

New Jersey Behavioral Health Planning Council (BHPC)

Meeting Minutes, December 9, 2015 10:00 A.M.

Attendees:

Harry Coe (P)	Michael Litterer (P)	Brenda Sorrentino
Ernst de Haas	Christopher Lucca	Robin Weiss (P)
Phillip Lubitz	Thomas Pyle	Susan Brocco (P)
Joseph Gutstein (P)	Michele Madiou	Bruce Blumenthal (P)
Damian Petino	Dan Meara	Rocky Schwartz
Ellen Taner	Robert Paige	David Dresher
John Sabin	John Pellicane	S. Lubitz
Joanne Dellosso	Lisa Negron	Tonia Ahern
Robert Paige	Pam Nickisher	Winifred Chain
Michele Madiou	Pamela Taylor	Marie Verna

DMHAS, CSOC & DDD Staff:

Donna Migliorino	Suzanne Borys	Geri Dietrich
Mark Kruszczyński	Helen Staton	Tara Ellison
Robert Culleton		

Guests:

Scott Campbell	Luann Lukens	Denise Cushaney
Janet Haag	Rachel Morgan	Kathleen Dobbs
Robert Hedden		

Note: (P) indicates that an individual participated via telephone.

I. Welcome/Administrative Issues/Correspondence

- A. Introductions
- B. Reminder from Phil - starting in January, meetings will be in the First Floor Conference Room.
- C. Announcements
 - a. Phil – We received letters of resignation from Linda Sacco & Joy Tossi
 - b. Phil – Letter from SAMHSA, technical assistance available to Planning Council.
 - c. Phil – Letter from Assistant Commissioner Mielke about Ancora inspection, concerns have been corrected.
- D. Minutes from last meeting (11/4/15) approved.
- E. Harry Coe shared with the Council the sad news of the passing of Jack Boucher on the morning of 12/9/15. There will be a memorial service in a few weeks.
- F. Dan Meara – We will be doing a parity workshop 1/21/16 at our office.

II. Presentation on Violence Reduction – Andre Valenti & Dr. Robert Eilers

- A. Data shows there has been a decrease in assaults. It's a 15% decrease from CY14 to CY15.
- B. There are data reports regarding where the assaults took place, etc. What we've found is CY14 there were 1896 episodes, CY15 there were 1916, a 1% increase which is not significant.
- C. Duration CY14 was 2,399, CY15 was 2,067, a 14% decrease.
- D. Training is a big part of decreasing these episodes. Beginning in January, our Team Based training will begin. 2 units from each of the 4 hospitals will take part. Somewhere around June or July, Work Based training will begin.
- E. We are looking to hire behavioral analysts as well.
 - Q – Tonia Ahern – Is there any kind of training available for substance abuse side?
 - A – Dr Eilers – That's something we should talk about, we haven't focused on that yet.

III. **Substance Abuse Prevention Efforts** – Roger Borichewski

- A. Our division state budget is widely supplemented by federal Block Grant funding as well as through state initiatives through drug court, state parole board, Dept. of corrections and those types of initiatives. So our actual state appropriation has significant amounts of additional funding. FY10 state appropriation was just shy of \$194M, last FY15 was over \$270M. So there is an upward trajectory in state funding. That does not include the resources through Dept. of Corrections, State Parole Board, etc.
- B. Under Governor Christie, the state is spending more money, more wisely, and serving more people than any previous administration.
- C. Budget in FY'10 was \$193,870,092 million (DHS) vs. Budget in 2015 at \$270,274,266 million. (This total does not include funding to DOC, JJC, AOC, etc.)
- D. Medicaid expansion allowed many more people to access addiction services: 31,104 in 2010 vs. 43,032 in 2014
- E. Currently, there are about 6,300 addiction treatment beds in New Jersey vs. 4,005 in 2010
With these beds, we're serving about 83,245 unique patients a year.
- F. In 2012, Governor Christie expanded and mandated drug court statewide vs. 3 counties, with non-mandatory drug court in 2010.
- G. In the last two fiscal years, the drug court allocation has increased by almost \$8 million
- H. There are 584 drug court beds vs. 242 total in 2010. Governor Christie has added 342 beds.
- I. We're currently serving about 5,344 in drug court (treatment only – does not include other facets of drug court programs) vs. 3,424 in 2010.

Phil – We will put the topic of substance abuse beds on agenda for a future meeting.

IV. **FFY 2016 Synar Report** (SAPT Block Grant) – Suzanne Borys

- A. The Synar Report is to prevent the sale of tobacco to underage youth.
- B. As part of the Substance Abuse (SA) Block Grant, in addition to submitting our implementation report (which we did on 12/1/15), we also have to submit a Synar report which is due 12/31 every year. This report is in compliance with the public health service act and tobacco regulations. We are required to report information regarding the sale and distribution of tobacco products to individuals under age 18. This is our compliance report for FFY2016.
- C. In NJ you must be 19 to purchase tobacco products. If we fall below the required 20%, we can get a substantial penalty to our SA Block Grant to the tune of 40%. This is a joint proposition between DMHAS & DOH. The inspections & enforcement are done by the DOH.
- D. Based on this year's findings, there were 59 citations made and 20 fines assessed. This is higher than last year when there were only 33 citations and 9 fines. The inspections occurred from 7/28/15 – 9/18/15.
- E. We use the Synar Survey Estimations System (SSES), all our summary tables are the result of using the federal system. We use what's called a list frame. The latest frame coverage study we did was 2013. We have to do a coverage study every 3 years. We aren't due until 2016 for the next coverage study. When we did it in 2013, our coverage was 91%, 80% was required.
- F. DOH continues to conduct their FDA compliance check program. So in addition to doing the federal requirement for Synar they also have an FDA program going on. We're planning to revise the MOA between us and DOH to reduce retail violation rates.
- G. 11 municipalities in NJ have raised the age of sale from 19 to 21 years of age. This is a big prevention effort.
- H. Out of 328 outlets, our retailer violation rate was 18.6%. This is very concerning. We made the percentage, we're okay, but last year our percentage was 11.5%.

V. **Committees/Sign Up** – Phil Lubitz

- A. We'd like for everyone to sign up for at least one committee at the January meeting.

VI. **Public Comment**

- A. Scott Campbell * – “Insurance companies hire subcontractors to get medical records for auditing and clerical tasks. What I've experienced is they're obtaining private conversations of clients and therapists that take place behind closed doors. This is a privacy issue. I think this is something that needs to be corrected. I've drafted up a plan of correction and I believe it should be addressed in the Community Mental Health Service Act”.

1. S. Campbell proposed a change to the Community Mental Health Services Act (NJAC 10:37-6.79) as follows:

“All mental health providers acting on a request for disclosure from a 3rd party Business Associate (BA) when the reproduction of any part of a patient’s chart is requested or required to be made, must perform the following:

(1) Identify any psychotherapy notes contained in the chart being requested as defined in 45 CFR 164.501.

(2) Verify compliance with sections of 45 CFR 164.508 (a)(2) for any content identified as psychotherapy notes contained in the chart being requested. The mental health provider shall make redactions to any content identified as psychotherapy notes.

(3) Notification to the patient about the chart being requested, and give the patient the opportunity to inspect his or her chart for accuracy (as per 45 CFR 164.524).

(4) Keep transactional account of the disclosure (as per 45 CFR 164.528).”

2. S. Campbell was welcomed to return to subsequent meetings of the NJ Behavioral Health Planning Council

NEXT GENERAL MEETING TO BE HELD

January 13, 2016, 10:00 am

New room location: First Floor Conference Room (CR 1-100A)

* At the January 2016 meeting of the NJ Behavioral Health Planning Council, S. Campbell requested that the minutes of this section be revised. Although the minutes of the December 2016 meeting were approved without those revisions, you may find the suggested revision in the “Public Comment” section of the minutes of the January 2016 general meeting of the NJ Behavioral Health Planning Council.