

**BOARD OF MENTAL HEALTH AND
SUBSTANCE ABUSE SERVICES**

January 24, 2014

**Department of Mental Health
And Substance Abuse Services
Oklahoma City, Oklahoma**

Board members present:

J. Andy Sullivan, M.D., Chair
Brent Bell, M.D.
Joel Carson
Mary Anne McCaffree, M.D.
Paul Pierce, M.D.
Ronna Vanderslice, Ed.D.
Gail Wood

Others present:

Commissioner, Terri White, ODMHSAS
Durand Crosby, ODMHSAS
Carrie Slatton-Hodges, ODMHSAS
Angie Patterson, ODMHSAS
Steven Buck, ODMHSAS
Pam Ball, ODMHSAS
Dewayne Moore, ODMHSAS
David Heath Holt, ODMHSAS
James Patterson, SOS

Carol Ladd, ODMHSAS
Nisha Wilson, ODMHSAS
Jason Maddox, ODMHSAS
John Hudgens, ODMHSAS
Jeff Dismukes, ODMHSAS
Bryan Hiel, ODMHSAS
Wendy Larson, ODMHSAS
Jeff Dismukes, ODMHSAS
Dina Fredman, Focus Counseling

CALL TO ORDER

Dr. Sullivan called the meeting to order and declared a quorum was present.

APPROVAL OF MINUTES OF THE NOVEMBER 15, 2013, BOARD MEETING

Mr. Carson moved to approve the November 15, 2013, minutes. Ms. Wood seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Sullivan	Yes
Mr. Carson	Yes	Dr. Vanderslice	Abstain
Dr. Pierce	Yes	Ms. Wood	Yes

**DISCUSSION AND POSSIBLE ACTION REGARDING PROGRAM
CERTIFICATION RECOMMENDATIONS**

Alcohol and Drug Treatment Programs

A. One-Year Certification

One-year certification was recommended for: Center Point, Inc.; Family Development and Intervention Services, Inc.; Four Winds Ranch Recovery

Center for Adolescent Females, L.L.C.; Osage Nation Counseling Center; Promises, Inc.; Tiger Mountain Recovery, Inc.; and YCO OKC, Inc., Tulsa.

Ms. Wood moved to approve one-year certification for the above-referenced programs. Dr. Pierce seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Sullivan	Yes
Mr. Carson	Yes	Dr. Vanderslice	Yes
Dr. Pierce	Yes	Ms. Wood	Yes

B. Two-Year Certification

Two-year certification was recommended for: CommunityWorks, L.L.C.; Resonance Center for Women, Inc.; Specialized Outpatient Services, Inc.; and YCO OKC, Inc., Oklahoma City.

Dr. Vanderslice moved to approve two-year certification for the above-referenced programs. Ms. Wood seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Sullivan	Yes
Mr. Carson	Yes	Dr. Vanderslice	Yes
Dr. Pierce	Yes	Ms. Wood	Yes

C. Certification with Special Distinction

Certification with special distinction was recommended for: Rogers County Drug Abuse Program, Inc.; and Valley Hope Association dba Oklahoma City Valley Hope.

Dr. Pierce moved to approve certification with special distinction for the above-referenced programs. Dr. Vanderslice seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Sullivan	Yes
Mr. Carson	Yes	Dr. Vanderslice	Yes
Dr. Pierce	Yes	Ms. Wood	Yes

Dr. Sullivan recognized Rogers County Drug Abuse Program, Inc., for scoring 100% in all categories at their site visit.

Opioid Substitution Treatment Programs

A. Two-Year Certification

Two-year certification was recommended for: Southern Oklahoma Treatment Services, Inc.; and VCPHCS IV, L.L.C. dba New Beginnings Medical Center.

Ms. Wood moved to approve two-year certification for the above-referenced programs. Dr. Pierce seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Sullivan	Yes
Mr. Carson	Yes	Dr. Vanderslice	Yes
Dr. Pierce	Yes	Ms. Wood	Yes

Outpatient Mental Health Treatment Programs

A. Permit for Temporary Operation

Permit for temporary operation was recommended for: Dallas Restorative Family Services, Inc.; Focus Counseling, L.L.C.; and Love and Associates Wellness Services, P.L.L.C.

Dr. Pierce moved to approve the permit for temporary operation for the above-referenced programs. Ms. Wood seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Sullivan	Yes
Mr. Carson	Yes	Dr. Vanderslice	Yes
Dr. Pierce	Yes	Ms. Wood	Yes

B. One-Year Certification

One-year certification was recommended for: iAspire Family Services, Inc.

Ms. Wood moved to approve the one-year certification for the above-referenced program. Dr. Pierce seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Sullivan	Yes
Mr. Carson	Yes	Dr. Vanderslice	Yes
Dr. Pierce	Yes	Ms. Wood	Yes

C. Two-Year Certification

Two-year certification was recommended for: Calming Connections, L.L.C.; Clear View Professional Counseling, Inc.; Hahn Psychological Services, L.L.C.; Healing Hearts Counseling Center, L.L.C.; Journey Therapeutic Services P.L.L.C.; Western Plains Youth and Family Services, Inc.; YCO OKC, Inc., Oklahoma City; and YCO Tulsa, Inc., Tulsa.

Dr. Pierce moved to approve the two-year certification for the above-referenced programs. Ms. Wood seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Sullivan	Yes
Mr. Carson	Yes	Dr. Vanderslice	Yes
Dr. Pierce	Yes	Ms. Wood	Yes

Community-Based Structured Crisis Center Programs

A. One-Year Certification

One-year certification was recommended for: Mental Health Services of Southern Oklahoma, Inc.

Ms. Wood moved to approve the one-year certification for the above-referenced program. Dr. Pierce seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Sullivan	Yes
Mr. Carson	Yes	Dr. Vanderslice	Yes
Dr. Pierce	Yes	Ms. Wood	Yes

B. Two-Year Certification

Two-year certification was recommended for: Oklahoma Crisis Recovery Unit.

Dr. Bell moved to approve the two-year certification for the above-referenced program. Ms. Wood seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Sullivan	Yes
Mr. Carson	Yes	Dr. Vanderslice	Yes
Dr. Pierce	Yes	Ms. Wood	Yes

Community Mental Health Center Programs

A. Certification with Special Distinction

Certification with special distinction was recommended for: Family & Children's Services, Inc.

Ms. Wood moved to approve certification with special distinction for the above-referenced program. Dr. Vanderslice seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Sullivan	Yes
Mr. Carson	Yes	Dr. Vanderslice	Yes
Dr. Pierce	Yes	Ms. Wood	Yes

Dr. Sullivan recognized Family & Children's Services, Inc., for scoring 100% in all categories at their site visit.

Community Residential Mental Health Programs

A. One-Year Certification

One-year certification was recommended for: Burdine, Inc. dba New Beginning Residential Care Home.

Dr. Pierce moved to approve the one-year certification for the above-referenced program. Dr. Vanderslice seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Sullivan	Yes
Mr. Carson	Yes	Dr. Vanderslice	Yes
Dr. Pierce	Yes	Ms. Wood	Yes

B. Certification with Distinction

Certification with distinction was recommended for: Santa Fe Residential Care Home, L.L.C.

Ms. Wood moved to approve certification with distinction for the above-referenced program. Dr. Pierce seconded the motion.

Dr. Sullivan recognized Santa Fe Residential Care Home, L.L.C., for scoring 100% in all categories at their site visit.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Sullivan	Yes
Mr. Carson	Yes	Dr. Vanderslice	Yes
Dr. Pierce	Yes	Ms. Wood	Yes

Dr. McCaffree arrived at 9:15 a.m.

DISCUSSION REGARDING REPORT FROM COMMISSIONER

Partners Meeting – Commissioner White stated that Steven Buck, Deputy Commissioner for Communications and Prevention Services, suggested that in January of 2014, we hold a Partners meeting with the facilities that deliver treatment services, prevention services, our advocacy agencies and some of our newer partners that are in private practice to discuss the FY15 budget. Commissioner White presented the budget request presentation that will be presented at the Capitol. This was a great opportunity for discussion and it allowed people to see what is going on in the system, in terms of the budget.

Oklahoma Watch-Out Forum, Tulsa, OK – This was a forum in Tulsa. Commissioner White stated that she and Mike Brose had an opportunity to be on a panel to talk about mental health issues. This was an open discussion forum that was moderated by the Oklahoma Watch.

Leadership Duncan Class XVIII Health Services Day – (Speaker) – Commissioner White had an opportunity to speak to the Leadership Duncan class regarding mental health and addiction issues.

Leadership Oklahoma City – (Speaker) – Commissioner White had an opportunity to speak to the Leadership Oklahoma City class regarding mental health and addiction issues. Commissioner White stated that she will be speaking at Leadership Oklahoma next month. This provides an excellent opportunity for leadership training on the mental health issues of Oklahoma.

Danielle Dill, Director of Health & Fitness; Dr. Myron Pope – Vice President for Student Affairs; Dr. Bruce Lochner – Director Student Counseling Center; Dr. Diane Genther – Staff Psychologist Student Counseling Center; Katrina Shaklee – Executive Director Wellness Center; Dr. Beth Kerr – Legal; Dr. Mark Hamlin – Chair Department of Psychology; Dr. Janelle Grellner – Professor Department of Psychology; and Adrienne Martinez – Director of Student Conduct, the University of Central Oklahoma – Commissioner White, Carrie Slatton-Hodges, Deputy Commissioner for Recovery and Treatment Services, and Steven Buck, Deputy Commissioner for Communications and Prevention Services, had an opportunity to meet with the staff from the University of Central Oklahoma. The University of Central Oklahoma is striving to be a prevention oriented campus around mental illness and addiction. They recently went through a restructure of their counseling center to help promote prevention. The Department is willing to provide resources to assist with this effort.

Prescription Drug Prevention Launch Multiple Media Coverage – (Interviews with The Oklahoman, The Journal Record, Channel 4, Channel 9, KTOK Radio and Statewide Radio News Network) – Commissioner White, Governor Fallin, Secretary Cline, and Darryl Weaver, Director of the Bureau of Narcotics and Dangerous Drugs, launched the Oklahoma Prescription Drug Plan. This is an effort to come from multiple angles to combat the issue of prescription drug abuse. The Department's primary focus will be on prevention and treatment services. Commissioner White stated that over 30 organizations were represented at this meeting. The Governor asked Commissioner White to chair this committee and Secretary Cline will co-chair. Commissioner White stated that the ultimate goal is to reduce the number of prescription drug overdose deaths in the state of Oklahoma.

Santa Fe School District Meeting – (Speaker) – Commissioner White spoke at the Santa Fe School District In-service meeting. The entire staff from the school district was in attendance to hear about the issues of mental health and addiction.

Commissioner White stated that the Department has had a lot of media coverage in the past month related to mental health and addiction issues. She had the opportunity to interview with Jaclyn Cosgrove from The Daily Oklahoman; Steve

Bennett from OETA; Ken Johnson from KOMA; and Lisa Shear with the Edmond Sun. These interviews help bring awareness of mental health and addiction issues that Oklahoma families are facing.

OETA Forum – Commissioner White had the opportunity to serve as a panel member with NAMI Oklahoma and NorthCare to bring awareness to Oklahoma’s mental health and substance abuse issues.

Freeze Your Face Off Baron’s Hockey Game Benefitting NAMI Oklahoma – Commissioner White and Steven Buck had the opportunity to meet with a parent that lost his son to mental illness. This individual partnered with the Baron’s hockey team and held a 5-K race prior to the hockey game to bring awareness of mental health issues that Oklahoman’s are facing. All proceeds from this event were donated to NAMI Oklahoma. Commissioner stated that there were over 800 participating in this event.

Office of Management and Enterprise Services Budget Hearing and Senate and House Budget and Performance Hearing – Commissioner White stated that we have had our budget hearing with the Senate and House and we are waiting for the Governor’s budget which will be released next week.

Dr. McCaffree wanted to bring a concern to the attention of the Board regarding opioid prescriptions. Her concern is opioid withdrawal for newborns and outpatient treatment. She feels like this is a group of people that we haven’t thought about. For example: An infant whose mother was taking prescription drugs and abusing this drug during pregnancy, her baby often has withdrawal symptoms, which is called the Neonatal Abstinence Syndrome. She stated that there is a specific protocol to follow to prescribe for that infant. She stated that we are running into problems being allowed to prescribe the necessary drugs because of the current regulations. Dr. McCaffree stated that if infants don’t get a prescription with decreasing amounts, that the infant suffers several other health issues. She would like to see us focus on this need to overcome the hurdles that the physician faces in writing the prescription for the infant.

DISCUSSION REGARDING REPORT FROM CHIEF OPERATING OFFICER

Durand Crosby, Chief Operating Officer, announced that our staff is already busy preparing for the Quality Team Day which will be held on May 8, 2014, at the State Capitol. Mr. Crosby stated that this is a day where we display our quality Improvement/Performance Improvement projects. Mr. Crosby also stated that last year the Department received 25 Governor’s Accommodations.

Mr. Crosby stated that the Suicide Prevention Conference is scheduled for May 21-22, 2014, and the Children’s Conference is scheduled for June 24-26, 2014. The Children’s conference will be held at the Embassy Suites in Norman, OK.

Cindy Rosenthal, Mayor of City of Norman and Terri White, Commissioner, ODMHSAS – Mr. Crosby stated that he and Commissioner White have attended several meetings regarding a community project in collaboration with the land owned by the Department. He stated that we will continue to meet with community leaders of Norman as this project develops.

Mr. Crosby mentioned that Dr. McCaffrey has previously asked that the department keep the Board apprised of when we have articles published in peer review articles. Mr. Crosby stated that the members of our DSS division were recently published in a peer reviewed journal, and we have a copy of the article if any Board members are interested in reading it. In addition, because of the expertise many of our employees have in their particular field, our staff are often asked to present at national conferences. Mr. Crosby informed the Board that recently David Wright and Nisha Wilson were asked to present on our drug court outcomes at the National Drug Court Conference.

Mr. Crosby stated that Steven Buck, Deputy Commissioner for Communications and Prevention Services, and his staff are busy going through bills. Mr. Buck will give a presentation in March to bring an update on where we stand on legislation.

DISCUSSION REGARDING THE REPORT FROM THE CORPORATE ACCOUNTABILITY COMMITTEE

Mr. Carson presented the report from the Corporate Accountability meeting that was held on Wednesday, January 22, 2014 as follows:

Dewayne Moore, Legal Counsel, presented the Advocate General's report to the committee, due to Ms. Cain being out ill.

The Advocate General's report was reviewed by the Committee.

There were no changes to the report.

Commissioner White introduced Jason Maddox to the Corporate Accountability Board as the new Inspector General.

The Inspector General's report was reviewed by the Committee.

Mr. Maddox reported that there were no changes to the report that was presented.

Mr. Maddox was asked for more details on two pending investigations from Board Member Joel Carson. After Mr. Maddox provided the information Mr. Carson requested, Mr. Carson moved to present the Inspector General's report to the full Board. Dr. Henry Haynes seconded the motion.

There was no further business discussed.

DISCUSSION AND POSSIBLE ACTION REGARDING THE OFFICE OF INSPECTOR GENERAL REPORT

Jason Maddox, Inspector General, stated that there was no additional information to add to the Inspector General’s report.

Mr. Carson moved to approve the Office of Inspector General Report. Dr. Pierce seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Sullivan	Yes
Mr. Carson	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes	Ms. Wood	Yes
Dr. Pierce	Yes		

DISCUSSION AND POSSIBLE ACTION REGARDING THE OFFICE OF CONSUMER ADVOCACY REPORT

Dewayne Moore, Legal Counsel, presented the Advocate General’s report. He stated there was no additional information to add to the report.

Mr. Carson moved to approve the Office of Consumer Advocacy Report. Dr. Vanderslice seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Sullivan	Yes
Mr. Carson	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes	Ms. Wood	Yes
Dr. Pierce	Yes		

DISCUSSION REGARDING THE REPORT FROM THE PERFORMANCE IMPROVEMENT COMMITTEE

Dr. Vanderslice presented the report from the Performance Improvement Subcommittee held on Wednesday, January 15, 2014 as follows:

There were two presentations for the January meeting.

The first presentation was by Leah Price, Executive Director, Tulsa Center for Behavioral Health (TCBH) on Elopements.

Executive Director Price indicated that there were a total of 27 elopements over the last year; that is an increase in elopement and elopement attempts in 2013. Many of these attempts never managed to leave the premises; however, they still created a cause for concern.

While some of these were due to staff error, an examination of the facts surrounding each of these elopements revealed that several were actually due to infrastructure issues at the facility. More than half of these incidents involved consumers slamming/kicking through doors, breaking the magnetic locks and

kicking through the actual walls of the facility. Some of the other incidents occurred at hospitals where consumers were being treated for medical emergencies.

They have undertaken several steps to prevent elopements, such as: securing all heat/air wall units with tamper proof screws; reinforcing walls of the building; the courtyard has been re-fenced with a taller fence and wiring has been placed above the fence line; trees and shrubs have been cut back or down completely; and magnetic locks on doors have been cleaned.

They are currently working with the property owner to further increase security and are examining other projects to make the facility more secure.

The second presentation was by Debbie Moran, Executive Director, Jim Taliaferro Community Mental Health Center (JTCMHC) and Carl Albert Community Mental Health Center (CACMHC) on the Enhanced Tier Payment System (ETPS) Measure Improvements.

Executive Director Moran stated that when she began as the Interim Executive Director of JTCMHC one of her first priorities was to evaluate the revenue issues. She began by researching their ETPS numbers, revenue sources and billing codes.

One of the first things she determined was that JTCMHC was approximately four months behind on billing with not all revenue sources being billed. This was primarily due to staffing issues and using inappropriate billing codes. Staffing issues were resolved and every program was evaluated in regards to data, collections and billing codes – corrections were completed. They are now current with all of their billing and have seen a drastic increase in collections.

Meetings were next scheduled with the Director of Information Services, Kevin Marble, and the Director of Data Support Services, Mark Reynolds, to research how much and what data was being uploaded into the Department's billing system. It was discovered that not all the data was uploading. Meetings were held with data entry staff to discuss issues and brainstorming of solutions. Systems and processes were established and implemented. The following steps were completed and processes established to ensure data was timely entered, and that the process was sufficiently monitored to correct errors and hold staff accountable.

Overall outcome:

They have improved revenue collections from \$127,827.32 for ETPS measures in FY-09 to \$1,263,187.30 collected in FY13.

They have also improved the numbers of consumers seen, from 627 consumers per month in March 2010 to 1157 per month in December 2013.

The meeting was adjourned.

Durand Crosby, Chief Operating Officer, addressed the Board regarding the types of presentations that will be presented in the Performance Improvement Subcommittee Meetings in 2014. Mr. Crosby discussed the new format of the critical incident report. This report shows a summary of consumer incidents, including data from the past 12 months and a comparison to national benchmarks to give the Board a better perspective for how the facilities have been doing over this time period.

This new reporting system allows us the opportunity for more detailed reporting of any possible trends and areas of concerns.

Mr. Crosby stated that an additional change for PI Subcommittee meetings is that previously we presented two performance improvement projects that we have recently completed and showed the final outcomes. We will continue to present one project that is completed, but we will now also present a project in its initial stage where we have identified an issue and are in the process of determining how to address the problem. This will not only give the Board greater insight into the staff's quality improvement process, but also give the Board the opportunity to provide greater input into the process as well.

DISCUSSION AND POSSIBLE ACTION REGARDING CRITICAL INCIDENT REPORT

John Hudgens had no additional information to add to the Critical Incident Report.

Dr. Pierce moved to approve the Critical Incident Report. Dr. Bell seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Sullivan	Yes
Mr. Carson	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes	Ms. Wood	Yes
Dr. Pierce	Yes		

DISCUSSION REGARDING THE REPORT FROM THE FINANCE COMMITTEE

Mr. Carson presented the report from the Finance Committee meeting held on Wednesday, January 22, 2014.

The Finance Committee was called to order by Dr. Haynes, Chair.
The Committee approved the minutes from the November 12, 2013, meeting.

Finance Report Ending December 2013

Mr. Edwards, Budget Director, presented the finance report for the month ending December 2013. He presented the budget to actual comparison report as follows:

Revenue collections were slightly below projections by \$240,000. Mr. Edwards explained that some of this is due to timing issues because some of the collections will be received at the end of the fiscal year. Other causes include our waiting to get a plan for our Medicaid administration costs approved by CMS. We expect to see this number improve before the end of the fiscal year. Expenditures are under budget by \$19.4 million or 8%.

The year-to-date net variance for the agency is a positive \$19.2 million or 8%.

SFY 2014 Budget Revisions #3 & #4

Mr. Edwards presented budget revisions 3 and 4 that had been processed since the last Finance committee meeting. Budget revision #3 was a \$3 million net decrease to the agency's budget. Details of the revision consisted primarily of a duplication budget error in the Enhanced Tiered Payment System.

Budget revision 4 was an increase of \$1.2 million to the agency's budget. Details of this revision consisted primarily of the new Disaster Response Grant of \$1.3 million for the Moore tornado's disaster relief activities.

SFY 2013 Audit Report

Mr. Edwards presented the FY13 State Audit Report for review. There were no significant issues arising from the audit report that was discussed, or were the subject of correspondence with management. There was one internal control deficiency noted that was communicated to management in the form of an audit finding; however, the deficiency noted was not considered to be significant or material weaknesses in the internal control accounting procedures.

The Finance Committee recommended approval of the FY14 December Financial Reports, Budget Revisions #3 and #4, and the FY13 State Auditor's Report.

There was no new business to discuss and the meeting was adjourned.

DISCUSSION AND POSSIBLE ACTION REGARDING MONTHLY FINANCE REPORT

Rich Edwards, Budget Director, stated that there were no updates to the reports.

Commissioner White introduced Mr. Edwards to the Board. She stated that Mr. Edwards has been filling in for Juarez McCann, Chief Financial Officer, while he is out of the office. Commissioner White distributed a copy of the budget presentation to the Board members. She stated that this is the budget presentation that was presented to Governor's office, the House of Representatives and the State Senate.

Mr. Carson moved to approve the Financial Report. Dr. Pierce seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Sullivan	Yes
Mr. Carson	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes	Ms. Wood	Yes
Dr. Pierce	Yes		

PRESENTATION

Carrie Slatton-Hodges, Deputy Commissioner of Recovery and Treatment Services, gave a presentation on Core Mental Health Services. Her presentation shows the core services that are currently being offered through the Department of Mental Health and Substance Abuse Services.

Who Do We Serve?

- We serve adult Oklahomans in need of mental health and substance abuse treatment who are 200% of poverty or below and have no other means of pay. We will serve any child in need of treatment who has no other means of payment.
- Because of limited resources, we also have illness severity criteria that must be met for adults to receive services.

Severity Criteria - Mental Health

First Priority

- Individuals with psychosis who have severe or extreme functional impairment. This includes persons with Bipolar disorder with psychosis, Major Depression with psychotic features, Schizophrenia, and Schizoaffective disorders.
- Those who pose a danger to self or others as a result of mental illness (“imminent” danger is not a requirement for outpatient services).
- Aftercare for persons leaving psychiatric inpatient or crisis units.
- Persons at risk of institutional placement or homelessness (e.g., mental health, jail, prison, etc.) due to symptoms and behaviors resulting from a serious emotional disturbance or any mental illness. This includes adults being released from jail/prison or transition age youth who initiated services prior to their 18th birthday or who are aging out of other public systems (e.g., child welfare or juvenile justice).

Second Priority

- Individuals with the diagnostic disorders described in priority one who have mild or moderate impairment.
- Individuals with major mood disorders.
- Individuals with anxiety disorders who have severe or extreme functional impairment.

- Individuals not otherwise meeting the conditions noted above, but who have a mental illness and have children who are receiving mental health services (for the purposes of promoting the overall health of the entire family and preventing a worsening of the child's situation).
- Individuals not otherwise meeting the conditions noted above, but who have a mental illness and are victims of domestic violence or other trauma (for the purposes of early intervention due to the potential impact of trauma and preventing exacerbation of the mental illness). This includes military veterans.

Third Priority

- Individuals with anxiety disorders who have mild or moderate functional impairment.

Fourth Priority

- Individuals with other diagnoses who meet the ODMHSAS criteria for serious mental illness.

Severity Criteria - Mental Health

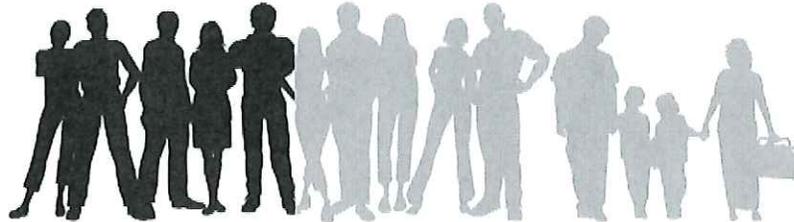
- Persons meeting the conditions of the First or Second Priority groups will be served.
- CMHC's will utilize available funding to the maximum extent possible to serve consumers in the other priority groups described above. However, services to consumers in those lower priority groups may be restricted if funding levels are not sufficient to do so.

Severity Criteria – Addiction

- 1) Pregnant, injecting drug users.
- 2) Pregnant substance abusers.
- 3) Injecting drug users.
- 4) Drug Dependent persons with HIV/AIDS, if physically able to participate in the treatment program.
- 5) Women with dependent children.
- 6) Minorities.
- 7) Other individuals with substance dependence, abuse, and/or use disorders.



Because resources are already limited, ODMHSAS-purchased services (indigent population) at local Community Mental Health Centers are provided based on a **tiered delivery system**...persons meeting levels 1 and 2 criteria are prioritized which means only those with the most serious illnesses are receiving services.



A cut to provider rates simply means that fewer people will be seen, and the tiered system of service delivery will be tightened even further...meaning that **Oklahomans with higher levels of acuity will be unable to access services** resulting in additional negative consequences for the individual, families and communities.

Is this the strategy for treating other illnesses such as heart disease?

Core Services Increase

ODHMSAS history shows the last time an increase in dollars for core behavioral health services was received in FY05.

Unpaid (Pended) Core Services

Value of uncompensated FY13 Core Services Provided by ODMHSAS Providers is \$5,291.298.

Service Need

Mental Health Services:

- **64%** of individuals eligible for our services are not receiving treatment.

Substance Abuse Services:

- **74%** of individuals eligible for our services are not receiving treatment.

This Year's Budget Outlook

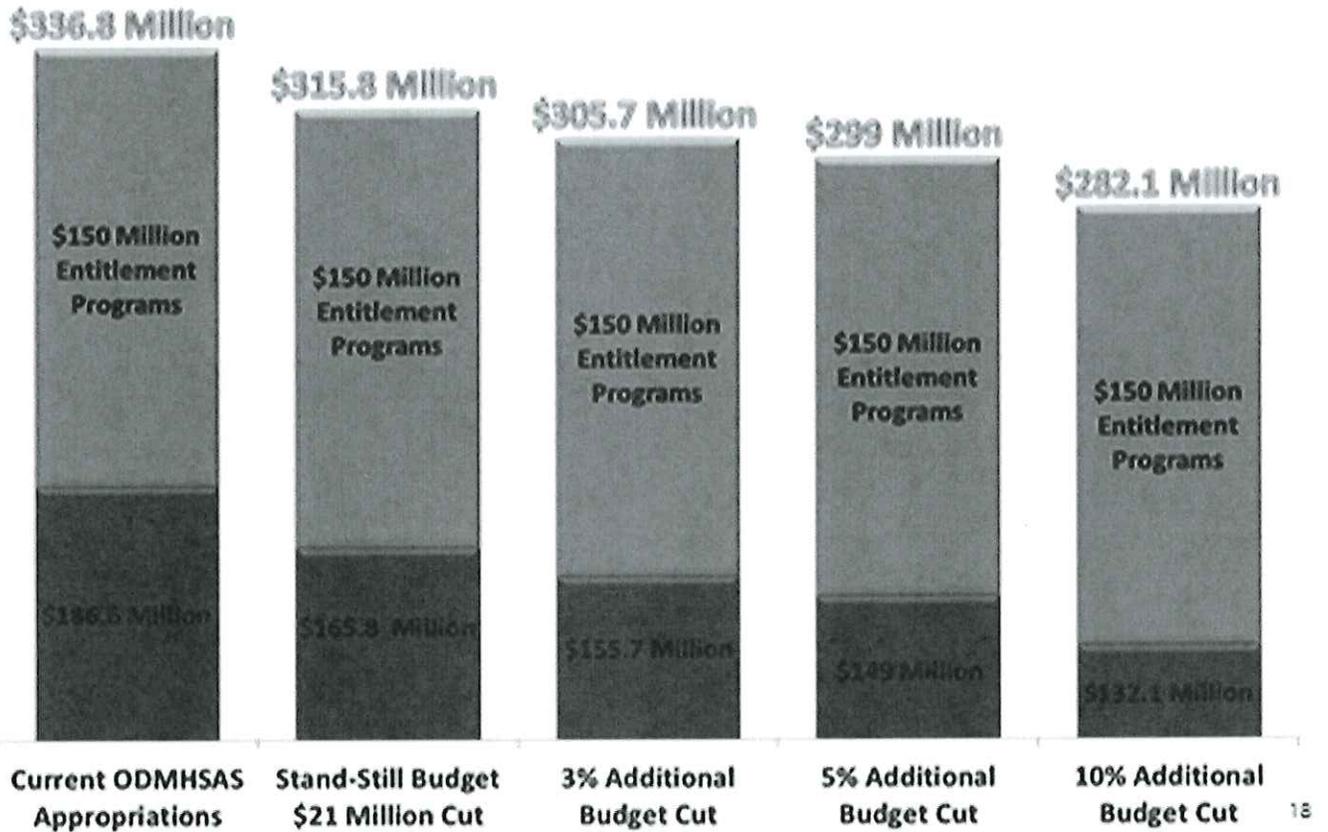
ODMHSAS will be forced to cut \$21 million from direct treatment services unless additional funding is allocated to maintain existing programs.

The department already has the lowest administrative overhead of any state agency (less than 3%). The only place to make cuts will involve state-appropriated funding that supports direct care and programs targeting at-risk populations. The potential for these cuts threaten to undo recent progress, the

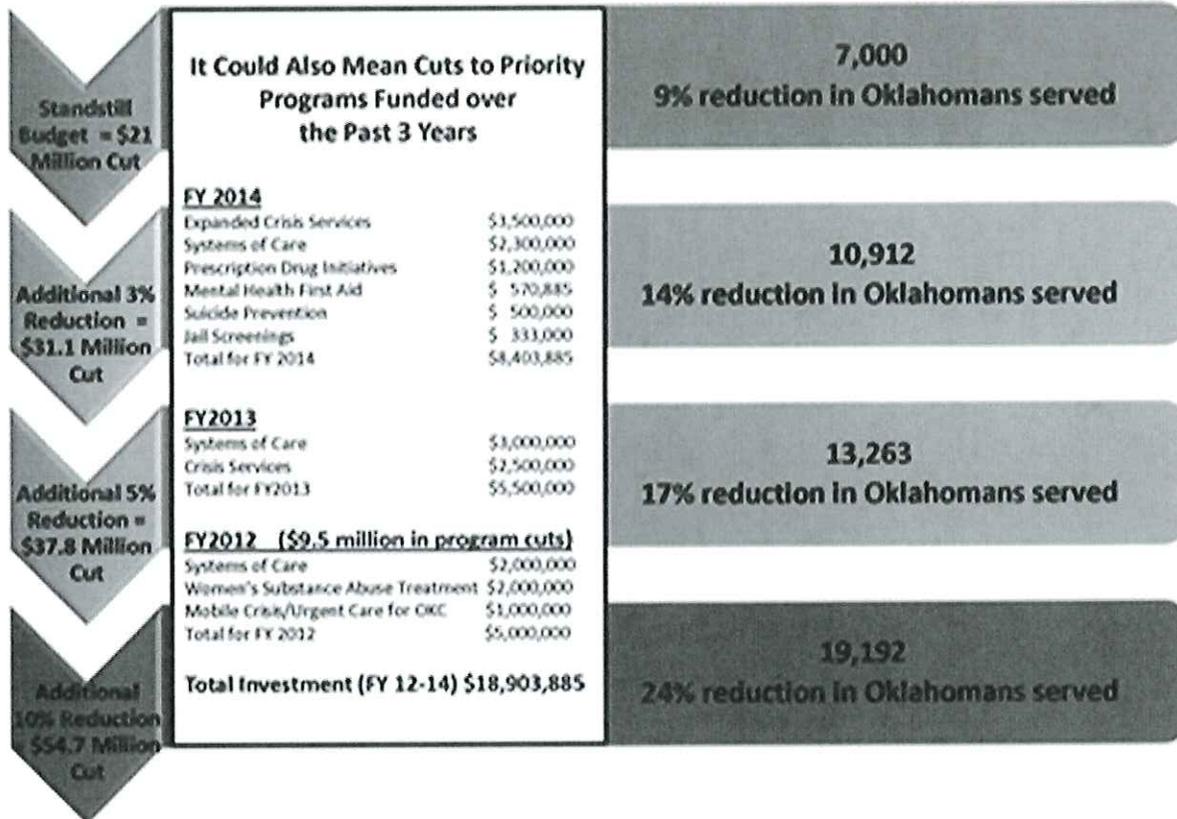
Governor's proposals and legislative investment for needed programs, in addition to further impacting other areas of state and local government (law enforcement, prisons and jails, education, local emergency services and community hospitals, foster care and other human services).

Cuts to ODMHSAS Services

Crisis Services, Hospital Care, Outpatient Services, Residential Treatment



Cuts Mean Oklahomans Losing Services



Top 10 FY15 Budget Priorities

Although things may appear gloomy at the state level, we remain optimistic, of course. We are still committed to achieving funding for evidence-based programs that will ultimately save thousands of lives and millions of taxpayer dollars:

- 1) **Maintenance of Existing Programs**
- 2) **Smart on Crime Initiative**
- 3) **Improving Behavioral Health Access for Oklahoma's Health and Safety**
- 4) **Health Homes**
- 5) **Provider Sustainability Rate Increase**
- 6) **Saving Lives and Families through Suicide Prevention**
- 7) **Treatment and Supports to Serve Oklahoma's Heroes**
- 8) **Screening, Brief Intervention and Referral to Treatment Private/Public Partnership**
- 9) **95 Additional Beds for Residential Substance Abuse Treatment**
- 10) **Law Enforcement Partnership to Reduce Illegal Alcohol Sales to Minors**

Top 10 FY15 Budget Priorities

Item #3

Improving Behavioral Health Access for Oklahoman's Health and Safety: \$12,600,179

Even with heightened attention given to ODMHSAS in recent years, and the growing understanding that behavioral illnesses are a priority health concern in our state, a majority of Oklahomans in need of behavioral health services are unable to access care. The department serves only **80,000 of the 700,000 to 950,000 Oklahomans** experiencing mental illness or a substance use disorder. For the average Oklahoman, services simply do not exist until their disease progresses to a point that it becomes a crisis...after jobs have been lost and there are no other options for treatment services except through government support, when families have already been irreparably harmed and, too often, after devastating consequences for the individual and others.

There has been an additional investment by the Governor and legislature over the past three years and that is greatly appreciated. That investment has been specific to initiatives targeting at-risk populations. We have not addressed the needs of the everyday Oklahoman who is in need of services, and often asking for services, to keep their illness from worsening and avoid the consequences of not providing treatment.

People Do Recover!

- Recovery rates for mental illnesses and addiction surpass the treatment success rates for many other physical illnesses, including heart disease.
 - Schizophrenia, 60%
 - Bipolar Disorder, 80%
 - Major Depression, 65% to 80%
 - Addiction Treatment, 70%

(Report of the National Advisory Mental Health Council, March 1998)

Summary

Tremendous need still exists in our state, as rates of prescription drug abuse continue to rise; waiting lists to obtain services continue to grow; and our state remains historically above the national average for its rate of incarceration.

There are success stories, though.

Reducing stigma, emphasizing prevention, and increasing access to care are necessary if we are to progress in treating these diseases of the brain. Also, integration with physical healthcare – particularly within primary care and emergency room settings – to implement screenings for substance abuse, depression and suicide risk, is essential.

Mental illness and addiction are diseases that can, and should, be treated. Thousands of Oklahomans are testaments to the fact that recovery is possible.

NEW BUSINESS

There was no new business.

ADJOURNMENT

Mr. Carson made a motion to adjourn the meeting. Dr. Pierce seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. Sullivan	Yes
Mr. Carson	Yes	Dr. Vanderslice	Yes
Dr. McCaffree	Yes	Ms. Wood	Yes
Dr. Pierce	Yes		

The meeting adjourned at 10:30 a.m.


Brent Bell, M.D.


Joel Carson


Mary Anne McCaffree, M.D.


Paul Pierce, M.D.


J. Andy Sullivan, M.D., Chair


Ronna Vanderslice, Ed.D.

Gail Wood