



ADMINISTRATION

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QUARTERLY REINVESTMENT COMMITTEE AGENDA

2/22/2022

10:00- 11:00

Microsoft Teams meeting

Join on your computer or mobile app

[Click here to join the meeting](#)

Or call in (audio only)

+1 267-603-3952

Phone Conference ID: **744 027 378#**

- I. Introductions and sign-in
 - Participants: Jacque Miller, Deanna Kimble, Elena Farr, Vanessa Shellman, Kelly Gordon, Carol Gilberti, Theresa Bower, Barbara Vanaskie, Shea Madden and Katie Hugo
- II. Overview of the Reinvestment Committee objectives if there are any new members (Jacque)
 - No new members joined the committee meeting.

III. Information update provided by HealthChoices

-Current reinvestment contract summary, Excess funds Summary (prepared by Elena/presented



Reinvestment
2021 YE.pdf



Reinvestment
Funds History to...

by Jacque)



REINVESTMENT
UPDATE_FEB 2022.do

-Current Reinvestment plans updates/status/outcomes (Deanna)

-OMHSAS approval letters, requests, and communications concerning reinvestment (Deanna)

- Deanna shared that presently, only the Community Based Peer Support plan and the Short Term RTF plan have funds remaining. It is expected that both providers will spend down their funds within the allowable timeframe, which is by January 1, 2023.
- Jacque indicated that HealthChoices may need to increase the amount of reinvestment funds available for the Short-Term RTF reinvestment plan in order to execute implementation. More information will be discussed next quarter, if this is a need. Currently, the provider is in the contracting phase; MHY Family services must contract with the Lycoming County Commissioners for the facility, Community

Care to bill for the services, and with HealthChoices to begin start-up/spending the reinvestment funds.

- V. Stakeholder feedback, recommendation(s) and requests for further study to determine feasibility of recommendations using future reinvestment funds.



CFST Literal
Comments Febr...

- VI. Sharing of CFS/T member comments (Deanna)
- Some members' literal comments identified a desire for MAT detox services; Shea and Barb clarified that there are two providers within 60 minutes of our counties which can provide facility-based MAT detox services however at this time, there are no OP detox options in our community.
 - Similarly, one member expressed a need for MAT in Clinton County. Shea and Barb provided information that both Clean Slate and Crossroads provide MAT support in this county. Moreover, the concern expressed by Shea regarding ensuring members are aware of this information was shared by the Committee. It was determined that the information will be given to the CFST to educate members and will be relayed repeatedly in provider and member forums.
- VII. Current Stakeholder and Committee Recommendations (see attachment)

Recent Stakeholder and Committee Recommendations

1. The recent closure of the Beacon Hub drop-in center has been felt throughout the community. Shea shared that the WBDAAC office has encountered a significant number of dually diagnosed members with no meaningful activities to fill their days. Although the Clubhouse and Skills' site base rehab programs could be an option for some individuals, these options are formal supports that require referral rather than an informal social program. It's important that we begin to explore another, sustainable drop-in center for our community.
2. Teresa identified the need for a local, longer-term OP step-down type service that could support individuals discharging from UPMC Susquehanna MHIP. Jacque shared that HealthChoices regularly meets with UPMC regarding expansion of services and has also had discussions with Geisinger about their expansion into our counties. This suggestion can be part of these discussions to improve engagement in aftercare services.
3. Jacque furthermore shared that there is a gap between facility levels of care like MHIP and RTF and individuals' return to the community; enhancing coordination of care and expansion of community-based services is an area of ongoing need.
4. Kelly shared that during her encounters with providers and families, she has recognized a lack of knowledge and skill regarding children diagnoses with Reactive Detachment Disorder (RAD). Jacque suggested that providers could utilize the HC Provider Training funds to pay for training; there may also be a local provider who would be willing to provide this training. This will be followed-up on and additional information will be shared at the next quarterly meeting.
5. Jennifer drew attention to the inadequate supports provided to incarcerated individuals with behavioral health needs. The committee discussed the current services and supports that are presently available in both Lycoming County Prison and the Clinton County Correctional Facility (MH and SUDs assessments, case management, and peer support) and what forms of additional help might be beneficial to this population. Suggestions included assistance with re-establishing MA eligibility, securing housing, and supports to help facilitate transition back to the community.
6. To help adults who are struggling to parent with mental health or substance use issues, parenting education and supports are recommended as a potential future reinvestment plan.
7. Carole shared that the new federal Family First Preservation Act will require counties to develop resources and processes that support family preservation and prevents children from being placed out of the home in residential

treatment facilities. Reinvestment funds may want to be directed towards activities and services that provide support to at-risk families.

8. Deanna shared plan ideas that have derived from Oversight and Internal Meeting discussions. Keith suggested moving forward with gathering information and data regarding Peer Specialist Transitional Supports to present for the consideration of the committee.

9. Teresa Bower noted that there is a shortage of counselors who are knowledgeable in eating disorders, such as anorexia. She also noted the ongoing shortage of services by psychiatrists. Jacque agreed with both her suggestions and added that the shortage of psychiatric services is a problem nationwide.

10. Denise Feger from Crossroad discussed consideration of any available reinvestment funds. Crossroads is considering starting a structured mental health outpatient program that would run about 9 hours per week. It would look similar to the structure of the methamphetamine program or their structured Intensive Outpatient (IOP). They would use these services for individuals in mental health court and those facing chronic mental illness.

11. HealthChoices staff shared about a program called MST-PSB and shared an outline of the program including how it could benefit the members of Lycoming/Clinton counties.

Next Scheduled Meeting: March 24, 2022 10:00-11:00