

## Newsletter January 2023

Together, building the health and well-being of all Hoosiers!

News, programs and training opportunities / Distributed to all members

Reaching out to the most vulnerable Pages 6-9

## Meet Adult and Child Health Outreach team - helping persons with the greatest needs

In recent years, society has seen a positive shift toward mental health awareness. However, mental health services alone are not enough to create sustainable improvements in mental health for many individuals, particularly those experiencing homelessness.

For meaningful change to occur, mental health services must be provided in collaboration with programs addressing crucial social determinant factors such as homelessness, unemployment, poverty, and social isolation.

One such program can be found at **Adult & Child Health**, championed by the Homeless Outreach team. We went to meet them. *See page 6-9* 



Also this issue:



**Committee update** Putting the Pieces Together



State and Federal updates

#### LETTER FROM ZOE





## To our wonderful members:

## As we head into 2023 the council looks forward to several things -

A legislative session that will support 988, Certified Community Behavioral Health Clinics, and Group Homes. To learn more about our policy ask please see our Policy Update Putting the Pieces Together on pages 10-12.

A Legislative Event & Lunch with our members at the State House, 2nd floor Atrium, on Wednesday, February 8 - kicking off at 8:00, with Lt. Governor Suzanne Crouch speaking at 8:30am. Location - Hyatt Regency Downtown. Breakfast from 8:00am-9:00am. For more information on this event *please click here*.

#### Learning and networking at our February Member Meeting on February 9 and 10 at the Hyatt in downtown Indianapolis. *Click for more information*

**Racial Trauma Training** – Thursday, February 16th – 10:00am-12:00pm EST via zoom. For more information, *click here*.

**Providing continued support, training and resources to assist all our members** with the Certified Community Behavioral Health Clinic Standards by continuing our work with the mobile assessment/CCBHC, data analytics, CFO and the other council committees. If you are not plugged into these efforts, please reach out to *Denise Wade* to learn how you can be a part of the great work our committees are doing! Pending the approval of the State's Demonstration Application the DMHA/Council clinical/operational and financial workgroups will also start back up.

**Grant Administration Support.** The council is proud to offer funds for our members through several grant opportunities. *To learn more read Andy's article on page 5.* 

# healthcare PARTN

### PARTNER SPOTLIGHT

**NextGen Healthcare** offers a complete and comprehensive enterprise solution

that pushes the boundaries of whole-person care, by integrating behavioral, physical, and oral health with I/DD and human services, the solution extends beyond a classic clinical setting with social and human services solutions to support complex and diverse delivery systems in a fully integrated manner.

Click here to learn more

#### WELCOME

#### Continuing member education and engagement with -

- Cup of Joe with Zoe Next date February 7th
- O's with Zoe Begins on January 30th @ 10-11am
- Regular Council Email Updates
- Social Media updates- if you are not connected, get connected today! Click below to follow us on:

LinkedIn 🛅 Twitter 🎔 Facebook 🕇

- **Continuing our newsletter** to share the great work of our members and the council
- Member engagement survey will be launching at our Winter
  Conference

As you can see 2023 has much to look forward to! Most importantly we look forward to bringing value to each of you by asking ourselves everyday-

#### Did the Indiana Council Bring Value to our Membership Today?

Our hope is in 2023 you can continue to answer YES and that you know the value you bring to the council with your engagement. *Together we will build the health and well-being of all Hoosiers.* 

Cheers to you for making this possible!

In gratitude, Zoe

#### **Zoe Frantz**

President, CEO 812-298-4533 **zfrantz@indianacouncil.org** 



Our new '**member only'** section of our website is now live, where IC members can access exclusive content.

*Visit the members area* to log in and find out more - or *contact us* to become a member.

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### The Indiana Council of Community Mental Health Centers

represents the collective interests of all community mental health centers (CMHCs) currently certified and accredited to provide community-based behavioral health services across all ninety-two counties in Indiana.

CMHCs in Indiana served over 300,000 behavioral health consumers in 2022. CMHCs provide services primarily to those suffering from severe behavioral health and substance abuse conditions which further reduce additional costs to society by directing coordinated care to our most vulnerable citizens.

Click the image below to view / download our flyer on the benefits provided to our communities by our network of CMHCs.



#### **KEY CONTACTS:**

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#### **GRANT ADMINISTRATION**

## Andy's Grant Admin Updates

## Great news! We have submitted claims and funds have been received from the State for the COVID grant and anticipate funds from the REL

**grant soon.** And of course, we expect Bridge Grant funds any day! I just wanted to just walk through some of the opportunities and processes for the different grants the Indiana Council is administering. We will continue to provide guidance and updates in future newsletters, so stay tuned!

#### **COVID Mitigation Grants**

This grant reimburses CMHCs for COVID related expenses including testing, training, PPE, supplies, and labor costs to complete the testing process for both staff and clients. Indiana Council was provided \$1.7 Million Dollars to award to participants, and we have only received claims for a small portion of that amount thus far. We encourage all member agencies to participate in this grant program. 10 CMHCs have completed contracts to utilize these funds, and we have another CMHC signing their contract soon!

The claims process requires completion of a form and providing invoices for purchased tests, PPE, labor costs, etc. The claims process is very easy, and I am happy to walk you through it. The Indiana Council has been submitting claims since the summer and we are starting to see funds trickle in, thankfully! Participating CMHCs must provide a Direct Deposit Form to me to receive the funds as they are received. If you are not sure if you've sent the form or have questions, please feel free to *contact me*.

#### **Racial Equity and Leadership Grant (REL)**

The REL grant provides funding for Indiana to assess and enhance the equitable and inclusive practices within the State's CMHC system. The State has provided \$160,880.43 in funding for procurement of a contractor to complete the assessment. A Request for Proposals (RFP) was issued by the state and a contractor has been identified. Their role will be to assess the current state of CMHCs around internal culture and delivery of services and identify, recommend, and implement the efforts needed to launch a meaningful initiative for sustainable change with regards to the equitable care of underserved and marginalized populations within and across the State CMHC system. Six members of the REL Committee, representing six different CMHCs, have participated in the RFP process and will serve as liaisons to the state as the selected contractor completes their work. CMHCs that have participating staff will receive compensation as certain milestones are achieved. The Indiana Council submits claims to the State once milestones are achieved. The milestones are as follows:

- Support of RFP Development
- RFP Scoring and Award
- Project Kick Off
- Assessment Support
- Implementation Support

Indiana Council handles all claims and has made one request to the State for the first milestone. A second claim to the State is forthcoming and the selected contractor will be identified soon. Funds from the first claim and milestone have not yet been received.

**REMINDER:** A request for Direct Deposit Form for **REL grant participants was sent to the CEOs of the represented CMHCs.** Again, if you are not sure if you've sent the form, feel free to contact me.

I hope everyone had a wonderful holiday season, and I look forward to working with all of you throughout 2023!

#### Andy Zellers

Grant Administrator & Policy Research Analyst 812-204-1789

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#### COMMUNITY UPDATE





# Mental Health Services for the Most Vulnerable

## Adult and Child Health Outreach helping persons with the greatest needs

In recent years, society has seen a positive shift toward mental health awareness. However, mental health services alone are not enough to create sustainable improvements in mental health for many individuals, particularly those experiencing homelessness. For meaningful



change to occur, mental health services must be provided in collaboration with programs addressing crucial social determinant factors such as homelessness, unemployment, poverty, and social isolation.

One such program can be found at *Adult & Child Health*, championed by the Homeless Outreach team. Adult & Child Health is an accredited nonprofit primary care, behavioral health, and social services provider with multiple locations in central Indiana. Adult & Child, along with their community partner *Wheeler Mission*, recently welcomed a site visit by **Zoe Frantz** and **LeeAnn Jordan** of the Indiana Council of Community Mental Health Centers.

Zoe and LeeAnn joined these organizations at the **Wheeler Mission Center for Women & Children** to see firsthand how the organizations' partnership has been impactful to persons experiencing homelessness.

"Wheeler Mission is grateful for the long-standing collaborative partnership with Adult & Child Health. Through the years, our relationship has deepened and evolved to address the complex needs of those we serve across a widening spectrum of services and support," said **Colleen Gore, MSW**, Chief Program Officer for Women's Programming at Wheeler Mission and Adult & Child Health Board Member.

#### COMMUNITY UPDATE

"What began as a coordinated outreach approach has expanded to co-located mental health services and now involves discussions to provide supportive housing service. This flexible process is integral in promoting sustainable life change for some of the most vulnerable members of our community."

Integral to Adult & Child's organizational mission is delivering "life-enhancing . physical, social, and behavioral healthcare services" with hope, compassion, and creativity. The Homeless Outreach team at Adult & Child embodies that mission through the core belief that all persons deserve access to needed health and social services and no one should fall between the cracks.

Adult & Child began providing outreach services in 2011 with just one staff member providing outreach to individuals experiencing homelessness in Marion County. This program has since grown to include six full-time positions under two different funding opportunities in order to meet the growing needs of the community. The Outreach Team is made up of **Stacey Nugent, Dustin Hughbanks, Jane Wiles, Brandi Ward**, and team leader **Brian Paul**.

"Our outreach team is responsible for saving lives throughout the year. They are real-life heroes"

Annually, Indianapolis providers conduct what is called a "point-in-time count" to provide data on homelessness in Marion County. In 2022, there was a 9% decrease in Marion County's homeless population with 1,761 individuals experiencing homelessness. In 2021, 1,559 total individuals were served through the combined efforts of Adult & Child's homeless outreach team. 2021 also saw 1282 individuals served by the Projects for Assistance in Transition from Homelessness (PATH) grant and 467 served by the Community Development Block Grant (CDBG). The de-duplicated number was 1559.

The goal of Adult & Child's outreach team is to work with the most vulnerable individuals in Marion County who are unsheltered, with a focus on meeting basic needs, assessing housing needs and emergency situations, and connecting individuals to services including behavioral health, primary care, education and/or employment, and addiction services.

"The Outreach Team at Adult & Child Health is responsible for saving lives throughout the year. They are real-life heroes, especially during inclement weather, as their focus is to provide needed supplies and conduct wellness checks on individuals exposed to harsh weather conditions," said Jennifer Disbro, LCSW, Vice President of Community and Specialty Services at Adult & Child Health.



Adult and Child Center
 603 E. Washington St. – 9th Floor, Indianapolis IN 46204
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### Adult and Child Health Outreach



#### A DAY IN THE LIFE OF AN OUTREACH WORKER

#### A typical day begins with a team meeting and the development of a daily plan for outreach.

A large part of the day involves following up on referrals, which could come from a number of different sources. Outreach staff can become connected to individuals through city-wide outreach efforts, from staff who have stopped into local camps or locations identified by partnership efforts, through other shelters, and through their established walk-in office hours.

Other Adult & Child staff make internal referrals to the outreach team as well. The team packs items for the day, including blankets, water, snacks, and Narcan. They head out into the community prepared to attend to any potential needs of those they serve, from food or medical requests to unplanned crisis scenarios.

During outreach walk-in hours at Adult & Child Health, the team triages the needs of individuals as they arrive, with the goal of creating a coordinated entry access to complete housing assessments. However, during these hours, the team also links individuals to primary care and behavioral health and assists them in accessing crucial identification documents that may include birth certificates, ID cards, social security cards, and more.

Recently, an individual arrived at Adult & Child walk-in hours experiencing chest pain. He had been scheduled for an open-heart procedure but had not yet received the surgery. During his meeting, staff called an ambulance to attend to the individual and his reported pains. He was taken to the hospital and was admitted to await surgery. The team will continue to follow up on this individual and any additional needs following the procedure.

#### PARTNERSHIPS & EXTERNAL PROGRAMS

Adult & Child's Homeless Outreach Team partners closely with a variety of other organizations and programs within the Central Indiana community. Some of these partnerships include the IMPD Homeless Unit, Wheeler Mission Men's and Women's Shelter, Horizon House, Homeless Initiative Program (HIP), the Coalition for Homeless Intervention and Prevention (CHIP), Adult Intervention Center (AIC), and the Marion County Prosecutor's Office's Quality of Life Program.



The Quality of Life program through the Marion County Prosecutor's Office is aimed at individuals struggling with homelessness, substance use disorders and mental health issues who have also been charged with low-level, non-violent offenses. The goal is to divert these individuals out of the criminal justice system and into supported services, housing, and other necessary resources.

**Stacey Nugent, PATH Outreach and Engagement Specialist** with Adult & Child Health, has worked with six individuals who have gone through the program. Her first referral was the Quality of Life program's first graduate.

#### COMMUNITY UPDATE

Stacey met this individual while out on outreach. He had grown up in foster care, but after aging out of the system, he faced homelessness. While on the streets, he was robbed, assaulted, and left with a traumatic brain injury. After his hospitalization and rehab, he returned to the streets and later stole food and clothes from a Walmart, receiving a theft charge.

Once Stacey began working with this individual, she reached out to Quality of Life and suggested him as a good fit for the program. She also connected him to Youth Link services to work on housing. He was housed, enrolled in college, connected with *Indiana Youth Group*, remained involved in services, and has successfully completed the Quality of Life program—which means his record was wiped clean.

Adult & Child staff continue to make referrals to the Quality of Life program, which reached its one-year anniversary of accepting cases in April of 2022.

#### TEAM STRENGTHS & PASSION

"Adult & Child's Outreach team members are incredible at engagement. They have a real ability to connect and build trust with individuals with significant untreated mental health issues," said **Brian Paul**, Adult & Child Homeless & Housing Resource Team Leader.

The team is diverse in their past work experiences, which helps in the many situations they encounter out on the streets. Individual team members have medical backgrounds, rural outreach experience, legal backgrounds, and mental health/substance abuse treatment experience.

The team is also made up of excellent community collaborators who often provide trainings to many of Adult & Child's community partners. One recent training involved working with **Wheeler Mission**'s case managers on how to navigate the legal system.

The Outreach team exemplifies one of Adult & Child's values of "meeting people where they are"—often very literally. The team regularly meets individuals within the community in locations that include shelters, camps, and other places not meant for human habitation.

Each Outreach team member is an advocate for persons experiencing homelessness as it relates to systems, services, and resources. They know most individuals they serve by name, take time to learn their story through a personcentered approach, and help each individual set goals. When someone is ready to be connected to services or resources, they are quick to respond. The team follows best practices and utilizes harm-reduction approaches.

To learn more about Adult & Child's services, please visit adultandchild.org.



HFAITH

603 E. Washington St. – 9th Floor, Indianapolis IN 46204 Designated in: MARION, JOHNSON







#### **COMMITTEE UPDATES**



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#### PUBLIC POLICY COMMITTEE

# Putting the Pieces Together

The year 2022 was very busy for the behavioral health community. There were several documents released in support of (1) the enhancement to the local infrastructure, (2) additional funding needs and (3) recommendations for future growth in service delivery and workforce.

- Behavioral Health Commission Report
- A Plan for Indiana to Expand the Use of Certified Community Behavioral Health Clinics (CCBHC)
- 2022 CCBHC Impact Report Expanding Access to Comprehensive, Integrated Mental Health & Substance Use Care

The constant piece to this system is the local **Community Mental Health Center (CMHC**). The 24 CMHCs focus on serving economically disadvantaged Hoosiers and those who typically encounter difficulties accessing care. The services provided by the CMHC system include, inpatient and outpatient treatment, crisis services, services for children and adolescents, elderly people, substance use services, residential services, peer-led services and more. CMHCs not only provided these critical services to consumers in our local communities but they also employee over 15,000 staff throughout Indiana.

In previous legislative sessions, two primary pieces were enacted to lay the foundation for the future mental health service delivery.

#### House Enrolled Act 1468-2021

- Established the pathway for a 988 crisis hotline to be overseen by the Division of Mental Health and Additions (within FSSA).
- Provides services by a Mobile Crisis Team after a 988 call and may include behavioral health services that provide short term, less than twenty-four (24) hour care with the capacity for diagnosis, initial management, observation, crisis stabilization and follow-up referral services to a person in a homelike environment.
- No funding mechanism was enacted, however, the establishment of a 988 crisis hotline was mandated by the Federal government.
- House Enrolled Act 1222-2022 required FSSA to establish a plan to expand the use of Certified Community Behavioral Health Clinics (CCBHC).
  - CCBHCs are designed to provide a comprehensive range of mental health and substance use disorder services with an emphasis on the provision of 24-hour crisis care, utilization of evidence-based practices, care coordination and integration with physical health care
  - Congress enacted legislation in 2014 transforming the way mental health and addiction services are funded, closing the gap in funding between physical and behavioral health care. The law created CCBHCs, which receive reimbursement through Medicaid for the full cost of services they provide at higher, more competitive rates than CMHCs currently receive.



HEALTH







#### **COMMITTEE UPDATES**

With the preceding historical overview, that brings us to the 2023 legislative session and what is needed to bring all these "program pieces" together and put the mental health system in Indiana on the right track for comprehensive and appropriate service delivery for all Hoosiers.

#### Legislative Action Need - 2023 Agenda

#### SB1 - Senator Crider – Certified Community Behavioral Health Clinics.

As a next step following the enactment of HEA 1222, this legislation will mandate that FSSA apply to the United States Department of Health and Human services for a Medicaid State Plan Amendment (SPA) for CCBHC participation and reimbursement.

- The CCBHC model alleviates decades-old challenges that have led to a crisis in providing access to mental health and substance use care.
- Currently there are 19 pilot CCBHC sites in Indiana that are federally funded through Substance Abuse and Mental Health Services Administration (SAMHSA). With these funds many CMHCS have built mobile and crisis services that have since October 2021 reached over 600,000 individuals.
- Without a sustainability plan for the CCBHC demonstration and a SPA, these services are at risk of being eliminated when the Federal grant funding expires.

#### HB 1006 - Representative Steuerwald – Mental Health Referral and Diversion Program.

This legislation establishes a local mental health referral program to provide mental health treatment for certain persons who have been arrested.

- The referral program will use the 988 crisis hotline to deploy the mobile crisis teams in a local community that will utilize the CCBHC enhanced services.
- Hoosiers in crisis will receive more appropriate assessment and placement than ill-suited and expensive hospitalization or jail.

#### HB 1001 – Mental Health Funding Pieces

These two funding and revenue enhancement pieces are what will complete the entire package for a more robust and comprehensive mental health system in Indiana.

#### 1) 988 Crisis Hotline Surcharge

The Behavioral Health Commission recommended the establishment of a \$1 988 surcharge to fund the comprehensive crisis response system. The recommended \$1 surcharge has been calculated to raise \$90 million in new state dollars. The revenue would be used to continue building and sustaining a state-wide 988 call center, establishing local mobile response teams and funding appropriate services.

• The federal law allows for states to impose a surcharge similar to the one that funds the current 911 system. The surcharge would be in conjunction with the one-time federal funding Indiana has earmarked to development a comprehensive crisis response system, resulting in necessary system stainability.



#### 2) Certified Community Behavioral Health Clinics Funding

- Currently, the 19 CCBHCs are funded by a federal SAMHSA grant. A budget appropriation will fund the remaining five local CMHCs, not currently receiving federal funds as well as continue funding for the 19 once federal dollars are no longer available.
- The state appropriation will bridge the gap until 2025/2027 which is the timeline for the federal demonstration's completion and meet the anticipated 2027 SPA approval.

The funding request to address these needs is \$30 million (for the biennium).

#### 3) Group Home Capital and Daily Living Support

- There are roughly 475 group home beds in Indiana for the severely mentally ill. These beds and services required for consumers residing in these beds are provided by the local CMHC provider. The physical structural conditions of the current group home in Indiana are declining. On average, the age of group homes is approximately 40 years. There is a significant need for upgrades and new construction.
- The current State Hospital wait list for a local group home bed is 100 patients. With a capital infusion, improvements and new group homes can address roughly one-half of the State Hospital wait list.

#### The capital request to address these needs is \$24 million (for the biennium).

- In addition, a daily living support rate is needed to cover the costs of providing services to these group home residents. There is no state or federal reimbursement that covers many of the residential needs at this time. Many local providers cover these expenses with fundraising at the local level. This funding model is not sustainable in the future.
- A task group of CMHC providers conducted a rate review study and calculated a daily rate of \$39 per day was enough to cover the unreimbursed services provided today. It is important to point out that the State Hospital cost per day is over \$2,000.

#### The budget request to cover a daily living support rate is \$13 million (for the biennium).

Funding is truly the final piece of the puzzle to ensure those with mental health and substance use needs have the services available in all corners of Indiana. As highlighted in the Behavioral Health Commission Report, untreated mental illness in Indiana is estimated at \$4.2 billion annually.

# The Indiana Council of Community Mental Health Centers requests a total biennium budget to ensure access to vital mental health services in the amount of \$67 million broken down as follows:

- Certified Community Behavioral Health Clinics Funding \$30 million
- Group Home Capital Support \$24 million
- Group Home Daily Living Support \$13 million

#### **COMMITTEE UPDATES**

#### LEGISLATIVE LUNCH

#### Reach out to your legislator in your Community!

Join us at our legislative lunch on Wednesday – February 8th!



#### ADDICTIONS COMMITTEE:

Chair: Tracy Waible, Cummins twaible@cumminsbhs.org

**The Addiction Committee** is forming a sub group along with the Adult Committee that will be focused on the role of the peer recovery specialist. We plan to explore everything from interview questions during the hiring process, training, curriculum and service delivery, and enhancing skill sets to supervise peers adequately.

#### ADULT SERVICES COMMITTEE:

Chair: Brent Clemenz, Valley Oaks bclemenz-ne@valleyoaks.org

The Adult Services committee is organizing

a work group to address how to expand peer services, ensure access to career training and advocating for a sustainable reimbursement rate. Workforce shortage continues to be a challenge that we are facing. Most centers have received the CCBHC grant and are continuing to implement and improve processes.

#### RACIAL EQUITY AND LEADERSHIP COMMITTEE:

In honor of Black History Month the REL Committee will be hosting
a training on Racial Trauma presented by Dr. Steven Kniffely, a clinical
psychologist and expert on race and racial trauma, who teaches at
Spalding University in Louisville, Ky. The Racial Trauma Awareness
training includes: an overview of racial trauma, how it affects behavioral
health as well as physical health; microaggressions - how to identify and
respond to microaggressions; and how to identify racial trauma and those
that are experiencing racial trauma.

Co-Chair:

Cedalia Ellis, Southwestern *Ellisc@Southwestern.org* Co-Chair: Letecia Timmel, Four County

Ltimmel@Fourcounty.org

Thursday, February 16th – 10:00am-12:00pm EST via Zoom. For more information, *click here*.

• The REL committee remains committed to **mentoring and growing racially diverse leaders** within the CMHC system and invites centers to refer BIPOC-identified CMHC staff to contact our committee chairs if they are

interested in learning more. The REL Committee recently

developed a committee mission statement.

This mission statement will serve as a description of the committee's purpose and focus: "The Indiana Council Racial, Equity, and Leadership Committee is committed to driving the understanding, development, and implementation of DEI initiatives across the CMHC system while simultaneously providing mentorship and leadership development opportunities for the BIPOC-identified professionals.

#### STATE AND FEDERAL UPDATES





#### STATE UPDATES

Thank you to all of you who submitted group home capital information. We are finalizing our proposal on behalf of our members to submit today! We will keep you posted on the status of this funding.

 Indiana AG announces Opioid Funds will be distributed to communities -*Click here for Indy Star article* IndyStar.

Click here for further information pdf from FSSA

- Join the Indiana Council at the 2023 IRHA Public Policy Forum - Click here for details
- AHEC 2023 Annual Conference Self-care is Patient Care- call for proposals is attached.
- There are several RFFS out and due soon.
   To review click here.
- DCS Proposals Click here for DCS Proposal request page

#### Click here to download DCS RFI forms and info

- CCBHC Bridge grant fund
   The contract is moving through IDOA. The council is working on contract templates to send out as soon as the contract from the State is final.
- CCBHC Legislative Plan and Impact Report
   The plan has been submitted to the legislature!
   Click here to view the plan. Thank you to the
   members of both workgroups that assist in this
   plan development. DMHA has asked to keep the
   workgroups in place for when we are ready to
   work with them on the demonstration application.

This process will start the first part of this year to get it completed by the March deadline. **The CCBHC Demonstration Application has been submitted by DMHA.** The Indiana Council is proud to offer a letter of support regarding this application.

- State Data Warehouse thank you to the Data Analytics Committee for their work on this project. We have confirmed with the state that they are interested in having this project be a part of the demonstration process for CCBHC! We will be kicking off our meetings again in January.
- Future Facing Community Mental Health Centers Assessment and Development of Recommendations – A memo for this timeline was sent out in our monthly update. Thank you to the council's board who are the advisory committee for this project and to the members who have stepped up to be a part of the interview process.
- State Intake Improvement Project DMHA has reached out to all Data/IT contacts regarding the intake changes and updates.
- The Indiana Council Racial, Equity, and Leadership Community Mental Health Review, the vendor and the attached scope of work are finalized. I am thankful for the advisory committee from the Council to work with this vendor and look forward to this project getting underway in 2023!

#### STATE AND FEDERAL UPDATES

- DCS Training requirements Quality and Youth Services committee met with DCS. Our next steps in to align what was shared with the DCS auditing team and advocate for contract language changes since there are some flexibilities that DCS shared on the call, but we would like to confirm them with the audit team and get them in writing if possible.
- IPLA modernization. The Council is working with IPLA on these efforts
- Workforce The Council and our lobbyist team are working with the Hospital Association on a

workforce bill that Representative Manning will carry this coming session. We are also working with DMHA's new workforce director, Medicaid, and Senator Donato on removing the 2-year requirement and on a workforce development bill.

- HIP equalization still waiting on the CPT code break down.
- 988 update- the 988-leadership team will
   be joining the Council's Mobile Assessment
   Committee meeting for the first 20 minutes or so to provide updates to this group.

#### FEDERAL UPDATES

Thanks to you for raising your voice, the Omnibus spending bill passed by Congress, including substantial increases for mental health and SUD programs, as well as modest increases for I/DD programs. Other provisions also extend Telehealth rules for another year and eliminates the rule that prevented doctors from treating more than 100 patients with buprenorphine.

Subsequently, we learned that the **Restoring Hope** for Mental Health and Well-Being Act of 2022 (HR 7666, passed by the House in June 2022) was also part of the Omnibus Bill. An *excellent summary of the mental health provisions in the act* was published by a children's advocacy group, and include:

- Parity Enforcement: \$50 million over 5 years, starting in 2024, to fund state-level of mental health and substance use disorder parity laws. (Sec. 1331).
- Infant and Early Childhood Mental Health: Authorizes \$50 million per year for HHS to provide grants or contracts for technical assistance to infant and early childhood mental health programs (Sec. 1402).
- School-based Mental Health: Directs HHS to issue a report that identifies best practices for behavioral and mental health intervention teams



in schools and institutions of higher education (Sec. 1404). Authorizes HHS to provide grants or contracts for technical assistance to school-based health centers (Sec. 1401).

- Community-based Mental Health: Reauthorizes the Community Mental Health Services Block Grant, increasing spending from \$533 to \$858 million per year (Sec. 1141). Increases SAMHSA funding for children with serious emotional disturbances from \$119 to \$125 million per year (Sec. 1411).
- Mental Health Workforce: Reauthorizes a variety of HHS training grants (Sec. 1311) and authorizes \$13 million per year for a new Peer-supported Mental Health Services grant program (Sec. 1151).

#### **FEDERAL UPDATES**



- Integrated Primary and Behavioral Health Care: Updates SAMHSA's Integration Incentive Grants program (Sec. 1301).
- Crisis Continuum of Care and Coordination: Helps support behavioral health crisis care by: (a) establishing a Behavioral Health Crisis Coordinating Office at SAMHSA (Sec. 1101); (b) directing HHS to publish best practices for a crisis response continuum of care (Sec. 1102); and (c) authorizing \$10 million per year for a pilot program to divert the response for mental health and substance use disorder crises from law enforcement to mobile crisis teams (Sec. 1122).
- Mental Health Innovation: Authorizes \$10 million per year for a National Mental Health and Substance Use Policy Laboratory (Sec. 1121).
- Serious Mental Illness: Authorizes \$9 million per year for the Assertive Community Treatment Grant Program and \$22 million per year for assisted outpatient treatment (Sec. 1123) and directs HHS to conduct a study on the direct and indirect costs of serious mental illness, including health-related costs, homelessness, and criminal justice-related costs (Sec. 1124).



## Join me in Los Angles, CA in May for *NatCon23*.

The Council will be on a panel, and we will have a member dinner for all of you who attend!

Please feel free to share this information with your staff to let them know there is still time to lock in the lowest registration rate for NatCon23 and remind them to use your state discount code for additional \$50 in savings.

Your Discount Code: INmember23 Click here for more info and to register ANOTHER BILL, championed by the National Council and the Indiana Council, the *Mental Health Access Improvement Act*, was also included in the omnibus. This bill contains the following:

- **Telehealth:** Extends the telehealth flexibilities for COVID-19 through December 31, 2024.
- MFT/LPC services. Establishes Medicare coverage for services provided by marriage and family therapists and licensed professionals counselors beginning on January 1, 2024. This move will substantially increase the number of available professionals to treat mental health disorders nationwide. CMS regulations for promulgating the change are expected to be released this summer. Following release of those rules, MFTs/LPCs must then enroll as Medicare providers and obtain training about Medicaid policy. For more information, the American Association of Marriage and Family Therapy offers a detailed webpage.
- **Psychiatric residencies.** Creates 100-200 new medical residency positions dedicated to psychiatry or psychiatric subspecialities.
- Mobile crisis services. Increases payments for crisis psychotherapy services furnished by a mobile unit by 50 percent beginning January 1, 2024 and enables peer support specialists and other auxiliary personnel to participate in delivering both crisis and behavioral health integration services
- Partial hospitalization and IOP coverage. Changes Medicare's partial hospitalization benefit to provide coverage of intensive outpatient services, effective on January 1, 2024.
- The legislation also requires HHS to:

 Gather data needed to revise Medicare's prospective payment system for inpatient psychiatric hospitals and psychiatric units in 2025.

2. Conduct outreach to physicians and providers about the availability of behavioral health integration and OUD treatment services as covered Medicare benefits, and about the requirements to determine eligibility and bill using BH integration and OUD treatment codes.

#### **FEDERAL UPDATES**



**42 CFR, PART 2 changes simplify release of SUD treatment records.** On December 2, The Department of Health and Human Services released a notice of proposed rulemaking, suggesting changes to a cumbersome federal regulation that will make it easier for providers to share patients' confidential substance use disorder treatment records.

- Under 42 CFR, Part 2 the '70s-era law meant to safeguard SUD treatment records – patients have to consent each time substance use records are shared, an arrangement that makes compliance, as well as access and use of the information, more difficult for providers. Under the proposal, providers would only need to get a patient's consent one time to share substance use records, a standard more like that used in HIPAA, the federal law that protects other patient medical records.
- Indiana Council members, National Council together with other health and treatment organizations including the *American Society for Addiction Medicine*, have pushed for this change. The final rule would go into effect 60 days after publication on March 1, but compliance wouldn't be expected until February 2025.



### in brief

Click links to view articles

Resource: Crisis Intercept Mapping for Service Members, Veterans and their Families (SMVF) Suicide Prevention (SAMHSA)

Technical Assistance: From Crisis to Care: Building from 988 and Beyond for Better Mental Health Outcomes (SAMHSA) New Blog: Addressing The Nation's Behavioral Health Crisis: An HHS Roadmap to Integrate Behavioral Health (HHS)

#### HealthAffairs

Proposed Rule: Advancing Interoperability and Improving Prior Authorization Processes for Medicare Advantage Organizations, Medicaid Managed Care Plans, State Medicaid Agencies, CMS.gov etc. (CMS) Report: Long COVID (pdf) (HHS)



Rural Opportunity: USDA Seeks Applicants for Grants to Help People in Rural and Tribal Communities Access Remote Education and Health Care Resources (USDA)

#### HIGHLIGHTS



## Indiana Council Fall Conference

Thank you to all who attended our Fall Conference on October 27 & 28 - and a big thank you to our sponsors and speakers listed below:

#### **Speakers:**

Brett Beckerson Kyle Kessler Brent McGinty Shauna Reitmeier C.J. Davis Jay Chaudhary

#### Executive Level Partners:

- SmithAmundsen
- NextGen
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- CareSource
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- Afia
- MHA Indiana
- Hylant
- MHS
- Alkermes





Zoe Frantz & Senator Michael Crider



Zoe Frantz, Lt. Governor Suzanne Crouch, Jay Chaudhary



Senator Michael Crider, Zoe Frantz, Representative Greg Steuerwald, Dr. Carrie Cadwell

#### FROM OUR FALL ADVENTURES ...

Valley Oaks Admin Team & The Indiana Council





Representative Ethan Manning, Senator Stacey Donato, Indiana Council and 4C Staff



Ari Nassiri, Steve McCaffrey, Zoe Frantz, Jay Chaudhary



Committee meeting at our Fall Conference



Brett Beckerson – National Council of Well Being





Our Lobbyist Team – Grant Waggoner, Sydney Moulton, Lou Belch, Kelli Waggoner, Zoe Frantz



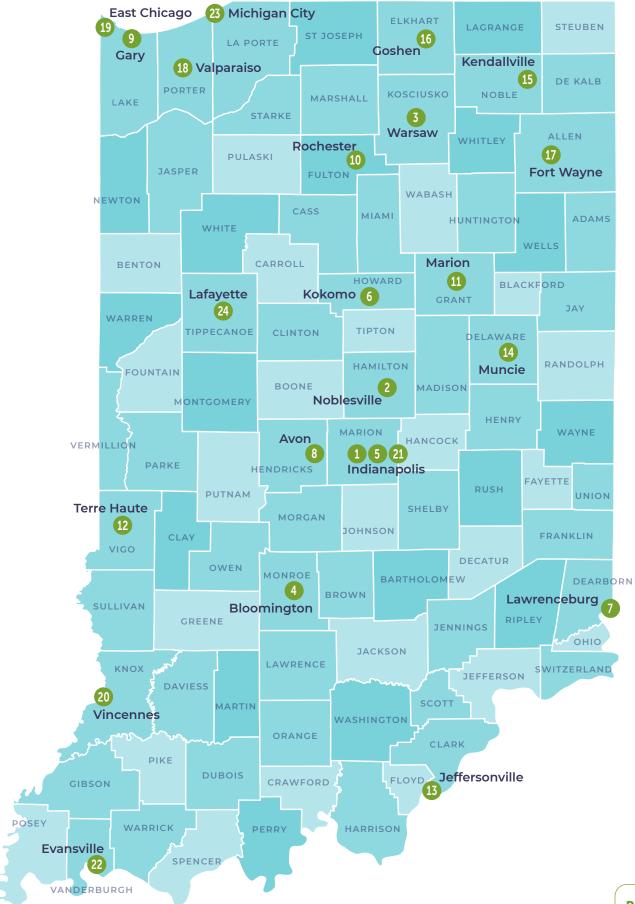
### **Our Providers** - Serving all 92 Indiana Counties

Indiana Council of Community Mental Health Centers, Inc. P.O. Box 875, Carmel, IN 46082 (317) 684-3684 indianacouncil.org

• Numbers show head office locations. • Click provider logos to visit their sites



>> Click here to view provider details on our site



#### UPCOMING EVENTS



## Calendar 2023 Save the dates!

### Cup of Joe with Zoe

Half hour State leader meet and greet with our members and partners, meets first Tuesday each month at 8:30am EST via Zoom.

UPCOMING DATES:





>> Click here for Zoom link Meeting ID: 210-953-5684 Password: ICCMHC

## Legislative Lunch



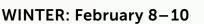
#### Wednesday, February 8 beginning at 8am.

A Legislative Event & Lunch with our members at the State House, 2nd floor Atrium, on Wednesday, February 8 - kicking off at 8:00, with Lt. Governor Suzanne Crouch speaking at 8:30am.
Breakfast from 8:00am-9:00am.
For more information on this event please click here.

- Location: *Hyatt Regency,* One South Capitol Avenue Indianapolis, IN 46204
- This is a member only event, and an individual PAC donation is encouraged to attend.

### Quarterly Meetings Locations TBD

Educational opportunities for members and partners to learn about Federal and State wide policy and Behavioral Health initiatives \*\*Continuing Education Credit offered for members only



Location: Hyatt Regency, One South Capitol Avenue Indianapolis, IN 46204

SPRING: May 10-12 SUMMER: July 26–28 FALL: October 25–27

Click here to visit our events pages

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For further information on any of these events please contact LeeAnn Jordan