MEMORANDUM

TO: AZ BEHAVIORAL HEALTH PLANNING COUNCIL

FROM: ANNE ROCK- OFFICE OF INDIVIDUAL & FAMILY AFFAIRS

DATE: SEPTEMBER 14, 2012

RE: NEXT SCHEDULED MEETING

Enclosed are the minutes of June 14, 2012, and the agenda for our next meeting, which is scheduled for:

September 21, 2012
10:00 a.m. – 12:30 p.m.
Colorado River Indian Tribe
Behavioral Health Services & Substance Abuse Program
Department of Health & Social Services Conference Room
12302 Kennedy Drive
Telephone: 928-669-3256

Directions: From Phoenix or Tucson, take I-10 West to exit 19, which is US 95/AZ 95 to Parker. Arizona 95 becomes the main street in Parker. Turn left at the second stop light which is Agency Road, and follow all the way to the end, where you will see the building. It is just right down the road from the Parker Indian Health Services. Dr. Kimberly Campbell and her staff will meet with us and present on their program.

There is no telemedicine available for the full Council meeting; however there is telephone conferencing available. I will email the telephone dial in instructions on Monday for those who plan to participate by phone.

The Committees will meet on September 20, 2012, at Arizona Counseling and Treatment Services (ACTS), 1021 Kofa Avenue, Parker. Directions to ACTS: Turn left on 11th Street from AZ 95. This is going to be the street right before the main light in town. You will then turn right on the second street which is Kofa Ave. The ACTS building is right there on the corner. Telemedicine will be available for all Committees at ADHS/DBHS, Conference Room 215B, 150 North 18th Avenue, Phoenix, and CPSA, Plaza Arboleda, 2502 North Dodge Boulevard, Tucson.

- Planning & Evaluation: 1:00 p.m. – 2:00 p.m. Rachael Knurr, Site Director for the Parker ACTS program, will meet with the Committee and provide a presentation.
- Advocacy & Legislation: 2:00 p.m. – 3:00 p.m.
- Children and Community Advisory: 3:00 p.m. – 4:00 p.m.
- Executive: 4:00 p.m. – 5:00 p.m.

Please email me at rocka@azdhs.gov or by telephone, 602-663-7234 if you will be attending by telemedicine for the Committees, or to let me know that you will not be able to attend.

Thank you very much.

"...to advise, review, monitor, and evaluate all aspects of the development of the State Plan"
(Public Laws 99-660, 100-639, and 102-321)
ARIZONA BEHAVIORAL HEALTH PLANNING COUNCIL
150 North 18th Avenue, 2nd Floor
Phoenix, Arizona 85007

MEETING OF SEPTEMBER 21, 2012
10:00 A.M. – 12:30 A.M.
COLORADO RIVER INDIAN TRIBE
BEHAVIORAL HEALTH SERVICES & SUBSTANCE ABUSE PROGRAM
DEPARTMENT OF HEALTH & SOCIAL SERVICES CONFERENCE ROOM
12302 KENNEDY DRIVE
PARKER, AZ

AGENDA

I. Call to Order & Introductions Vicki Johnson, Chair

II. Approval of June 14, 2012 Minutes Chair

III. CRIT-Behavioral Health Welcome & Presentation Dr. Kimberly Campbell
     Staff-TBA*

IV. ADHS/DBHS & Arizona State Hospital Reports Cory Nelson

VI. Committee Reports
   A. Executive Vicki Johnson
   B. Advocacy/Legislation Steve Carter
   C. Children & Community Advisory Dan Haley
   D. Planning & Evaluation Vicki Johnson

VII. State Agency Updates
    A. AHCCCS Kristin Frounfelker
    B. ADE Candice Trainor**
    C. ADOH Maureen Rooney
    D. DES/DCYF Michael Carr
    E. DES/RSA Andrea Benkendorf

VIII. T/RBHA Updates Chair

IX. Other Business/Announcements Chair

X. Next Meeting/Agenda Chair

XI. Call to the Public Chair

XII. Adjournment Chair

*to be announced
**tentative

"...to advise, review, monitor, and evaluate all aspects of the development of the State Plan"
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I. Call to Order & Introductions

The meeting was called to order at 10:05 a.m. A quorum was present, and introductions were made.

II. Approval of May 18, 2012 Minutes

Dan Haley motioned to approve the minutes; Julia Engram seconded the motion. The minutes were approved as written.

III. Cenpatico Welcome

Terry Stevens, Chief Executive Officer of Cenpatico, welcomed the Council to Apache Junction. Terry reported that Cenpatico is in its third year of their journey into integrated health. Reports about mortality rates for the behavioral health population led the RBHA to implement integrated health programs throughout their GSAs.

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Cenpatico began offering health promotion programs, smoking cessation, healthy diet, and purchased state of the art work-out and fitness machines.

Terry said that there are eight models/levels of integrated health programs, and they must be between a Level Four and a Level Eight to be considered integrated. All of Cenpatico’s providers have begun integrated health implementation, and Mountain Health and Wellness is considered a Level Eight program. Terry added that she hoped that the Planning Council will be able to visit all their programs during their schedule, as the programs should be in place within the next six months.

Cenpatico’s issues include Licensure; there is work to develop integrated rules, as the current Rules are very restrictive, i.e., requiring two separate entrances, for the behavioral health and the physical health programs. Credentialing is another issue, as well as working with the AHCCCS Health Plans. The RBHA must work individually with each Health Plan, and some historically haven’t been willing to work with RBHAs. Medical records are another issue, and several providers have had to purchase systems; Mountain Health & Wellness developed their own system. The workforce also needs to include staff that understand and are experienced in integrated health care. The medical profession also doesn’t speak in “behavioral health” language.

Navigators will also be trained to help members navigate the new integrated health system.

IV. Mountain Health & Wellness Presentation

Gustavo McGrew welcomed the Council and prepared a PowerPoint presentation. MHW celebrated its new building in Apache Junction with a grand opening last year. Over 4,700 individuals are served by MHW, and 806 of them have chronic conditions. 22% of its members are adults with SMI. Primary health + behavioral health + wellness = fully integrated services (chart). MHW has one governance structure (board of directors); one management structure, and one electronic health record.

MHW underwent a structural shift in its organizational culture. The organization’s name was changed from Superstition Mountain Mental Health Center (SMMHC) to Mountain Health and Wellness to demonstrate the change from a “mental health center” to a wellness program. This is their new identity, which is an integrated health care company. There is also a new paradigm, which is an integrated health care company for everybody (not just the behavioral health community). The new framework is from one of pathology to now of wellness. MHW embraces SAMHSA’s 8 Dimensions of Wellness.

MHW delivered its first integrated health care service in June 2011, and in June 2012, a nurse practitioner credentialed in family practice and psychiatry was hired. MHW’s electronic health record has the capability to send alerts for assessments and service plan due dates; electronic prescribing can be done with one click, and drug/allergy reactions are also identified.
MHW’s motto is “Wellness = Joyfulness”.

There is also a culture of wellness for MHW staff. Staff are involved in health promotion campaigns in the community; they have a Celebrating Wellness Committee, and staff participate on the Apache Junction Wellness Partnership, which is a large community group. St. Luke’s Health Initiative is assisting MHW working with their community.

Gustavo identified a list of needed activities to make implementation a success:
- Integrated facility license
- Integrated contracts
- Integrated rates of reimbursement
- Integrated credentials
- Integrated staff positions (all positions)
- Integrated clinical language
- Integrated organizational structure
- Integrated internships/externships
- Integrated educational opportunities (billing; accounting; degrees: MAs, MDs, PhDs, nurses, etc.).

V. ADHS/DBHS Report

Margery Ault, representing Laura Nelson, reported that DBHS held its stakeholder public forums in May 2012; the PowerPoint is available on the DBHS website. The T/RBHAs will be notified of their allocations, which will be based on historical funding and population size. The focus is on community based recovery services.

The OBHL Rules have been revised; residential, inpatient, and outpatient services will be impacted.

VI. Arizona State Hospital Report

Debra Taylor, representing Cory Nelson, reported on the Hospital census, which is 236; there are 116 civil patients and 120 forensic patients.

The Hospital has been undergoing much change and transition in the past year. Non-violent crisis intervention training has been conducted with all staff and there has been a security re-organization, which is now called “Campus Support and Safety”. There are 17 open Support positions and the Hospital is recruiting. The current Chief of Security will be retiring the end of July and this position will also need be filled.

The move is occurring for the new Forensic Hospital; the first move will be July 12th, and two units will be moved each day. There have been some physical plant changes, such as some glitches with the lights.
Debra also reported that ten Governor’s Office staff and Mental Health Probation Officers toured the Hospital in May.

VII. Committee Reports

A. Executive: James Russo reported that the Council is recruiting additional members, specifically those with a substance use background. The May meeting survey scores were 5s and 4s, but there were only seven surveys submitted. James requested that each member submit their survey at the end of the meeting.

The September meeting will be held in Parker.

B. Advocacy/Legislation: Anne Rock reported that Steve Carter distributed the MCAP final legislative summary. The Legislature passed 387 bills in the session, of which 326 were signed by the Governor into law, and 26 that were vetoed. The effective date for the new laws will go into effect on August 2, 2012.

Significant budget items passed this session was the appropriation of $39 million for non-Title XIX SMI services; an increase of 2% in provider rates starting April 2013; continued funding for non-Title XIX SMI adults for prescription medications, crisis services and supported housing at the current rate; and addressed the TANF shortfall by adding $25.8 million in funding.

C. Children & Community Advisory: Dan Haley reported that the Committee reviewed the draft SAFE B Card and modified it to reflect the adult population. The Card will be presented to the Council in September for their approval.

VIII. AHCCCS Report-Health Insurance Exchange

Linda Skinner was invited to meet with the Council periodically to provide an update on the Health Exchange program, which is part of the ACA. The ACA requires that all individuals under the age of 65 have health insurance by January 2014.

The Health Exchange program must be in place in every state by October 2013, and there will be open enrollment during October through December 2013 to be ready for January 2014.

Regarding the Medicaid expansion, the FPL will be raised to 133% (actually 138%). Childless adults will be included. AHCCCS is waiting for a decision by the Supreme Court.

Governor Brewer has asked Arizona to move forward in implementing the ACA, which is primarily IT work at this time. Also, the two eligibility systems (DES and AHCCCS) will be changed, as well as Health-E Arizona.

AHCCCS is currently in procurement mode, and contracts will be awarded.
IX. State Agency Updates

A. ADE: There was no report.
B. ADOH: There was no report.
C. AHCCCS: There was no report.
D. DES/DCYF: There was no report.
E. DES/RSA: There was no report.

X. T/RBHA Updates

There was no report.

XI. Other Business/Announcements

There was no other business or announcements.

XII. Next Meeting/Agenda for Meeting

The next meeting will be September 21, 2012, at the Colorado River Indian Tribe, 12302 Kennedy Drive, Parker. Agenda items include a presentation from the Tribe’s behavioral health program. There will be no telemedicine but telephone conferencing is available.

The following Committees will meet on September 20, 2012 at Arizona Counseling and Treatment Services (ACT). Telemedicine will be available at ADHS/DBHS in Phoenix and at CPSA Plaza Arboleda, Tucson:

- Planning & Evaluation: 1:00 p.m. – 2:00 p.m. ACTS staff will meet with the Committee and present on their program.
- Advocacy & Legislation: 2:00 p.m. – 3:00 p.m.
- Children & Community Advisory: 3:00 p.m. – 4:00 p.m.
- Executive: 4:00 p.m. – 5:00 p.m.

XIII. Call to the Public

There was no response.

XIV. Adjournment

The meeting was adjourned at 11:40 a.m. A tour of the facility followed the meeting.