-Chair at the July meeting.
 - 1. Dona to send out current by laws to all members per Bob Culleton's request.

III. Block Grant Overview Part 3 (Donna Migliorino)

- A. Our current Mental Health Project Officer has retired and a new assignment hasn't been made as of yet.
- B. The Mental Health Block Grant is approximately \$12 million and the Substance Abuse Prevention and Treatment Block Grant is approximately \$47 million.
 - 1. The Division of Children's System of Care (DCSOC) receives a small portion of funding for mental health services (@\$500,000 in lieu of Block Grant dollars). The majority of DCSOC is funded by Medicaid and State dollars.
- C. The application is due September 1, 2013, but we want to submit it in August if possible. The due date was originally in April, but SAMHSA pushed back to the regulatory deadline because of the sequester.
 - 1. Lynn will have information on sequester out by end of month most likely
- D. Sections C V are not required (just requested) but we have completed them anyway
- E. There have been changes to the guidance and new information requested by SAMHSA
- F. Uploaded now onto WebBGAS
 - 1. Sections C, D, E, F. H, I, J, K, L, N, O,P, Q, R, T, U, W, X, Members, Table 2 Mental Health, Table 6B, Planning Step 1 will be up today
- G. Yet to be completed/uploaded
 - 1. Sections G, M, New section is N-2 which doesn't even have instructions on how to complete it yet as it just went live on WebBGAS yesterday
- H. Questions/Comments
 - 1. Q. Joanne Oppelt When will this be complete except for the brand new section N2? A. Hopefully by early next week.
 - 2. Q. Chris Lucca When do you expect SAMHSA to make their decision? A. Usually in the fall we will get a Notice of Grant Award saying it's approved.

IV. Medicaid expansion in New Jersey - Roxanne Kennedy

- A. distributed power point presentation
- B. In February the Governor decided New Jersey would implement Medicaid Expansion as part of the Affordable Care Act.
- C. Expansion begins October 1, 2013 with enrollment and benefits effective as of January 1, 2014
- D. 10 essential health benefits
- E. We will add services in an alternative benefit plan (ABP) (primarily substance use

- disorder services)
- F. Estimated there are 101,000 individual who will become eligible
- G. Approximately 192,000 are eligible already but not enrolled
- H. Comments/Questions
 - 1. Q. Ellen Taner- Describe the difference in numbers. A. First group are newly eligible and second are already eligible.
 - 2. Q. Bob Culleton Do you have numbers by county distribution? A. Roxanne can you email me that? I don't have it but I think we do have it.
 - 3. Q. Suzanne Borys Is the rate issue being addressed because it's so low? A. It's part of the rate study.
 - 4. C. Maryanne Evanko some agencies are meeting on these issues and parity
 - 5. Q. Ellen Taner ACA also mandated prevention. Are there any other prevention being added to Medicaid? A. They have to be billable services and there haven't been a lot of conversations about it other than smoking prevention (cessation).
 - 6. Q. Robin Weiss we have to pre-certify for behavioral healthcare services but not for medical services. That's not parity. A. Greg Karlin There is no prior authorization for acute inpatient for a Medicaid consumer so the agency referenced might be calling for something else.
 - 7. Q. Psychiatric Emergency Services how does that work in ASO? A. It will remain a contract. The state will get a match.
 - 8. Q. Jack Bucher What about respite? A. I don't know where they will fit in the future.
 - 9. Q. Jack Bucher what about supported housing? A. The housing dollars are not Medicaid reimbursable. The State will maintain money to buy housing and the services will fall under community support services.
 - 10. Q. John Pellicane How is family household defined? Also is this diagnosis dependent or open? A. Targeted case management is diagnosis dependent but requires a state plan amendment. We are looking to add additional diagnostic criteria. Also the family care website and DFD has the definition of a household.
 - 11. C. Bob Culleton If you're considering TCM for the SUD population, we've done research and found it should be no more than two admissions.
 - 12. Q. Bob Do you have a plan for informing the newly eligible about their Medicaid eligibility? A. Yes we have \$7.5 million for publicizing the State changes regarding the ACA.
 - 13. Q. There is no real infrastructure in the South. Is there a travel resource? A. If we get rates right it might encourage satellite sites with less than 16 beds to open in South Jersey. DMAHS (Medicaid) has applied for an Assistors grant to be able to train people across the State assist individuals enrolling in Medicaid and the Health Insurance Exchange.
 - 14. C. Bruce Blumenthal Supportive Housing money for housing subsidy will remain with state but community support services will support rest of services.
 - 15. Q. Randy Thompson Will the \$7.5 million go to the navigators? A. No its for publicity.
 - 16. Q. Jack Bucher Does the sequester impact this? A. Not that I know of.
 - 17. Q. Bill Cole How many are in Medicaid now? A. \$1.3 million right now.
 - 18. Q. Ellen Taner Is enrollment time limited? A. I think its rolling for the first 3

years.

V. Activities/Grants/Issues/Recommendations

- A. Suzanne We've received over 200 income eligibility surveys of providers so far. This survey does not include emergency services, self-help services or prevention. It also added the new definition of SMI
- B. Winifred When Steve Adams discussed programs for people getting out of prisons and how its not our funding- can we advocate for these programs to continue? A. Chris Lucca each discipline in UBHC is expected to get appointments for inmates. Chris hasn't noticed a gap in services but what he's seeing may be different from the programs Winifred is referencing.
- C. Alternatives to hospitalization (respite/wellness) CSPNJ has partnered with Bridgeway in Passaic and Middlesex Counties and Drenk in Ocean County, each with \$600K in contracts for this peer-driven respite centers for 5 people 24 hours a day 7 days a week with about 8 staff per site who have certifications/
- D. Rate setting meeting was held on May 20, 2013.
- E. PAD booster occurring now

Next General Membership Meeting on 7/10/13- 10:00-12:00, Room 3000

The Membership Subcommittee will meet at 9 am on 7/10/13
The Block Grant Subcommittee will meet at 9:30 am on 7/10/13
The Olmstead Advisory Committee will meet at noon on 7/10/13 in room 3052
The Advocacy Subcommittee will meet at noon on 8/14/13