

**ALABAMA DEPARTMENT OF MENTAL HEALTH
BOARD OF TRUSTEES
FRIDAY, November 17, 2023
MEETING MINUTES**

A meeting of the Alabama Department of Mental Health Board of Trustees was held on Friday, November 17, 2023, in-person and virtual.

Call to Order

Vice-Chair Donna Foster welcomed members and called the meeting to order at 10:03am.

Roll Call was conducted:

BOT Members Present:

Kim Boswell, Commissioner (In-Person)
Donna Foster (Virtual)
Dr. Cynthia Bisbee (Virtual)
Judge Sheri Friday (Virtual)
Dennis Stripling (Virtual)
Dr. Sandra Parker (Virtual)
Judge Christopher Hughes (Virtual)
Larry Bailey
William Pete Cobb (Virtual)
Dave White, Governor's Senior Policy Advisor-(Representing Governor Kay Ivey)

BOT Members Absent:

Lt. Governor Will Ainsworth
Speaker Nathaniel Ledbetter
Leslie Sanders
Rodney Barnes

Others Present:

Kathy Sawyer, Associate Commissioner for DD
LaVonda Blair, Associate Commissioner for Administration
Nicole Walden, Associate Commissioner for MH/SU
Tommy Klinner, Chief Legal Counsel
Malissa Valdes, Director of Public Information
Beverly Johnson, Director, Prevention Services
Berenice Artis, Executive Assistant
Jontai Reynolds, Administrative Assistant
Collier Tynes, Legislative & Constituent Affairs Director
Kiarah Holloway, PIO (Virtual)
Dr. Christine Rembert (Virtual)
Kiarah Holloway, PIO (Virtual)

Review and Approval of Agenda

Ms. Foster asked if there were additions to the Agenda and for approval. Dennis Stripling motioned to accept the Agenda and Pete Cobb properly seconded. Approved by acclamation without additions, deletions, or oppositions.

Review and Approval of May 12, 2023 and August 11, 2023 BOT Minutes: Due to the absence of a Quorum, the minutes for the May 12, 2023 and the August 11, 2023 BOT meetings were not approved. Dr. Foster introduced the minutes for a motion to approve the minutes together. Dr. Sandra Parker motioned to approve, and it was properly seconded by Pete Cobb with no discussions, additions or oppositions. Dave White abstained.

Commissioner's Report:

Commissioner Boswell conducted the Roll Call where a Quorum was established. Commissioner Boswell opened the meeting introducing the new Administrative Assistant, Jontai Reynolds. Jontai is one of four Reynolds family members who work for the Department. Another significant event addressed by Commissioner Boswell was the opening of the crisis center in Tuscaloosa, Hope Pointe, which will be shared later in the meeting during the PIO report with Malissa Valdes.

The Commissioner began the meeting introducing the FY25 Budget increases by priority in priority order. This document will be emailed to the members following the meeting.

Workforce Investment

The first priority category Commissioner Boswell addressed was Workforce Investments with the first item, Taylor Hardin Litigation. The two litigation issues involve a consent decree that the Department has been addressing for the past five years. The main focus of the consent decree involves those individuals who are waiting in jails for a forensic evaluation, with 340 individuals awaiting inpatient evaluations. The Department continues working on this major issue.

The second litigation issue involves a settlement agreement between the Department and ADAP (Alabama Disabilities Advocacy Program). In April 2023, ADAP served the Department with an extensive demand letter centered on staffing and the clinical treatment side of service delivery at Taylor Hardin. The Department made some commitments related to staffing as a part of the settlement agreement.

- Funding requested to address these legal issues, \$9.8 million. This funding request will also assist with other operational funding of Taylor Hardin with a large portion covering staffing and attaining the staffing ratios relative to the settlement agreement with ADAP and the continued cost of contract workers, which is quite expensive.

Staffing at Taylor Harding continues to be a challenge, so the Department must rely on contract workers to ensure staff coverage.

- Additionally, \$2 million was requested to assist with forensic treatment to help patients move through the system faster and the additional staff and support needed to accomplish this. This funding will also help the Department perform jail-based restoration to help decrease the probability of individuals entering the system and adding to the waiting list.
- Funding requests were also made for both Mental Health and Substance Use. On the mental health side, this request has been made for the last two years. One of the ways that our mental health centers continue to struggle around workforce is due to the department being a safety net where services must be provided regardless of the individuals' ability to pay. Forty-five percent of the people we serve have no ability to pay and mental health centers manages this issue through long waiting lists and low salaries.
- For the last two years on the mental health side, the Department has asked for funds to cover the mental health safety net and the amount received, \$15 million. This year, we are asking for \$13 million, which will bring a total spend of \$36 million out of the \$41 million.
We divided this request between the General Fund and the Education Trust Fund as this is the manner in which the Legislature appropriated these funds last year, so this is how we reflected it the budget request this year.
- Similarly, Substance Use has an estimated uncompensated care item totaling \$8 million in their budget. Last year they received funding and this year we are requesting \$2.25 million to assist them with workforce development and once again, split between the General Fund and the Education Trust Fund.
- An additional item in this category is the Nurse Delegation Program. When the rate study was conducted in DD, the Nurse Delegation Program was not included.

This program is a package of services that you cannot just increase the rate you pay nurses and be able to fund this package of services.

The amount requested is \$800,000 to increase the rate of the Nurse Delegation Program from \$8 per hour to \$10 per hour. These are some of our pressing needs, however staff is still needed to implement all the new programs as well as staff at Taylor Hardin to provide the clinical treatment the Department agreed to in the settlement agreement.

Crisis Care

The next category addressed by the Commissioner, Crisis Care, with the first budget request, \$1.5 million for operational funds for the new Pediatric Crisis Unit at WellStone that is scheduled to be opening around September/October 2024. These funds will be made available to provide 24 child and adolescent crisis beds at WellStone in Huntsville. They are adding a child and adolescent unit to their new crisis center. This unit was in WellStone's plans as an addition to the new crisis center, they opened nearly a year-and-a-half ago.

A new item in our budget that was addressed by Associate Commissioner Kathy Sawyer is the increasing number of individuals with dual diagnosis of mental illness, intellectual and developmental disabilities. We have about 90 cases ADMH is working on, usually in conjunction with DHR because many of these cases being adult protective services cases. We are asking \$5.5million in pure state dollars to stand up crisis beds so that we can pull some of the people off that list.

This year we are serving about 40 individuals and next year, we need to serve another 40 to address this pressing need. This has become a national issue which the Commissioner advised was discussed on a regional call with SAMSHA. It was the topic of conversation as every state is dealing with this issue. Both NASMHPD (National Association of State Mental Health Program Directors) and NASDDDS (National Association of State Directors of Developmental Disabilities Services), two national organizations, are pushing to open a center for excellence to address this issue as all states are seeing the same trend we're seeing.

Rural Crisis Care

We are asking for \$3 million to complete our rural crisis care model. This item was in our budget last year and would help us begin to develop a rural crisis care model that would work throughout the state. Currently, crisis care centers are open primarily in urban areas, however, we really need a good rural crisis care model so that we can implement these services in the more rural areas of our state.

Substance Use

The third priority category to address, Substance Use, as about midway through the year, sometimes in the month of June, we run out of Medicaid/State match dollars leaving individuals unable to get treatment due to providers not having the ability to provide treatment services because they no longer have the state match for the federal dollars.

Unlike our mental health centers who are required to serve individuals with no insurance coverage, our substance use treatment providers are not required to do that, so when they run out of money, they can no longer provide additional treatment services. We are asking \$2 million in Medicaid/State match.

Similarly, we have the same issue with detox where we run out of money for detox beds about mid-year. We have a request to increase the number of bed bays for detox services and are asking for \$1 million. To address substance use prevention, we are requesting \$1.5 million to address increases in underage drinking and vaping. There is a report showing there has been a 40% increase in underage drinking and 41% increase in vaping.

- **Dr. Parker questioned if funds regarding residential detox bed bays has been received and if funds will go to existing residential detox facilities as she would love to have one in Mobile as part of their crisis centers?**

Commissioner responded the Department has not received the funds as it is part of the budget request and determination has not been made who will receive the funding. During the budget presentation, Commissioner stated a question was posed whether these funds could be allocated out of Opioid Settlement dollars. With detox bed she responded yes, these funds could be allocated to fund detox beds as detox is part of treatment. Commissioner suggested that everyone take a look at the RFP that's going out today.

- **Dave White questioned if detox beds would be eligible for funding from the Opioid Settlement money?**

Commissioner responded that detox beds could be eligible for funding, but a concern the Department has is that the Opioid Settlement is one-time money and when you talk about state matched dollars, the Department is hesitant about using one-time money. The reality is that any of our providers have to apply, not the Department and providers could certainly apply for these funds.

Prevention

We are concerned particularly with vaping as some of the health consequences of vaping have not yet been determined, but in terms of overall adolescent health, it has a very negative impact.

Enhanced Supports for Developmental Disabilities

This last item is a combination of services designed to address the dually diagnosed groups of individuals that actually live in the community and are trying to stabilize their placements in the community. We are asking \$640,000 for specialized behavioral support that would help develop provider capacity to provide for the mental health side of these services.

We have two out-of-state providers, Benchmark and Project Transitions, that we are contracting with to come into the state and work with our ID/DD providers to help build their provider capacity to provide those very specialized behavioral supports.

Additionally, there is an item around assisted technology. There are some really innovative assisted technologies available that can help address some of the workforce issues. Technology that can be put in the home and allow for some things to be done in the home through technology instead of having to have an individual physically present in the home.

We have a pilot program, however, to get people to understand and see the technology and be comfortable with it, we need to be able to show that in each one of our five DD regions, so we are requesting \$250,000 to be able to pilot this technology in all five of our regions.

There's also \$500,000 requested for housing supports due to the big push with the HCBS Setting Rule to have more people in the community and to do this, if individuals are to live apartments or even in their own homes, there are housing supports that are not covered under the waivers. For example, having to come up with a deposit to move into a rental home or apartment, first and last month's rent and other expenses that are not covered by the waiver.

Below is a breakdown by Divisions of which items each Division is requesting, the total General Fund request of \$34.8 million and the ETF request of \$8.4 million.

FY25 Budget Request Increase by Division	GF	ETF	TOTAL
Mental Illness	\$ 22,839,145.00	\$ 6,500,000.00	\$ 29,339,145.00
Pediatric Crisis Services	\$ 1,500,000.00	\$ -	\$ 1,500,000.00
Rural Crisis Care	\$ 3,000,000.00	\$ -	\$ 3,000,000.00
Taylor Hardin Litigation	\$ 11,839,145.00	\$ -	\$ 11,839,145.00
Workforce Investment	\$ 6,500,000.00	\$ 6,500,000.00	\$ 13,000,000.00
Substance Use	\$ 5,275,000.00	\$ 1,125,000.00	\$ 6,400,000.00
Residential Detox	\$ 1,000,000.00	\$ -	\$ 1,000,000.00
Prevention & Improved Outcomes	\$ 1,150,000.00	\$ -	\$ 1,150,000.00
Medicaid State Match	\$ 2,000,000.00	\$ -	\$ 2,000,000.00
Workforce Investment	\$ 1,125,000.00	\$ 1,125,000.00	\$ 2,250,000.00
Developmental Disabilities	\$ 6,766,080.00	\$ 800,000.00	\$ 7,566,080.00
Remote Supports	\$ 67,200.00	\$ -	\$ 67,200.00
Nurse Delegation Program	\$ -	\$ 800,000.00	\$ 800,000.00
Housing Assistance	\$ 500,000.00	\$ -	\$ 500,000.00
Specialized Behavioral Supports	\$ 698,880.00	\$ -	\$ 698,880.00
Crisis Residential Services	\$ 5,500,000.00	\$ -	\$ 5,500,000.00
Special Services	\$ -	\$ -	\$ -
GRAND TOTAL			
From ETF and GF	\$ 34,880,225.00	\$ 8,425,000.00	\$ 43,305,225.00

We attended several pre-meetings and meetings with folks from the Governor's Office, Dave, our Policy Analyst, Doryan, Budget Officer and Drew, the Legislative person. Collier will be sharing a bit more details on our Legislative strategies.

Commissioner Boswell also shared some details of a great meeting she had with Blue Cross/Blue Shield (BCBS) Medical Review Board where she was invited to speak on crisis services and mental health services in the state of Alabama. A member from Virginia, the Chairman of one of their groups, was implementing crisis services and was interested in hearing more about crisis services and if BCBS was interested in providing similar type services as part of their coverage.

Some time was spent with the Review Board and VPs' of other departments where discussions were conducted regarding crisis services and the PATH program (*Pediatric Access to Telemental Healthcare*). We had good data to show and share with them on how much that is improving access to care.

ADMH has been conversing with the Greater Birmingham Foundation around a collaborative care model. This model, similar to PATHS, involves putting a therapist in the primary care physician's office so that mild-to-moderate mental health conditions can be addressed at the primary care physician's office rather than having to search for a psychiatrist or a therapist out in the community.

Another model presented was an innovative and interesting in-home substance use treatment program. This model was discussed during the Commissioner's attendance at the CSG Opioid Masterclass Seminar in Kansas City, Mo. It has been done around the state, so this was a good conversation to have with BCBS as this is a model that is paid for primarily through insurance coverage.

Commissioner Boswell messaged that physicians are really the trusted advisors for people and more often-than-not, when people are trying to figure out a way to access care or experiencing a mental health issue, their physician is the first person they talk to. Physicians play a key role in making sure folks get access to care. Present were several primary care physicians who were excited about the collaborative care model and feedback afterwards sparked a lot of conversation which may generate some follow-up interest. It would be a huge accomplishment for the people we serve to get BCBS on board with covering crisis services or the integrated care model.

During a NASMHPD Meet-Me-Call, Commissioner Boswell shared that some preliminary statistics indicate even people who have insurance, for a variety of reasons, are not accessing mental health care until they've reached that crisis stage. A big part of what we want to try to do is get them into care before they reach that crisis stage.

- Divisional Reports -

Legislative & Constituent Affairs Report – Collier Tynes

Collier discussed the recently submitted ADMH Annual Legislative Agenda to the Governor's Office. The Department was asked to identify bills on the Agenda that would require legislative action and bills anticipated to be introduced this session that would impact the Department. There were only two bills identified on the Legislative Agenda that would require legislative action:

- The first bill is a repeal of superseded Statutes 15, 16, 20, 21 and 22. These statutes are full of antiquated language for commitment proceedings and are superseded by Rule 11 in the Alabama Rules of Criminal Procedures. The Administrative Office of the Court (AOC) also agrees with this analysis that these statutes are old and obsolete and don't follow the standards for commitment processes established in *Lynch v. Baxley*.
- The second bill is another legal request involving NGRI (Not Guilty by Reason of Insanity) and the right of appeal. This legislation would establish the right of appeal process for individuals adjudicated as NGRI. Currently, a federal Habeus Corpus proceeding is the only remedy available to correct errors and the ADMH has no right to appeal a denial in Alabama state courts.

There have been cases where the Agency has returned to the same Circuit Court numerous times where the individual's release continues to be denied. Individuals have been treated and professionals deemed them ready to be reintegrated and with no right to appeal, this takes up valuable bed space and creates more blockages in our facilities. In 2019, this bill was introduced, sponsored by Senator Cam Ward and carried by Representative Merika Coleman in the House, SB117. It ran out of time in the session and was not passed.

There were a few bills listed on the Legislative Agenda that we anticipate to be introduced this session that impact the Department. The 988 Telephone Surcharge Bill proposed by the 988 Study Commission was introduced last year. This bill was introduced as an effort to codify Alabama's crisis system of care as well as expanding it statewide through a sustainable funding stream, the same as funding for 911.

It quickly gained fast and diverse support, with seventeen bi-partisan co-sponsors and twelve statewide associations. Although it did not pass, several legislators are actively discussing reintroducing it. Chairman Reynolds, Senator Gudger and members of a recently established mental health legislative roundtable are publicly discussing reintroducing this bill. To date, we have the full continuum of crisis services available in 19 of Alabama's 67 counties and we continue to see the demand for this service.

The second piece of legislation we anticipate to be introduced this session that will impact the Department is the gaming or gambling legislation. There have been several recent media articles about Speaker Ledbetter's support of addressing gaming in our state. An ad hoc house committee has been actively working on a gaming bill and are strategically looking at the regulations and addressing the revenues.

The ad hoc committee inquired of ADMH about language regarding these revenues and the possibility of the department receiving 20 per cent of these revenues. In wrapping up the Legislative & Constituent Affairs report, Collier added there are no further details about this bill, and we will follow leads from the Governor's Office.

Collier communicated another initiative that she is proud to share involving the teamwork of several ADMH employees and collaboration across many state agencies to help ADMH facility staff regarding childcare needs. In several meetings, facility staff identified childcare as a need or struggle and a survey was drafted and disbursed. Staff were informed the survey was purposed to review organizational needs for childcare and potentially connect them with existing programs that they may not be aware of.

There was great participation in the survey and findings also revealed there is the need for summer and after-school care for kids in K-12 grades. Collaborative communication with all childcare-related state agencies was launched and findings showed that several state agencies deliver a wide scope of services, Department of Human Resources, Department Early Childhood Education, as well as the State Department of Education's summer and afterschool programs.

A meeting was held with each group and an inventory document created showing all the programs and offerings. With the assistance of Dr. Christine Rembert, Director of Facility Services, enrollment days were scheduled at each of the facilities with some of the agencies present so staff could present questions and view applications and eligibility requirements. These events showed facility staff the seriousness of our responsiveness to the critical needs they reported.

A document was created for the Tuscaloosa area staff that's very parent-centered. It is in chronological age order from birth to K12, showing what programs options and offerings are available and the possibility of some programs offering reduced costs based on income levels.

For the K-12 group, there are some unique summer and after-school initiatives happening and this document also outlines the cost, quality of the programs as well as links and contact information. As a result of our collaborative efforts, the Department of Human Resources has requested that we create this document for statewide application showing all the program offering.

- **Dave White commented that this program is groundbreaking and great work, not just for Tuscaloosa, but all of state government. Dave considers this a big deal, suggesting that contact be made with Nick Moore, Workforce Development, Governor's Office.**

Collier responded that State Personnel has asked about this initiative, and she is working on the document for them. Commissioner added that it's fascinating to learn that this information did not already exist somewhere, and people have to navigate multiple systems to learn about it. This was our learning opportunity in Tuscaloosa when it's really about putting all this information together and a good idea to share with other agencies such as DYS, ADOC, etc.

Onsite enrollment is another plus as well as Malissa Valdes suggestion this be included in the employee onboarding process when they're hired and once the document is complete, can be uploaded to our website. Dr. Cynthia Bisbee further suggested bringing in the 211 system as an additional resource.

Commissioner commented that this issue came out of the facility assessment and the fact that workforce development folks were looking at why some Alabamians were not going to work; it was due to the lack of accessible and affordable childcare.

MH/SU Division Report – Nicole Walden, Associate Commissioner

Opioid Settlement Fund & RFP

Associate Commissioner Walden opened her report with information on the Opioid Settlement Fund, the RFP and the \$8.5 million allocated to the Department of Mental Health.

ADMH was tasked with establishing a competitive grant process for the \$8.5 million. A/C Walden advised the Department looked at best practices and at what other states were doing to put together an RFP to be able to provide this money to individuals and agencies to provide services. The focus was on three areas:

- **Treatment services** – any individual with an opioid or stimulant use disorder. Stimulant use was included because when looking at overdoses across Alabama and nationally, opioid and stimulant use are tied together in a way not seen before and this funding would make a difference in both areas.
- **Prevention services** – no qualifying conditions as this is an across the board service for anyone, regardless of age, demographic or history of substance abuse.
- **Recovery support services** – any individual actively in recovery or is seeking to be in recovery.

Priority populations was another area of focus and ADMH looked at Alabama and national factors to determine what the priority populations should be, and they are as follows:

- Foster care or kinship issues – for children who have been affected through parents, grandparents or anybody involved in that system due to substance use.
- Justice-involved – any individual involved in the criminal justice system, incarcerated or not. This also applies to youth/adolescents in DYS custody or other agencies.
- Veterans
- Pregnant, parenting women and anyone who injects substances.
- Youth, adolescents and those transition aged individuals, between 18-24.
- Rural population – majority of our counties are rural.
- Elder citizens – there has been an increase in use in the later in age population.
- Any individual diagnosed with an opioid or stimulant disorder or at risk of developing a disorder.

In considering people who could respond to this RFP, ADMH wanted to broaden requirements that would not exclude people but attract those with experience.

There are four areas respondents/agencies can apply:

1. Those who have been certified by ADMH to offer treatment service
2. Those who have been certified by ADMH to provide prevention service
3. Those who have been approved by ADMH to provide recovery support services
4. Those who can be certified or approved by ADMH within four (4) months of receiving their award.

The RFP was posted November 16, 2023 with a 21-day turnaround and responses due back NLT December 8, 2023 with submission reviews to be done, December 19th - 20th. A significant volume of applications was expected so reviewers, identified through our Governors' Council as having expertise in treatment, prevention and recovery support services, were recruited to assist with reviews. Recommendations are anticipated to be ready the 1st week of January 2024 for presentation to the Opioid Oversight Commission.

Funding allocation of the \$8.5 million for the three areas, treatment, prevention and recovery support services was allocated the same as we allot our block grant money, state funding and discretionary grants with 70 per cent going to treatment/youth services (\$5.95 million), 20 per cent (\$1.7 million), and the remainder, about 10 per cent (\$850,000) to recovery support services.

➤ **Dr. Sandra Parker questioned when the funds will be distributed?**

A/C Walden responded that funds will be distributed as soon as ADMH can award the contract. Our rating is expected to be done by the end of December with submissions to the Opioid Oversight Commission in January 2024 and the Department's goal is to have a contract award ready by the end of January or first part of February 2024.

- **Dave White questioned why there is the need to submit the report to the Opioid Oversight Commission. Since ADMH appropriated the money, Mr. White questioned why ADMH could simply brief Representative Reynolds and Senator Gudger and proceed.**

Commissioner Boswell responded that Dave's suggestion was an option, however, in speaking with Representative Reynolds, Commissioner believes they want a working session. They have additional funds they have to appropriate, so they want to look at the full scope of what was submitted as they are aware there may be a request for more than \$8.5 million.

They want to look the full scope of what kinds of proposals came in as this will help them formulate how they will allocate the rest of the funding. A working session will also allow them to take a look at what we're recommending for the \$8.5 million as well as help them determine what they will do for future allocations.

- **Judge Sheri Friday questioned if these funds would be available for programs that involve dual-diagnoses?**

A/C Walden responded this is referred to as co-occurring and if someone presents a program who wants to treat this OUD or Stimulant disorder and they have an SMI and something else to go along with it, it will be looked at favorably. Commissioner Boswell expressed her concerns about the 19 presentations, that there are people who did not hear the first round of guiding principles that were laid out at the very first meeting.

Commissioner suggested these principles should be posted on the ADMH website where people could see the first and most important guiding principle is this money is to be used to save lives. This money is not designed to be used to supplant existing funds; but add to what is already out there, so having these principles available for referencing on the website would be helpful.

Many faith-based organizations presented; however, all are not equal. Some programs are certified through the Department, and some are doing best-practices, doing a good job and may or may not be certified through the Department. There's another category of programs that may be doing some good work, but the work is not considered best-practice.

DDD –Kathy Sawyer, Associate Commissioner

Due to a family emergency, Associate Commissioner Sawyer was absent. Commissioner Boswell presented highlights from DDD Divisional Report beginning with information regarding individuals who have both a mental illness and developmental disability.

- Challenging placements were addressed where ADMH placed 8 children and 5 adults who were in DHR custody since August into special DDD residential services.

- We are systematically working through the list and are working to stand up some of those crisis services beds. Glenwood has agreed to add 8 child and adolescent beds and 8 adult beds. AltaPointe has also agreed to add 2 child and adolescent evaluation beds in addition to Project Transition who will be working with our community providers to build that provider capacity.
- Waiver Amendments were turned in and the legislature approved funding for rate increases on the DD side of the house and the waivers had to be amended to increase those rates. The process is ongoing with the expectation to have the amendments back for the ID and LAH waivers by the end of this month and are awaiting final review of the CWP Waiver amendment.

Office of Public Information – Malissa Valdes, Public Information Officer

Melissa updated the group in showing the Opioid Settlement Grant RFP referenced by A/C Walden as it's posted on the ADMH website's homepage under Contract Opportunities.

She showcased photos from the October 17th Hope Pointe Crisis Center opening ceremony. There were nearly 200 attendees, and everyone had a wonderful time.

Malissa highlighted the new 988 Suicide Prevention Campaign, a paid campaign financed through federal funds allotted to a grant in relation to 988, that was spearheaded by Child and Family Services and Prevention, will kick off in January 2024. The campaign is an expansion of an earlier '*There's no shame in sharing.....*' theme with visual graphics, radio scripts and social media visual videos.

Division of Administration – LaVonda Blair, Associate Commissioner

Bureau of Human Resources:

ADMH continues to utilize contract staffing to fill direct care positions at our facilities and as of October 27, 2023, there was a total of 143 contract workers employed. Recruitment has been successful regarding essential leadership roles with the Harper Center's Facility Director starting on July 16th and their Director of Nursing started on September 1st. Taylor Hardin's Director of Nursing started on November 1st. temporary staffing as of August 1st.

Bureau of Finance:

- During the 13th Accounting period, the Bureau continued to process payments timely with 7,594 documents and 1,596 payments for a total of \$49.6 million.

Land and Facilities Management Office:

- Life Safety conducted 4,152 inspections for FY2023.
- Land Sales/Leases, for FY2023, generated \$1.178 million through the management of oil/gas/mineral leases, hunting leases, timber sales and other real estate leases.

Bureau of Information Technology:

- ADMH's Bureau of Information Technology (BITS) upgraded more than 15 servers to Server 2022.
- Laptops, desktops and other computer equipment has been ordered for our facilities and the deployment of new equipment is underway.
- The Central Office will be transitioning to WebEx Cloud calling.
- The Bureau has hired an Information Security Officer who is tasked with implementing the IT Security Plan.
- An Information Technology Steering Committee has been formed to prioritize and monitor agency information technology projects.

Office of OBRA PASSR (Omnibus Budget Reconciliation Act) PASSR Preadmission Screening and Resident Review):

- OBRA staff is currently providing Public Health Emergency Covid-10 transition guidance for hospitals and nursing homes.
- This Office manages a toll free (1-800-PASSR), a technical support line for all 67 Alabama counties.
- The PASSR Program processed 2,443 Level II Screening applications to determine the appropriate nursing facility level of care.
- OBRA processed 459 significant change applications to determine continued nursing home eligibility and the need for mental health support.

Nurse Delegation Program (NDP):

- The Office of Nurse Delegation trained 32 nurses on becoming a Delegating Nurse, updated 18 existing MAS Nurses on program changes and educated 19 Case Managers on TB requirements for ADMH-DD.
- a toll free (1-800-PASSR), a technical support line for all 67 Alabama counties.
- Nurse Delegation and Staff Development collaborated on revising the MAC 1 Training in the Relias eLearning system, including adding a pre-examination and updating the Module 1 Content to help improve learner comprehension.

Office of Policy & Planning:

The Office of Policy and Planning which includes the Office of Certification Administration (OCA) hired a new Certification Director, Mr. Fred McCoy, III. During this period, OCA processed 227 applications and processed 64 site visit reports.

➤ **Dave White asked to define the acronym OBRA PASSR.**

Commissioner responded with the explanation that OBRA stands for Omnibus Budget Reconciliation Act and PASSR, Preadmission Screening and Resident Review). OBRA administers this program for Medicaid with the Department screening and referring individuals for eligibility admission into a nursing home setting.

Individuals are screened for developmental disabilities and mental illness as nursing homes are not equipped to address mental health issues for individuals who are not stable, on medication or in need of some kind of specialized services. Through a fairly large contract, this program is very structured with a group of contracted psychiatrists who actually perform the evaluations.

Stakeholder Discussion

No discussion

Other Business

Commissioner informed the Board that Chief of Staff, Ada Katherine van Wyhe, has left the Department. As of November 1st, she transferred to the Alabama Association of School Boards.

Adjournment

There being no further business before the group, the meeting adjourned at 11:43am.

The next BOT meeting is scheduled for Friday, **February 16, 2024.**

Respectfully Submitted:

_____ Date: _____
Kimberly G. Boswell
Secretary of the Board and Commissioner

_____ Date: _____
Donna Foster, Vice-Chair of the Board

REPORT SUMMARY:

This report provides the Alabama Department of Mental Health (ADMH) Board of Trustees updates on the following matters:

- 2024 Regular Session
- Governor’s Recommended Budgets to the Legislature
- Alabama Opioid Settlement Oversight Commission Update

2024 Regular Legislative Session:

The Alabama Legislature convened for the 2024 Regular Legislative Session on February 6, 2024. That evening, the Governor provided her State of the State.

In her remarks, Governor Ivey endorsed the following bills that will be major topics of conversation this session:

BILL NUMBER	SUBJECT	SUMMARY
SB 1 Gudger	Elections	This bill prevents ballot harvesting. The bill has the language negotiated by ADMH last session, which allows those with disabilities to receive voting assistance.
HB 152 Blackshear	Gaming “Alabama Gaming Control Act”	This bill prevents illegal gambling and regulates forms of legal gaming, including a statewide education lottery. It also establishes the Gaming Trust Fund, where 95% of gaming taxes and license fees are collected. Administration and distribution of the Gaming Trust Fund would be through an annual, independent appropriation bill (like the ETF or General Fund bills) <i>for non-recurring, non-education purposes only</i> . Mental health and developmental disabilities are listed as appropriate expenditures for the Gaming Trust Fund. This bill also directs up to \$200,000 of the unclaimed prize money to go to ADMH “for the treatment of compulsive gambling disorder and educational programs related to the disorder.”
HB 129, SB 61 Garrett, Orr	School Choice “The Choose Act”	This bill establishes \$7,000 Education Savings Accounts (ESAs), and the Governor has noted this as her number one legislative priority. The program will begin in the 2025-2026 Academic Year. For the first two years, it will assist low-income families, and the first 500 tax credits would be reserved for eligible special-needs students with IEPs or 504 plans. Beginning its third year, it will assist all families.

The ADMH Legislative and Constituent Affairs Director is reviewing all pre-filed and filed bills daily. To date, ADMH is tracking 84 bills related to mental illness, developmental disabilities, child and family services, healthcare, human resources, state agencies, and other topics. This number will continue to grow as session progresses and more bills are filed each legislative day.

Governor’s Recommended Budgets to the Legislature:

On February 7, 2024, the Governor submitted her recommended FY 2025 General Fund and Education Trust Fund (ETF) Budgets to the Alabama Legislature. The table below outlines changes in each budget from FY 2024.

BILL NUMBERS	SUBJECT	SUMMARY
SB 67 , Albritton	FY 25 General Fund Budget	<p>ADMH received a \$11,839,145 increase over FY 24 in the Governor’s recommended General Fund Budget. This includes the following:</p> <ul style="list-style-type: none"> - \$9,839,145 to staff and support Taylor Hardin, as requested by ADMH in accordance with the ADAP consent decree and settlement agreement - \$2,000,000 to forensic service improvements at Taylor Hardin <p>Additional increases were provided for the proposed 2% State Employee COLA, the proposed SEIB increase, as well as inflationary operational costs.</p> <p>The Governor recommended level funding for all other General Fund programs and did not recommend any decreases.</p>
SB 71 , Albritton	FY 24 General Fund Supplemental	<p>ADMH received \$9,400,000 in the Governor’s recommended General Fund FY 24 supplemental budget. This includes the following:</p> <ul style="list-style-type: none"> - \$8,400,000 for Taylor Hardin emergency staffing, as requested by ADMH - \$1,000,000 for Bullock County Hospital bridge money to keep 31 psych beds operational while the hospital converts to the CMS Rural Emergency Hospital (REH) model, as requested by ADMH
HB 145 , Garrett	FY 25 Education Trust Fund Budget	<p>ADMH received an increase of \$156,242 in the Governor’s recommended ETF FY 25 Budget. This includes the following increases:</p> <ul style="list-style-type: none"> - \$81,242 for a 2% employee pay raise - \$25,000 for Camp ASCCA - \$25,000 for Rainbow Omega <p>The Governor recommended level funding for all other ETF programs and did not recommend any decreases.</p>
HB 144 , Garrett	FY 24 Education Trust Fund Supplemental	<p>ADMH did not receive appropriations in the FY 24 ETF Supplemental Budget.</p>

Alabama Opioid Settlement Oversight Commission Update:

During the 2023 Legislative Session, \$8.5 million in Opioid Settlement Funds were appropriated to ADMH “to administer a grant program.” ADMH successfully developed, implemented, and awarded a RFP process that received 52 proposals and awarded 33 organizations with the first round of settlement dollars.

On January 31, 2024, Commissioner Boswell presented the RFP process to the Commission, and award notifications were sent via U.S. certified mail. The next Commission Meeting will be February 12 at 1:00 p.m.

MHSU BOT Report February 2024

ADMH Board of Trustees Report



February 16, 2024

Crisis Centers For November and December 2023, 1042 evaluations were completed, and 878 individuals were admitted for care at the 5 Crisis Centers. (Please note January data not completed) SpectraCare in Dothan continues to buildout facility with delays due to construction and supply chain issues regarding specialized life safety material with the opening now tentatively scheduled completion May 1, 2024. (System of Care & Partnerships)

Mobile Crisis Services (MCS) CMS has approved the State Plan Amendment for Mobile Crisis Services with a retroactive effective date of October 1, 2023. ADMH and AMA have established a work team which is in the process of updating the Procedure and Services Codes for reimbursement of Mobile Crisis Services. (System of Care & Partnerships, Knowledge & Awareness)

Peer Programs The Office of Peer Programs has begun preparing for the annual Alabama Institute of Recovery, which will take place April 1st through the 3rd at Shocco Springs Conference. Trainings for youth (7 trained), parent (3 trained), and substance use peer specialists (37 trained) were held this quarter. The Office is also preparing for the Substance Use Peer Conference the final week of March. This conference provides professional development opportunities for peers working in substance use recovery settings. (Peer & Family Engagement, Professional Workforce)

Child & Family Services ADMH was selected to participate in the National Governors Association Center for Best Practices Policy Academy to Drive Thriving Youth Mental Health and Wellbeing. The desired outcome of the participation and planning is to equip and empower students, families, and communities of Alabama with resiliency and the skills to maintain overall mental wellbeing. ADMH 988 No Shame Campaign has launched statewide. The presence of the campaign will enhance and expand awareness of mental health, substance use, suicide, and necessary resources. Agency for Substance Abuse Prevention hosted its inaugural nationwide Faith-Based Support Specialist Conference in Birmingham in December 2023. Guest speakers included the Assistant Secretary for SAMHSA and Commissioner Boswell. (System of Care & Partnerships; Knowledge & Awareness; Peer & Family Engagement; Professional Workforce).

Office of Deaf Services Director Steve Hamerdinger will retire after 21 years at the helm of one of the nation's premier programs for deaf people with mental illness. Amanda Somdal will assume the Director's role March 1. (Professional Workforce).

State Hospitals Workforce staff development continues remains in the forefront for facilities' leadership. The Alabama Career Essentials (ACE) program, a partnership of ADMH and Alabama Community College System (ACCS) has had over 100 hospital employees complete the program since initial cohort on October 16, 2023. The Mental Health Worker/Tech course has been completed through an extension of the partnership with ACCS and the inaugural cohort will begin on February 16, 2024. (System of Care & Partnerships, Organizational Health, Professional Workforce).

Substance Use Treatment The go-live date for the Building Bridges project for Walker County Jail is March 1, 2024. The jail and Birmingham Fellowship House will be hosting a lunch and learn on February 29th with the community, local judges and corrections. The program will provide medication assisted treatment services to individuals in the jail. (System of Care & Partnerships, Knowledge & Awareness)

CCBHC The Steering Committee has approved the Prospective Payment System (PPS-1) and Triggering Events that will drive Alabama's CCBHC model. In addition, they approved the required Evidence-based practices and required screening tools that all CCBHC providers must utilize; required populations of focus; Board Governance/Advisory Committee requirements; and the certification flowchart. The provisional certification process is being developed for Tier I providers. A concurrent certification is being developed for other providers who will convert to the CCBHC model after July 2024. ADMH is working with consultants to write the application for the 2024 CCBHC Demonstration (due March 20, 2024). (System of Care & Partnerships, Professional Workforce, Knowledge & Awareness)

Developmental Disabilities Division

February 16, 2024

Current Waiver Waiting List: 1,610

Waiver Enrollments	Counties	No. Enrolled
Intellectual Disability Waiver	All 67 Counties	4,352
Living at Home Waiver	All 67 Counties	506
Community Demonstration Waiver Program	Baldwin, Elmore, Houston, Jefferson, Limestone, Madison, Mobile, Montgomery, Morgan, Tuscaloosa, and Walker	434

HCBS Compliance Status

HCBS Setting Type	Number of Settings	Number with Corrective Actions	Number Deemed Compliant	Number Deemed Non-Compliant
Residential	640	100	640	0
Non-residential	54	11	54	0

Other Initiatives

- **New Crisis Residential/Evaluation Beds and Services** opened: Glenwood (8 Children and 8 Adult Beds); Baypointe (2 Children Evaluation Beds); Bullock Hospital (2 Additional Adult Stabilization Beds) and Project Transition opened 10 Crisis Coordination Cases.
- **Rate Increases/Waiver Amendments:** The ID and LAH waiver rate increases for Direct Support and Support Coordination Services were approved by Medicaid and providers began billing new rates in January 2024. The ID, LAH and CWP Waiver Amendments are still under review by Medicaid and CMS.
- **New Certified Beds and Services:** In the last quarter, 35 new residential beds were certified across the state: Region I: 23; Region II: 2; Region III: 5; Region IV: 3; and Region V: 2.
- **New ADMH-DDD Support Home Model** was approved to be funded with all state dollars.



Office of Public Information

February 16, 2024

Supporting the ADMH Strategic Plan

System of Care & Partnerships & Knowledge & Awareness

Alabama Crisis System of Care

SpectraCare will open in late March or April, with a large reception and ribbon cutting. We are working to create promotional information and plan the event.

Knowledge & Awareness

The new 988 campaign in full swing with paid media buys on radio, social media, digital billboards and printed materials that are being sent to all CMHCs, chambers of commerce, social orgs like the YMCA, and all partners and providers of the Dept.

DD Awareness Month is March and we are soliciting success stories from providers to create social media posts and will promote the month through a news release, social media, and interviews.

MH Awareness Month is May and we are formulating a Comm Plan, and preparing for events.

Knowledge & Awareness

New items such as ChapStick, hand sanitizer and tabletop banners have been designed and purchased to better showcase the dept. at events and conferences.

Knowledge & Awareness

A mental health museum is in *the punch list phase*, located at the Old Bryce Hospital. The museum plans to open in March 2024. The museum will be heavily promoted, with a reception planned as well.

Knowledge & Awareness

We have assisted with many presentations hosted by the Commissioner, including the FY25 Budget, Opioid Settlement Commission, Rotary Club, and others.

Professional Workforce

Initial planning of an ADMH All Staff Conference has commenced. Date is Oct 1-2, 2024.

New workforce development social media graphics and flyers have been created for ADMH as a whole, and each facility in Tuscaloosa to showcase increased rates of pay and benefits, to recruit more staff.

The **Division of Administration** provides vital support to the Alabama Department of Mental Health's facilities, Central and Regional Offices.

BUREAU OF HUMAN RESOURCES (*PROFESSIONAL WORKFORCE*)

- As of the week ending January 5, 2024, contract workers through Maxim Healthcare Staffing were as follows: Bryce Hospital **52**, Harper Center **28**, and Taylor Hardin **53**, for a total of **133** contract workers.
- To continue to stabilize the workforce, the following actions have been successfully implemented to improve recruitment and retention:
 - Established temporary hourly Mental Health Worker, LPN, and RN positions and increased the pay grades for LPN I and LPN II, established a new Support Coordinator series for the Division of Developmental Disabilities Community Waiver Program, retitled the Security Officer series classifications to Police Officer, and modified the MH Social Worker III minimum qualifications.

BUREAU OF FINANCE (*ORGANIZATIONAL HEALTH*)

- Act 2023-500 paved the way for the Comptroller's Prior Year Payment (PYP) process, which allows State Agencies to submit undisputed prior year claims to the Comptroller's Office instead of the Board of Adjustment (BOA). The first batch of payments are expected to be received mid-February 2024.

LAND AND FACILITIES MANAGEMENT OFFICE (*ORGANIZATIONAL HEALTH*)

- For Fiscal Year 2024 to date: Life Safety conducted 1,212 inspections. Land Sales/Leases income produced through the management of Oil/Gas/Mineral leases, hunting leases, timber sales, and other real estate leases generated \$533,520.63.

BUREAU OF INFORMATION TECHNOLOGY (BITS) (*ORGANIZATIONAL HEALTH*)

- Electronic Health Record (EHR) Customer Relationship Management has been successfully upgraded to the newest version.
- BITS - Information Security Officer is working on an IT Security plan and remediations.

OMINBUS BUDGET RECONCILIATION ACT FOR THE OFFICE OF PRE-ADMISSION

SCREENING AND RESIDENT REVIEW (OBRA PASSR) (*SYSTEM OF CARE & PARTNERSHIPS*)

- The OBRA Program provided PASRR Training Courses to over one hundred nursing home, hospital, home health, hospice, and state agency stakeholders on PASRR regulatory requirements.
- The PASRR Program processed 2,326 Level II Screening Applications to determine the appropriateness of nursing facility level of care.

NURSE DELEGATION PROGRAM (NDP) (*PROFESSIONAL WORKFORCE*)

- The Office of NDP trained 38 Nurses on Becoming a Delegating Nurse and updated 36 existing Medication Assistance Supervising (MAS) Nurses on program changes. NDP MAS nurse curriculum was created and approved by Alabama Board of Nursing (ABN).
- The NDP and Staff Development Offices revised/updated the Medication Assistance Certified (MAC) Worker I Training courses. ABN has approved courses 1 and 2.

OFFICE OF POLICY AND PLANNING (*SYSTEM OF CARE & PARTNERSHIPS, ORGANIZATIONAL HEALTH*)

- The Office of Certification Administration processed 294 provider certification applications and 85 site visit reports.
- The Office of Policy and Planning has collaborated with the Certified Community Behavioral Health Clinic (CCBHC) Organizational Authority and Network Adequacy Team to establish the ADMH CCBHC Preliminary Certification Application (one pager) and the ADMH CCBHC Certification Application Process Flowchart.

Stakeholder Discussion

Other Business

Adjournment

There being no further business before the group, the meeting adjourned at

The next BOT meeting is scheduled for Friday, **May 10, 2024.**

Respectfully Submitted:

_____ Date: _____

Kimberly G. Boswell
Secretary of the Board and Commissioner

_____ Date: _____

Donna Foster, Vice-Chair of the Board