

**BOARD OF MENTAL HEALTH AND
SUBSTANCE ABUSE SERVICES**

March 28, 2014

**Department of Mental Health
And Substance Abuse Services
Oklahoma City, Oklahoma**

Board members present:

J. Andy Sullivan, M.D., Chair
Brent Bell, D.O.
Joel Carson
Bruce Fisher
Henry Haynes, Ed.D.
Mary Anne McCaffree, M.D.
Paul Pierce, M.D.
Major Edward Pulido
Ronna Vanderslice, Ed.D.

Others present:

Commissioner, Terri White, ODMHSAS
Durand Crosby, ODMHSAS
Carrie Slatton-Hodges, ODMHSAS
Steve Buck, ODMHSAS
Angie Patterson, ODMHSAS
Michelle Lane, ODMHSAS
Bryan Hiel, ODMHSAS
Jason Maddox, ODMHSAS
Michaelle Statham, ODMHSAS
John Hostetler, ODMHSAS
Herman Green, ODMHSAS
Gary Wilburn, Edwin Fair CMHC
Kelly Smith Troutman, Edwin Fair CMHC
Jill Newman, Hope Revealed Mental
Health Center
Beverly Pittman, Family Recovery
Counseling Center
Jvon & Pat Cook, 3C Old Fashion
Boarding Home
Aimee Ahpeatone, Mosaic Mental
Health Center
LaDonna White

Carol Ladd, ODMHSAS
John Hudgens, ODMHSAS
Jeff Dismukes, ODMHSAS
Gretchen Geis, ODMHSAS
Juarez McCann, ODMHSAS
Pam Gaddis, ODMHSAS
Deneka Cain, ODMHSAS
David Heath Holt, ODMHSAS
Dewayne Moore, ODMHSAS
Yvon Fils-Aime, ODMHSAS
Joseph Mickey, ODMHSAS
Serena Ward, Hope Revealed
Mental Health
Miranda Bergman, Mosaic Mental
Health Center
Neeley Snyder, Family Recovery
Counseling Center
Kenny James, P.C.
Destry Newman, Hope Revealed
Mental Health Center
Brian Wolff, Duncan Community
Residence

CALL TO ORDER

Dr. Sullivan called the meeting to order and declared a quorum was present.

APPROVAL OF MINUTES OF THE JANUARY 24, 2104, BOARD MEETING

Mr. Carson moved to approve the January 24, 2014, minutes. Dr. Vanderslice seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

DISCUSSION AND POSSIBLE ACTION REGARDING PROGRAM CERTIFICATION RECOMMENDATIONS

Alcohol and Drug Treatment Programs

A. Permit for Temporary Operation

Permit for temporary operation was recommended for: Crossway Counseling Services, L.L.C.; Kenny James, P.C.; Providence Service Corporation of Oklahoma, Ada; Providence Service Corporation of Oklahoma, Durant and Madill; and Providence Service Corporation of Oklahoma, Hugo, Antlers and Idabel.

Mr. Fisher moved to approve temporary certification for the above-referenced programs. Dr. Pierce seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

B. One-Year Certification

One-year certification was recommended for: A Better Choice-Counseling Services, L.L.C.; Center Point, Inc., Tulsa; and Eagle Ridge Institute dba Eagle Ridge Family Treatment Center.

Dr. Vanderslice moved to approve one-year certification for the above-referenced programs. Dr. Pierce seconded the motion

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

C. Two-Year Certification

Two-year certification was recommended for: A Chance to Change Foundation; Jim Wallace & Associates, Inc. dba The Jetty Counseling Center; and New Alternatives Center, L.L.C.

Dr. Pierce moved to approve two-year certification for the above-referenced programs. Dr. McCaffree seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

D. Certification with Special Distinction

Certification with special distinction was recommended for: Family Recovery, Inc. dba Family Recovery Counseling Center.

Dr. Vanderslice moved to approve certification with special distinction for the above-referenced program. Dr. Pierce seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

Outpatient Mental Health Treatment Programs

A. Permit for Temporary Operation

Permit for temporary operation was recommended for: Counseling Solutions & Interventions, Inc.; Full Life Family Resource Center, L.L.C.; Fundamentals Counseling Services, L.L.C.; Hope Revealed Behavioral Health Center, L.L.C.; Legacy Family Intervention Services, Inc.; LeQuita J. Joyce, Inc. dba Roland Family Counseling Center; Mosaic Mental Health, L.L.C.; Promises, Inc.; Providence Service Corporation of Oklahoma, Ada; Providence Service Corporation of Oklahoma, Durant and Madill; Providence Service Corporation of Oklahoma, Hugo, Antlers and Idabel; and Serenity Counseling, Inc.

Mr. Fisher moved to approve the permit for temporary operation for the above-referenced programs. Dr. Pierce seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

B. One-Year Certification

One-year certification was recommended for: Community Counselors Group, Inc.; and NCC Partners, L.L.C. dba Norman Counseling Clinic.

Dr. Pierce moved to approve the one-year certification for the above-referenced programs. Dr. McCaffree seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

Programs of Assertive Community Treatment

A. Certification with Special Distinction

Certification with special distinction was recommended for: Edwin Fair Community Mental Health Center, Inc.

Dr. Vanderslice moved to approve the certification with special distinction for the above-referenced program. Dr. Pierce seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

Dr. Sullivan recognized Edwin Fair Community Mental Health Center, Inc., for scoring 100% in all categories at their site visit. They are eligible to receive a refund on their certification fees.

Community Residential Mental Health Programs

A. Certification with Distinction

Certification with distinction was recommended for: Burdine, Inc. dba New Beginnings Residential Care Home; Chase E Inc. dba 3C Old Fashion Boarding Home; Copp’s Residential Care, Inc.; Dow Residential Care Facility, Inc.; Duncan

Community Residence, Inc.; High Cedar Residential Care; and Sequoyah Mental Health Facility, Inc. dba Sequoyah Residential Facility.

Mr. Fisher moved to approve certification with distinction for the above-referenced programs. Dr. Bell seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

Dr. Sullivan recognized Burdine, Inc. dba New Beginnings Residential Care Home; Chase E Inc. dba 3C Old Fashion Boarding Home; Dow Residential Care Facility, Inc.; and Duncan Community Residence, Inc., for scoring 100% in all categories at their site visit. They are eligible to receive a refund on their certification fees.

DISCUSSION REGARDING RULES

Steven Buck, Deputy Commissioner of Communications and Prevention Services, stated that the Department of Mental Health and Substance Abuse Services, as part of the requirements set forth in the Administrative Procedure Act, has gone through a period of rulemaking/revisions for review and approval by the Board members. The Board's approval of these rules is part of the formal process to implement new rules and rule revisions. Should the Board choose to endorse the rules that are being presented for consideration, they would then be submitted to the Legislature. The Legislature will go through their process for rule changes/revisions. Deputy Commissioner Buck stated that this is the first year that we are operating under this new process for rule changes. Deputy Commissioner Buck gave a brief explanation to the Board members of the new legislative process.

Deputy Commissioner Buck presented the following chapter changes for the Board's consideration:

CHAPTER 1. ADMINISTRATION

Deputy Commissioner Buck stated that the public was given the opportunity to provide written comments, and a public hearing was held to allow further questions and comments to the proposed changes to this chapter. Such comments were provided to the Board for their consideration. The proposed rule revisions to Chapter 1 are part of the Department's review of Title 450. The proposed rules are intended to clarify existing rules, improve processes, and are intended to comply with statutory changes.

Summary:

Proposed Revisions to Chapter 1 include deleting references to Behavioral Health Rehabilitation Specialists (BHRS) since the provider designation will no longer exist after July 1, 2014, at which point all providers of psychosocial rehabilitation services must be a Licensed Behavioral Health Professional (LBHP) or certified through ODMHSAS as a Behavioral Health Case Manager II (CM II). Other revisions include updates to terminology based on previous rule changes as well as administrative changes to certain provider certification processes.

Dr. McCaffree moved to approve Chapter 1. Dr. Bell seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

CHAPTER 16. STANDARDS AND CRITERIA FOR COMMUNITY RESIDENTIAL MENTAL HEALTH FACILITIES

Deputy Commissioner Buck presented Chapter 16 rule changes regarding standards and criteria for community residential mental health facilities. Deputy Commissioner Buck stated that the public was given the opportunity to provide written comments, and a public hearing was held to allow further questions and comments to the proposed changes to this chapter. Such comments were provided to the Board for their consideration.

Summary:

In accordance with the Administrative Procedures Act the proposed rule revisions to Chapter 16 are part of the Department’s review of Title 450. The proposed rules clarify existing rules.

Proposed revisions to Chapter 16 are made to reflect changes related to licensure of residential care administrators through the Oklahoma State Board of Examiners for Long Term Care Administrators (OSBELTCA).

Dr. Pierce moved to approve Chapter 16. Dr. McCaffree seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

CHAPTER 17. STANDARDS AND CRITERIA FOR COMMUNITY MENTAL HEALTH CENTERS

Deputy Commissioner Buck presented Chapter 17 rule changes, that are to be considered, to the Board.

Summary:

Deputy Commissioner Buck stated that the public was given the opportunity to provide written comments, and a public hearing was held to allow further questions and comments to the proposed changes to this chapter. Such comments were provided to the Board for their consideration. The proposed rule revisions to Chapter 17 are part of the Department’s review of Title 450. The proposed rules are intended to clarify existing rules, improve processes, and are intended to comply with statutory changes.

Proposed revisions to Chapter 17 are made to clarify that, in addition to case managers, licensed behavioral health professionals (LBHPs) and Certified Alcohol and Drug Counselors (CADCs) can provide behavioral health case management without certification. Rules are also revised to reflect that a Young Adult in Transition includes children 16 – 18 with Serious Emotional Disturbance (SED) and adults 18 – 25 with Serious Mental Illness (SMI). Community Mental Health Center (CMHC) certification standards are revised to incorporate standards and criteria for gambling disorder treatment services as optional services within CMHCs. Rules are also revised throughout to update terminology to reflect recent changes to the Diagnostic and Statistical Manual of Mental Disorders as well as to identify certification standards that are so critical to the operation of a CMHC that failure to meet the standard would be grounds for immediate suspension, denial or termination of certification.

Dr. Pierce moved to approve Chapter 17. Dr. McCaffree seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

CHAPTER 18. STANDARDS AND CRITERIA FOR ALCOHOL AND DRUG TREATMENT SUBSTANCE RELATED AND ADDICTIVE DISORDER TREATMENT PROGRAMS SERVICES [AMENDED]

Deputy Commissioner Buck presented Chapter 18 rule changes, that are to be considered, to the Board.

Summary:

Deputy Commissioner Buck stated that the public was given the opportunity to provide written comments, and a public hearing was held to allow further

questions and comments to the proposed changes to this chapter. Such comments were provided to the Board for their consideration. The proposed rule revisions to Chapter 18 are part of the Department's review of Title 450. The proposed rules are intended to clarify existing rules, improve processes, and are intended to comply with statutory changes.

Proposed revisions to Chapter 18 are made to update terminology and definitions to encompass more addiction disorders, rather than just drugs and alcohol, as well as to incorporate changes made to the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM). Proposed rules also incorporate certification standards and criteria for gambling disorder treatment services as optional services for entities certified under Chapter 18. Further, revisions add more clarity and detail to service requirements in residential levels of treatment, including qualified providers of each service. Revisions also identify certification standards that are so critical to the operation of the entity that failure to meet the identified standards would be grounds for immediate suspension, denial or revocation of certification.

Dr. Bell moved to approve Chapter 18. Dr. McCaffree seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

CHAPTER 23. STANDARDS AND CRITERIA FOR COMMUNITY-BASED STRUCTURED CRISIS CENTERS

Deputy Commissioner Buck presented Chapter 23 rule changes, that are to be considered, to the Board.

Summary:

Deputy Commissioner Buck stated that the public was given the opportunity to provide written comments, and a public hearing was held to allow further questions and comments to the proposed changes to this chapter. Such comments were provided to the Board for their consideration. The proposed rule revisions to Chapter 23 are part of the Department's review of Title 450. These actions are intended to create standards and criteria for urgent recovery clinic services and distinguish these services from traditional facility based crisis stabilization services. Other proposed revisions clarify existing rules and ensure compliance with statutory provisions.

Proposed revisions to Chapter 23 include an update to the definition of "Emergency Detention" to correspond with changes made to Oklahoma Statute 43A, as well as to incorporate new certification standards and criteria related to

the use of technology. Proposed revisions also create two levels of care within Community Based Structured Crisis Centers (CBSCC): 1) facility based crisis stabilization for overnight crisis stabilization stays; 2) Urgent Recovery Clinic Services which provide up to 23 hours and 59 minutes of crisis intervention. Revisions also identify certification standards that are so critical to the operation of the entity that failure to meet the identified standards would be grounds for immediate suspension, denial or revocation of certification.

Dr. Pierce moved to approve Chapter 23. Dr. McCaffree seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

CHAPTER 24. STANDARDS AND CRITERIA FOR COMPREHENSIVE COMMUNITY ADDICTION RECOVERY CENTERS

Deputy Commissioner Buck presented Chapter 24 rule changes, that are to be considered, to the Board.

Summary:

Deputy Commissioner Buck stated that the public was given the opportunity to provide written comments, and a public hearing was held to allow further questions and comments to the proposed changes to this chapter. Such comments were provided to the Board for their consideration. The proposed rule revisions to Chapter 24 are part of the Department's review of Title 450. The proposed rules clarify existing rules, improve existing processes and are intended to comply with statutory changes.

Proposed revisions to Chapter 24 include changes to terminology based on recent updates to the Diagnostic and Statistical Manual of Mental Disorders (DSM) as well as to incorporate new certification standards and criteria related to the use of technology. Proposed revisions also eliminate details for levels of care and instead are cross referenced to Chapter 18 as applicable. Revisions also identify certification standards that are so critical to the operation of the entity that failure to meet the identified standards would be grounds for immediate suspension, denial or revocation of certification.

Dr. Pierce moved to approve Chapter 24. Dr. Haynes seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

CHAPTER 27. STANDARDS AND CRITERIA FOR MENTAL ILLNESS SERVICE PROGRAMS

Deputy Commissioner Buck presented Chapter 27 rule changes, that are to be considered, to the Board.

Summary:

Deputy Commissioner Buck stated that the public was given the opportunity to provide written comments, and a public hearing was held to allow further questions and comments to the proposed changes to this chapter. Such comments were provided to the Board for their consideration. The proposed rule revisions to Chapter 27 are part of the Department's review of Title 450. The proposed rules clarify existing rules and are intended to comply with statutory changes.

Proposed revisions to Chapter 27 include changes to terminology based on recent updates to the Diagnostic and Statistical Manual of Mental Disorders (DSM) as well as update terminology and requirements related to the provision of case management services to comply with rule revisions made to other chapters during the 2013 legislative session. Revisions also identify certification standards that are so critical to the operation of the entity that failure to meet the identified standards would be grounds for immediate suspension, denial or revocation of certification.

Dr. Pierce moved to approve Chapter 27. Dr. McCaffree seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

CHAPTER 50. STANDARDS AND CRITERIA FOR CERTIFIED BEHAVIORAL HEALTH CASE MANAGERS

Deputy Commissioner Buck presented Chapter 50 rule changes, that are to be considered, to the Board.

Summary:

Deputy Commissioner Buck stated that the public was given the opportunity to provide written comments, and a public hearing was held to allow further questions and comments to the proposed changes to this chapter. Such comments were provided to the Board for their consideration. The proposed rule revisions to Chapter 50 are part of the Department’s review of Title 450. The proposed rules clarify existing rules and are intended to comply with statutory changes and legislative intent.

Traylor Rains, Director of Policy and Planning, gave an overview of proposed changes to Chapter 50, regarding the public hearing process. Proposed revisions to Chapter 50 include certification for case managers. Mr. Rains stated that the proposed revisions to Chapter 50 include changes to Case Manager (CM) certification requirements which reflect legislative intent expressed during the 2013 legislative session. These changes would allow individuals with degrees in education to be eligible for CM certification through ODMHSAS without an additional nine hours of coursework in a behavioral health related field. Changes would also make eligible for CM certification, individuals who have non-behavioral health related bachelor's or master's degrees, but who have a Children's Certificate in Psychiatric Rehabilitation from the US Psychiatric Rehabilitation Association as well as individuals who are actively progressing toward obtaining a behavioral health related Master's or Doctoral degree.

Dr. McCaffree moved to approve Chapter 50. Dr. Pierce seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

CHAPTER 53. STANDARDS AND CRITERIA FOR CERTIFIED PEER RECOVERY SUPPORT SPECIALISTS

Deputy Commissioner Buck presented Chapter 53 rule changes, that are to be considered, to the Board.

Summary:

Deputy Commissioner Buck stated that the public was given the opportunity to provide written comments, and a public hearing was held to allow further questions and comments to the proposed changes to this chapter. Such comments were provided to the Board for their consideration. The proposed rule revisions to Chapter 53 are part of the Department’s review of Title 450. The proposed rules clarify existing rules and are intended to comply with statutory changes.

Proposed revisions to Chapter 53 include incorporating language that was added during the 2013 legislative session that allows an individual to become certified as a Peer Recovery Support Specialist (PRSS) if they are employed by a provider certified by ODMHSAS. Previous rules only allowed for certification of individuals employed by the State or for providers contracting with the State.

Dr. Vanderslice moved to approve Chapter 53. Major Pulido seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

CHAPTER 55. STANDARDS AND CRITERIA FOR PROGRAMS OF ASSERTIVE COMMUNITY TREATMENT

Deputy Commissioner Buck presented Chapter 55 rule changes, that are to be considered, to the Board.

Summary:

Deputy Commissioner Buck stated that the public was given the opportunity to provide written comments, and a public hearing was held to allow further questions and comments to the proposed changes to this chapter. Such comments were provided to the Board for their consideration. The proposed rule revisions to Chapter 55 are part of the Department's review of Title 450. The proposed rules clarify existing rules and improve existing processes.

Proposed revisions to Chapter 55 include updating provider terminology and revising provider qualifications for case management services based on changes made to other chapters last legislative session. Other proposed revisions are made to the standards and criteria for Program of Assertive Community Treatment (PACT) that will allow greater access to PACT services for consumers in need of this level of treatment.

Dr. McCaffree moved to approve Chapter 55. Dr. Bell seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

CHAPTER 60. STANDARDS AND CRITERIA FOR CERTIFIED EATING DISORDER TREATMENT PROGRAMS

Deputy Commissioner Buck presented Chapter 60 rule changes, that are to be considered, to the Board.

Summary:

Deputy Commissioner Buck stated that the public was given the opportunity to provide written comments, and a public hearing was held to allow further questions and comments to the proposed changes to this chapter. Such comments were provided to the Board for their consideration. The proposed rule revisions to Chapter 60 are part of the Department’s review of Title 450. The proposed rules clarify existing rules and are intended to comply with statutory changes.

Proposed revisions to Chapter 60 identify certification standards that are so critical to the operation of Certified Eating Disorder Treatment Programs that failure to meet the standards would be grounds for immediate suspension, denial or revocation of certification.

Dr. Vanderslice moved to approve Chapter 60. Dr. Haynes seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

CHAPTER 65. STANDARDS AND CRITERIA FOR GAMBLING TREATMENT PROGRAMS

Deputy Commissioner Buck presented Chapter 65 rule changes, that are to be considered, to the Board.

Summary:

Deputy Commissioner Buck stated that the public was given the opportunity to provide written comments, and a public hearing was held to allow further questions and comments to the proposed changes to this chapter. Such comments were provided to the Board for their consideration. The proposed rule revisions to Chapter 65 are part of the Department’s review of Title 450. The proposed rules clarify existing rules and are intended to comply with statutory changes.

Proposed revisions to Chapter 65 are made to update terminology based on recent revisions to the Diagnostic and Statistical Manual of Mental Disorders (DSM) as well as to clarify eligible provider qualifications. Additional revisions are proposed which identify certification standards that are so critical to the operation

of Gambling Treatment Programs that failure to meet the standards would be grounds for immediate suspension, denial or revocation of certification.

Dr. McCaffree moved to approve Chapter 65. Dr. Vanderslice seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

CHAPTER 70. STANDARDS AND CRITERIA FOR OPIOID TREATMENT PROGRAMS

Deputy Commissioner Buck presented Chapter 70 rule changes, that are to be considered, to the Board.

Summary:

Deputy Commissioner Buck stated that the public was given the opportunity to provide written comments, and a public hearing was held to allow further questions and comments to the proposed changes to this chapter. Such comments were provided to the Board for their consideration. The proposed rule revisions to Chapter 70 are part of the Department's review of Title 450. The proposed rules clarify existing rules, improve existing processes and are intended to comply with statutory changes.

Proposed revisions to Chapter 70 are made to identify certification standards that are so critical to the operation of Opioid Treatment Programs that failure to meet the standards would be grounds for immediate suspension, denial or revocation of certification.

Dr. Vanderslice moved to approve Chapter 70. Dr. McCaffree seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

DISCUSSION REGARDING REPORT FROM COMMISSIONER

Griffin Memorial Hospital and Children's Recovery Center – Norman Land Plan Vision Presentation – Commissioner White stated that the Department is still working with the Norman community on the Land Plan development.

Commissioner White stated that Durand Crosby, Chief Operating Officer, is our lead person on this project. Commissioner White and Mr. Crosby have had several meetings with Mayor Rosenthal as well as a community group and several others to discuss a long-term vision regarding the land the Department has in the Norman area. Commissioner White stated that a presentation was given to the Department employees in Norman to bring them up-to-date on the land development. The community group is being co-chaired by Mayor Rosenthal and State Representative Scott Martin. Commissioner White stated that she will continue to keep the Board current on any developments.

Dr. McCaffree asked what the net worth of the land in Norman was. Commissioner White stated that we are currently in the process of having the property assessed. Commissioner White stated that as soon as the property assessments have been completed, this information will be shared with the Board members.

Dewey Bartlett, Mayor, Tulsa, Oklahoma – Commissioner White reported that she and Mayor Bartlett have had several conversations over the last month. Mayor Bartlett would like to bring a Drug or Drug and Alcohol Summit to Tulsa to bring the Tulsa community together to discuss these issues. Commissioner White reported that the Department will assist in any way possible in terms of support and facilitation of the summit. Commissioner White stated that she will also be a speaker at this event.

The Oklahoma Academy Town Hall Research & Planning Committee Meeting – Commissioner White stated that each year the Oklahoma Academy Committee selects a different topic in which they hold a three-day retreat for academy members and other interested parties to discuss what Oklahoma should do on that particular topic. Commissioner White stated that next year the topic will be health care. The Committee wants mental health and substance abuse to be a big part of the health care discussion.

Woodward Chamber of Commerce Luncheon – (Speaker) – Commissioner White reported that the Department is continuing to reach out to the business community and community leaders to continue dialogue regarding the importance of mental health and substance abuse. Commissioner White stated that there were 120 in attendance, which was the largest crowd the Woodward Chamber of Commerce had in attendance at a luncheon in several months.

Rotary Club of Norman, Oklahoma – (Speaker) – Commissioner White stated that the Department will continue to reach out to the business community and community leaders to continue to keep dialogue open regarding the importance of mental health and substance abuse issues in Oklahoma.

Commissioner White stated that there were many media interviews and press opportunities in the past month. This is the time of year where there are a lot of discussions regarding funding priorities. Commissioner White reported that in

the coming weeks we will see a lot of editorials regarding mental health and substance abuse.

Deputy Commissioner Carrie Slatton-Hodges announced that Commissioner White was the recipient of the Kate Barnard Award. The Kate Barnard Award was created in 1998 to honor the ranks of women that have made a difference in Oklahoma by becoming public servants. Nominees are from the ranks of elected or appointed salaried public officials in Oklahoma.

Dr. McCaffree stated that Commissioner White had met with State Representative Doug Cox and referenced the Infant and Early Childhood Mental Health Summit. Dr. McCaffree asked about the potential impact from managed Medicaid on mental health services. Commissioner White stated that it is her understanding that originally there was quite a bit of discussion early on in the year regarding the need to move Medicaid to a managed care program. She reported that the hospital association and many physicians stated that this is not a good idea for Oklahoma and this has been reduced to a pilot program. It is now assigned to a House Committee, and it is rumored that it may not make it out of the House Committee. Dr. Sullivan stated Oklahoma tried this approach in the 1990's and it didn't work. He stated that the overhead is 7%. You can take that and put it in the hands of a private insurance company where the overhead is 25%-30%. The other 20% doesn't go into healthcare, it goes to executives and CEO's. Commissioner White stated that the health care providers and hospitals are definitely being heard on this issue at the Capitol.

Denise Northrup, Chief of Staff to Governor Mary Fallin; Steve Mullins, General Counsel to Governor Mary Fallin; Terry Cline, Ph.D., Secretary of Health and Human Services; Richard Salter, Jr., Assistant Special Agent in Charge, US DEA, Oklahoma District, (ASAC Salter); John Kushnir – Supervisor of OKC Diversion Group, US DEA; Darrell Weaver, Director, Oklahoma Bureau of Narcotics; Don Vogt, PMP Program Director, Oklahoma Bureau of Narcotics; Sandra LaVenue, Oklahoma Bureau of Narcotics; Colonel David Chiesa, Medical Group Commander, Vance AFB; Colonel Azzano, 72 Air Base Wing Commander, Tinker AFB; Colonel Dean Prentice, 72 MDG/CC, Tinker AFB; Lieutenant Colonel Tonja Everleth, 72 MDG (Expert Pharmacist), Tinker AFB; Colonel Glenn Waters, Garrison Commander, Fort Sill; Colonel Casleton, 97th Medical Group Commander, Altus AFB; Major Menze, Chief of Medical Staff, Altus AFB; Colonel Dalessio, CG McAlister Army Ammunition Plant; Dr. Gregory Rogers, Physician at MCAAP Clinic – Commissioner White stated that the Department is continuing to participate in dialogue around the prescription drug issue. The Governor's office, the Department of Health, the Bureau of Narcotics, and our office have had very productive meetings with the military bases located in Oklahoma to help combat this problem. She stated that we are seeing very good results from the armed forces dealing with the prescription drug issues.

Janna Morgan, Ph.D., Chief Mental Health Officer, Oklahoma Department of Corrections – Commissioner White stated that Janna Morgan, Ph.D., is the new Chief Mental Health Officer at the Oklahoma Department of Corrections. Commissioner White and Deputy Commissioner Carrie Slatton-Hodges recently met with Dr. Morgan where they had an opportunity to continue to discuss our partnership with the Department of Corrections. Commissioner White stated that we will continue to work with the Department of Corrections.

Major General Rita Aragon, Secretary of the Oklahoma Department of Veterans Affairs – Commissioner White stated that she and Major General Aragon had previous discussions regarding the need for a new building for ODMHSAS and the ODVA. She stated that our two agencies are desperately in need of a new building. Commissioner White stated that approximately three years ago there had been some discussions regarding both agencies sharing a building. Commissioner White stated that communications have resumed regarding the possibilities of the two departments sharing a building. Commissioner White will keep the Board members posted regarding this issue.

Oklahoma Infant and Early Childhood Mental Health Summit – (Speaker) – Commissioner White was the opening speaker at a recent summit that was jointly held by the ODMHSAS and the Oklahoma State Department of Health. There were several entities attending. She stated that they are trying to reenergize awareness.

ODMHSAS January Cultural Consciousness Luncheon – “2013 Accomplishments” and special guest speaker Mary Fallin, Governor – Commissioner White stated that in January Governor Fallin attended our Cultural Consciousness luncheon. She reported that this was the first time that a sitting Governor had attended our luncheon. Governor Fallin spoke about the successes of the Department over the last year.

Scott Hammersteadt, Ph.D., Archeologist, Oklahoma Archeological Survey, University of Oklahoma – Public Forum re: Griffin Memorial Hospital Mass Grave Site – Commissioner White stated that the second largest mass grave in Oklahoma is actually on the Griffin site. This is a result from a devastating fire that was at the hospital in 1918. We had not been able to locate the grave site but with the assistance from Dr. Hammersteadt and the University of Oklahoma, the grave site was located. Commissioner White stated the Department will make sure that the grave site is marked and available to families and the community.

DISCUSSION REGARDING REPORT FROM CHIEF OPERATING OFFICER

Durand Crosby, Chief Operating Officer, announced that the Children’s Mental Health Awareness Day at the Capitol is scheduled for April 14, 2014.

Mr. Crosby announced that the 2014 Children, Youth & Families Picnic Celebration is also on April 14th and the picnic is scheduled to take place on the north plaza and north lawn of the State Capitol at 3:30 p.m. and will conclude at 7:30 p.m.

Mr. Crosby announced that Quality Team Day is scheduled for May 8, 2014, at the Capitol. Mr. Crosby stated that this is a great opportunity to see the hard work our staff do each year at quality improvement to ensure we are providing effective service as effectively as possible. He stated that over the last seven years ODMHSAS has received more awards for our performance improvement projects than any other agency. Mr. Crosby stated that through the efforts of our staff continually finding ways to improve our programs, we are able to constantly find ways to serve more people more efficiently.

Mr. Crosby announced that the Suicide Prevention Conference is scheduled to take place on May 21-22, 2014. The location of this conference is yet to be determined.

Mr. Crosby announced that the Children's Conference will take place on June 24-26, 2014. This conference will be held at the Embassy Suites in Norman, Oklahoma.

Mr. Crosby stated that he and Commissioner White have been working tirelessly on the Norman Land Plan Project. Mr. Crosby stated that Larry Gross, Executive Director of Griffin Memorial Hospital and Teresa Capps, Executive Director of the Children's Recovery Center, are actively working on this project as well.

Mr. Crosby encouraged the Board members to read the success stories that are in their Board books. These success stories highlight some of the many success stories that we have each month.

Mr. Crosby asked Steven Buck, Deputy Commissioner of Communications and Prevention Services, to provide a legislative update. Deputy Commissioner Buck provided a hard copy of the Legislative Bills of Interest to the Board members. Deputy Commissioner Buck stated that the Legislature had reached the halfway point for this year. Deputy Commissioner Buck stated that a large majority of the time has been focused on the FY15 budget. Deputy Commissioner Buck reported that the state will have \$188 million less to appropriate this year. He stated that Commissioner White has been fighting very hard to get the needed funding for the services that we provide. Deputy Commissioner Buck gave a brief update on the following bills of interest:

ODMHSAS Request Bills:

HB2831 – This bill allows the Department to sell a specific tract of land and use the proceeds for infrastructure improvements. It would allow an amendment to

our Land Trust. This would allow us to create a way to use excess State property and unused assets to support the infrastructure at our agency.

HB2859 – This bill allows any Mental Health Court Judge to order progressively increasing sanctions or provide incentives when relapses and restarts occur rather than removing the offender from the program. Requires hearing for any revocation. This bill was introduced in response to a Court of Criminal Appeals ruling in 2013.

SB1472 – This bill allows ODMHSAS to make student loan payments for licensed mental health providers employed by the Department.

Mental Health/Substance Abuse Policy Bills:

HB2384 – This bill implements rates reflective of Medicaid to Medicare fee index; requires prior authorizations for controlled substances and non-generic pharmaceuticals; decreases the number of prescriptions per month; and limits reimbursement for emergency room visits.

HB2842 – This bill provides reimbursement upon salary of peace officer transporting a consumer for mental health services and allows ODMHSAS to contract with a third party to provide transportation services.

SB1495 – This bill introduces a pilot managed care program.

SB1845 – This bill requires court clerks to forward orders of involuntary commitment and persons found mentally incompetent to the FBI and OSBI. It allows those who were involuntarily committed or adjudicated mentally incompetent to petition the court to remove the disability.

HB3293 – This bill establishes a priority of increasing employee pay to a stated percentage of market average, and requires the Legislature to be accountable for funding the pay increase.

HB3294 – This bill redefines the Executive and Professional employees, and moves the function of the Merit Protection Commission to the Office of Management and Enterprise Services.

DISCUSSION REGARDING THE REPORT FROM THE CORPORATE ACCOUNTABILITY COMMITTEE

Dr. Haynes presented the report from the Corporate Accountability meeting that was held on Wednesday, March 26, 2014, as follows:

Deneka Cain, Advocate General, presented the Advocate General's report to the committee.

The Advocate General's report was reviewed by the Committee.

There were no changes to the report.

The Inspector General's report was reviewed by the Committee.

Mr. Maddox reported that there were no changes to the report that was presented.

There was no further business discussed.

Major Pulido stepped out of the Board meeting at 10:05 a.m.

DISCUSSION AND POSSIBLE ACTION REGARDING THE OFFICE OF INSPECTOR GENERAL REPORT

Jason Maddox, Inspector General, stated that there was no additional information to add to the Inspector General's report.

Dr. Haynes moved to approve the Office of Inspector General Report. Dr. McCaffree seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Dr. Sullivan	Yes
Mr. Fisher	Yes	Dr. Vanderslice	Yes
Dr. Haynes	Yes		
Dr. McCaffree	Yes		

Major Pulido returned to the Board meeting at 10:06 a.m.

DISCUSSION AND POSSIBLE ACTION REGARDING THE OFFICE OF CONSUMER ADVOCACY REPORT

Deneka Cain, Advocate General, stated that there was no additional information to add to the Advocate General's report.

Dr. Pierce moved to approve the Office of Consumer Advocacy Report. Dr. McCaffree seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

DISCUSSION REGARDING THE REPORT FROM THE PERFORMANCE IMPROVEMENT COMMITTEE

Dr. McCaffree presented the report from the Performance Improvement Committee meeting held on Monday, March 24, 2014, as follows:

There were two presentations for the March 2014 meeting.

The first presentation was by Ron Sims, Team Leader, ODMHSAS Community Response Team.

Mr. Sims spoke on the Urgent Recovery Center: Addressing Recidivism.

Ron Sims, M.A., LADC/MH Team Leader, gave a presentation on Addressing Recidivism and Working Together. He stated that in September 2013 ODMHSAS opened the Oklahoma County Crisis Intervention Center (OCCIC) at its new location at 2625 General Pershing Boulevard. OCCIC has a 16-bed crisis unit and a 16-chair Urgent Recovery Center (URC). The URC is a voluntary observation and stabilization unit that may provide services for up to 24 hours. A consumer may present to the URC by walk-in, hospital referral or law enforcement. Consumers are triaged and then assessed by a Licensed Mental Health Professional. If the consumer meets emergency detention (ED) criteria at that time, they will find them a bed at the Crisis Unit or a state-operated facility. If a consumer does not meet the criteria for emergency detention, they may be observed for a length of time not exceeding the 23 hour 59 minute cap. During their stay, consumers are evaluated multiple times to determine the need for crisis stabilization, medication, and/or outpatient referral. Upon discharge, the consumer's information is reviewed by the OCCIC Community Response Team which follows up with each consumer within 72 hours. The URC and the Community Response Team are working together to help consumers who may have experienced some difficulty in accessing traditional outpatient services.

The second presentation was also by Mr. Sims. This presentation was entitled: Working Together: Community Based Partnerships.

Mr. Sims stated that OCCIC works with a wide array of community agencies to help provide basic services in addition to mental health treatment. OCCIC consumers often benefit from services such as: housing, food, substance abuse treatment, and social opportunities, in addition to case management and therapeutic services. Through quarterly meetings, OCCIC communicates with multiple community stakeholders, including but not limited to: local shelters, other governmental agencies, community mental health centers, PACT teams, faith-based organizations, and sober social clubs in order to provide comprehensive services to vulnerable adults. These meetings serve to review existing needs, discuss future programs, and create new processes which help everyone bridge the treatment gap from one agency to another. OCCIC is working with public and private agencies to identify consumers at the highest risk

and brainstorm options to direct consumers to appropriate treatment, thereby reducing unnecessary emergency room utilization and lengthy inpatient stays.

Dr. McCaffree stated that this is truly a beautiful facility and recommended that individuals take a tour of the facility if possible.

The meeting was adjourned.

DISCUSSION AND POSSIBLE ACTION REGARDING CRITICAL INCIDENT REPORT

Durand Crosby stated that several months ago modifications were made to the reporting format for the Critical Incident Reports. This is part of an initiative to provide good governance, to make sure that we are able to better monitor events as they happen, and ensure that the Board has the appropriate information. We will continue to make modifications based upon comments that are received from Board members.

Dr. Sullivan stated that the new reporting format was much easier to read and felt the graphs make it easy to see at a glance where the Department is in comparison to the national benchmarks.

Mr. Crosby had no additional information to add to the Critical Incident Report. Dr. Pierce moved to approve the Critical Incident Report. Dr. Vanderslice seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

DISCUSSION REGARDING THE REPORT FROM THE FINANCE COMMITTEE

Dr. Pierce presented the report from the Finance Committee meeting held on Wednesday, March 26, 2014.

The Finance Committee was called to order by Dr. Haynes, Chair. The Committee approved the minutes from the January 22, 2014, meeting.

Finance Report Ending February, 2014

Mr. McCann presented the finance report for the month ending February 2014. He presented the budget to actual report as follows:

Revenue collections are below projections by \$1.2 million.

Expenditures are under budget by \$15 million or 9%.

The year-to-date net variance for the agency is a positive \$13.8 million or 8.5%.

SFY 2014 Budget Revision #5

Mr. McCann presented budget revision #5 that had been processed since the last Finance Committee meeting. Budget revision #5 was a \$2.5 million increase to the agency's budget. Details of the revision consisted primarily of a \$2 million increase for asbestos and mold removal at Griffin Memorial Hospital and Central Oklahoma Community Mental Health Center.

New Business

Commissioner White discussed the Governor's FY15 budget recommendation for the agency and the additional funds needed to maintain our current level of operations for FY15.

Dr. Pierce stated that the Governor's office is looking at a standstill budget for the Department, which would create a shortfall of approximately \$21 million for FY15 operations. This would result in a reduction in services.

Commissioner White stated that most agencies were recommended to receive a 5% cut in their budgets. ODMHSAS was recommended to receive a standstill budget. However, we need an additional \$21 million just to maintain services that we have in place today.

Mr. Fisher asked where these cuts will be coming from. Commissioner White stated that the Board would have to vote on the areas where cuts would be made. She stated that our primary goal will be to impact the least amount of individuals. Commissioner White also stated that our administrative costs are less than 3% and 97% of our budget goes into services. If we are given a flat budget, it would result in approximately 7,000 consumers losing services.

Commissioner White gave an overview of Medicaid, the expected growth and the reimbursement rates. She also provided details of the funding situation for the drug court program and the loss of the grant that is currently funding the program.

Based upon the discussion and review of the report, the Finance subcommittee moved for the approval of the Finance Report and Budget Revision #5.

There were no further discussions and the meeting was adjourned.

DISCUSSION AND POSSIBLE ACTION REGARDING MONTHLY FINANCE REPORT

Juarez McCann, Chief Financial Officer, stated that there were no updates to the reports.

Dr. Pierce moved to approve the Financial Report. Mr. Carson seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

DISCUSSION AND POSSIBLE ACTION REGARDING THE FOLLOWING PERSONNEL ISSUES:

A. Discussion and Possible Appointment of Deneka Cain as the Executive Director of the Oklahoma County Crisis Intervention Center.

Commissioner White stated that Deneka Cain has been serving as the Interim Director at the Oklahoma County Crisis Intervention Center for several months. Commissioner White made a recommendation to the Board to name Ms. Cain as the Director of the Oklahoma County Crisis Intervention Center.

Mr. Carson made a motion that Ms. Cain be appointed as the Director of the Oklahoma County Crisis Intervention Center. Dr. McCaffree seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

B. Discussion and Possible Appointment of Bryan Hiel as the Executive Director of the Oklahoma Crisis Recovery Unit.

Commissioner White stated that Bryan Hiel has been serving as the Interim Director of the Oklahoma Crisis Recovery Unit. Commissioner White made a recommendation to the Board to name Mr. Hiel the director of the Oklahoma Crisis Recovery Unit.

Mr. Carson made a motion that Mr. Hiel be appointed as the Director of the Oklahoma Crisis Recovery Unit. Dr. McCaffree seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Pierce	Yes
Mr. Carson	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes		

Congratulations were offered to both Ms. Cain and Mr. Hiel on their appointment as Directors.

PRESENTATION

Carrie Slatton-Hodges, Deputy Commissioner of Treatment and Recovery Services, gave a presentation on ODMHSAS and Medicaid. Her presentation shows the behavioral health portion of Medicaid: Then and Now.

Ms. Slatton-Hodges stated that Medicaid is the Federal insurance program for certain categories of individuals. In Oklahoma, Medicaid is limited to individuals who are blind, disabled, pregnant, have certain types of cancer, and a few other categories. There is a very limited number of individuals who qualify for Medicaid in Oklahoma. Ms. Slatton-Hodges reported that the largest number of individuals who are eligible for Medicaid in our State are children who are 300% below the poverty level. Children at this poverty level don't require a disabling category to qualify. She also gave a brief overview on the relationship and history of the Department of Mental Health and the Oklahoma Healthcare Authority.

Timeline

- Prior Partnerships between the agencies
- In 2011, the Oklahoma Health Care Authority (OHCA) contracted with Optum Health to process prior authorizations (authorizing services to consumers)
- \$4,000,000 annual contract with Optum
- Optum failed to meet the terms of the contract

Timeline

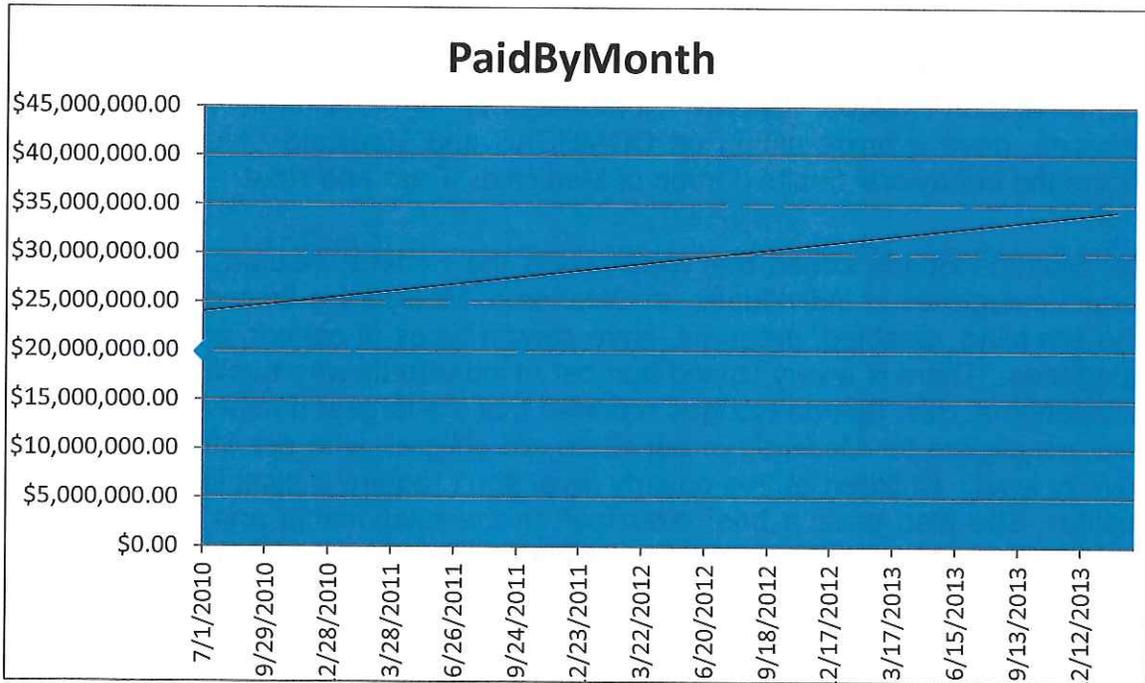
- Months later, OHCA terminated Optum's contract
- ODMHSAS stepped in
 - Created and initiated a replacement system
 - Up and running in **30 days**
 - Ensured appropriate services for consumers
 - Ensured provider reimbursement
 - Fiscal impact:
 - Saved the State of OK the \$4,000,000 contract
 - Saved provider agencies from closing, which allowed access to services for consumers
 - Strengthened Oklahoma's Medicaid system

Meanwhile...

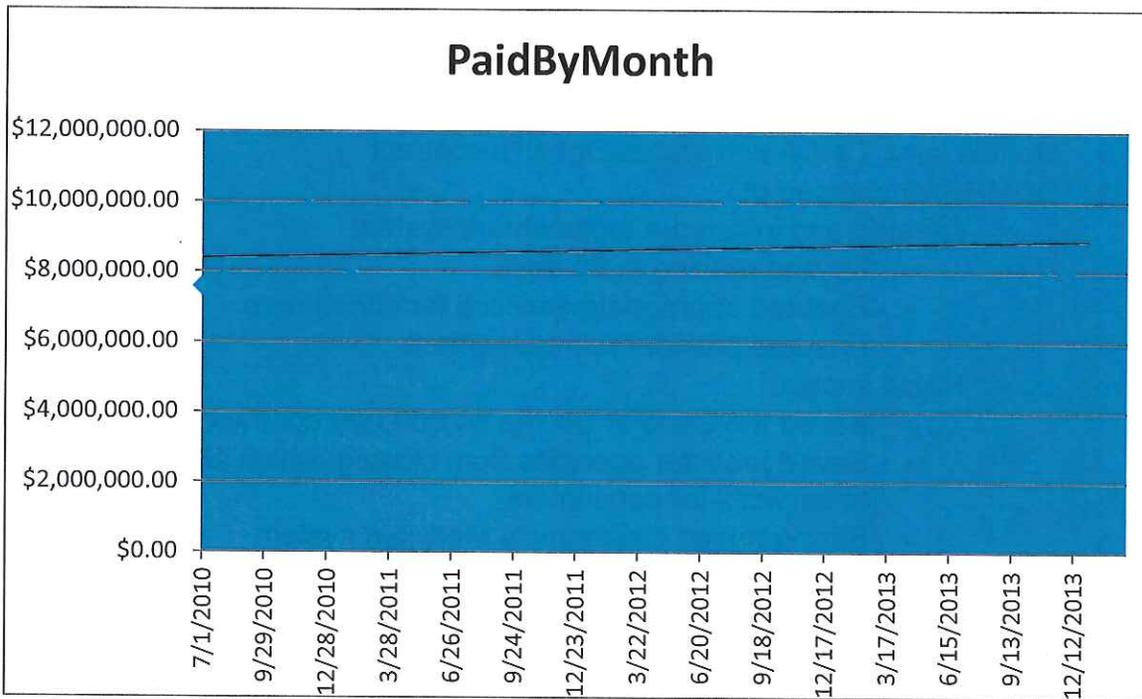
Historical Medicaid Trends

16% growth in Medicaid behavioral health billing EVERY YEAR for the previous ten years

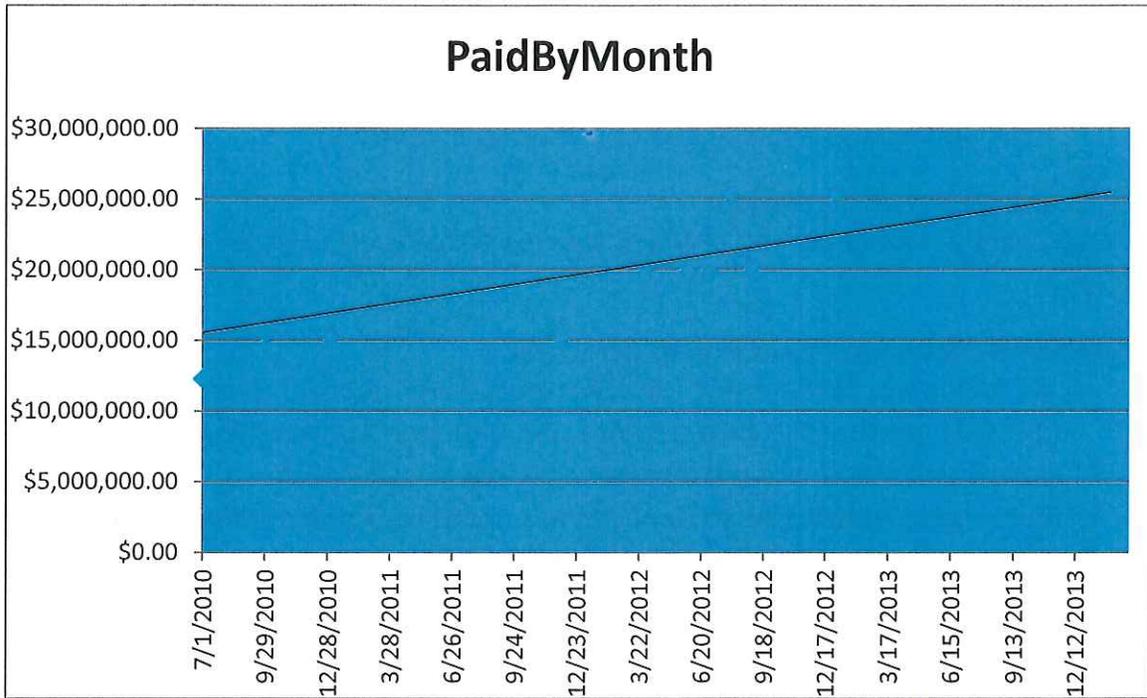
Total Behavioral Health



Inpatient Behavioral Health

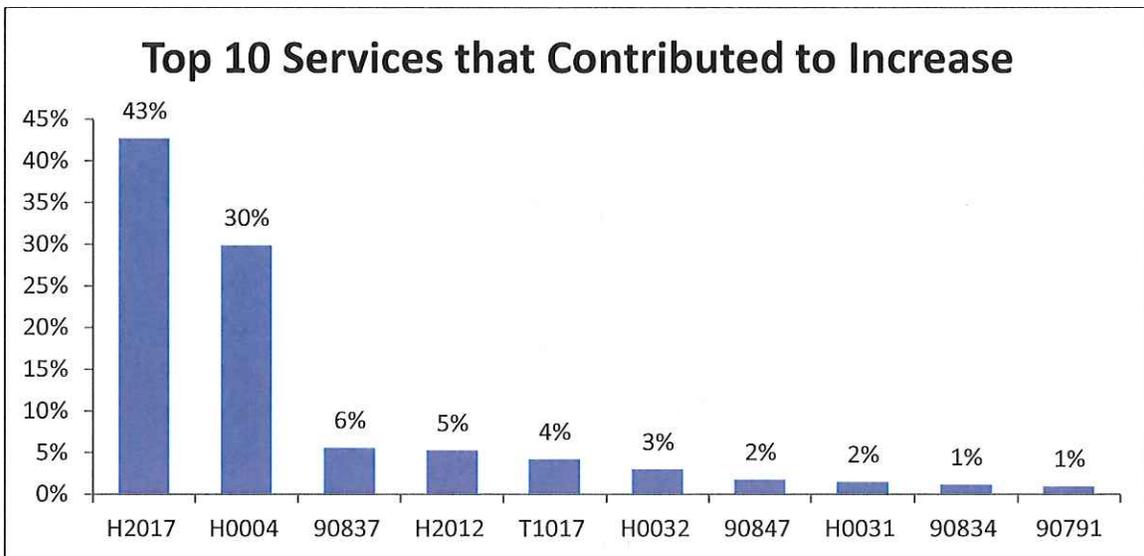


Outpatient Behavioral Health



A Closer Look at Outpatient Behavioral Health

- Between FY2011 and FY2013 there was a \$69,568,047 increase in outpatient behavioral health paid by Medicaid.
- So what makes up this increase?



Medicaid: Behavioral Health Outpatient Trends

- Dramatic increase in behavioral health rehabilitation (BHR) services between 2011 and 2013
- What are BH rehabilitative services?
- Significant billing of BHR services to children ages 0-6 (Research shows BHR services to this age group is lacking in efficacy)

Medicaid: Behavioral Health

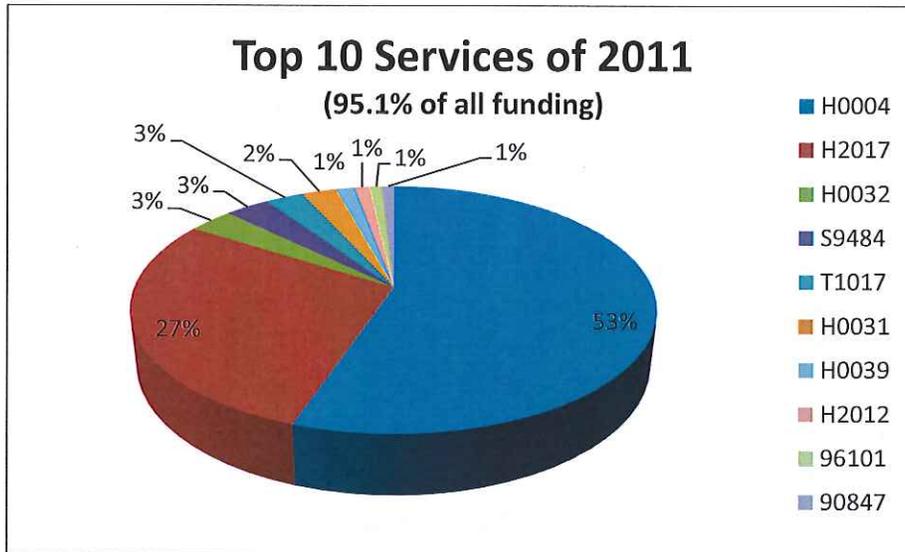
The behavioral health portion of Medicaid was transferred to ODMHSAS July 1, 2012

ODMHSAS Made Medicaid Policy Changes

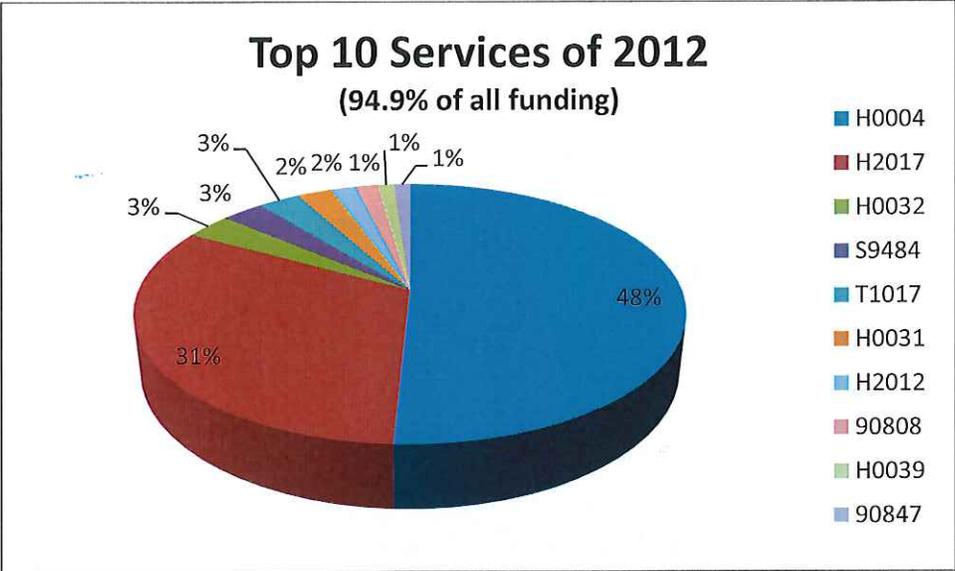
- No further reimbursement for BHR services for 0-3 and prior authorization for BHR services for children ages 3-6, with age appropriate evidence based curriculum provided before services are delivered.
- Behavioral Health Rehab services are not to be a stand-alone service, can only be provided in conjunction with therapy

Policy Changes

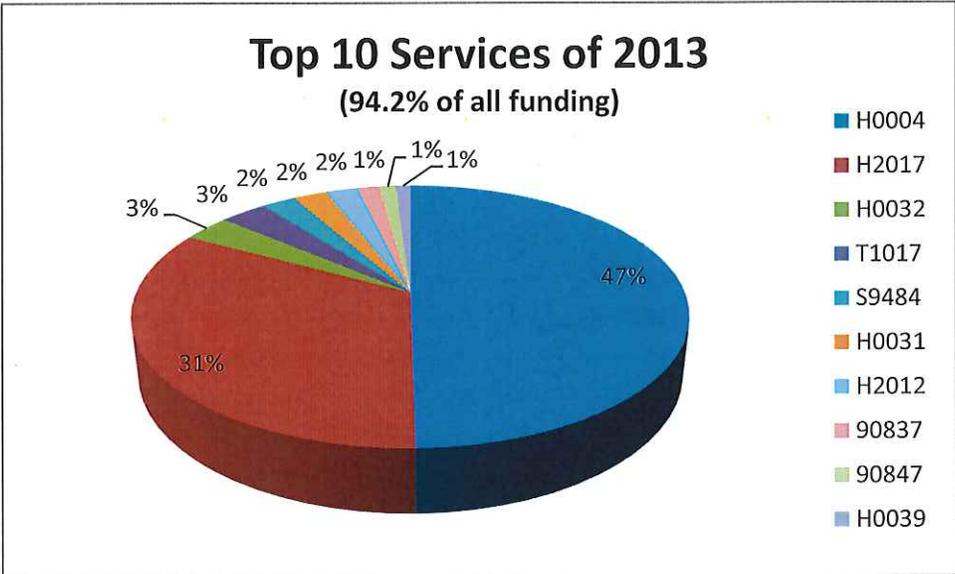
- BHRS are capped by units
- Prior authorization limits back in place
- Changes in Provider qualifications/certification
- LBHP staffing requirements
- In addition-hiring of staff



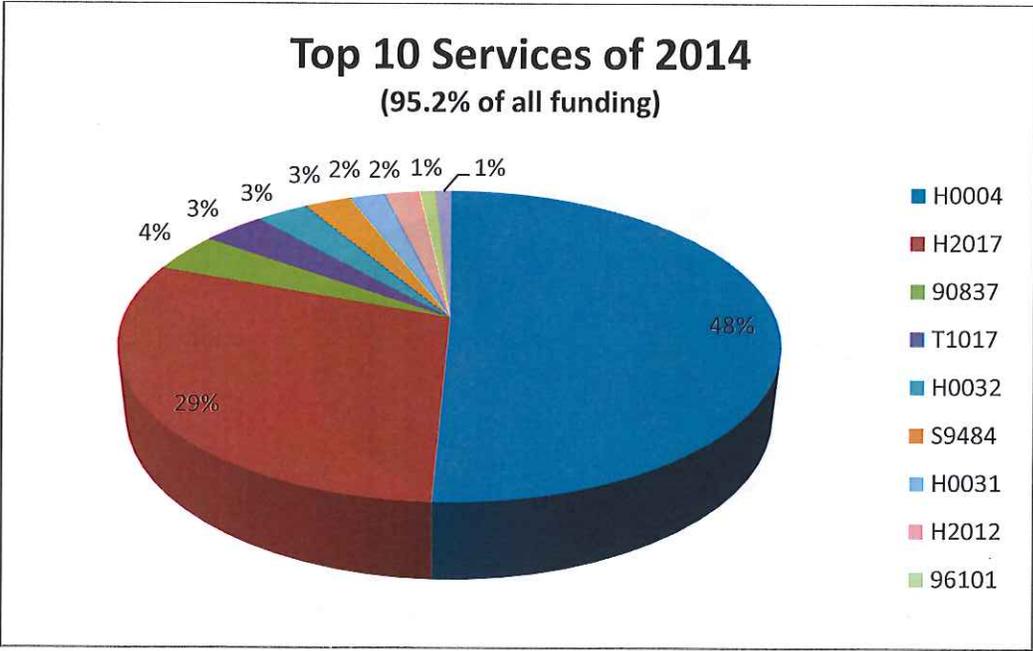
(H004 = Psychotherapy; H2017 – Rehabilitative Treatment)



(H004 = Psychotherapy; H2017 – Rehabilitative Treatment)

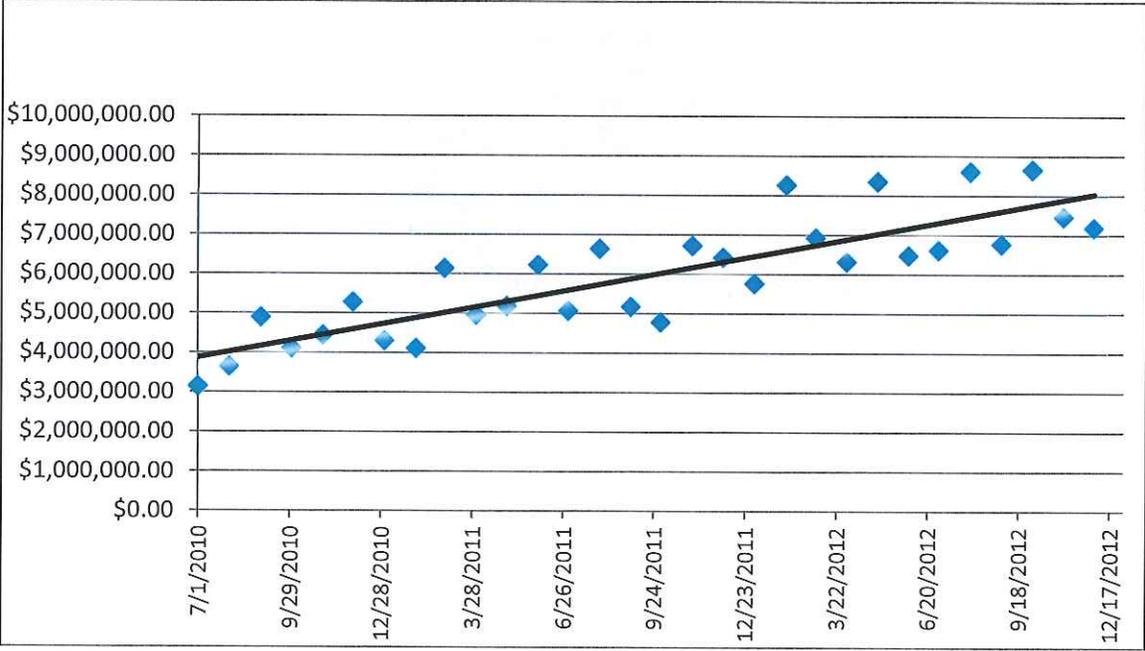


(H004 = Psychotherapy; H2017 – Rehabilitative Treatment)

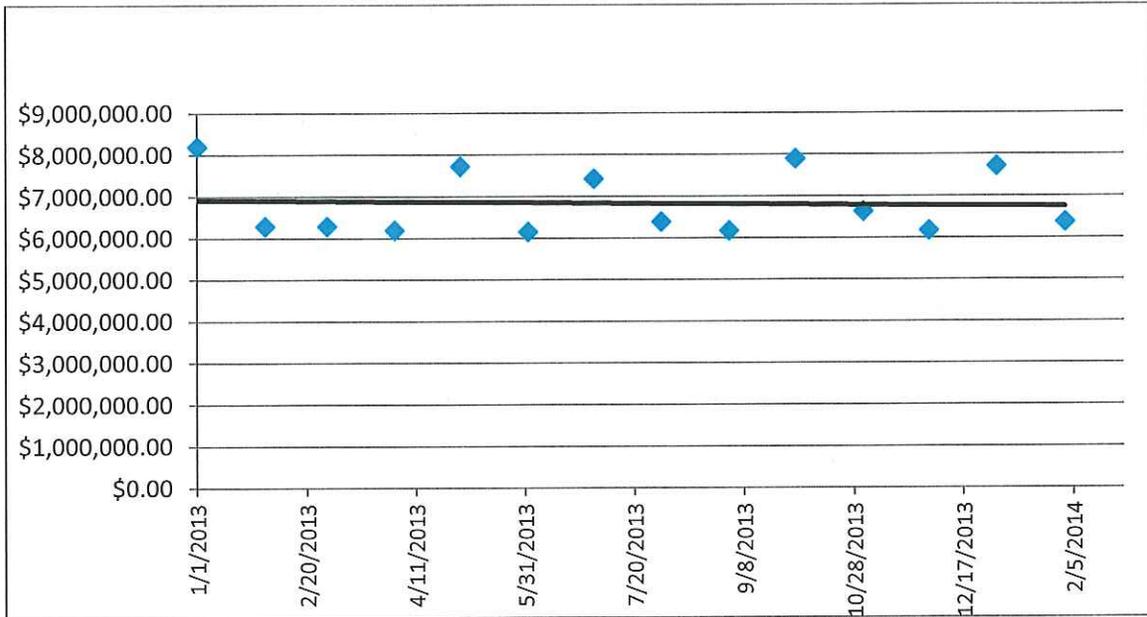


(H004 = Psychotherapy; H2017 – Rehabilitative Treatment)

Rehab Paid by Month, Before and After Policy Changes Prior to 1/1/13



Since 1/1/13



In Addition...

- Letters of Collaboration and Termination
 - Requires outpatient Medicaid/ODMHSAS behavioral health providers to:
 - **work together** if they are seeing the same member (collaboration); or
 - **end the other providers authorization** if one is open at the other provider and the consumer wishes to no longer receive services there (termination)
 - Expected savings of \$860,000 annually

Behavioral Health Medicaid Responsibilities Shifted to ODMHSAS

- Fiscal Impact:
 - Estimated savings of **\$7.8M** in FY13
 - Estimated savings of **\$18.7M** in FY14
 - Growth curbed from 16% to 7% projected at 5% for next year.

Things to Come

- Changes to contracts (independent audit, must stay below certain error rate)

Possible changes based upon budget decisions

- Rehab for SED/SMI
- Independent Assessors

Win-Win (Consumers and Fiscal Responsibility)

- ODMHSAS has proven itself the behavioral health experts, data savvy, and fiscally responsible
- Bleak fiscal trends and outlook allowed the state of Oklahoma to transition Medicaid’s behavioral health program to ODMHSAS
- Opportunity to analyze the reasons for the sharp increases in Medicaid spending that budgets could not sustain
- Policy and program changes improved services to consumers and financial bottom line

Major Pulido asked if the Medicaid rates had increased. Ms. Slatton-Hodges stated that when all the agencies experienced budget cuts a number of years ago, the Medicaid provider rates were reduced by 3% and they are currently at the reduced rate. She also reported that the mental health rates are lower than general medical care rates.

Dr. Sullivan stated that oftentimes a provider will lose money when treating a Medicaid patient due to the fact that it costs more to process the claim than is received in payment. The government has mandated the use of electronic medical records and with that comes the costs of meeting all the standards enforced with electronic records. He stated that there are some great advantages to using electronic records. However, it has not allowed him the opportunity to see additional patients.

Mr. Carson left the Board meeting at 10:40 a.m.

Dr. McCaffree left the Board meeting at 10:47 a.m.

NEW BUSINESS

There was no new business.

ADJOURNMENT

Dr. Haynes made a motion to adjourn the meeting. Major Pulido seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Major Pulido	Yes
Mr. Fisher	Yes	Dr. Sullivan	Yes
Dr. Haynes	Yes	Dr. Vanderslice	Yes
Dr. Pierce	Yes		

The meeting adjourned at 11:00 a.m.



Brent Bell, D.O.

Joel Carson



Bruce Fisher

Henry Haynes, Ed.D.



Mary Anne McCaffree, M.D.

Paul Pierce, M.D.



Major Edward Pulido

J. Andy Sullivan, M.D., Chair



Ronna Vanderslice, Ed.D.

