

Steve Sisolak
Governor



Richard Whitley, MS
Director

DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF CHILD AND FAMILY SERVICES
Helping people. It's who we are and what we do.



Cindy Pitlock, DNP
Administrator

RURAL NEVADA CHILDREN'S MENTAL HEALTH CONSORTIUM MEETING MINUTES SEPTEMBER 15, 2022

All members participated via Microsoft Teams technology (video or audio).

VOTING MEMBERS PRESENT:

Jan Marson
Jaymee Oxborrow
Mala Wheatley
Melissa Washabaugh
Michelle Sandoval
Rebecca McGough
Sarah Dearborn
Sarah Hannonen

VOTING MEMBERS ABSENT:

Heather Plager
Lana Robards

STAFF AND GUESTS:

Amna Khawaja
Anthony Lee
Beverly Burton
Carin Hennessey
Charlene Frost
Cherylyn Rahr-Wood
Dana Walburn
Greyson Whitehorn
Jan Marson
Jaymee Oxborrow
Jennifer Lords
Kary Wilder
Kendall Holcomb
Kim Donohue

Kristen Rivas
Linda Anderson
Misty Vaughan Allen
Shannon Hill
Stephanie Dotson
Vanessa Dunn
Zoe Houghton
775-250-3347

1. Call to Order, Roll Call, Introductions – *Melissa Washabaugh, Rural Children’s Mental Health Consortium Chair*

Melissa Washabaugh called the meeting to order at 3:17 p.m. Kary Wilder, Administrative Assistant, Division of Child and Family Services (DCFS), conducted roll call and determined there was a quorum.

2. Public Comment. *No action may be taken upon a matter raised during a period devoted to comments by the general public until the matter itself has been specifically included on an agenda as an item upon which action may be taken.*

There was no public comment.

3. For Possible Action. Approval of the May 19, 2022 Meeting Minutes – *Melissa Washabaugh*

MOTION: Jan Marson made a motion to approve the May 19, 2022 Meeting Minutes as presented.

SECOND: Jaymee Oxborrow

VOTE: Unanimous

4. For Possible Action. Approval of the June 6, 2022 Budget Workgroup Meeting Minutes – *Melissa Washabaugh*

MOTION: Jan Marson made a motion to approve the June 6, 20 Budget Workgroup Meeting Minutes as presented.

SECOND: Rebecca McGough

VOTE: Unanimous

5. For Information Only. Nevada 988 Hotline for Mental Health Emergencies and the Plan for Serving Youth and Families – *Kendall Holcomb, Public Information Officer, Nevada Department of Health and Human Services*

Kendall Holcomb gave a PowerPoint presentation explaining that the Nevada Crisis Response System and 988 will serve as the foundation of Nevada’s behavioral health safety net to reduce

behavioral health crises, strive to attain zero suicides and provide a pathway to recovery and well-being. The Criss Center (988) is coordinated with Mobile Crisis Response, crisis receiving and stabilization services through essential crisis principles and practices and is the foundation for crisis care. 988 is intended to divert non-medical, fire, police emergency calls that are suicide or mental health related out of the 911 system and to behavioral health professionals. The Hotline went live in July 2022. She reported that one in five people over the age of 12 have a mental health condition in Nevada and suicide is the ninth leading cause of death for youth in Nevada.

Cherylyn Rahr-Wood asked about crisis stabilization centers planned for rural areas. Ms. Holcomb responded that two more are planned for rural communities, locations are not yet identified. A previously identified rural provider backed out of the program due to staffing shortages. Ms. Holcomb clarified that capacity is available for stays up to 48 hours, with transfers to long term care as needed.

The 988 system does not have the ability to geolocate and callers are required to provide their name and locations in order to do a 911 handoff under an agency interoperability agreement. Ms. Holcomb will check on the ability for 911 to hand-off to 988.

Ms. Holcomb will send flyers in both English and Spanish to Kary Wilder for distribution to Consortium members and can provide other materials on request. SAMSA is providing support for materials.

Jaymee Oxborrow asked if clients need to call 988 first before going to crisis stabilization centers? Ms. Holcomb replied that once centers go live providers will have the ability to inform their clients they exist. The goal is to have one center live by the end of this calendar year.

6. For Information Only. Update on System of Care (SOC) Grant – *Bill Wyss, Division of Child and Family Services (DCFS)*

Shannon Hill provided an update on the Flex Funds Program. The Substance Abuse and Mental Health Services Administration (SAMSA) and the Centers for Medicaid Services have identified seven core services that should be available in the community: mobile crisis response and parent/youth peer support and Flex Funds. The purpose of Flex Funds is to give families an opportunity to purchase goods and services, to support needs and the educational and social domains, and to enable families and children to link to community-based enrichment activities they may not otherwise be able to. For example, purchases included volleyball camp, basketball, hoop karate classes a mountain bike, dance lessons and electronic drum kit. This program is taking place in partnership with Nevada PEP. Funds are accessible to families through Wrap Around in Nevada (WIN), Mobile Crisis, intensive step-down program, DPBH, Rural Clinics and child welfare. Intensive family Services are targeted towards tribal communities and SOC subgrantees.

Last year, 85 Flex Fund applicants were funded through the rural clinics, DPBH, Mobile Crisis and WIN. The largest usage was from Lynn County, followed by Washoe County. The program has been well received and accessed by families in our rural communities

Beverley Burton reported SOC has started the first round of Cultural Competency Training, a three-module series. A System of Care training is scheduled October 27th. She encouraged everyone to watch for the SOC quarterly newsletter which provides all training dates and training information. Ms. Burton said group training can be provided to organizations on request by contacting her directly. She will put her contact information in the Chat

SOC desires to be more active in creating partnerships with tribal communities and has partnered with and are funding a substance abuse clinical position with the Fort McDermott Wellness Center.

Melissa Washabaugh asked if transportation money was available through Flex Funds for medical visits. Ms. Hill said that was not part of Flex Funds and was most likely available through Mobile Crisis.

Melissa Washabaugh asked if income verification was part of the application process? Ms. Hill responded there is no income verification. \$500 is available per youth and family for a one-time purchase which is a federal guideline. There is no income requirement or cut-off.

Rebecca McGough asked how to help families access the Flex Funds applications? Ms. Hill said the list of services providers (care coordinators, therapists, agency contacts) are outlined in the handout. Families can work with their providers and care coordinators to access funds.

Kim Donohue asked about scheduling a visit to the Duckwater Shoshone Tribe. Ms. Hill said yes and that they're looking forward to it.

Melissa Washabaugh asked how to refer families for Flex Funds and Shannon Hill said there are identified points of access at agencies in rural communities. She said that if anyone has a family in need, to contact her directly for assistance.

7. For Information Only. Update on Pediatric Mental Health Access Care Grant –
Stephanie Dotson, Division of Child and Family Services (DCFS)

Stephanie Dotson reported there have been significant changes to the project and the program scope has been narrowed to focus solely on training and education. There is another community-based organization already providing mental health consultation and care coordination statewide and it was determined not to duplicate those services. Services are offered through the MVP's project, PAL Program Psychiatric Access Line, UNLV and Chicos Por La Causa. All pediatric providers were notified of the change and connected to those organizations.

Several training opportunities and publications have been released and now in the final year of the project NV Peds is offering four new trainings. The Ripple Effect (trauma informed care) training through Shondra Epping will be offered again. New teen camps are planned for the spring. The REACH Institute has a six-month training program for pediatric care providers which starts with the three-day training in mental health and behavioral health integration, followed by a once per month consultation for six months. Circle of Security training will be

offered which is a model for behavioral health clinicians working with families who have experienced trauma.

The number of publications and educational materials are increasing. Bi-monthly Infographics, monthly newsletters and quarterly Issue Briefs have been published. Ms. Dotson asked everyone to let her know of clinicians across the state who can be recognized and featured in upcoming publications.

Age-appropriate therapeutic bags with tools and recourses are available for clinicians (early childhood, latency-age, adolescent, etc.). Bags have been distributed to enrolled providers and contacts.

Melissa Washa asked about training dates. Stephanie answered she was not allowed to publicize dates and will send out email with the information when it is available. The Ripple Effect training is planned for November 2022.

8. For Possible Action. Update on Youth M.O.V.E. (Motivating Others through Voices of Experience) and discussion and possible action regarding collaborative initiatives – *Youth M.O.V.E. Facilitator*

Grayson Whitehorn reported several podcasts about the anxiety and stress of going back to school were released last month. This month is Self-Care Awareness Month and a new self-care podcast was just released and is available to share. The Clark County Children’s Mental Health Consortium is making plans for next May’s Children’s Mental Health Events in collaboration with Youth Move. Youth appreciate and would be engaged with interactive games for these types of events.

9. For Information Only. Updates from Medicaid – *Sarah Dearborn, Division of Health Care Financing and Policy (DHCFP)*

State Plan Amendment – Reimbursement Methodology for Crisis Stabilization Centers

- This SPA is on Request for Information (RAI), which essentially pauses the 90-day clock under Centers for Medicare & Medicaid Services (CMS) review. The latest discussions involve adding the methodology to different pages within the state plan since the services provided under a crisis stabilization center are outpatient based and may fit better under the rehabilitative services area rather than the hospital reimbursement pages where they were originally placed.
- Medicaid Services Manual (MSM) Ch. 400 policy for Crisis Stabilization Centers was approved during the March 30, 2022 public hearing. This policy includes some robust provider standards and requirements for such a critical piece to the crisis continuum.
- A new Provider Type 12 Specialty 250 – Crisis Stabilization Center was created.

During the February Interim Finance Committee (IFC), Nevada Medicaid was approved to use Home & Community Based Services (HCBS) American Rescue Plan Act (ARPA) quarterly spending, to provide funding for a consultant to assist with recommendations for strengthening behavioral health services available to children through Medicaid. This will include things like

facilitating stakeholder engagement; conducting a gap analysis, providing recommendations and assistance with identifying authority needed for CMS approval for identified services; providing recommendations related to service delivery model; and assistance with fiscal impact and projections for identified services. The consultant, Health Management Associates (HMA), is working on scheduling one on one interviews currently with stakeholders and discuss the current children's mental health challenges. These meetings will help to prepare for a meeting that brings stakeholders together in September to collaborate around goals, timelines, and desired outcomes for this effort to improve Medicaid services and the overall system of care for children and youth with behavioral health needs and their families.

- There is a larger stakeholder meeting bringing everyone together later September in Clark County and there will be one scheduled in Washoe County as well.

Upcoming MSM 400 – Mental Health and Alcohol and Substance Abuse Services – Provider Qualifications

- A Public Hearing will be held on September 27, 2022 to approve updated policy.
- This policy will help clarify the qualifications for Qualified Behavioral Aids and Mental Health Peer Supporters, Qualified Mental Health Associates, and Qualified Mental Health Professional providers.

Mobile Crisis Planning Grant

- The Mobile Crisis Planning Grant Project and Core teams have been working hard on developing how Nevada will build mobile crisis teams that will be eligible under enhanced Federal Medical Assistance Percentage (FMAP) offered through Section 1947 of the SUPPORT Act. Medicaid has been working with Mercer on this project and they have delivered their final recommendation report to the state. Medicaid is working through these recommendations and making determinations regarding moving forward. For example, it is likely Medicaid will pursue a state plan amendment rather than a waiver to ensure already covered crisis intervention services include the requirements needed and outlined for qualifying mobile crisis teams to receive enhanced FMAP. There is a tentative timeline to propose new MSM policy and state plan amendment in April 2023. Medicaid is determining how to delineate these teams from other mobile crisis or crisis intervention that does not qualify for the enhanced FMAP, for example, identifying if a possible certification would be needed, development of a new provider type and use other system updates to include modifiers for qualifying services.
- To qualify for the enhanced FMAP, services must align with the following requirements:
 - Eligibility – these services would need to be available to all Medicaid eligible individuals experiencing a Behavioral Health or Substance Use Disorder crisis.
 - Services would need to be community based and provided outside of a facility-based setting like a hospital.
 - A multi-disciplinary team is required to include at least one behavioral health professional and one professional or paraprofessional, like a peer (which is identified as a requirement in Senate Bill 390).

- Services delivered are trauma informed and everyone on the team is required to be trained in trauma informed care, de-escalation and harm reduction.
- Mobile Crisis services are required to be offered 24/7/365 and include screening, assessment, stabilization, de-escalation and coordination to appropriate referrals.
- Lastly, mobile crisis teams are required to maintain relationships with community partners.
- Stakeholder meetings to include Community Behavioral Health Centers (CCBHC) mobile crisis teams and other established mobile crisis teams will begin in late September and October. Work is in progress currently to put together provider slide decks.
- System work is beginning to build a new Crisis services provider type.

SUPPORT Act Post Planning Grant

- Work being done through the SUPPORT Act Post Planning grant has been related to the 1115 Substance Use Disorder Demonstration Waiver
 - The enhanced benefits being requested are clinically managed residential and withdrawal management services consistent with American Society of Addiction Medicine (ASAM) levels of care 3.1, 3.2, 3.5, and 3.7 that are not covered for individuals 22-64 under the State Plan due to Institution for Mental Disease (IMD) rule that prohibits Medicaid from reimbursing for services in and IMD.
- Ms. Dearborn reminded everyone to visit the SUPPORT Act webpage <https://dhcfp.nv.gov/Pgms/SUPPORTActGrant/> to find the SUD Data Book, the Strategic Plan, Infrastructure Assessment Report, and Sustainability Plan.
- Medicaid has also been working on looking at data submitted to CMS on a quarterly basis that identifies if in fact the work being done to increase substance use treatment provider capacity is working. For example, there was an increase in Nurse Practitioners performing substance use treatment services.

Quadrennial Rate Reviews (QRR)

- NRS 422.2704 requires that, every four (4) years, the State of Nevada, Division of Health Care Financing and Policy (DHCFP) review the rate of reimbursement for each service or item provided under the State Plan for Medicaid to determine whether the rate of reimbursement accurately reflects the actual cost of providing the service or item. If the Division determines that the rate of reimbursement for a service or item does not accurately reflect the actual cost of providing the service or item, the Division must calculate the rate of reimbursement that accurately reflects the actual cost of providing the service or item and recommend that rate to the Director of Health and Human Services (DHHS) for possible inclusion in the State Plan for Medicaid.
- DHCFP has established a schedule for completing rate reviews by provider type. Surveys will be made available on this page for the designated providers. Completed surveys must be emailed to QRR@dhcfp.nv.gov in Excel format. Various channels may be used to notify affected providers of the availability of surveys for selected provider types to include: email and fax blasts from DHCFP's fiscal agent (Gainwell Technologies), correspondence to

provider associations, web announcements on the Provider Portal, and updated postings on the bottom of this webpage.

- Provider surveys will request information regarding the Cost of Providing Service for each CPT/HCPCS/Revenue code allowed under the designated provider type. Providers should ensure that surveys are completed and submitted by the deadline listed on the survey. These surveys will help DHCFP determine if the current reimbursement rates paid to providers accurately reflect the cost of providing the service or item.
- The deadline for completing surveys is Friday, September 16, 2022.

Certified Community Behavioral Health Centers (CCBHCs)

- Six CCBHCs functioning under State Plan authority were impacted with a rate decrease due to the rebasing of their rates using the fiscal year that occurred during the pandemic.
- A Disaster Relief SPA was submitted on 9/14/22, to alleviate the impact of that rebasing and allow these providers to utilize their initial rate before rebasing occurred, while DHCFP can work simultaneously to amend state plan language to address the issue, rebasing the rate during the pandemic has caused.

Specialized Foster Care services provided under Medicaid's newest 1915(i) state plan option authority.

- There are 12 enrolled Specialized Foster Care agencies throughout the state.
- Providers can perform and get reimbursed for intensive in-home supports and services as well as crisis stabilization services.
- DHCFP hosts monthly meetings with specialized foster care agencies to address any concerns or questions regarding the services.

10. For Possible Action. Updates from Nevada PEP and discussion and possible action regarding collaborative initiatives – *Charlene Frost, Nevada PEP*

Char Frost reported NV PEP has been busy with the SOC unit and is putting together a monthly podcast for parents and she will send a link to the podcast channel to Kary Wilder for distribution to Consortium members. The Youth Voice agency-level training was just finished and will be available through The Center for the Application of Substance Abuse Technologies (CASAT) platform. The goal is to work towards getting more youth voice at the agency level. They are continuing to develop children's mental health specific parent trainings and there are currently free trainings available on the website regarding depression, trauma, and anxiety. Youth Move is going to have a dedicated website that will be separate from Nevada PEP's website.

Nevada PEP is hearing from parents about the lack of critical services for speech therapy, occupational therapy and physical therapy. She is working with families to think outside of the box and propose ideas to the school district with the hope of getting some movement to help children get what they need. Unfortunately, children with disabilities were disproportionately affected by the pandemic and experienced loss of learning.

11. For Possible Action. Make Recommendations for New Legislative Updates and Reports
Standing Agenda Item – *RCMHC Members*

Char Frost reported there is a bill coming up (the same as last time) to formalize the State Consortium into law. The Clark Regional Behavioral Health Policy Board is putting forward a bill to increase the property transfer tax to fund things like supportive in-home services for individuals who are homeless. This bill is called the “Transformational Fund” and the property transfer tax has not been raised since the mid 1980’s. The goal is to get around federal regulations that individuals must be homeless for a year and a half before they can get federal assistance. This will allow for help to people who are without housing and support services and provide wraparound services for those who are low income or extremely low income. The bill is designed so individual policy boards within each region will decide how money is split to balance funds between different regions with different needs. She will forward dates and information on the bills as available.

Cherylyn Rahr-Wood reported the Northern Regional Behavioral Health Policy Board selected their Bill Draft Request (BDR) 385. She offered to provide a presentation of the bill at the next meeting.

Melissa Washabaugh encouraged everyone to contact her with BDR and policy information that the Consortium can support with a letter of recommendation.

12. For Information Only. FY2022 Budget Review – *RCMHC Members*

Tabled.

13. For Possible Action and Vote. FY2023 Budget Development – *RCMHC Members*

After review and discussion, a vote was held to approve the RCMHC FY2023 Budget. Ballpark numbers in the categories for the retreat and community conversation events are placeholders and can be modified.

MOTION: Jan Marson made a motion to approve the RCMHC FY2023 Budget as presented.

SECOND: Rebecca McGough

VOTE: Unanimous

14. For Possible Action and Vote. Consortium Retreat Planning – *RCMHC Members*

Tabled.

15. For Possible Action. Community Event Participation – *RCMHC Members*

Melissa Washabaugh reported that she held a community outreach event at Lovelock Frontier Days which went well. Swag items were distributed and children and families were engaged through games, interactive questionnaires and coloring workbooks. Jaymee Oxborrow was unable to go to Dayton Valley Days and announced that a Trunk or Treat event is scheduled for October 30th in Silver Springs. Rebecca McGough said she would be in Fallon on September 24th

and can pick up swag items from the Reno DCFS office to bring with her. She will coordinate with Kristen Rivas. Melissa Washabaugh clarified that unless event costs are higher than \$100, a vote to approve community event participation does not need to be taken at the meeting.

16. Make Recommendations for Agenda Items for the Next Meeting – RCMHC Members

- Children’s Mental Health Month May 2023 Planning
- Cherylyn Rahr-Wood will present an update on Northern Policy Board BDR 385

17. Public Comment. *No action may be taken upon a matter raised during a period devoted to comments by the general public until the matter itself has been specifically included on an agenda as an item upon which action may be taken.*

There was no public comment.

18. Adjournment. – *Melissa Washabaugh, Chair*

The meeting was adjourned at 5:05 pm.

CHAT TRANSCRIPT

Welcome to the September Rural Children's Mental Health Consortium meeting, by Kary Wilder.

2:48 PM

Please enter your name, title and organization in the Chat for the Record, by Kary Wilder.

3:02 PM

Hi Kary, this is Kim Donohue could I ask to be added to the calendar invite? I love to attend these meetings and would like to be added to the invite. Thank you!! Hope you are having a great day

Hi Kim, I'll add you to the listserv, by Kary Wilder.

3:08 PM

Thank you, I appreciate it! by Kim Donohue (Guest).

3:08 PM

Thank you, I appreciate it!

Sarah Dearborn, you were so amazing this morning on WCCMHC, by Misty Vaughan Allen.

3:12 PM

Does this group have by-laws? by Kim Donohue (Guest).

3:13 PM

Does this group have by-laws?

Yes, by Kristen Rivas.

3:13 PM

Ok just wondering because that could be written into your by-laws, by Kim Donohue (Guest).

3:14 PM

Shannon Hill - DCFS System of Care Grant Unit, by Shannon Hill.

3:19 PM

Linda Anderson, Nevada Public Health Foundation, by Linda Anderson (Guest).
3:19 PM
Amna Khawaja - DCFS System of Care Grant Unit
3:19 PM
Beverly Burton, DCFS System of Care Grant Unit
3:19 PM
Greyson Whitehorn - Youth Move Nevada
3:19 PM
Kristen Rivas PEU DCFS
3:19 PM
Stephanie Dotson - DCFS NVPeds, guest for the record
3:19 PM
Jennifer Lords, State Youth Behavioral Health Integration Coordinator (NDE/DCFS/DPBH)
3:19 PM
Dana Walburn, NDE school health and wellness
3:19 PM
Misty Allen, Office of Suicide Prevention
3:20 PM
Vanessa Dunn, Belz and Case Government Affairs
3:20 PM
Kendall Holcomb - DPBH Public Information Officer
3:20 PM
Carin Hennessey, BH Unit, DHCFP
3:20 PM
Kim Donohue, Southern Regional Behavioral Health Coordinator, Mineral, Esmeralda, Lincoln,
Northern Nye Counties
3:20 PM Char Frost, Statewide Family Network Director, Nevada PEP
3:21 PM
Cherylyn Rahr-Wood Cherylyn@nrhp.org, Northern Regional Behavioral Health Coordinator
4:03 PM Cherylyn Rahr-Wood
Kendall, I have two county taskforce meetings next week can I get some materials from you? I
will be in person and can deliver. I will pick up.
4:03 PM Kendall Holcomb
kholcomb@health.nv.gov
4:10 PM Kim Donohue (Guest)
Exciting news Shannon!
4:12 PM Kim Donohue (Guest)
Thank you for sharing, could we schedule a visit to Duckwater Shoshone Tribe
4:13 PM Jan Marson (Guest)
How much is in the fund?
4:19 PM Char Frost
Jan, were you asking for the total monies dedicated to flex funds?
4:21 PM Kim Donohue (Guest)
Stephanie I would like to have your email please, thank you!
4:23 PM Stephanie Dotson
nvpeds@dcfs.nv.gov

4:23 PM Cherylyn Rahr-Wood

Thank you, Stephanie. Great work!!

4:23 PM Misty Vaughan Allen

So excited to meet you Greyson!

4:23 PM Kim Donohue (Guest)

Thanks Stephanie!

4:24 PM Char Frost

Youth MOVE Podcast

4:24 PM Char Frost

[https://open.spotify.com/episode/47jC6ggNK2qI6xNU1AiEcO?si=1sJOJ01YTEWhNAp3W7H](https://open.spotify.com/episode/47jC6ggNK2qI6xNU1AiEcO?si=1sJOJ01YTEWhNAp3W7HASw)
[ASwhttps://open.spotify.com/episode/47jC6ggNK2qI6xNU1AiEcO?si=1sJOJ01YTEWhNAp3](https://open.spotify.com/episode/47jC6ggNK2qI6xNU1AiEcO?si=1sJOJ01YTEWhNAp3W7HASw)
[W7HASw](https://open.spotify.com/episode/47jC6ggNK2qI6xNU1AiEcO?si=1sJOJ01YTEWhNAp3W7HASw)

4:25 PM Misty Vaughan Allen

Great call Melissa, May is always here before we know it.

4:59 PM Kim Donohue (Guest)

Chair- The Southern Regional Board Has selected their BDR as well, happy to present on it as well.

5:03 PM Misty Vaughan Allen

Thank you all for your tireless work! Take good care,

5:03 PM Kim Donohue (Guest)

Thank you everyone

5:03 PM Misty Vaughan Allen

Thank you all for your tireless work! Take good care,

5:03 PM Kim Donohue (Guest)

Thank you everyone

5:03 PM Cherylyn Rahr-Wood

Thank you for all the hard work and compassion you all have for this work.

5:04 PM Carin Hennessey

Thank you!

Meeting ended