



Thurston-Mason Behavioral Health Organization (TMBHO) Agenda Setting Meeting

Date:	January 13, 2017	Time:	9:00am
Location:	Thurston County Courthouse, 2000 Lakeridge Drive SW, Bldg 1, Room 280		
Subject:	Agenda Setting		
Staff Contact/ Author:	Tina Gehrig, Clerk Phone: 360-867-2509		
Commissioners:	Bud Blake, TMBHO Chair Terri Jeffreys, TMBHO Vice-Chair John Hutchings, Commissioner Sherri Nehl, Kelli Kennedy		
Thurston-Mason Behavioral Health Organization:	Mark Freedman, Administrator Joe Avalos, Chief Operating Officer Tara Smith, Fiscal Manager		
3a-3i Consent Items	<p>The Advisory Board will be presenting at the January 19th Governing Board Meeting. The following contracts on the consent calendar were reviewed as follows:</p> <ul style="list-style-type: none"> • 3a State only contract \$300,000 for Telecare and \$60,000 for discharge planner • 3b ABHS – Clients are still be shuttled to Pt. Angeles 2 days a week. Still awaiting the opening of the Lewis County detox facility. • 3c – Alternatives – this is an extension of the current contract which pays for phase 2 of the jail chemical dependency program. • 3d – Eric Bruns These services are tied to the overall system of care for children’s services. This contract will pay for evaluations. The Commissioners requested a copy of bio. • 3e – Fee for Service Residential To ensure adequate residential treatment services, these providers have access to one pot of funds for treatment as needed. • 3f – Pierce County Alliance The Medicaid treatment funds are contracted to Pierce County Alliance for Thurston County Drug Court program. • 3g – Pioneer Human Services This contract covers 3 facilities which provide co-occurring inpatient treatment. • 3h Prosperity This is a core residential treatment program for women’s and pregnant parenting treatment services. 		

	<ul style="list-style-type: none"> • 3i – SeaMar SeaMar is one of the main providers of both mental health and substance use.
<p>4a Voucher List</p>	<p>This voucher list is for the month of December, 2016. Per the policy, Mark Freedman reviews and signs off weekly and then the Governing Board reviews and signs off monthly. Documents will be added to the website.</p>
<p>HCA Mid Adopter Recap of Discussion</p>	<p>The majority of BHO’s are not in agreement with HCA and are working with lobbyist Brad Banks on other possible options. HCA has been pushing for BHO’s to become early adopters with flexibility as an incentive. There does not appear to be much incentive for BHO’s to become mid adopters and doesn’t appear to be any takers. MCO’s have expressed an interest in phasing in to avoid all coming online at the same time in 2020. Staff would like to have a discussion with an MCO(s) or other BHO. Commissioner Blake requested that staff put together a business plan detailing what services TMBHO would offer. The PowerPoint document was reviewed as follows:</p> <ul style="list-style-type: none"> • If HCA requires all Medicaid funding to go directly to MCO’s the difference in funding to TMBHO is \$12 million versus \$60 million (yearly) • Concern with lack of resources for high utilizers • If TMBHO becomes mid-adopter most likely would experience loss of many community resources such as: <ul style="list-style-type: none"> ○ Children’s Long Term Inpatient, Children and Family System of Care, Wraparound with Intensive Services (WISe), ○ Crisis Triage, E&T, LEAD ○ Mason County Triage, Mason Matters, Mason County Opioid Planning ○ Program uncertainty for crisis delivery system, e.g., CMHPs ○ Loss of access to local data for behavioral health planning. • TMBHO recommendations: <ul style="list-style-type: none"> ○ Continue program development (local detox, policy level requests, expanded mental health) ○ Continue pursuit of behavioral health licensure ○ Begin conversations with MCO’s around 2020 integration ○ Pursue TMBHO psychiatric prescriber ○ Continue TMBHO reserve spend-down plan ○ Pursue independent entity, LLC (North Sound is LLC) • The Board would like to see a spreadsheet listing the authorization process, rates, etc. for each MCO. It was noted that MCO’s will not share their rates. • Feedback from SW Full Adopter Region: <ul style="list-style-type: none"> ○ Each MCO has different rates, billing requirements, and authorization process. ○ Lengthy process for payment (which our network of providers could not sustain). ○ Significant lags for receipt of data. ○ No new programs have been implemented. • Mid-Adopter Considerations <ul style="list-style-type: none"> ○ Termination of reserve spend-down (approximately \$30 million) ○ Loss of new program planning (local detox, expanded mental health, policy level requests)

	<ul style="list-style-type: none"> ○ Loss of negotiation of BHO functions with MCO's ○ Local community coordination (LEAD) ○ Unknown impact of repeal of Affordable Care Act ○ Loss of network providers
Human Resources Consultant	Staff has received one proposal for HR consultant. There are currently two options for hiring: 1) release an NOI, or 2) go with current proposal. The policy allows for a non-competitive process in this instance. The consultant would provide start-up work and feels that they could complete the process of becoming a separate entity within six months. Staff is comfortable with their qualifications. Thurston County HR would be available during the transition on an as needed basis. Mark will clarify with Sam Burkey if we can go ahead with this proposal. If not then an NOI would be released.
Behavioral Health Agency Licensing	Staff is beginning to develop policies and procedures for mental health agency licensure application. Staff is recommending that the CDMHP's that are currently connected with Telecare and BHR be moved to the BHO once licensed. Because there is currently an RFP out for the E&T, staff are recommending that the function of CDMHP's be taken out of the package and competing applicants are notified of such. If however, BHR is not selected as the successful bidder, they would still be able to retain the CDMHP function for six months, or unless TMBHO gain licensure. To assure objectivity, this RFP is being reviewed by out of county individuals. The Governing Board will have final approval on the award.
Thurston Evaluation and Treatment RFP Update	Three letters of intent have been received: BHR, Telecare, and Recovery Innovations. Recovery Innovations operates an E&T in Pierce County.
Open Network Procurement Process	This would establish an alternative means on how BHO Network providers are selected. For outpatient services only, applicants who meet required qualifications and wish to provide services could become a provider. This would continue to enhance the current network and increase the options for client choice. Recently Consejo approached TMBHO with interest in providing outpatient services in Mason County. TMBHO currently does not have a procedure in place to meet these requests. Several questions were raised: Can we move ahead with policies and procedures; should this be considered as a sole source or should we move to an open network policy. RFP's would still be issued for specialty services.
BHO Psychiatric Prescriber	TMBHO staff has been approached by an ARNP who would like to be a prescriber for the BHO. Currently the BHO could initiate a subcontract with her, and after becoming a licensed agency, we could look a possibly some sort of mobile service with her becoming an employee. As a subcontractor she would carry her own insurance and risk, etc. Great Rivers and North Sound are doing a similar service. Particularly in the kid's service, there is a significant lack of available prescribers.
New BH Provider Proposal – Mason County	Consejo is interested in providing services in rural Mason County. They will focus on providing services in the community rather than office based.
Mason County Triage	Staff is working on a real estate agreement to purchase the PUD building in Mason County. The interlocal for the transfer of funds to TMBHO has been signed by the BOCC. A resolution will be added to the agenda for the purchase of the building in the amount of \$275,000.
Local Thurston County Acute Detox	Staff is still in negotiation with Royal Life Centers, a private, for profit agency who is interested in providing detox services to Medicaid recipients, due to the increased request by such individuals. They have been providing scholarships to Medicaid individuals in order

	to be able to serve them. The contract would be a fee-for-service for approximately 5 beds at a daily per bed rate of \$350. This is a sole source as they are they only detox provider in Thurston-Mason County.
2163 Application (Housing)	Staff met with Gary Aden regarding an RFP coming out for purchase of a home that could be dedicated for clients coming out of triage. The BHO could pay for treatment and case management, but not supervision. Need additional clarification from Gary Aden.
Updates	<ul style="list-style-type: none"> • <u>Syringe Exchange</u> The BHO is looking at having the Syringe Exchange Program operated by Capital Recovery Center and added to their existing contract. The State Department of Health supplies the needles and the staff is paid out of disposal tipping fees and local funding. The Board requested that an NOI be released. In addition to exchanging over 1 million needles yearly, the exchange also serves as an access point for treatment. • <u>Mobile Outreach</u> Mobile outreach is staffing up in Thurston and Mason Counties. Mason County should begin February. Mason County does not have the benefit of a working relationship with something like the LEAD team so they will work on a training/coaching plan, protocols/processes and role of staff. Commissioner Blake will connect with Jon Tunheim about meeting with Commissioner Jeffries. • <u>BHA Licensing- Timeline</u> Amy Martin is working with Great Rivers on developing policies and procedures. The timeline will be presented 1/19. • <u>BHO Legal Representation</u> Staff has received 2 bids and 2 rejections. The 2 bids are from agencies that currently represent other BHO's. The Board is fine with receiving only 2 bids, but would like to see both of the proposals and they will provide an opinion. • <u>Human Resources Manager</u> The HR Manager position is ready to be posted; however, the salary seems extremely high so that is being looked at. Information has been requested from Great Rivers BHO. Katie Gerard is working to fit the position into an existing slot.

I certify this is a true and correct copy of the original document maintained in the Office of the Thurston-Mason Behavioral Health Organization.

ATTEST:

Tina Gehrig, Clerk of the Board

Date: _____