

ND Behavioral Health Planning Council (BHPC) Meeting
Video Conference
February 17, 2021

Meeting Minutes

Council Members in Attendance: Brenda Bergsrud (Consumer Family Network), Chairperson; Emma Quinn (Individual in Recovery-MH), Vice Chairperson; Kurt Snyder (Individual in Recovery, SUD), Immediate Past Chairperson; Lorraine Davis (Member at Large); Rosalie Etherington (DHS Behavioral Health Service Delivery System); Brad Hawk (Indian Affairs Commission); Jennifer Henderson (Principal State Agency: Housing); Cheryl Hess-Anderson (Vocational Rehabilitation); Andrea Hochhalter (Family Member of an Individual in Recovery); Teresa Larsen (Protection and Advocacy Project); Glenn Longie (Tribal Behavior Health Representative); Dawn Pearson (Principle State Agency: Medicaid); Amanda Peterson (Principle State Agency: Education); Lisa Peterson (Principal State Agency: Criminal Justice); Pamela Sagness (Principal State Agency: Mental Health); Kirby Schmidtgall (ND National Guard); Jodi Stittsworth (Family Member of a Child with SED); Carl Young (Family Member of a Child with SED).

Presenters and Staff: Tami Conrad (NDDHS, Project Manager); Bevin Croft (Human Services Research Institute); Daniella Rayel (Human Services Research Institute); Melissa Hillmyer (Human Services Research Institute); Jennifer Faul (Pediatric Mental Health Care Access Program); Kelli Ulberg (DHS, Behavioral Health).

Facilitator: Greg Gallagher, The Consensus Council, Inc.

Call to Order: Chairperson Brenda Bergsrud called the meeting to order at 12:03 PM, CT, via video conference. BHPC members and presenters provided self-introductions via video conference sign-in.

Quorum. With a majority of total current BHPC members not reporting present, Chairperson Bergsrud declared the absence of a quorum. No formal votes may occur until a sufficient number of BHPC members are present, defined as a majority of total current members.

Approval of Minutes. Chairperson Bergsrud called for the review of the [December 9, 2020, meeting minutes](#). Chairperson Bergsrud reviewed the minutes and deferred any action on the approval of the minutes, awaiting the presence of a quorum.

Approval of Agenda. Chairperson Bergsrud called for the review of the [February 17, 2021, meeting agenda](#) prepared by the BHPC Executive Committee. Mr. Gallagher provided an overview of the agenda. Chairperson Bergsrud declared the adoption of the agenda.

Review of BHPC Next Steps Summary. Greg Gallagher placed into the record [the BHPC Next Steps Summary](#), dated December 9, 2020, reflecting BHPC actions following the December 7, 2020, BHPC meeting. The *Recorded Next Steps* provides a cumulative listing of identified BHPC priorities, outstanding activities, and Council assignments. The *Recorded Next Steps* provides a basis for the development of all BHPC meeting agendas and informs BHPC members of issues that may require specific consideration. No action was required by the BHPC membership.

Current Status of Behavioral Health Planning Council Membership: Tami Conrad. Chairperson Bergsrud recognized Tami Conrad to provide an update on current BHPC membership vacancies. Ms. Conrad reported that the status of all [BHPC membership slots](#) is identified on the BHPC website and identified five dedicated slots which are transitioning for renewal or which remain to be filled, awaiting action from the Governor's Office:

- Healthcare Representative
- Family Member of a Veteran
- Principle State Agency: Social Services, pending
- Mental Health America of ND, pending
- Family Member of an Adult with SMI

Ms. Conrad stated that Sara Stoltz (DHS) will be nominating a replacement for the Social Services position. Carlotta McCleary has indicated she will be nominating a replacement for the Mental Health America of ND position. The Governor's office has received one application for the Family Member of an Adult with SMI position. The Healthcare Representative position and Family Member of a Veteran position have not received applications.

Ms. Conrad stated that individuals interested in being considered for filling a designated slot must submit a [state application form](#), which will be considered by the Governor's Office, leading ultimately to an appointment by the Governor, if accepted. Teresa Larsen requested consideration for the development of a BHPC brochure overviewing the Council's purpose, membership criteria, and application process, including links to the application form. Such a brochure could be posted online, printed, and distributed to encourage people to consider applying to be a member of the BHPC. Members expressed support for such an resource.

Summary Report of ND Behavioral Health Strategic Plan and Future Activities, Bevin Croft, [Human Services Research Institute](#). Chairperson Bergsrud recognized Dr. Bevin Croft, HSRI, to provide an update on the status of the [state's behavioral health strategic plan](#). Dr. Croft recognized Danielle Rayel and Melissa Hillmyer as a technical assistants for the project. Dr. Croft presented a [summary report](#) of recent activities designed to advance the state's behavioral health strategic plan, which sets the course for ongoing system monitoring, planning, and improvements in the long-term.

Dr. Croft revisited the Vision Statement and the 13 strategic plan aims adopted by the BHPC. Dr. Bevin stated that the principal role of the BHPC within this process is to oversee and drive the various systems improvement activities, including

- Providing advice regarding all project activities, including processes, plan development, and communications with the public;
- Approving the content in the strategic plan;
- Meeting quarterly with HSRI to review progress and determine next steps; and
- Committing the Executive Committee to meet monthly with HSRI.

Dr. Croft reported that following the December 9, 2020, BHPC meeting, discussions continued on renaming the state plan, moving forward. The plan has operationally been titled the *ND Behavioral Health Vision 20/20* since its inception; however, with a change in year and a maturing sense of its institutional standing, it has become necessary to reassess its title. The HSRI and the

DHS have set the final title for the state plan, following a review of compiled suggestions, as the [North Dakota Behavioral Health Plan](#), or *The Plan*, for short.

Dr. Croft provided an update on the status of designated team leads and BHPC liaisons who will guide the integration of the plan's various components. BHPC liaisons will coordinate oversight and channel support between quarterly BHPC meetings and work directly with DHS lead staff, who will provide administrative leadership. Current plans are to move the plan steadily forward, adjusting for impacts throughout the legislative session.

Representative liaisons reported on planning progress since the December 2020 BHPC meeting, noting that work on the plan has slowed considerably due almost entirely to activities surrounding the 2021 Legislative Assembly. Dr. Croft referenced a spreadsheet that is being developed to better record and monitor overall program management. A primary goal has been to identify all potential organizations that could be included in the various aims of the plan. It is anticipated that this activity will continue throughout the duration of the plan's activities. Members observed that the development of the DHS [Asset Map](#) has provided a good foundation for some of this work. Liasons expressed a need to dedicate a realistic amount of time to move the various plan goals forward. Dr. Croft referenced the [summary report](#) to overview activities during 2021. It is anticipated that the state plan's working draft will be updated quarterly.

Dr. Croft and Teresa Larsen introduced activities to move *Aim 12: Diversify and Enhance Funding* forward. Central to this discussion is the interplay between the state's Community Mental Health Services Block Grant (CMHSBG) and the Substance Abuse Prevention and Treatment Block Grant (SAPTBG), which both properly lie within the advisory domain of the Behavioral Health Planning Council. The Substance Abuse and Mental Health Services Administration (SAMHSA) merged the CMHSBG and the SAPTBG in 2011 and the state placed advisory responsibilities for these grants within the BHPC. In addressing recent 2021 legislative discussions and balancing budget allocations, the BHPC Legislative Committee has identified a need for the BHPC to more thoroughly study and address its proper role as an advisory body to the state regarding the CMHSBG and the SAPTBG, especially since striking a proper balance between mental health and substance use services has emerged as a clear challenge.

Members noted that both mental health and substance use matters define the scope of behavioral health, involving an interplay or overlap between the two areas. Program and budget categories sometimes introduce inelegant presentations of the two areas. How the BHPC approaches and presents this interplay will influence the span and accuracy of state policies. The state's behavioral health plan offers a framework to properly present behavioral health's scope and to fund behavioral health services, balancing all needs. Members requested to revisit the state's Medicaid state plan, the dedicated application of user taxes (e.g., alcohol, marijuana, gambling), and accessing the Legacy Fund, all which involve activities within Aim 12. Members encouraged the BHPC to broaden discussions on various ways to fund behavioral health activities, including recommending future legislative initiatives.

Members recommended that the BHPC invite DHS Medical Services staff to provide a presentation on the structure and management of Medicaid services.

Pam Sagness presented a summary of DHS quarterly budget activities, covering mental health and substance use categorical services. Ms. Sagness stated that the data indicate that more resources

are dedicated to mental health than substance use categories. Medicaid reimbursement for certain treatments, such as certain opioid treatments, have themselves demonstrated only recent enhancements. The service field is evolving quickly and the reimbursement systems have been slower in keeping pace. Many services address co-occurring or dual diagnoses. Members expressed an interest for the BHPC to prepare a position white paper that clearly identifies and promotes a proper integration of both service and budget initiatives, respectful of both mental illness and substance use disorder interests. For example, despite its great benefit to the state, the Medicaid 1915(i) state plan does not represent a panacea for funding issues, given its eligibility restrictions: how might the state better supplement this program to include those who are ineligible. Aim 12 within the state plan offers a means to move this financial support for services forward, as presented in the [summary report](#).

Dr. Croft stated that work will proceed to involve the active participation of BHPC liaisons, as set forth within the plan. Chairperson Bergsrud thanked Dr. Croft and all BHPC liaisons for their work.

Quorum. Greg Gallagher reported that a quorum had been achieved. Chairperson Bergsrud declared a change in the Regular Order of Business to consider and approve the [December 9, 2020, meeting minutes](#).

TERESA LARSEN MADE AND GLENN LONGIE SECONDED A MOTION TO APPROVE THE DECEMBER 9, 2020, MEETING MINUTES. THE MOTION PASSED UNANIMOUSLY. CHAIRPERSON BERGSRUD ANNOUNCED THE RESULTS AND DECLARED THE PASSAGE OF THE MOTION.

Chairperson Bergsrud declared the resumption of the Regular Order of Business.

Pediatric Mental Health Care Access Program, Project Update and BHPC Consultation. Chairperson Bergsrud recognized Jennifer Faul, Coordinator of the Pediatric Mental Health Care Access Program, to provide the program's quarterly report to the BHPC. Ms. Faul presented a summary of the PMHCAP's quarterly activities referenced in the [PMCHAP Quarterly Report](#).

The project has moved forward engaging various clinics related to *Goal 1: Increase telehealth behavioral health services to children and adolescents in underserved areas of the state*. This activity has secured the involvement of the following clinics: Elbowoods, Coal Country Community Healthcare, Center for Family Healthcare at UND Bismarck. Overall, 10 clinic contacts will be completed by the end of February 2021.

The project has marked steady progress with *Goal Two: Extend knowledge to pediatric primary care professionals across the state for the early identification, diagnosis, treatment and referral of mental health disorders*. During this past quarter, the project has conducted trainings in social pragmatic communication disorders, fetal alcohol syndrome, acquired traumatic brain injury disorders, involving screening and treatment. The project's statewide symposium is set for September 16, 2021. During the project's Year Two activities, approximately 245 pediatric professionals have participated in the regularly scheduled ECHO sessions and 145 pediatric professionals have participated in the annual symposium. Recorded trainings are available online.

The project's budget was submitted in February, awaiting approval, including the use of carryover funds related to treatment. The project will direct carryover to treatment and enhanced pediatric

professional training, aligned with American Academy of Pediatrics guidance. Dr. Faul referenced a series of collaborative activities specified in the [summary report](#).

In response to members expressed an interest in learning more about the PMHCAP's principal accomplishments to date, Dr. Faul stated that the first year's accomplishment centered on expanding pediatric professional training opportunities, instructions on screening tools and protocols, and preparing for the commencement of treatment during Year Two. Amanda Peterson expressed an interest in extending the project's outreach to schools across the state. Dr. Faul reported that the project has initiated contacts with select school districts to offer professional training on uniform screening tools and protocols and referrals. Dr. Faul and Dr. Etherington have discussed how to integrate the project's activities into the behavioral health state plan.

Chairperson Bergsrud thanked Ms. Faul for her presentation.

2021 Legislative Assembly Activities, Legislative Initiatives, and the Department of Human Services' Executive Budget. Chairperson Bergsrud opened discussion on 2021 Legislative Assembly activities, focusing on behavioral health initiatives and funding. Mr. Gallagher noted that during its December 9, 2020, business meeting, the BHPC established the BHPC Legislative Committee and appointed as its members, including Brenda Bergsrud, Emma Quinn, Kurt Snyder, Teresa Larsen, and Carlotta McCleary. The Committee was charged with (1) identifying prospective legislative initiatives aligned with the purpose of the BHPC; (2) monitoring legislative initiatives through the legislative process; (3) coordinating communications with BHPC members and facilitating effective BHPC input throughout the process; (4) soliciting the active participation of BHPC members; (5) drafting legislation that might advance the aims of the BHPC and the state's behavioral health strategic plan; and (6) empowering the BHPC Legislative Council, with full participation of the BHPC Executive Committee, to transact legislative activities that support the aims of the BHPC.

Since the December 2020, the BHPC Legislative Committee has conducted eight separate meetings, documented with minutes and supporting materials:

- [December 16, 2020](#)
- [December 29, 2020](#)
- [January 8, 2021](#)
- [January 15, 2021](#)
- [January 22, 2021](#)
- [January 29, 2021](#)
- [February 5, 2021](#)
- [February 12, 2021](#)

Teresa Larsen and members of the BHPC Legislative Committee presented a [summary list](#) of certain legislative initiatives which have emerged as significant issues impacting behavioral health interests.

Members reviewed the proposal for a new state hospital, which was extensively documented during the [December 29, 2020](#), BHPC Legislative Committee, including Dr. Etherington's detailed summary reports. During the initial phase of the legislative session, certain amendments have emerged, including conducting a larger interim study, securing a central state hospital location,

and/or providing other regional hospital/clinic locations specifically in the western half of the state. Current legislative discussions are encouraging, mindful that there are many more conversations ahead.

Committee members reported that the BHPC submitted testimony in support of HB 1089 related to aversive therapy.

Committee members reported that the BHPC submitted testimony in support of HB 1318 related to securing seclusion and restraint plans and reporting within schools; however, the prospects for this bill appear tenuous.

Committee members reported that the committee has been monitoring legislative discussions related to the potential use of revenue enhancements generated from recreational marijuana for dedicated behavioral health treatment, assuming the recreational marijuana proposal were to move forward. As the conversations continue, the BHPC should be in a position to propose the use of any revenue enhancements for treatment, if the bill were to move to the second Chamber.

Committee members reported that the BHPC has stated its support for HB 2311, and the prospects of initiating improvements to the state's K12 academic content standards to address behavioral health promotion and care and suicide prevention.

Committee members reported that the BHPC has been monitoring legislative discussions on HCR 3032 related to a hospital discharge database and SB 2161 related to a hospital bed registry and management system. A bed registry and management system supports family efforts to secure and track empty treatment beds statewide.

Committee members reported that the BHPC has been monitoring legislative discussions on HB 1038 and HB 1380 related to the use of the state's Legacy Fund. The BHPC has previously identified the use of Legacy Funds to support behavioral health services. The committee anticipates that this discussion will advance to an interim study.

Committee members reported that the BHPC has been monitoring legislative discussions on how to improve the state's Medicaid state plan, specifically supporting enhanced technical assistance to service providers. The committee has explored the prospects of drafting language for insertion into the DHS executive budget to encourage the development and use of a service provider navigation system to improve Medicaid training and reimbursement technical assistance. The DHS has conducted similar technical assistance for schools to support their access to provider services and reimbursement. The DHS supports such an activity. Members expressed support for the BHPC to advance this initiative with both DHS and the Legislative Assembly.

Committee members have observed that the BHPC would benefit from additional training on both the the Mental Health Block Grant and the SUD Block Grant into future BHPC meeting agendas.

Committee members reported that the BHPC has been carefully monitoring discussions on HB 1012, the DHS Executive Budget. Members observed that progress is being made to recover some of the initial cuts to behavioral health programming. The House has moved the behavioral health division's budget forward, pulled out the SUD Voucher Program for further review, established a 75% hold even budget base, and incorporated certain guiding amendments. Mr. Gallagher

reported that the BHPC Legislative Committee has scheduled its next meeting for March 5, 2021. All BHPC Legislative Committee meetings are open to the public and public notice is issued.

Public Comments. Greg Gallagher opened the floor for any public comments. No members of the public came forth to provide comments. Greg Gallagher closed the period for public comment.

Review of BHPC Next Steps Summary. Greg Gallagher revisited [the BHPC Next Steps Summary](#), dated December 9, 2020, reflecting BHPC actions following the December 7, 2020, BHPC meeting. The summary will be updated to include the proceedings of the February 17, 2021, BHPC meeting, forming the basis for future meeting agendas.

Behavioral Health Division Updates: Pam Sagness, Department of Human Services. Chairperson Bergsrud recognized Pam Sagness, DHS, to provide a general overview of recent DHS' activities.

Ms. Sagness reported that Tami Conrad has assumed responsibility for the management of the Mental Health Block Grant.

Ms. Sagness noted that the Behavioral Health Division has taken on certain responsibilities and staff from the recent closure of Lutheran Social Service, including staff from the Project Renew Team, which provides crisis Covid services from FEMA and SAMHSA funding, and the Gamblers Choice Program.

The state's Medicaid State Plan was recently approved by CMS and now moves into a full implementation status.

The DHS will be conducting a soft launch of Community Connect, a new program which expands the Free Through Recovery Program to include individuals who have a substance use disorder or severe mental illness or behavioral health needs with other at-risk factors. The soft launch has already produced 98 referrals.

Effective November 1, 2020, the Behavioral Health Division has initiated the Community Behavioral Health Program, the Covid emergency funded program that may extend to end of the fiscal year and has provided support for 250 individuals .

The state's Covid grant, providing services for individuals with mental illness or SUD or behavioral health needs, has received an additional \$2.8 Million running through May 2022.

Chris Jones has agreed to meet with the BHPC at its July 21, 2021, meeting.

DHS has submitted the System of Care Grant for youth services; however, the impacts of the pandemic required the state to return the grant, since the grant's terms did not allow for an extension. The state will hopefully receive this grant in the future. It has been submitted.

Ms. Sagness presented a general overview of Mental Health Block Grant awards and encouraged the BHPC to delve more deeply into the Grant's structure, going forward.

BHPC Meeting Dates for 2021. Future BHPC meeting dates include the following:

- Wednesday, April 28, 2021, 10:00 AM – 4:00 PM, CT;
- Wednesday, July 21, 2021, 10:00 AM – 4:00 PM, CT;
- Wednesday, October 20, 2021, 10:00 AM – 4:00 PM, CT;

Adjournment. Having completed all agenda items and hearing no further comments from the BHPC members, Chairperson Bergsrud entertained a motion to adjourn.

KURT SNYDER MADE AND EMMA QUINN SECONDED A MOTION TO ADJOURN. THE MOTION PASSED UNANIMOUSLY.

CHAIRPERSON BERGSRUD DECLARED THE MEETING ADJOURNED AT 2:27 PM, CT.

Respectfully submitted,

Greg Gallagher
Facilitator,
The Consensus Council, Inc.

Appendix A
BHPC Meeting Agenda
February 17, 2021

Behavioral Health Planning Council Meeting
Wednesday, February 17, 2021
Video Conference Meeting
12:00 PM – 2:30 PM, CT

Agenda

- 12:00 PM Welcome and Call to Order: Brenda Bergsrud, Chairperson
Roll Call of Council Members via Electronic Sign-in
Quorum
- Approval of December 9, 2020, Meeting Minutes
Approval of February 17, 2021, Meeting Agenda
Review of BHPC Next Steps Summary: Greg Gallagher
Current Status of Behavioral Health Planning Council Membership:
Tami Conrad
1. Healthcare Representative
 2. Family Member of a Veteran
 3. Principle State Agency: Social Services
 4. Mental Health America of ND
 5. Family Member of an Adult with SMI
- 12:15 PM Summary Report of ND Behavioral Health Strategic Plan and Future
Activities, Bevin Croft, [Human Services Research Institute](#)
- Behavioral Health Funding Strategies and Priorities, and
Identifying Additional Goals within Aim 12: Teresa Larsen, Protection
and Advocacy Project
- Open Discussion: BHPC Members
- 1:15 PM Pediatric Mental Health Care Access Program, Project Update and
BHPC Consultation: Kim Mertz, Department of Health; Jennifer Faul,
PMHCAP Coordinator
- 1:20 PM 2021 Legislative Assembly Activities
- Legislative Initiatives
 - HB 1012, Department of Human Services Executive Budget
- [BHPC Legislative Committee Meetings](#)
- [December 16, 2020](#)
 - [December 29, 2020](#)
 - [January 8, 2021](#)
 - [January 15, 2021](#)

- [January 22, 2021](#)
- [January 29, 2021](#)
- [February 5, 2021](#)
- February 12, 2021

2:20 PM Public Comments

Next Steps: Brenda Bergsrud, BHPC Chairperson

2:30 PM Adjourn

Next Meeting: Wednesday, April 28, 2021, 10:00 AM – 4:00 PM, CT;

Videoconference Connections. Members and the interested individuals can join the Council's proceedings, via computer or phone connection at the following address or phone number:

Topic: BHPC Quarterly Business Meeting

Time: Feb 17, 2021 12:00 PM Central Time (US and Canada)

Join Zoom Meeting

<https://us02web.zoom.us/j/82012797734>

Meeting ID: 820 1279 7734

Phone Connection Option: 346-248-7799 US

Enter code: **820 1279 7734#**