

Legislation & Policy Committee Meeting, June 17, 2020, 9:30am

Legislative Update – Alan Bolter

Budget Update

Alan stated that there has been very little movement on the budget as of today. The revenue estimating conference, which was held in May, is projecting a \$3.2 Billion deficit for the current FY and a \$3 Billion deficit for FY21. The legislature will be in session for the rest of June, one week in July, and then will be out until after Labor Day. Alan reported that the federal stimulus dollars are all earmarked and cannot be used for already appropriated items. He stated that everything causing the deficit IS related to COVID, so the State is requesting flexibility on the spending of these federal dollars. The Legislature is likely to wait for an answer on this request before trying to tackle the budget. Alan stated that when the Legislature starts looking to do budget cuts, everything will be on the table and nothing will be absolutely off limits.

SB – 690 COVID-19 Supplemental

Alan gave a brief overview of this bill which is a Supplemental totaling \$1.3 Billion. This bill includes the funding for the \$3/hr Direct Care Wage.

HB 5832 – Crisis Centers

Alan stated that this bill would amend the MHC by adding Chapter 9A to create crisis stabilization units which would provide for holding for 72 hours, allow facilities to be secure, and some type of treatment/services be made available. Alan stated that many different stakeholders have been involved in this process including the Hospital Association, Blue Cross, etc. Representative Mary Whiteford is the sponsor for this bill. Amendments were accepted earlier this week which would require face to face psychiatry and allow for Hospitals to operate these centers. Alan stated that we have advocated for telepsychiatry to no avail. CMHA is working to have the bill include language that says if Hospitals choose to run crisis stabilization units, they must be financially responsible if they don't have a contract with a CMH. If this is put into the bill, many hospitals would choose not to run these centers. Alan will send out the language in these amendments. Group discussed Alan putting together talking points for advocating on this bill and how these changes don't make sense.

SB 826 – PA/NP MH Professionals

Alan stated that this bill would expand the definition of “mental health professional” to include Physician Assistants, Certified Nurse Practitioners, and Clinical Nurse Specialists-Certified. It would fix access issues for rural communities by expanding the pool of those medical professionals in those areas. PA's would be allowed to use safety restraints and it would allow PA's and NP's to be one of the signers on Involuntary Inpatient Stays. This will likely be moved this week in committees. Group discussed overuse of seclusion/restraints by this group.

HB 5412-5416 – Telehealth bills

Alan stated that this package of bills would allow telehealth/telemedicine services on a broader scope. This bill is likely to go to the Governor for approval soon. Group discussed the use of telephones in this scope of telehealth bills and if they could be included in services. Group also discussed privacy monitoring and if the patient's rights were discussed in this bill. Alan stated they were addressed prior to this bill being created. Group wondered if any discussions were being held regarding lower income consumers and if dollars could be used to support them. Lisa Williams stated that from a CMH perspective, this was not allowed, but telehealth is permissive, not exclusive.

HB 5298 PRTF and MI PRTF Concept Paper

This bill would allow for the creation of an 8-12 bed facility, called a Psychiatric Residential Treatment Facility (PRTF), as a step-down facility for youth under age 21 with complex psychiatric conditions. Group reviewed the concept paper drafted by BHDDA late last year. Group discussed criteria that will be determined to be eligible for those beneficiaries. Alan reported that the State has a formula for the “takeup” rate that will have something to do with meeting eligibility requirements, but that formula is being worked on now.

Policy Updates – Bob Sheehan

Health Homes – BHDDA Presentation

Bob reviewed the Health Homes presentation from the State and the expansion of Health Homes. Behavioral Health Homes will serve up to 20,000 beneficiaries and the Opioid Health Homes will serve up to 5,000 beneficiaries.

System Design Initiative

Bob reported on the System Design Initiative that was recently approved by the Executive Board of the Association, which includes design elements as follow: publicly sponsored and structured system, CCBHC, Behavioral Health Homes and Opioid Health Homes, clinical integration, SIM and MI Health Link “lessons learned”.

Mediation Initiative

Bob stated that Recipient Rights appeals now have mediation requirements, but this is not funded. Block Grant dollars are going to fund this right now, but this is not a good long-term plan. An advisory workgroup has been formed to develop a training for the mediators.

CCBHC Status

Bob stated that there are currently 8 CCBHCs, and with SAMHSA approval, 10 more will be added in Michigan, making Michigan one of the largest states for CCBHC sites. The Association will be sending a list of support needs for the CCBHC sites in moving

forward. Group wondered if there was a timeline for applying for this. SAMHSA is ready to move forward, but CMS is involved in COVID services, so pandemic-related distractions are holding up the process. It is just a matter of time.

Financial Reporting and Revision Advocacy

Bob stated that the Department has been requesting a lot of financial reporting in the last several years which are making our system look like a fee for service setup. The cost in different regions (due to travel, or lack of travel) is so different, and the actuaries are not understanding that. The Association sent a document to Jeff Wieferich and Penny Rutledge expressing concern for the trend of how the financing system is being portrayed.

The next meeting of the Legislation & Policy Committee is scheduled for Wednesday, September 16, 2020, 9:30am, and will be a virtual meeting with option to attend in-person at CMHA Office.

Meeting adjourned at 10:58am.