



Long-Term and Behavioral Health Committee Minutes
Thursday, April 8, 2021
10:00 a.m. -12 Noon
WebEx Event

DRAFT

Healthcare Planning and Certificate of Need Section

This remote meeting was held during the COVID-19 declared State of Emergency. As such, the meeting followed the directives in SL 2020-3 (SB704) enacted May 4, 2020.

Committee Members Present: Ms. Valarie Jarvis, Ms. Vanessa Ervin, Sen. Michael Garrett, Mr. Cooper Linton, Mr. Jim Martin, Mr. Tim Rogers, Ms. Quintana Stewart, Dr. Chris Ullrich (<i>ex officio</i> - did not vote on any motions)
Committee Members Absent: Mr. Vincent Morgus
SHCC Members Present: Dr. Jessie Tucker
Healthcare Planning: Ms. Melinda Boyette, Ms. Elizabeth Brown, Dr. Amy Craddock, Dr. Tom Dickson, Dr. Andrea Emanuel, Ms. Trenesse Michael
DHSR Staff: Ms. Julie Faenza, Ms. Gloria Hale, Ms. Celia Inman, Ms. Lisa Pittman, Ms. Fatimah Wilson
AG's Office: Mr. Derek Hunter

Agenda Items	Discussion/Action	Motion	Vote	Recommendation / Action
Welcome & Announcements	Ms. Jarvis welcomed members, staff and the public to the first Long-Term and Behavioral Health (LTBH) Committee meeting of 2021. The meeting was held remotely due to the COVID-19 State of Emergency. Ms. Jarvis stated that the purpose of this meeting was to review the policies and methodologies for the <i>Proposed 2022 State Medical Facilities Plan</i> (SMFP). The Committee's recommendations will be forwarded to the State Health Coordinating Council (SHCC) for consideration at the June 2, 2021 meeting. Ms. Jarvis stated the meeting was open to the public, but discussion would be limited to members of the Long-Term and Behavioral Health Committee and staff. Dr. Amy Craddock facilitated introductions by calling committee members by name.			
Review of Executive Order No. 46: Ethical Standards for the State Health Coordinating	Ms. Jarvis reviewed Executive Orders 46 and 187 and gave an overview of the procedures to observe before taking action at the meeting.			

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Council & Executive Order No. 187: Extending the State Health Coordinating Council				
Approval of September 17, 2020 Minutes	A motion was made and seconded to accept the September 17, 2020 meeting minutes.	Rogers Martin	Aye: Jarvis; Ervin; Garrett; Linton; Martin; Rogers; Stewart Nay: None	Motion approved
Nursing Care Facilities - Chapter 10	No petitions or comments were received for this chapter. Ms. Trenesse Michael provided a review of the policies and the need methodology for Chapter 10.			
Adult Care Homes – Chapter 11	No petitions or comments were received for this chapter. Ms. Michael presented the policies and the need methodology for Chapter 11.			
Medicare Certified Home Health Services – Chapter 12	No petitions or comments were received for this chapter. Ms. Elizabeth Brown provided a review of the policy and the methodology.			
Hospice Services – Chapter 13	No petitions or comments were received for this chapter. Ms. Brown noted that there are no policies specific to hospice services and then summarized the methodologies for these services.			
Psychiatric Inpatient Services - Chapter 14	No petitions or comments were received for this chapter. Dr. Emanuel presented Policy MH-1, which is applicable to Chapters 14, 15 and 16, and the methodology and policy specific to Chapter 14.			
Substance Use Disorder /Chemical Dependency - Chapter 15	No petitions or comments were received for this chapter. Dr. Emanuel noted there are no policies specific to Substance Use Disorder services aside from Policy MH-1 (reviewed earlier). She reviewed the need methodology for this chapter.			

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Intermediate Care Facilities (ICF/IID) - Chapter 16	No petitions or comments were received for this chapter. There is no need methodology for ICF/IID beds. Dr. Emanuel reviewed Policy ICF/IID-5.			
Recommendation	A motion was made and seconded to approve the policies and methodologies for Chapters 10-16 in preparation of the 2022 SMFP.	Rogers Garrett	Aye: Jarvis; Ervin; Garrett; Linton; Martin; Rogers; Stewart Nay: None	Motion approved
Division Recommendation: Psychiatric Inpatient Bed Need Methodology	A motion was made and seconded to approve the Division's recommendations regarding the psychiatric bed need methodology. The recommendations included in the motion are in Attachment A.	Ervin Garrett	Aye: Ervin; Garrett; Linton; Martin; Rogers; Stewart Nay: None Abstain: Jarvis	Motion approved
Division Recommendation: Substance Use Disorder Bed Need Methodology	A motion was made and seconded to approve the Division's recommendations regarding the substance use disorder bed need methodology. The recommendations included in the motion are in Attachment B.	Ervin Linton	Aye: Ervin; Garrett; Linton; Martin; Rogers; Stewart Nay: None Abstain: Jarvis	Motion approved
Other Business	Ms. Jarvis noted the next LTBH Committee meeting will be on Thursday, May 13, 2021 at 10:00 a.m. This meeting will be held via WebEx. The next full SHCC meeting is Wednesday, June 2, 2021 at 10:00 a.m. The staff will notify everyone in advance whether this meeting will be in person or via WebEx.			
Adjournment	Ms. Jarvis called for a motion to adjourn. A motion was made and seconded. Mr. Rogers left the meeting before the vote to adjourn.	Linton Martin	Aye: Jarvis; Ervin; Garrett; Linton; Martin; Stewart Nay: None	Motion approved

Attachments

Attachment A: Recommendations Regarding Psychiatric Inpatient Bed Need Methodology

- Remove need determination methodology beginning with Proposed 2022 SMFP. SMFP will no longer include need determinations.
- Eliminate distinction between child/adolescent and adult beds.
- Continue to include facility-level inventory and utilization data in SMFP.
- Make no changes to Policy MH-1.
- Conduct annual review for first 2 years of implementation.
- Any person may apply for a CON. Petitions are not required.
- Do not designate certain people/entities as “qualified” CON applicants.
- CON applications include patient access and financial assistance policy to enable access to care for medically underserved (see below). *Cannot enforce.*
- Require CON applicants to reserve 15% of new beds for medically underserved. *Cannot enforce.*

In the context of psychiatric inpatient beds, people who are “medically underserved” include the following groups:

- People with co-occurring disorders
- Members of minority racial or ethnic groups
- Children and adolescents
- Elderly (65 and older)
- People without employer-provided or private insurance
- People with government-funded insurance (Medicaid, Medicare, TRICARE)
- People who are homeless
- People who are ex-offenders

Attachment B: Recommendations Regarding Substance Use Disorder Bed Need Methodology

- Remove need determination methodology beginning with Proposed 2022 SMFP. SMFP will no longer include need determinations.
- Eliminate distinction between child/adolescent and adult beds.
- Continue to include facility-level inventory and utilization data in SMFP.
- Make no changes to Policy MH-1.
- Conduct annual review for first 2 years of implementation.
- Any person may apply for a CON. Petitions are not required.
- Do not designate certain people/entities as “qualified” CON applicants.
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- People who are ex-offenders