

# QUARTERLY LYCOMING-CLINTON HEALTHCHOICES REINVESTMENT COMMITTEE MEETING

MAY 26, 2020

## ATTENDANCE:

Jacque Miller – HC Director; Deanna Kimble – HC Quality/Clinical Manager; Elena Farr – HC Fiscal Officer; Keith Wagner – Executive Director and Ginny Noble, Housing Specialist - Lycoming-Clinton Joinder; Katie Hugo - West Branch Drug and Alcohol Abuse Commission; Carole Gilberti and Tracy Carney – Community Care Behavioral Health Organization; Jennifer Colon – Recovery Community Connections; Teresa Bower - consumer representative; Cathy Bennett, Joinder Administrative Assistant (present for minutes).

## OVERVIEW OF REINVESTMENT COMMITTEE OBJECTIVES:

Jacque Miller welcomed and thanked everyone for their attendance at today's meeting which was being held by call in or zoom conferencing. She noted that this meeting's purpose continued to focus on obtaining input from people in recovery with mental health or drug and alcohol issues on what programs or services to fund with available reinvestment dollars. She distributed the following materials to the group and these documents will be included as attachments to these minutes:

- Attachment A – Agenda
- Attachment B – Reinvestment Update – 5/26/20
- Attachment C – Reinvestment Funds History (2008 to Present)
- Attachment D – HealthChoices Reinvestment Report FY 2019-2020
- Attachment E – Recent Stakeholder and Committee Recommendation

## REINVESEMNT UPDATE THROUGH 5/26/20 (ATTACHMENT B):

Jacque Miller referred the group to the Reinvestment Update document noting that the recommendations that were made by the Reinvestment Committee at their February meeting had been submitted to the State in the Reinvestment Plan Document due in Harrisburg by March 1<sup>st</sup>. She noted that we hope to hear back from the State by next week regarding our request to fund and implement the listed services in this document. She also reviewed the current reinvestment continuation plans being funded which includes respite services through Diakon. She noted that funding for respite services was scheduled to end on June 30, 2020; however, a request to extend this plan for an additional year was submitted and approved by OMHSAS as all of the funds had not been able to be spent due to the Statewide COVID-19 shutdown. She also noted that a request for a one year extension was also submitted and approved to continue funding the Supportive Housing and Safe and Healthy Homes programs through Lycoming-Clinton MH/ID and West Branch Drug and Alcohol.

## REINVESTMENT FUNDS HISTORY (ATTACHMENT C):

The Reinvestment Funds History which summarized where funding has been utilized from 2008 through current programming was distributed to the group.

**HEALTHCHOICES REINVESTMENT REPORT - FY 2019-2020 (ATTACHMENT D):**

A spreadsheet which summarized the current services being funded was also distributed which showed funds previously spent and those remaining to be spent.

**RECENT STAKEHOLDER AND COMMITTEE RECOMMENDATIONS (ATTACHEMENT E):**

A document summarizing recent input from stakeholders and the Reinvestment Committee was also distributed and reviewed.

**GENERAL INFORMATION/DISCUSSION:**

Keith Wagner noted that he is working on the annual plan which is due in Harrisburg in July. He noted that if anyone had any suggestions for inclusion in this document to please forward them to himself, Jacque or Deanna.

Teresa Bower expressed her concern that physicians are prescribing medications such as Adderall to treat ADHD when it is highly addictive and there is an opioid epidemic in the country. She also noted that this medication can cause a bad reaction for individuals.

Jacque Miller asked the group if they had any suggestions for programs if new reinvestment funds would become available. She noted that the ongoing suggestion for a youth peer program for youth who have a mental health or substance abuse issues is being considered.

**NEXT MEETING:**

The next meeting date for the Reinvestment Committee was set for Tuesday, August 25, 2020 at 10:00 a.m. at the Sharwell Building.

Respectfully Submitted,

  
Jacqueline Miller  
HealthChoices Director



**ADMINISTRATION**

**KEITH WAGNER**  
MH Administrator

**SHEA MADDEN**  
D&A Administrator

**JACQUELINE MILLER**  
HC Director

**DEANNA KIMBLE**  
HC Quality/Clinical Manager

**ELENA FARR**  
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**QUARTERLY REINVESTMENT COMMITTEE AGENDA**

5/26/2020

10:00- 11:00

- I. Introductions and sign-in
- II. Overview of the Reinvestment Committee objectives if there are any new members (Jacque)
- III. Information update provided by HealthChoices
  - New Reinvestment plans updates/status (Deanna)
  - OMHSAS approval letters, requests, and communications concerning reinvestment (Deanna)
  - Current reinvestment contract summary, Excess funds Summary (Elena)
  - Current reinvestment plan outcomes (Deanna)
- IV. Stakeholder feedback, recommendation(s) and requests for further study to determine feasibility of recommendations using future reinvestment funds
- V. Current Stakeholder and Committee Recommendations (see attachment)

**Next Scheduled Meeting: August 25, 2020 10:00-11:00**

**REINVESTMENT UPDATE**

5/26/20

**I. Reinvestment Plans in Process:*****Reviewed by OMHSAS Team, revised/resubmitted on 4/15, and on docket for SSRC approval this month:***

- White Deer Run Trauma Focused-CBT Training (\$21,550)
- PCIT Expansion (\$20,000)

***Reviewed by OMHSAS Team, revisions are in process to move to SSRC for June meeting:***

- Integrated Peer Support Services (\$100,000)
- School Based Intensive Outpatient Services (\$25,000)
- Short-Term Crisis Residential Treatment Facility (\$427, 522)

***Draft plans being prepared for initial submission to OMHSAS Team by June 1<sup>st</sup>:***

- Methamphetamine Treatment Outpatient Services (\$71,438)

**II. Reinvestment Plan Updates:**

- ***Respite Services Continuation Plan***
  - ✓ During Quarter 3 (January 1, 2020-March 31, 2020) 28 families received respite services; two children served were identified as at-risk for out of home placement.
  - ✓ To date, a total of 20 respite providers are being utilized by families; most of these providers are individuals that the families specifically identify.
  - ✓ Referrals have been received from BHRS, Family Based Mental Health providers, children's TCMs, CSBBH providers, BLaST Academy, and MH and SUDS OP providers.
  - ✓ No children were placed in foster care or were identified as at-risk for placement in foster care.
  - ✓ 100% of families served report satisfaction with services, although some families reported being disappointed at the maximum cap that has been placed on utilization of respite, due to a reduction in funds from the previous year.
  - ✓ 100% of families reported an improvement in family functioning/family dynamics
  - ✓ 100% of families reported that respite reduced the stress in their household

Funding for Respite Services was scheduled to end on June 30<sup>th</sup>, 2020; due the anticipation of funds not being able to be spent due to the statewide COVID19 shutdown, a request to extend the reinvestment plan for one year was submitted and approved by OMHSAS this month.

- ***Supportive Housing Plan/Housing Funds and Safe & Healthy Homes Funds.***

- ✓ During Quarter 3 (January 1, 2020- March 31, 2020) WBDAAC served 26 members with Supportive Housing funds. MH/ID served 15 members with Supportive Housing funds, and 4 members with Safe & Healthy Homes funds to resolve bed bug infestations.
- ✓ 98% of total members assisted have maintained their housing; loss of housing was primarily related to relapse and incarceration.
- ✓ 98% of members experienced no IP admissions, crisis utilization, ER use, or were incarcerated.
- ✓ 100% of members served reported enhanced quality of life.

Funding for Supportive Housing was scheduled to end on June 30th, 2020; due the anticipation of funds not being able to be spent due to the statewide COVID19 shutdown, a request to extend the reinvestment plan for one year was submitted and approved by OMHSAS this month.

Lycoming-Clinton HealthChoices  
Reinvestment Funds History

ATTACHMENT C

Reinvestment Description	<u>Total Funds Available</u>	<u>Funds Spent</u>	<u>Remaining Funds Available</u>
<b>2008 Reinvestment Funds -</b>			
<b>D&amp;A Case Management</b>	\$ 76,766	\$ 76,766	-
Provider was WBDAAC. 45 members were served. Provider recruited 4 physicians in our bi-county area as prescribers for both Suboxone and Vivitrol and coordinated 2 county Medication Assisted Treatment (MAT) teams composed of prescribing physicians and representatives from SA providers to monitor clients' compliance with the MAT program. 100% of members in the MAT program for over one (1) year agreed the medication along with outpatient treatment assisted with their recovery; 50% report that the medication assisted with day-to-day tasks; reduction in higher levels of care was also noted.			
<b>Mobile Psych</b>	\$ 287,122	\$ 287,122	-
Reinvestment Committee was convened to prepare RFP and review proposals for provider; committee included 2 consumers, adult TCM, and two HSAB members. Provider was Skills. 192 members served when transitioned to medical spend; 97% of members sustained independent housing; participants achieved 63% of goals; members experienced a 25% reduction in use of Crisis and MHLP.			
<b>2009 Reinvestment Funds -</b>			
<b>Dual Diagnosis Outpatient</b>	\$ 74,174	\$ 74,174	-
Provider was Crossroads Counseling. Agency developed co-occurring OP services programming. Developed new policies, processes, and operations to establish self as co-occurring OP clinic. Hired and trained staff regarding co-occurring competency, expanded staff to include therapeutic specialties. Psychiatrist monitored all medications with limited wait time; clinic is able to serve a population that faced denial of admission in the past due to unmanageable substance abuse or mental illness. Successfully scheduling clients within one week of referral; 67 co-occurring clients served.			
<b>2010 Reinvestment Funds -</b>			
<b>Drop in Center</b>	\$ 55,591	\$ 55,591	-
See Below			
<b>2011 Reinvestment Funds -</b>			
<b>Drop in Center</b>	\$ 211,675	\$ 211,675	-
Provider was Skills. Reinvestment funding ended 2017. 35-40 members participate each week; staff provides transportation to and from building. Over 5 years of funding, consumer involvement in daily operations of drop-in center increased 25%; consumer engagement in positive community activities increased 60%; consumer sense of mutual support and encouragement towards recovery increased 57%.			
<b>Decision Support Center</b>	\$ 20,463	\$ 20,463	-
CSG agreed to participate in PCORI Grant regarding the Shared Decision Making (SDM) model. Funds allowed purchase of technology and software. 369 members were identified to utilize the DSC with Peer Support. Members successfully developed and applied personal medicine and power statements with prescribers, completed CommonGround health reports, and utilized the Recovery Library.			
<b>Enhanced Mobile Psych Rehab</b>	\$ 148,550	\$ 148,550	-

Provider is Skills. Program was rolled into a BHH APA at end of 2 year reinvestment plan. Wellness Nurse was hired and MPR staff were trained in wellness coaching. 83 members served at end of final reinvestment year. A 29% reduction in MHIP utilization was noted; 100% of members admitted to IP met with the nurse during their stay and 77% of members admitted to IP were assisted with coordination of aftercare during admission. 59% of members achieved one or more wellness goal; nurse and EMPR worker meet with UPCM Susquehanna MHIP staff weekly to review potential referrals, for discussion of current cases, and to meet with members to assist with discharge planning

**Child Respite**

See Below

**Dual Diagnosis Treatment Team**

Partnership with BHARP, Beacon Light is provider. Share team with Blair and HML; 5 members served.

Average length of stay in program for Lycoming Clinton members was longer than projected due to Lycoming Clinton members having high no show and cancellation rates for appointments; none were admitted to higher levels of care. Overall satisfaction rate with Team as reported by members was 4.6 out of 5.

**Substance Abuse Resource Center**

Providers prepared applications; receiving funds were WBDAAAC, PATH, White Deer Run OP, and Genesis House. Funds were utilized for technology and resources. Providers reported 3-18 members, family members, and supportive persons utilized the resources each week; WBDAAAC implemented RRC in both counties.

Resources regarding relapse prevention and helping family members in recovery were the most popular topics of information sought by clients.

**Supportive Housing**

See Below

**ASAM Network Wide Training**

Partnership among HC, CCBH, and WBDAAAC. 90 local SUD provider staff were trained in the use of ASAM Criteria tool. Three trainings were completed. WBDAAAC has confirmed that 100% of staff required to attend ASAM training have completed training; as part of SCA annual provider monitoring in Spring 2019, WBDAAAC will verify that 100% of SUD provider staff are accurately implementing the ASAM assessment tool.

**2012 Reinvestment Funds -**

**Child Respite**

Diakon successfully recruited respite staff from both counties to provide in-home, overnight, and emergency respite services. An average of 12 families each month were provided with an average of 30-50 hours of respite; services were requested for children with ASD, with multiple behavioral health issues, returning home after Residential Treatment, and with sexually reactive behaviors. Outcomes to date have been positive, with 100% of families reporting they are "Very Satisfied" with services and have experienced improvement in family functioning (70%). Only one child to date (less than 1% of members served) was placed out of the home.

**Evidence Based Trauma Treatment**

Providers prepared proposals to implement EBP for women's trauma support groups; providers were CSG, Crossroads, and Genesis House. CSG and Crossroads implemented groups in both counties. 86 members were served during reinvestment and providers reported a 85-100% retention and completion rate. Aggregate outcomes reported by members include a 50% decrease in MH symptoms, a 1-3% decrease in SA symptoms and a 25% reduction in trauma symptoms. 75% of members also reported an increase in improvement in overall functioning and coping skills.

**Supportive Housing**

	\$	5,785	\$	5,785	\$	-
	\$	25,000	\$	25,000	\$	-
	\$	23,811	\$	23,811	\$	-
	\$	31,195	\$	31,195	\$	-
	\$	26,055	\$	26,055	\$	-
	\$	71,268	\$	71,268	\$	-
	\$	99,536	\$	99,536	\$	-
	\$	39,803	\$	39,803	\$	-

See Below

**Healthy Homes - MH/ID**

This reinvestment plan revision expanded financial support available to help members maintain safe and healthy housing. Members in need of financial assistance to treat other home based health compromising conditions that prevent attendance at counseling, jobs, or school, may be considered for funds on a case by case basis. To date, 5 members have utilized these funds to resolve health concerns in their homes.

\$ 20,569 \$ 18,765 \$ 1,804

**2013 Reinvestment Funds -**

**Certified Peer Services**

Reinvestment funds were used for expansion of CSG CPS services and implementation of stand-alone 2nd choice for CPS services, to be provided by Skills. Skills' program was transitioned to the medical spend after reinvestment ended. CSG hired and certified two new CPS and one CSP Supervisor and all three received Forensic Peer certification; one peer also participated in Wellness Recovery Action Plan (WRAP) training. Skills hired and certified four CPS and one CPS Supervisor, and all three received Forensic Peer certification. 48 members were being served at the time reinvestment ended. Providers noted a 15% reduction in utilization of Crisis and a 31% decrease in admissions to MH/ID; members reported a 50% increase in self-esteem and social functioning.

**Supportive Housing - WBD AAC**

Reinvestment is utilized for Contingency Funds for members/clients of WBD AAC in need of affordable, safe, and independent housing. Plan was extended one more year, until 2020. 13 members were served last year. 100% of members maintained their housing; 92% of members did not access higher levels of care or were incarcerated; 100% of members reported enhanced quality of life and that having stable housing is providing a safe environment in which they can recover.

**Healthy Homes - WBD AAC**

This reinvestment plan revision intends to expand financial support available to help members maintain safe and healthy housing. Members in need of financial assistance to treat other home based health compromising conditions that prevent attendance at counseling, jobs, or school, may be considered for funds on a case by case basis. To date, 7 members have been assisted with funds and 100% have maintained their housing.

\$ 88,733 \$ 72,108 \$ 16,625  
\$ 20,569 \$ 1,015 \$ 19,554

**Contingency Fund Use - Supportive Housing MH/ID**

Reinvestment is utilized for Contingency Funds for members/clients of MH/ID in need of affordable, safe, and independent housing. Plan was extended one more year, until 2020. To date, MH/ID has served 11 members with supportive housing funds; 100% of members reported enhanced quality of life and that having stable housing is providing a safe environment.

**Community Based D&A**

Reinvestment funds were utilized to support training and implementation of Community Care model; provider was Crossroads Counseling. One team was recruited and trained for each county. Service was transitioned to the medical spend following reinvestment start-up. 16 members were being served at the end of reinvestment; 70% of youth being served had maintained sobriety since intake. Only one member was placed out of the home due to relapse. 100% of parents were willing to participate actively in treatment; families reported 34% improved communication and better insight into the dynamics of addiction.

\$ 159,985 \$ 159,985 \$ -



ATTACHMENT D

Reinvestment Agency	Description	Year	Contract amount for 19-20	Spend monthly												Spend 19-20	Remaining Contract Balance
				July 19	Aug 19	Sept 19	Oct 19	Nov 19	Dec 19	Jan 20	Feb 20	Mar 20	Apr 20				
Lyc/Cin MH WBDBA Lyc/Cin MH WBDBA	Healthy homes-MH Supportive housing-WB Supportive housing-MH Healthy homes-WB	12-13	16,999.50	865.50	176.60	-	996.40	20.02	2,755.00	1,551.40	2,831.12	3,767.80	2,231.97	15,195.81	1,803.69		
		13-14	65,650.29	3,850.00	4,555.00	2,840.00	6,959.56	4,025.00	5,516.00	3,475.00	4,825.00	6,390.00	6,590.00	49,025.56	16,624.73		
		13-14	46,449.00	3,020.00	4,850.00	3,206.00	1,650.00	5,464.00	13,984.00	10,143.00	4,132.00	-	-	-	46,449.00	-	
		13-14	19,554.00	-	-	-	-	-	-	-	-	-	-	-	19,554.00		
<b>Total</b>			<b>148,652.79</b>	<b>7,735.50</b>	<b>9,581.60</b>	<b>6,046.00</b>	<b>9,605.96</b>	<b>9,509.02</b>	<b>22,255.00</b>	<b>15,169.40</b>	<b>11,788.12</b>	<b>10,157.80</b>	<b>8,821.97</b>	<b>110,670.37</b>	<b>37,982.42</b>		
Diakon	Children respite services	17-18	72,226.00	2,206.78	4,507.66	4,861.33	4,113.98	6,012.04	4,187.11	9,546.36	150.46	6,791.36	5,975.05	48,352.13	23,873.87		
			72,226.00	2,206.78	4,507.66	4,861.33	4,113.98	6,012.04	4,187.11	9,546.36	150.46	6,791.36	5,975.05	48,352.13	23,873.87		
<b>Total</b>			<b>220,878.79</b>	<b>9,942.28</b>	<b>14,089.26</b>	<b>10,907.33</b>	<b>13,719.94</b>	<b>15,521.06</b>	<b>26,442.11</b>	<b>24,715.76</b>	<b>11,938.58</b>	<b>16,949.16</b>	<b>14,797.02</b>	<b>159,022.50</b>	<b>61,856.29</b>		

## Recent Stakeholder and Committee Recommendations

1. 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.
2. 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.
3. 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.
4. 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.