



**LONG ISLAND REGIONAL PLANNING CONSORTIUM**

**Board of Directors Q1 2021 Meeting Minutes**

*March 11, 2021 10 am- 12 pm*  
Meeting held via Zoom

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**Call to Order & Welcome**

- Meeting called to order at 10:03 am by Kristie
- Welcomed new board members

**Roll Call & Confirm Quorum**

- Roll call completed/quorum confirmed

**Q3 Minutes Approval**

- Motion to approve:
  - 1<sup>st</sup> Mark Epley
  - 2<sup>nd</sup> – Jeff Friedman
- All in Favor, None Opposed
- Minutes Approved

**Workgroup Updates** – Alyssa gave updates for each of the subcommittees:

- **C & F**
  - Children & Family Medicaid Service Finder Pilot
    - Implemented on LI based on the Mohawk Valley Pilot on 2/11/21
    - Gave brief demonstration of the tool
    - Referral Forms recently added to assist with CFTSS referrals
    - 80% of LI Designated Providers are actively updating their information
    - Survey will be completed to obtain data on how the tool is working and if agencies have seen a difference in referrals and getting children connected.
    - Suggestion made to look in to connecting this to IPA or NOW POW to help with collecting data on referrals and utilization.

- Suggestion to look at Cognito forms as another option for connecting the tool to make referrals simpler
    - Service Finder is being expanded in to other regions across the state with a goal of it being taken over by a State Partner or other Entity
  - CFTSS/HCBS Learning Collaborative began in January
    - Varied experiences for people to learn from each other
    - Survey will be sent out for what other areas to look into
  - Universal CFTSS Regional Referral Form – Small taskforce established and met on 3/8
    - Looked through 14 referral forms to see what was working and what gaps could be filled
    - Agencies would need to buy-in to this as a transition/supplemental
  - Looking at cost for hiring and training YPST/FPSS staff prior to being able to bill for Medicaid services
    - Intensive credentialing involved
    - Looking at what the up-front costs are and the time it takes to recoup
- **HHH**
  - Completed an HCBS Service Directory with monthly updates
  - Focus is on the CORE transition
  - Next meeting 3/25 - focus on starting discussions with the Managed Care Plans around this transition
    - What is the focus of the group going forward?
    - Renaming this group – Does it make sense to rename the group when there no longer being “HCBS” Services
      - Adult Rehabilitative Services
        - It is important to remind people that it was formally known as HCBS
- **Peer Supervision Learning Collaborative**
  - Successful presentation from a peer run organization (HALI) on their peer supervision model which includes multiple types of supervision.
  - Surveying group to identify areas of focus to arrange presentations and create more concrete goals for the Collaborative
  - Looking for co-leads for the group to assist with direction and planning

#### RPC Updates:

- **Healthix**
  - Goal of bringing statewide entities to the table across the state

- Future of managed care – availability of additional, timely data sets
- What is the value being provided
  - Data for value-based arrangements
- Are RHIOs still opt-in only?
  - Yes – challenge to get client buy-in
- How do people feel about opt-in/opt-out?
  - Difficult getting consent with children, easier with adults – ongoing battle
    - Biggest obstacle – Healthix legal
    - Noted that there may be roadblocks with full consent for adolescents based upon their experience with the healthcare professional and their trust of healthcare
  - Important to increase education
    - Public education campaign
- **Key Partner Stakeholder Nominations/Voting**
  - On hold with RPC Status
  - Will begin this once the status is determined
  - Suggestions for key partners can be sent to Alyssa
- **RPC Project Status**
  - Project is part of the OMH Budget Assumption
  - Waiting on status with the Federal Relief being approved
  - Over 700 Stakeholders across the state, which is a rare forum to meet regional and state challenged
  - Conference is asking for full restoration
  - Focus is on the future
    - Stakeholder survey
    - RPC Evaluation Team
    - 4 co-chairs to craft a document
    - Looking for testimonials and photos
    - Public-facing document (April)
    - Sustainability Risk Analysis
    - Co-chairs letter will be sent later today
  - Call with Commissioner Sullivan to advocate for full restoration. Value is seen, but it is about budget
  - RPC Cannot lobby as it is a conflict due to being a neutral convener
  - Project may look different going forward
  - Will update Boards as more information is available

## **Primary Care and Behavioral Health Integration**

- Discussion focused on HEDIS measurements and starting to engage primary care in discussions about integration to be able to bring to Managed Care Organizations for Value Based Payment Discussions
- Primary Care is driven by different metrics than behavioral health
- Goal is to make sure patients have better access to services
- MCO Partners all agreed the need to focus on this now
- Discussed familiarity with HEDIS
  - Polled Board:
    - 38% Not Familiar
    - 33% Very Familiar
    - 29% Somewhat Familiar
- IPA's would be a good source for engagement and possible educator for the group.
- Should the VBP Group be re-instated?
  - Possibly look at this with re-naming it for inclusivity
- Polled the group to see if Primary Care and Behavioral Health Integration should be a priority for the region.
  - Yes – 75%
  - Unsure – 22%
- Based on poll this will be a priority
- Alyssa will send a survey to assess which IPA's organizations are connected to and then arrange for a presentation at the next Board Meeting to focus on this.

## Advocacy

- Advocacy Efforts across various groups have been occurring. Asked Board Members to give synopsis of the areas of focus to see where the RPC can align or support efforts.
  - **Health Home Coalition** – Hira Ruskin
    - Continuing state rates that were due to expire this year. Felt positively that this will be extended through 2022.
    - Proposed 1% cut (excluding children) to Health Homes
    - Telehealth – reviewed success from children's health home and continuation of the ability to use this modality
  - **NYAPRS** – Emily Vaianella
    - Restoring 5% cut to behavioral health services
    - Release 22 million in community investment funding
    - Increase funding for housing
    - Ending solitary confinement for young and elderly. End long-term solitary confinement
    - Funding peer crisis services -Other options for re-investing in the community
    - Opposing expansion of inpatient commitment standards

- Supporting voluntary crisis centers
- Protecting adult home rights and transition to community
- Extending funding for self-directed programs
- Revising Olmstead - Alternatives to nursing homes
- Passing legislation to address unresolved trauma
- **FTNYS** – Eileen Kadletz
  - Family empowerment week (versus day)
  - Townhalls occurred during the week. Mental Health/Substance Use Town Hall:
    - Money in budget for crisis centers
    - July 2022 – 988, mental health crisis support by crisis centers
    - Creation of mobile youth ACT teams – Long Island will be starting in late summer/early fall
    - \$10 million transfer from last year to this year’s budget for schools to enhance community resource support for families
    - OMH and OASAS integration
    - 5% reduction in state aid
    - CFTSS can be billed to Medicaid
    - Telehealth – advocated that it should continue for family/peer advocates post-pandemic
    - Crisis Centers – Separate areas will be for kids/families and adults with peer services as part of the structure
    - Lack of beds for RTF – Upgrade services in Community Residences
    - Lack of availability for CFTSS and HCBS
- **Others:**
  - **MHANYS** – Colleen Merlo
    - Focus was on funding in the state budget for providers, supportive housing and community investment.
    - Need funding for School Mental Health Resource & Training Center, Mental health trainings for school personnel, suicide prevention, mental health absence days
  - **ACL** – Mike Bellotti
    - More housing and services for Community Residences
    - Continuing to exclude housing from withholds or budget cuts
- RPC to partner somehow better distinguish between those truly in need of mental health and substance use care and those more for the criminal justice side

## 2021 Goals Revisited

- Alyssa Reviewed the Open Issues that were previously identified
- Consensus was to keep them all open and continue work in these areas
- Add Primary Care and Behavioral Health Integration as a Key Issue
- Open floor for other areas:
  - Managed Care Organizations identified Transitional Age Youth as an area of need from their perspective.
    - Would like to get an understanding of the transition from the Children's System to the Adult System.
    - Hear about the experiences of the clients
    - Where can MCO's help
  - First Episode Psychotic Episodes – besides ON TRACK, what other programs are willing and able to work with these clients

**State Partner Updates** - no other updates from OMH or OASAS

Meeting adjourned at 11:57 am