

**Meeting Minutes of
The Governor's Council on Behavioral Health
8:30 a.m., Thursday, February 12, 2009**

The Governor's Council on Behavioral Health met at 8:30 a.m. on Thursday, February 12, 2009, in Barry Hall's Conference Room 126, 14 Harrington Road, Cranston, Rhode Island.

Members Present: Richard Leclerc, Chair; Leo Cronan; Sandra DelSesto; Scotti DiDonato; Karen Kanatzar; Joseph Le; Peter Mendoza; Anne Mulready; Ian Knowles for Neil Corkery, and Reed Cosper

Ex-Officio Members Present: Craig Stenning, Department of Mental Health, Retardation and Hospitals (MHRH); Sandy Woods, Department of Children, Youth and Families (DCYF), Denise Achin, Department of Education (DOE); Fredrick Friedman, Department of Corrections, Colleen Polselli, Department of Health

Guests: Bruce Long, Vivian Weisman, Richard Antonelli, Allison Croke, Greg Graustein, and John Mongelli

Staff: Charles Williams, Corinna Roy and Lisa Stevens.

Once a quorum was established, the Chair, Richard Leclerc, called the meeting to order at 8:42 a.m. After introductions were conducted, Richard entertained a motion to accept the Minutes of January 13, 2009. Peter Mendoza motioned to approve the minutes, and Joseph Le seconded the motion. All were in favor and the minutes were approved as written and submitted.

Annual Report Process: Per the request of the Council at the January meeting, Corinna added information/changes to the annual report (*attachment I*) on the Block Grant, the CAITs presentation and motions made regarding this presentation and key findings from the SPF SIG. There were no other actions or motions made to include in the report. Sandy Woods requested that CIS be removed from the DCYF initiative because it should be listed under DHS. She also requested that information on FCCP programming be included under DCYF restructuring. Sandy asked that the wording of the replacement of residential slots with less intensive slots be changed because DCYF is not doing away with residential slots. Sandy will reword this and submit it to Corinna. Craig mentioned that the issue in item 3 needs to be revised. Reed Cosper volunteered to revise and forward to Corinna. Craig also mentioned that item 10 should have an update which he will submit to Corinna. Rich would like to add a request to the Governor that additional members be appointed from DHS to this council in the annual report. Motion made and seconded to send the annual report with these amendments. All were in favor, motion passed.

Children's Intensive Services (CIS): Letter from Council to the Governor and response from Gary Alexander, Director, Department of Human Services: There was a request for a status report which will be scheduled for a Spring meeting. Corinna asked that a subcommittee on Children's Services be created and that anyone on this Council should email her if interested and this will be reported at the next meeting.

Redraft of Letter Regarding Medicare/Medicaid Services: Given the actions of the Governor in the last two weeks, there is no longer a need communicate or send a letter on this issue.

Updates from MHRH: Gary Alexander's name has been submitted to the Senate as Secretary of OHHS. The configuration of OHHS is changing as the Health Department is no longer part of OHHS. Significantly, for MHRH, the oversight of the Eleanor Slater Hospital returns to the Director of MHRH. The Global Waiver has been approved. The House and Senate have passed their versions of the oversight legislation. A major advantage is a new source of funding; Costs Not Otherwise Matchable (CNOM) which is a program not normally used by states. RI is taking the position with CMS that there

are individuals who are not Medicaid eligible who need costlier settings than they are currently receiving. Through the CNOM program RI could gain access to these funds. This will reduce the state expenditure and expand the global cap by \$25 million. MHRH has been approved for 15 million of these funds for each of the next five years. This department has more than half of the dollars available under the CNOM which is a significant undertaking as we will need determine who is eligible for these services, it requires a whole new claiming system and is staff intensive. The hospital and Developmental Disabilities each have one CNOM initiative but the largest is in Behavioral Health (Substance Abuse and Mental Health). The intent of the CNOM is to look at those serviced individuals who are currently receiving service that is not Medicaid programmed. These individuals are at risk of needing a higher level of care, institutionalization, group home, hospitalization, or the ACI. By expanding and strengthening their services through the CNOM program, they will be at a lower risk for requiring the higher level services or becoming Medicaid eligible.

The supplemental budget hearings have been concluded which included corrective action plans for each department, CNOM's and a small portion of the proposed stimulus package.

Craig spoke about the 2010 budget which is now done and the only significant proposal for MHRH is Mental Health Reform. This is called the Rhode Island Consumer System of Care. The intent of this reform is to serve individuals in need with the proper amount or level of care in the right setting as early as possible in the identification of their illness. Tom O'Hare (a neutral clinician) has volunteered to be the lead researcher in the pilot program to use this as a national model. Craig requested this topic be added to next month's agenda.

Richard Antonelli asked if there is a plan of getting people access in a timely fashion. Craig answered that there have been improvements with the step down services and that this will keep improving. MHRH is modifying it's regulations to address this issue.

Updates from DCYF: Sandy Woods handed out an updated listing of FCCP's (*attachment II*). DCYF is finalizing a concept paper for what is being termed as phase II of the FCCP programming. There will be community meetings to get feedback and once that is finalized an RFP will be issued for phase II building on what has been done on phase I. Phase II will now include families who are open to DCYF where phase I was more of a prevention/diversion model.

OLD/NEW BUSINESS

New Business: Rich requested if it was this committee's wish to support Craig Stenning's nomination as Director of MHRH by drafting a letter to the Governor. A motion was made to send a letter to the Governor in support of this nomination, it was seconded, the vote in favor was unanimously passed.

ADJOURNMENT AND NEXT MEETING

There was no further business. Upon motion made and seconded, the meeting adjourned at 2:45 p.m. The next meeting of the Council is scheduled for **Tuesday, March 10, at 1:00 p.m. in the first floor Conference Room 126 at the Barry Hall Building.**

Minutes respectfully recorded and written by:

Lisa Stevens
Secretary, Governor's Council on Behavioral Health

Attachment I: Annual Report
Attachment II: FCCP Contacts