

# Insider

February 2019

## Message From the President

We are One!

Welcome to the first edition of our newsletter as Florida's One Behavioral Health Association (OBHA). In our first two months of operation we have seated three new boards, held three board meetings, integrated our legislative priorities, and continued to move forward with identifying a new name and logo for our OBHA. We recently hosted a reception and two board meetings in Tallahassee, and were thrilled with the powerful opening response from State Legislators and State Agency leadership. The Monday evening reception catered to more than 80 individuals including Representative Mel Ponder, Representative Cyndi Stevenson, Representative John Cortes, Representative Jennifer Webb, Representative Cindy Polo, Representative Adam Hattersley, and Representative David Smith.

The Advocacy Organization (dba Florida Council for Behavioral Health) Board Meeting was held on Tuesday February 12. During the Advocacy Meeting board members addressed legislative and policy issues with key legislative and agency leadership including AHCA Secretary Mary Mayhew, DCF Secretary Chad Poppell, Attorney General Ashley Moody and the Chair of House Appropriations Travis Cummings who asked questions and listened intently to our responses. The Tallahassee event concluded with our Services Organization (dba Florida Alcohol and Drug Abuse Association) Board Meeting on Wednesday.

In this issue we have much to share with you including legislative updates, state and national policy updates, grant opportunities, member and organizational profiles, and a list of upcoming events. We always welcome your feedback on this newsletter and all our communications.

We hope you take a moment to enjoy a few pictures from our Tallahassee meetings on the next page.

[Email Melanie here](#)



# Tallahassee Reception and Board Meeting Photos



TapRoot presents branding options



David Feldman



One BH Association Legislative reception



Anna Baznik, Sally Cunningham & Shane Messer



Doug Leonardo & Maggie LaBarta



Barbeque buffet



Jon Cherry & Deanna Obregon mingle with guests



Board meeting



Members mingling at reception



Services board meeting



Advocacy board meeting



Anna Baznik talks telehealth with Rep. Ray Plasencia



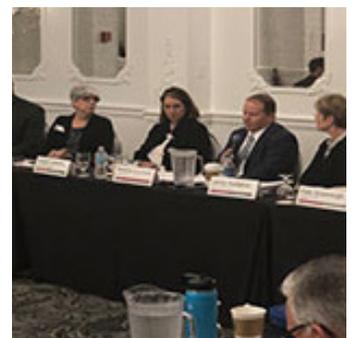
A full house at first board meeting



Members listening to update from AHCA Secretary Mary Mayhew



DCF Secretary Chad Poppel addresses the board



Rep. Travis Cummings shares legislative insights

# ICYMI - In Case You Missed It!

## AHCA Proposed Changes to Medicaid

The Agency for Health Care Administration (AHCA) is conducting a public hearing on Tuesday, February 26th to take comments on the most recent drafts of several Medicaid Behavioral Health Services Coverage Policies (BH Handbooks). In advance of the public hearing, AHCA requested feedback from One Behavioral Health Association members on the proposed coverage policy changes. A summary of the comments received by One Behavioral Health Association Members may be seen [HERE](#).

One Behavioral Health Association staff members will attend the AHCA public hearing in Tallahassee and provide comments on your behalf. Copies of the draft Medicaid Behavioral Health Services Coverage Policies can be found [HERE](#).

## Center for Medicaid and CHIP Services

The Centers for Medicare & Medicaid Services (CMS) is pleased to present the inaugural episode of our new podcast series, CMS: Beyond the Policy. We've heard from stakeholders that they don't often have time to read lengthy policy documents and participate in training. During some of our recent outreach and education efforts we heard first hand from doctors that a podcast would be a great way to present important, up-to-date information. With the goal in mind to inform the broadest audience possible about changes and updates made within CMS, we took that suggestion and created this podcast.

Our first episode focuses on Evaluation and Management Coding. Last November, CMS finalized changes in the Calendar Year 2019 Physician Fee Schedule (PFS) as part of efforts to help create a more accessible, affordable and innovative healthcare system that delivers quality for patients and empowers them to make the best decisions about their healthcare. The Calendar Year 2019 PFS included significant changes to how doctors and other clinicians document office and outpatient visits billed to Medicare.

In the coming months, we will continue to release new episodes that discuss new proposals, policies, and programs in this new forum. The first episode of CMS: Beyond the Policy will be available for download on iTunes and Google Play in the coming days.

Podcast Page: <https://www.cms.gov/podcast>

Episode 1: <https://www.cms.gov/podcast/episode-1-evaluation-and-management-coding>

## Addiction Recovery Housing in Rural Communities

U.S. Department of Agriculture (USDA) Assistant to the Secretary for Rural Development Anne Hazlett and Department of Health and Human Services (HHS) Assistant Secretary for Mental Health and Substance Use Dr. Elinore McCance-Katz announced that the two agencies will partner through a Memorandum of Understanding (MOU) to create addiction recovery housing in rural communities.

Through the MOU, nonprofit organizations will be able to purchase homes from the USDA Real Estate Owned single-family properties from the USDA and convert them to housing for people recovering from opioid misuse.

In December 2018, USDA launched the Community Opioid Misuse Toolbox. This initiative includes the [Community Resource Guide](#), a comprehensive directory of federal resources that can help rural communities address the opioid crisis, and the [Community Assessment Tool](#), an interactive database to help community leaders assess how and why the opioid epidemic is impacting their regions.



## Take the Survey: Defining Peer Support Under the Department of Labor - We Want Your Feedback!

On behalf of iNAPS, a national workgroup has developed a proposed definition for peer support specialist to submit for federal standard occupational classification through the US Department of Labor. The draft of this definition was presented at the Annual Conference in December and we received much valuable feedback.

We are asking you to complete this short survey regarding the proposed definition so that we can move forward with submission.

The proposed title, Peer Support Specialist, does not prevent the use of other job titles such as Recovery Coach, Peer Bridger, Peer Navigator, etc.

To complete the survey please click here or copy and paste this link in your web browser:

<https://www.surveymonkey.com/r/WCH7CL9>

## Member Spotlight - Individual

### Jacqueline Dowdy, CEO, River Region Human Services

(Q) How would you describe your job to a child?

(A) I oversee an organization that saves lives by helping individuals and families cope with health issues and provide services to help them live better lives.

(Q) How did you start out in this profession?

(A) My work in nonprofits began in 1987 when I served as the Office Manager and Accountant for the Prison and Jail Project (currently called the Carolina Justice Policy Center) and the Durham Community Penalties Program in North Carolina. The organization advocated for prison alternatives for defendants who were dealing with substance abuse and mental health illnesses. Through these programs, I did volunteer work with families who had relatives on death row. Additionally, I served on the Board of Directors for the Carolina Justice Policy Center for eight years and Options Plus, Inc. which was a program that worked with defendants of domestic violence. The advocacy work was centered around prison recidivism, policy for prison alternatives, and prison sentencing.

Personally, I was impacted by a family member who served in the Vietnam War who suffered from PTSD which eventually led to opioid use. It was my work with these agencies that I began to understand how mental health is connected to drug abuse. As an ordained minister in the United Methodist Church, I have always had a vision to develop a transitional housing program to assist men and women evolve back into society as viable, healthy and whole persons.

Although the last 13 years have been in higher education, it was easy to make the shift back to nonprofit advocacy and human service work. River Region Human Services presented an opportunity to leverage my experience and skills in organizational change and transformation.

(Q) What are the biggest challenges in your role?

(A) The major challenges in my role are the complexities of each program as it relates to the portfolio of funding sources and familiarizing myself with the DCF and CARF regulations and compliance requirements.

(Q) What is the most rewarding part of your job?

(A) The most rewarding part of my job is working with a team who is committed to serving and going beyond the call of duty to ensure that River Region remains a viable part of the community to continue serving clients and saving lives. Also, the opportunity to meet and connect with partners who are just as committed to the same mission...saving lives and communities impacted by the opioid crisis and AIDS/HIV epidemic in the city of Jacksonville.



(Q) What are your favorite hobbies?

(A) I love my dogs, Roxie who is a blue nose Pitbull and Bianca who is a Chihuahua. I love taking cruises to the Caribbean for vacations, playing games, and spending time with family and friends

# Member Spotlight - Organization

## Charlotte Behavioral Health Care, Punta Gorda

**(Q)** When another healthcare organization, or another member, thinks of Charlotte Behavioral Health Care what do you want them to visualize?

**(A)** We want to be seen as a patient-focused, innovative, trustworthy, flexible and quality-focused provider to our funders and other stakeholders. We strive to do things right the first time, and use continuous quality improvement to correct it when we don't.

**(Q)** How has growth affected CBHC since its launch in 1968-69 in terms of locations, staff, and patient services?

**(A)** We are excited to celebrate our 50th anniversary this year! CBHC began its operations in a small historical home in downtown Punta Gorda with a handful of staff. Today, we operate programs in three counties, with four locations in Charlotte, DeSoto, and Lee. We employ over 260 staff who proudly touch the lives of over 13,000 neighbors annually.

**(Q)** Are there any recent new programs or new innovative services that you would like to highlight?

**(A)** CBHC has been in a dynamic period of change for the past three years, with expansion primarily into intensive, community based programs such as FACT and CAT. We have been delivering telehealth services for several years, but strategically, we seek to double our volume of telehealth services over the next year.

**(Q)** What is the most common challenge you find when speaking with executives at other community-based behavioral health care organizations?

**(A)** Recruiting and retaining a talented workforce is one of the most significant challenges in our industry. One essential trait in our search for talent is a willingness to change. We, as behavioral health providers, ask our patients to change, and so it's imperative for our industry/staff/leadership to be change agents as well. With telehealth and other technology advancements, the way we deliver services over the next ten years is going to change dramatically, and our workforce and leadership will subsequently have to adapt or be left behind.

**(Q)** How does your organization define successful outcomes?

**(A)** First, and foremost, by maintaining 95% patient satisfaction results and through individual successes, one patient at a time. Next, by caring for our caregivers—the staff. Caring for staff more intentionally ultimately means better care for our patients. More objectively, we strive to deliver quality services that are readily accessible to our community, and we measure accordingly.

**(Q)** Are there any awards or recognitions received by CBHC that you would like to share with readers?

**(A)** CBHC was honored to receive the Charlotte Legacy Award from Drug Free Charlotte County for our efforts to address suicide prevention without a funding stream. We also were rewarded the Recovery Award by ARCHway institute, the Five Star Performance Award by Central Florida Behavioral Health Network, and the Non-Profit of the Year Award by the Punta Gorda Chamber of Commerce.

**(Q)** Can you please leave us with a last statement about CBHC: What is most important to remember?

**(A)** Last year, our management team got together to develop an updated mission statement and core values – a mission and core values that each of us felt truly represents our promise to the members of our community, our values as an organization, and what we strive to embody in our interaction with patients. I think the team summarized it best with our new mission statement to our patients: “Partnering to instill hope, inspire growth, and embrace life.” By living up to these standards, we deliver care that changes people's lives.



# Grants and Funding Opportunities

## Strengthening Systems of Care for People Living with HIV and Opioid Use Disorder

**Application Due Date: April 16, 2019**

This notice announces the opportunity to apply for funding for a new 3-year initiative entitled Strengthening Systems of Care for People Living with HIV and Opioid Use Disorder.

The purpose of this initiative is to fund an estimated one (1) to four (4) entities, referred to as System Coordination Providers (SCPs), who will assist states in leveraging resources at federal, state, and local levels for people living with HIV (PLWH) and opioid use disorder (OUD).

Specifically, the goal of this initiative is to strengthen system-level coordination and networks of care between the Ryan White HIV/AIDS Program (RWHAP) recipients and other federal, state and local entities funded to respond to the opioid epidemic to ensure PLWH and OUD have access to behavioral health (BH) care, treatment, and recovery services.

[Learn More About This Grant.](#)

## FY 2019 Linking Actions for Unmet Needs in Children's Health Grant Program

**Application Due Date: Friday, April 19, 2019**

SAMHSA is accepting applications for the 2019 Linking Actions for Unmet Needs in Children's Health Grant Program (Project LAUNCH).

The purpose of this program is to promote the wellness of young children, from birth to 8 years of age, by addressing the social, emotional, cognitive, physical, and behavioral aspects of their development. It is expected that this program will provide local communities or tribes the opportunity to disseminate effective and innovative early childhood mental health practices and services, ultimately leading to better outcomes for young children and their families.

SAMHSA plans to issue 15 grants of up to \$800,000 per year for up to 5 years.

[Learn More About This Grant.](#)

## Grants for Expansion and Sustainability of the Comprehensive Community Mental Health Services for Children with Serious Emotional Disturbances

**Application Due Date: Friday, April 19, 2019**

SAMHSA is accepting applications for Grants for Expansion and Sustainability of the Comprehensive Community Mental Health Services for Children with Serious Emotional Disturbances (System of Care (SOC) Expansion and Sustainability Grants). The purpose of this program is to improve the mental health outcomes for children and youth (from birth through age 21) with serious emotional disturbance, and their families. This program will support the implementation, expansion, and integration of the SOC approach by creating sustainable infrastructure and services that are required as part of the Comprehensive Community Mental Health Services for Children and their Families Program (also known as the Children's Mental Health Initiative or CMHI).

SAMHSA plans to issue 6-24 grants of up to \$3,000,000 per year for up to 4 years.

[Learn More About This Grant.](#)



## Maternal Opioid Misuse Model Funding Opportunities

**Application Deadline: May 6, 2019 at 3pm E.T.**

On behalf of the Innovation Center within the Centers for Medicare & Medicaid Services (CMS), we are excited to share that the Notice of Funding Opportunity (NOFO) for the Maternal Opioid Misuse (MOM) Model is now live.

The model aims to address fragmentation in the care of pregnant and postpartum Medicaid beneficiaries with opioid use disorder through state-driven transformation of the delivery system surrounding this vulnerable population. By supporting the coordination of clinical care and the integration of other services critical for health, wellbeing, and recovery, the MOM model has the potential to improve quality of care and reduce costs for mothers and infants. Additional information on the model can be found on the model's website: <https://innovation.cms.gov/initiatives/maternal-opioid-misuse-model/>.

State Medicaid agencies and their care-delivery partners are invited to apply for this funding opportunity until May 6, 2019 at 3pm E.T. The model application is on Grants.gov here: <https://www.grants.gov/web/grants/view-opportunity.html?oppId=312758>.

# Regulatory Updates

## Update on Methadone Medication-Assisted Treatment Licenses

In early December last year, Governor Rick Scott used his authority under Executive Orders 17-146 and 18-362 to direct DCF to suspend the requirement for a determination of need before issuing new licenses for methadone medication-assisted treatment. In response, DCF published a request for applications for the methadone medication-assisted treatment licensure component. Applications were due to DCF by February 4, 2019.

An appeal was filed in the First District Court of Appeals on January 4, 2019 requesting a stay on Governor Scott's action to suspend the needs assessment requirement, which would have effectively prevented DCF from approving new licenses. The 1st District Court of Appeals denied the motion for a stay on January 30th.

DCF reports that 123 applications for methadone medication-assisted treatment licenses were received by the February 4th deadline and staff began reviewing and processing them on February 5th. If application packets are found to be incomplete, applicants will be notified by DCF and given 10 days to cure any deficiencies.

Applicants will be notified directly by DCF if their application for licensure has been approved.



## Webinars and Workshops

### Upcoming Webinars and Workshops include:

February 26 - [Webinar: Concept of Recovery: Practical Recovery Management Applications](#)

February 27 - [Workshop: Opioid Use Disorder During Pregnancy: A Review of Medication Assisted Treatment-Dania, FL](#)

February 28 - [Webinar: Supporting Mothers and Babies Affected by Opioid Use Disorders \(OUD\)](#)

To see additional future webinars and workshops please [visit our community calendar](#). You may also view previously recorded webinars by visiting our [training library](#). If you're not already receiving the email alerts for all of our upcoming webinars and workshops, please sign up here to receive notifications on workshops around the state and registration for online webinars. FADAA's webinars, offered in affiliation with the Florida Department of Children and Families Office of Substance Abuse and Mental Health, allow you to receive Continuing Education for all fully attended live webinars.



# Events and Meetings

## Administrators Forum, May 9-10, 2019

Florida Mall Hotel and Conference Center  
1500 Sand Lake Road, Orlando, FL 32809

The forum brings together chief professionals in the Human Resources, Financial, and Information Technology fields in the Behavioral Health sector. The two day forum features stand-alone presentations for each group, as well as combined presentations. Last year's event had over 130 participants with the CFOs, CIOs and HR Directors from 30 different behavioral health organizations throughout the state of Florida.



## One Behavioral Health Association Board Meeting/ Strategic Planning, May 21-23, 2019

Embassy Suites by Hilton St. Augustine Beach  
Oceanfront Resort  
300 A1A Beach Boulevard, St Augustine, Florida, 32080  
Rate: \$149 (Inclusive of parking)

[Register for Meeting](#)

[Book a Room](#)



## Florida Behavioral Health Conference, August 21-23, 2019

Hilton Orlando Bonnet Creek Resort  
14100 Bonnet Creek Resort Lane, Orlando, FL 32821

**Registration is now open!**

[Registration for Attendees Here](#)

[Registration for Sponsors and Exhibitors Here](#)

This event has grown into the largest behavioral health conference in the Southeast and attracts more than 1,400 professionals, executives, exhibitors, and volunteers each year. The conference provides attendees with opportunities to learn and apply the most current technology, research, and trends to their daily jobs and to network with other professionals. The Florida Behavioral Health Conference 2019 will host three plenary sessions and over 80 workshops with multiple tracks available for continuing education. Come join us for the behavior health signature event of the Year: The Florida Behavioral Health Conference 2019!

