

**Meeting Minutes of  
The Governor's Council on Behavioral Health  
1:00 P.M., Tuesday, March 4, 2008**

The Governor's Council on Behavioral Health met at 1:00 p.m. on Tuesday, March 4, 2008, in Barry Hall's Conference Room 126, 14 Harrington Road, Cranston, Rhode Island.

Members Present: Richard Leclerc, Chair; Linda Bryan; Leo Cronan; Sandra DelSesto; Mark Fields; James Gillen; Mitch Henderson; Richard Hill; Karen Kanatzar; Joseph Le; Peter Mendoza; Anne Mulready; Reed Cosper; and Elizabeth Earls.

**Ex-Officio**

Members Present: Dr. Ellen Nelson, Director, Gene Nadeau and Lou Cerbo, Department of Mental Health, Retardation and Hospitals (MHRH); Sandy Woods, and Winsome Stone, Department of Children, Youth and Families (DCYF); Mary Ann Ciano, Department of Elderly Affairs (DEA); Denise Archin, Department of Education; and Elizabeth Gilheeny, Department of Justice.

Staff: Trish Leddy, Melinda Thomas, Charles Williams, Tom Martin, Richard Sabo, and Elena Nicolella, Mary Ann Nassa.

Guests: Vivian Weisman; Maureen Apperson, John Mongelli and an unidentified representative of RIEAP.

Once a quorum was established, the Chair, Richard Leclerc, called the meeting to order at 1:10 p.m. After introductions were conducted, Richard entertained a motion to accept the Minutes of January 8, 2008. Mary Ann Nassa stated Representative Long did attend the last meeting and that the minutes did not reflect his attendance. She added that he was unable to be present at today's meeting because he was attending a global warming conference in New York City.

Elizabeth Earls motioned to approve the minutes as amended, and Peter Mendoza seconded the motion. All were in favor, and the minutes were approved as amended.

**ANNUAL REPORT TO THE GOVERNOR - REVISION/APPROVAL**

Corinna Roy reported that a meeting was held by the Annual Report Workgroup. Corinna distributed a copy of the *Revised 2007 Annual Report (See Attachment I)*. She reported that the revisions included information submitted to her as well as some of the other mandatory reporting regarding presentations and council activities. It was determined at the Workgroup meeting that the report be submitted in letter form rather than as previous submissions. The Council reviewed the document and made the following comments:

- Liz Earls stated that Numbers 1, 2, and 3 do not capture all the issues, and she would like more of an opportunity to speak to those pieces.
- Peter Mendoza stated that he would like to see substance abuse included into Number 2. Reed Cosper suggested that the distinction between mental health and substance abuse be maintained rather than using behavioral health.
- Mitch Henderson noted that in Numbers 1, 2, and 6 quantitative measures are used and suggested metrics as an alternative for greater understanding.
- Denise Archin questioned Page 2, in the last paragraph, regarding the Notice of Proposed Rulemaking (NPRMs) and the accuracy of the last statement. Richard stated that the statement is

incorrect and that the Governor can only express the State's opinion to Centers for Medicare & Medicaid Services (CMS) about the regulatory changes in case management and the rehab option.

- Denise distributed the document which Henry A. Waxman released entitled *The Administration's Medicaid Regulations: State-By-State Impacts (See Attachment II)*, which provides the website for the full report. The report details the state-by-state impacts of seven regulations issued by (CMS) that would make major, wide-ranging changes in Medicaid.
- Maureen Apperson noted that when referring to the emergency room bullet, any stats used may not capture those patients that hospitals are boarding on Medicaid units, and that many hospitals are sending patients to medical units while they wait for psychiatric beds. She stated that this practice accounts for hundreds of people who are not receiving psychiatric treatment while they are waiting. Richard stated that the reference should then be adjusted.
- Charles Williams asked what the time span is for those who are waiting in the emergency rooms. Reed Cospser stated that he does not agree that an average captures the reality of the situation. Maureen Apperson stated that they have been looking at people waiting longer than 24 hours and thinks that there needs to be some parameters. Reed thinks that waiting longer than 24 hours is a good starting place.

Corinna Roy will distribute an updated version with a deadline for responses via e-mail. She will then redraft the report for review at the next meeting.

#### **UPDATES AND BUDGET FROM MHRH**

Richard introduced Dr. Ellen Nelson, Director of MHRH. Dr. Nelson stated that the Department is progressively moving towards improving the system and assuring that there is communication and believes there have been opportunities put in place to accomplish those goals. She requests that if there are other opportunities that people feel are necessary that they be brought forward. She stated that there will be upcoming developments in substance abuse with the formation of a Substance Abuse Planning Effort for the State of Rhode Island headed and initiated by Neil Corkery and Lou Cerbo. Dr. Nelson stated that it is difficult to advocate for some of the necessary reforms without a substance abuse plan. A representative steering committee will be created to look at the whole system and identify where it is working and where there are needs and whether those needs are clinical services and program needs or financial needs.

Dr. Nelson stated that the Department has been meeting with representatives of the behavioral health community in regard to the budget situation. She stated that most immediately she is addressing the 2008 State shortfall of revenue of approximately 150 million dollars which is to be spread through all of the departments. There is a struggle so late in the year to come up with an approach to such a huge additional reduction in general revenue. She applauded and thanked the behavioral health community for their diligence in looking at how this will affect the provision of care and determine some of the ways to modify and moderate that hit. She added that cuts have not been finalized, and they are in the process at the Governor's Office of going back and looking at a potential modification of the 2008 budget yet again. In anticipation, she added that the May Revenue Conference may suggest either an improvement or a stall in the economy. Additionally, the Department is in the process of preparing for the 2009 budget hearings, and she thinks that the General Assembly may delay the start slightly in the interest of settling the 2008 budget. She does not have a specific date, but anticipates a date in late March or the first week of April; and as soon as it is known, they will be in a better position to prepare.

Dr. Nelson welcomed the following questions:

- Liz Earls stated that in regards to the proposed Substance Abuse Plan, the Governor's Council was formed as a Substance Abuse Advisory Council and Mental Health Advisory Council to the Governor. Liz asked if Dr. Nelson envisioned a role for the Governor's Council in the development of the Plan. Dr. Nelson stated that they would ask the chair to serve or appoint someone to create a direct connection between the two.
- Reed Cospers asked about the recovery of funds in the Division of Developmental Disabilities (DD). Dr. Nelson stated that the dialog of the re-examination of the issues continues in that area; and to date, she is unable to give a final report. She explained that the Budget Office determines what the components of the reduction will be, and with a total MHRH budget of 490 million and because DD is 260 million dollars of that total, the impact across the board hits hardest in DD when measuring dollars.

Dr. Nelson introduced Lou Cerbo, MHRH Clinical Director, to provide an update on the Transition from Prison to the Community Program (TPCP). Lou stated that the program had a late start because of logistics; but over the past six weeks, 68 inmates have been assessed from the ACI. Of the 68, as of March 3<sup>rd</sup>, 27 were in treatment. The goal was to get 140 within one fiscal year which would breakdown to about 45 every three months. Lou also addressed a question raised at the last meeting regarding co-occurring disorders stating that a majority of the programs have capabilities to deal with co-occurring disorder patients, and the ones that do not have that specialized treatment modality are able to refer out to people who have the expertise. The programs include The Providence Center, Phoenix House, Eastman House and Wilson House.

Liz Earls asked what the average length-of-stay was expected by the parole board. Gene Nadeau stated that the short-term is up to 90 days and long-term is from 90 days to 9 months. Liz asked if the parole board dictates the stay or is it based on a treatment plan. Lou stated that the parole board can suggest, but it is based on the treatment plan.

Dr. Nelson introduced Gene Nadeau, Acting Associate Director, to highlight the 2008 budget. Gene reported that with regards to the 2.7 percent reduction exercise which was in addition to the 150 million dollar shortfall, the mental health portion is 1.15 million dollars, and the substance abuse and prevention portion is 407,000 dollars out of the general revenue system. Over the last two weeks, they have met and asked for help from the community providers as well as the trade association representatives. These conversations have been informed with the knowledge of the proposed end result. Gene stated that the meetings have been very productive. He added that what the Department is doing is following through with what they are required to do and that is to provide the best mix of whatever works best. Dr. Nelson added that it is a very difficult time, and she believes that they are trying to weigh out how to best resolve this issue. She reminded everyone that there is a reality confronting the State with the current budgetary situation. She does not believe that anyone has the perfect solution, and she thinks that the process that we are about to go through of looking at the impact of the budget is not only this Council's or the Department's or the Governor's, but is the General Assembly's and the citizens' of the State of Rhode Island. She respects the process and thinks that out of that process they will come up with what the wisest way is to deal with the issue.

Dr. Nelson introduced Charles Williams, Chief of Prevention and Planning, to report on the ATR grant. Charles Williams reported that the ATR project is officially underway and providers are seeing clients. Two individuals were assessed at the DCYF Pawtucket offices on February 29th, and two more were

assessed over the past week. Charles stated that there is an interim-paper voucher system in place and that all requirements of the Federal Government have been met. He anticipates that by the end of March the electronic voucher system will be up and running and they will be able to expand the number of individuals assessed at that time. He reported that staff will be attending training on the GAIN instrument in Hartford, which is the assessment instrument that is built into the electronic-voucher system.

### **SUBSTANCE ABUSE BLOCK GRANT SUBMISSION**

Charles Williams reported that the Substance Abuse Block Grant submission was due and submitted on September 30. He stated that in past years there have been questions from SAMHSA about pieces of the submission, and this year there were questions about a couple of forms. Responses are being prepared and as soon as the responses are completed, the block grant will be posted. No changes were proposed this year, although there is anticipation that there will be changes in the block grant submission for federal fiscal 2009 since the current contracts for the primary prevention set-aside will expire in the fall.

Richard Hill asked if contracts for the block grant run yearly or for longer periods of time and if they differ per provider. Charles stated that it does differ. He stated that some of the dollars go into the general outpatient contracts with the primes and some go to opioid treatment providers and the timeframes of those contracts vary. The outpatient contracts are for five years, and the other contracts that are continuous are annually renewed. Charles added that the prevention contracts were originally for a five-year term but they were reduced to a three-year term with an annual renewal.

Sandra DelSesto stated that the original RFP and purchase order for the current prevention contracts stated that it was a five-year contract. She stated that through a verbal communication they were informed that it would be a three-year contract with two one-year renewals to bring them up to five years. She added that it affects 13 programs and wants to know why it changed. Charles stated that he inherited a group of contracts with an expiration date of September 30, 2008. Sandra then asked why DBH is not honoring the conditions in the original RFP and purchase order. Charles stated that he cannot reply for the Division because he does not know what internal policy decision was made when it changed. Sandra stated that she was told that the Department Administration preferred three-year contracts and that they could expect two one-year renewals. The first they heard about a change was in some recent communication from Charles Williams. Gene Nadeau stated that he will look into it and report back.

Richard Leclerc asked Charles if he could provide a one-page summary of the block grant submission. Charles stated that he will provide that for the next meeting.

### **MEDICAID REFORM PACKAGE**

Craig Stenning - Postponed

### **UPDATES FROM DCYF**

Winsome Stone stated there were no updates at this time.

Richard Leclerc stated that two months ago the community was informed that children's residential programs in the State were cut by 10 percent, and they were planning to achieve that with some cutbacks and accommodations by several providers. He requested at that time that a summary of information about how many beds would be eliminated, and what kinds of services were going to be eliminated. He

asked if that information could be obtained and shared in aggregate form with the Council between now and the next meeting. He stated that he is aware that Janet Anderson has much on her plate although, when she attended the February meeting she did say that she would get that information to the Council.

### **OLD/NEW BUSINESS**

Denise Archin, Department of Education, provided some follow-up information related to targeted case management (TCM) changes a subject discussed at the last meeting regarding. She introduced a lawsuit between the *State of Maine, Maryland, New Jersey and Oklahoma against the U.S. Federal Government to stop the TCM change*. She submitted a copy of the 16-page lawsuit to the Council Secretary (*See Attachment III*) for distribution with the minutes. She will forward the website address to Corinna Roy for e-mail distribution.

Richard stated that there are some amendments to various bills going through the U.S. Senate and House to place a one-year moratorium on regulatory changes regarding TCM and the Rehab Option. Liz Earls stated that the Rule went into effect as of today, so the states can not afford to wait to see if the moratoriums are passed. Therefore, states are actively moving to implement the Rule.

Karen Kanatzar stated that there were four Family Care Community Partnerships (FCCPs) that were to be identified and awarded contracts and requested an update. Richard stated that they were identified and tentatively awarded pending contract signing. Winsome Stone was not aware of the awards and stated that they will be posted on the website when final. Richard stated that his information was that the tentative awards went to Child and Family Services of Newport, Family Resources in Woonsocket, Family Services in Providence and South County Cap.

Richard announced and distributed a "Save the Date" flyer for the Rhode Island Association for Infant Mental Health & Rhode Island Kids Count as they present *Cultural and Linguistic Competence: Implications for Early Childhood Mental Health*, on May 13, 2008 at the Marriott Hotel in Providence (*See Attachment III*).

### **ADJOURNMENT AND NEXT MEETING**

There was no further business. Upon motion made and seconded, the meeting adjourned at 2:30 p.m. The next meeting of the Council is scheduled for **Thursday, April 10, at 8:30 a.m. in the first floor Conference Room 126 at the Barry Hall Building.**

Minutes respectfully recorded and written by:

Mary Ann Nassa  
Secretary, Governor's Council on Behavioral Health

***Attachment I: Revised 2007 Annual Report***

***Attachment II: The Administration's Medicaid Regulations: State-By-State Impacts***

***Attachment III: State of Maine, Maryland, New Jersey and Oklahoma against the U.S. Federal Government to stop the TCM change***

***Attachment IV: Cultural and Linguistic Competence: Implications for Early Childhood Mental Health***