



Present (in person at Sibley County Family Service Center or via GoToMeeting): Angela Youngerberg, Phil Claussen, Barb Dietz, Chera Sevcik, Suzi Nerison, Sue Rynda, Cassie Sassenberg, Mark Shaw, Klea Rettmann, Naomi Ochsendorf

Others Present: Amy Haas, Jamie Hayes, Teri Herder-Blahnik

Present for 2020 Tamra Rovney Achievement Award Presentation: Jim & Connie Rovney, Mike Pribyl, Ricki Pribyl, Julie Moniz, Amy Pluym, Melody West, Katie

Mark Shaw called the meeting to order at 9:06 a.m.

Presentation of the 2020 Tamra Rovney Achievement Award: Sue Rynda, representing the Award Committee, spoke about how the Tamra Rovney Achievement Award came about as a means to honor the memory and work of Tamra Rovney (who passed away from cancer last October, 2019) by recognizing an individual within our 10-county region who encompasses the same passion for mental health work and advocacy that Tamra possessed as a Social Worker, Supervisor and, just prior to her cancer diagnosis, Sibley County Director of Human Services. Angie Youngerberg went on to speak about how Tamra lived out her values by advocating for and serving people with lived mental health experiences as does the first ever recipient of the Tamra Rovney Achievement Award, Mike Pribyl, Executive Director of Horizon Homes. Following presentation of the award, Tamra's parents, Jim and Connie Rovney, gifted him a plant. With great humility and profound appreciation, Mike Pribyl accepted the first annual Tamra Rovney Achievement Award and the living gift in her memory. *(One may find pictures and a link to the video of the presentation at www.sccbi.info.)*

Approval of Minutes: Phil Claussen moved to approve the minutes of the September 18, 2020 meeting. Klea Rettmann seconded. Motion carried.

Approval of Agenda: Sue Rynda moved to approve the agenda. Naomi Ochsendorf seconded. Added to the agenda was a proposal for urgent care consultation services. Motion carried with the addition.

Public Comment: None.

September Vendor Report: Sue Rynda moved to approve the September vendor payments. Naomi Ochsendorf seconded. Motion carried.

October RMT Report, Amy Haas: Amy reported on the October 8th RMT meeting.

- The Mental Illness Awareness video project received 300 views as of 10/08. NAMI MN forwarded the video link to its email contacts.
- RMT Consumer Representatives gave county clubhouse check-ins. Several clubhouses are now adding small indoor groups/activities to their calendars. Coordinators are trying to figure out how to do holiday celebrations within the limits of social distancing.
- Teri provided an overview of the Housing with Supports survey that she conducted with tenants at Horizon Homes and House of Lights board & lodges.
- Jamie provided updates on an online LGBTQ+ training coming up in December, grant budgets and the telepresence grant.
- Underspending requests were discussed. A committee was formed to review smaller, non-urgent requests.
- Jamie shared some information about a BECMHC proposal that was being prepared for submission to JPB.
- Discussed funding options for an IRTS bill received by individual who received services.

SCCBI-related Contracts: Jamie received a draft of the AMHI contract but nothing for Crisis. Approval of AMHI and Crisis contracts continues to be delayed as we await a response from DHS to our request that language be added to include an advance of grant funds in the second year of the contracts. DHS routinely waits to distribute grant funds until late spring (May and June). Without a cash advance, SCCBI is unable to pay vendors unless fiscal host counties dip into their own dwindling county cash reserves. Mark Shaw wrote a letter to Commissioner Jodi Harpstead and two Deputy Commissioners alerting them that SCCBI fiscal host counties

are not comfortable signing contracts that include content with which they do not agree. Fiscal hosts counties should not be expected to use their own funds to pay SCCBI expenses, and delaying payment violates the contracts with its vendors. Other fiscal host counties (Polk, Grant, Ottertail) report the same predicament. DHS has only pledged to address the Y2 advance in October 2022 for the 2023-24 contract cycle. Where do we go from here? Contracts are effective 01/01/21. The latest that contracts can be brought to the JPB for approval is November 20. We may need to give our vendors notice of the possibility that we will lack the money to pay them until we receive the grant funds in late spring. No further action was taken at this time.

Psych Formula 2021: Jamie presented the recommended new version of the Psych Formula (*emailed to JPB on 10/15*). The **overall** amounts allocated to Regular Psychiatry and Urgent Care did not change for 2021. The Committee determined not to factor administrative costs into the formula. The three clinics vary from one another in many ways, and the numbers do not align consistently with Psychiatric Services being provided to the AMHI population across the clinics. As directed during the September JPB meeting, Jamie separated the regular psychiatry rate from the urgent care rate. In doing this, the committee concluded to look at what the anticipated use of urgent care would be from each clinic and allocate the funding to match that. FTE time was decreased to account for providers with accumulated sick/vacation time, as well as other job duties that took time away from direct patient care. The Direct Service Percentage increased from 58% to 70%. Those steps changed the rate for psychiatry and urgent care. In 2020, the rate was \$77.24/slot for 9,925 appointment slots. Of those 7,522 were regular psychiatry and 1,773 were urgent care. With the new formula, the rate will be \$55.36 for Regular Psych and \$72.64 for Urgent Care. There will be 12,379 total slots; 10,493 regular and 1,886 urgent care. Utilizing the new formula will result in a \$460 reduction of total funding for Freeborn County Mental Health Center and a significant reduction of \$8,303 for Sioux Trails. BECMHC will see an increase of \$8,493 in total funding. The new formula addresses the higher cost of providing Urgent Care services and reflects a solid job of looking at other factors (i.e., cost of providing Psych vs. UC services, adjusting FTE to account for accumulated sick/vacation time, and other job duties taking time away from direct patient care), it does not resolve FCMHC's overspending in Psychiatry. In fact, the new formula reduces funding for Regular Psych by \$6,317 and increases (historically underspent) Urgent Care funding by \$5,857. Suzi Nerison voiced concern that the numbers provided to Jamie for her calculations are low. It may be an option to bill more services as urgent care, but without an operational definition of "urgent care" the clinic is hesitant to move forward with that. Jamie submitted a request to DHS for a definition over a year ago, but they never responded. During the discussion, Jamie located a document dated 12/18/14 and entitled "SCCBI Urgent Care Services" which she emailed to Board members. The text defines three types of Urgent Care (rapid access appointment, transition appointment, urgent evaluation). Located just below the document's heading is the broad definition: "Urgent Care is a service that addresses imminent mental health concerns. Its purpose is to prevent the need for emergency care and/or hospitalization." Suzi will look into the numbers for FCMHC while Jamie schedules a date/time for the Psych Formula Committee to reconvene before the November 20th JPB meeting (perhaps include Sioux Trails). Since the psych formula will need to be brought to JPB for final approval on November 20, the Board authorized the Executive Committee to sign off on the formula after the Psych Committee reconvenes to look at new/additional data from FCMHC that may affect the formula.

Proposal for Urgent Care and Consultation Services Collaboration (addition to agenda): South Central Crisis Center and Blue Earth County Mental Health Center submitted a proposal for a collaborative pilot project to "Proactively continue to expand community capacity through creative partnerships to assist individuals to maintain living safely in the community, without the need for higher levels of care or intervention."

Language included in the written proposal:

- **Plan** – MCH and SCCC leadership actively engaged the initial planning stages of the collaborative pilot project with the intended goal to serve only the residents of the SCCC with psychiatric services from providers of the MHC through dedicated, onsite Urgent Care appointments. Time will be made available for consultation purposes if the SCCC team requests a chart review, medication education, networking with primary care or community psychiatry, or other consultation needs. Two APRNs from the MHC would be assigned primary coverage duties for the SCCC. One provider would be assigned to the SCCC for three hours each weekday, from 8-11am. A minimum of two Urgent Care slots would be made available each day (provider may offer more slots within the same amount of time, if patient is not new to them, and history review is not required). At least 45 minutes would be made available to the SCCC team for

consultation purposes. This service will be seen and viewed as an “add on” to the residential service, and not core to the service provided. It is not within the assumed rate for the SCCC, and therefore is not part of the services required.

- **Financial** – Billing for UC appointments at the SCCC may be able to occur depending on Rule 29 licensure allowance, but the details surrounding this have not been fully fleshed out. It is the request of the SCCC and the MHC that funding up to \$78,000 (3 hours/day x 5 days/week x 52 weeks/year x \$100/hour) be provided by the SCCBI for one year for the cost of the psychiatric services in order to allow sufficient time to assess the level of need, utilization, reimbursement, policy/contract implications, etc. This would last for a maximum of one year. Long term options will be known after the first year.

Discussions followed about expanding ability of SCCC to serve people with higher acuity, anticipated start date (beginning of 2021 or February), assignment of liability (mostly SCCC), and a method to evaluate the success of services. Barb Dietz moved to approve one-year funding of up to \$78,000 for the collaborative pilot project between South Central Crisis Center and Blue Earth County Mental Health Center to provide residents of the SCCC with psychiatric services from providers of the BECMHC through dedicated, onsite Urgent Care appointments and consultation services. Klea Rettmann seconded. Motion carried unanimously.

2020 Unmet Needs Requests and Plan: The Board discussed a plan for processing and determining underspending requests. It was decided that the Underspending Request Form must be signed by the County Director before it is sent to Jamie. The Board decided that requests under \$1,000 can be approved by the committee that was established at RMT. Anything over that will need to go through JPB. Blue Earth County Mental Health Center made a one-time funding request of \$15,000 for Marketing to address a COVID-related decrease in the number of referrals for psychiatry services. BECMHC plans to utilize any MHC underfunding prior to drawing on Unmet Needs funds. Barb Dietz moved to approve Blue Earth County Mental Health Center’s request of \$15,000 for marketing, utilizing MHC underspent dollars from their staffing allocation. Klea Rettmann seconded. Motion carried.

Regional Telepresence Updates:

- **WebEx or Zoom Medical?** – Jamie obtained estimates from WebEx and Zoom Medical. The WebEx estimate came in at \$45,000 (before tax) for 200 licenses over 12 months. Zoom Medical came in \$20K less than WebEx. The same price as regular Zoom, it includes signed documentation confirming that the platform is HIPAA compliant. BEC is leaning toward Zoom due to the significantly higher cost of WebEx. Sibley and Brown Counties are leaning toward Zoom while Watonwan is already using it. The number of licenses (200) used for the estimates was drawn from the number of Vidyo licenses that SCCBI obtained. Since many counties are already using Zoom, the number of licenses needed may likely be less than 200. To obtain more precise estimates, each county will let Jamie know how many licenses they actually need. Formal proposal to follow.
- **USDA Telepresence Grant** – The grant application is in review for the second round of grants. Jamie was told that if awarded, grant funds can be used to reimburse accrued telepresence expenses for Adult and Children’s MH services.

DHS Crisis Grant Virtual Site Visit: The DHS virtual site visit occurred on October 8th. Jamie has not yet received the report. She voiced concern that the DHS Liaison only reviewed two records (Lorraine reported that DHS is supposed to review six.) and that she was unfamiliar with or unaware of the services, supports, utilization numbers, outreach and other information/details included in reports regularly sent to her over the past year.

As there was no further business, the meeting adjourned at 12:58 p.m.

Next JPB Meeting:

Friday, November 20, 2020, 9:00 a.m. – 12:00 p.m. Platform to be determined.

Respectfully submitted, Teri Herder-Blahnik, Administrative Assistant, SCCBI