ASSOCIATION FOR BEHAVIORAL HEALTHCARE

# e∙update

April 2016















Tuesday, May 3 CSS/TSS, 10 a.m.

<u>Monday, May 9</u> **Billing**, 10 a.m. (Hampton Inn, Natick)

Tuesday, May 10 CBFS 2:30 p.m. (Community Healthlink, Worcester)

<u>Thursday, May 12</u> CPS Oversight, 10 a.m.

Friday, May 13 Children's Services, 10 a.m. (Hampton Inn, Natick) Corporate Compliance, 10 a.m. (Hampton Inn, Natick)

> <u>Tuesday, May 17</u> **OTP**, 9:30 a.m.

<u>Thursday, May 19</u> Human Resources, 10 a.m.

Friday. May 20 DAE/SOA, 10 a.m. Quality and Outcomes, 10 a.m. (Hampton Inn, Natick)

Thursday, May 26 DSM-5/ICD-10, 10 a.m. (Hampton Inn)

> <u>Friday, May 27</u> **PDT/PH**, 10 a.m.

All meetings are held at ABH unless otherwise noted. For more information, call 508-647-8385.

# FY 2017 Budget Action Needed

It's time to ask our members of the House of Representatives and Senate to support Behavioral Health funding in the Fiscal Year 2017 state budget. Your advocacy is vital to preserving and expanding current services. The Opioid Crisis continues to ravage communities across the Commonwealth and more funding is needed to expand access to life saving treatment.

### **Action Requested**

#### Contact your State Representative and Senator NOW! Click <u>here</u> to send an email in support of Mental Health and Addiction Funding in the State Budget!

ABH has two major priorities we hope you will support.

- ABH is requesting that the Legislature fund the Department of Mental Health, MassHealth and Chapter 257 line items at the levels recommended by Governor Baker. This will preserve all existing services, including new DMH community placements created in the last two fiscal years.
- ABH is requesting increased funding at the Bureau of Substance Abuse Services by \$11 million over Governor Baker's recommendations to fund additional addiction treatment services.
  - ♦ \$6 million would fund 200 new Recovery Home beds.
  - \$2 million would serve 500 additional individuals in the supportive case management program.
  - S3 million would fund a Recovery Coach pilot program. BSAS began funding Recovery Coaches through outpatient clinics in FY'16, but this new pilot would expand their roles outside of the traditional outpatient treatment system and meet clients where they are.

Find more information about ABH's budget request fact sheet here.

# Landmark Opioid Legislation Becomes Law

On March 14, Governor Charlie Baker signed *H.* 4056, An Act Relative to Substance Use, Treatment, Education and Prevention into law. This new Opioid law will require emergency department (ED) clinicians or Emergency Service Programs (ESPs) to conduct a substance abuse evaluation within 24 hours on patients who show up in an ED with symptoms of an opioid overdose. Hospitals will be required to notify the patient's primary care physician. Insurance coverage for the evaluation period will be mandated. Hospitals will also be required to inform a parent or guardian if a minor has suffered from an opiate-related overdose.



The bill limits all first time opiate prescriptions to a seven day supply and a seven day limit on all prescriptions for minors unless certain exceptions apply.

School districts will be required to conduct screenings, including one called Screening, Brief Intervention, and Referral to Treatment, known as SBIRT for short, or an alternative program. The Department of Elementary and Secondary Education will determine the two grade-levels where this screening will be performed. This important prevention language was a priority of the Children's Mental Health Campaign.

The bill also incorporates a Senate provision, championed by Senator John Keenan, that will allow patients to request that only a portion of their opioid prescription be filled in order to discourage overuse of painkillers or the proliferation of unused medicines that can get into the hands of people struggling with substance use.

For a detailed summary of the bill, click here.

# **Quick Snapshots**

**Certified Community Behavioral Health Clinics**: As you may know, through a partnership among the Department of Public Health (DPH), the Department of Mental Health (DMH), and MassHealth, the Commonwealth, has released a Request for Applications (RFA) for Certified Community Behavioral Health Clinics (CCBHC). The state has indicated that it will "certify two or more applicants as CCBHCs." Successful applicants will have the opportunity to participate in a two-year national demonstra-



tion project beginning in 2017, if the Commonwealth is selected to participate. For more information, click <u>here</u>.

**Sober Home Certification**: The Department of Public Health held its first voluntary sober homes certification training. For more information, click <u>here</u>.

**MassHealth Stakeholder Session**. Click <u>here</u> to check out the MassHealth slides from its March 10 public stakeholder session.

# **Suicide Prevention Conference**

The Massachusetts Department of Public Health, in conjunction with the Massachusetts Department of Mental Health, the Massachusetts Coalition for Suicide Prevention and AdCare Educational Institute, Inc. are hosting a suicide prevention conference:

## Hill Day 2016

ABH will be joining colleagues from across the country at the National Council's annual Hill Day on June 6-7 in Washington, D.C.

For more nformation, click <u>here</u> or contact Mandy Gilman.



## Learning from Within: Inspiring Hope, Saving Lives

Wednesday, April 27-Thursday, April 28 7:45 a.m.—4:15 p.m. Sheraton Framingham Hotel and Conference Center 1657 Worcester Road, Framingham

Workshop descriptions and agenda are available <u>here</u>.

For more information, please contact: Laura Guida: Laura@adcare-educational.org

## Telemedicine

The Division of Insurance (DOI), which regulates fully insured commercial health insurance carriers in the Commonwealth, recently held a series of information sessions on telemedicine. DOI is collecting information and highlighting best practices for telehealth programs for a report to the Massachusetts Legislature. ABH submitted comments, which highlighted the following:

- Most studies have found that telehealth saves patients, providers, businesses, and payers money when compared with traditional approaches to care.
- ABH strongly agrees with other stakeholders that in order to practice telemedicine in Massachusetts, physicians and other practitioners should be licensed by the Commonwealth. Documentation should reside in the health records of the responsible entity, such as the physician.
- ABH members believe it is essential that regulators and payers not limit the location from which a provider can practice or a patient/client may receive telehealth services. For example, while the provider must adhere to the regulations that guide their practice in a mental health and/or addiction outpatient clinic, he/she should not be required to be physically present at the location of licensure. Regulations and payment structures should encourage this flexibility, not inhibit it.
- DOI and other regulators should also remain agnostic on the types of transmissions that are acceptable, only requiring that transmissions are compliant with state and federal privacy laws.
- Telemedicine reimbursement rates should be no less than the current rate for inperson consultation or contracted delivery of services.

For more information, contact Mandy Gilman at <u>AGilman@ABHmass.org</u>.

## **Train that Brain**

There are a number of upcoming trainings that focus on children and families. More information on each training can be found by clicking on the link:

- How the Adults in Adoption Impact the Experience of <u>Children and Themselves</u> on April 5th from 9 a.m. to 12 p.m. This training is being held at UMASS in Shrewsbury and is FREE (some CEUs will likely be offered).
- Understanding DCF and the Child Welfare Lens: For Professionals in the Community on April 26th from 9 a.m. to 4 p.m. This training is being held at Fort Taber Community Center in New Bedford and costs \$20 (CEUs are included).
- Horizontal Needs in Vertical Systems: Addressing the Challenges Faced by Youth with Co-occurring Disorders on April 27th from 11 a.m. to 12 p.m. This training is a Webinar and is FREE.
- <u>Different Types of Child Abuse Have Similar Consequences: Questions and Con-</u> <u>troversies</u> on April 29th from 9 a.m. to 12 p.m. This training is being held at UMASS in Shrewsbury and is FREE (some CEUs will likely be offered). Contact Dianne Williams to register (<u>Dianne.Williams@umassmed.edu</u>)

## **Keeper's Korner**

There's a lot of news to keep up with lately. Here you go:

- <u>A Crisis With Scant Data: States Move To Count Drug</u>-Dependent Babies. *NPR*.
- To Help Newborns Dependent On Opioids, Hospitals Rethink Keeper is taking a break from all her Mom's Role. NPR.
- Pregnant And Addicted: The Tough Road To Family Health. NPR.
- <u>Demand Surges for Addiction Treatment During Pregnancy</u>. *Stateline*, The Pew Charitable Trusts.
- <u>Building a Ground Army to Fight Heroin Deaths</u>. *Stateline*, The Pew Charitable Trusts.
- <u>Hunting the Genetic Signs of Postpartum Depression With an iPhone App</u>. The New York Times.
- <u>President Obama Is Taking More Steps to Address the Prescription Drug Abuse</u> <u>and Heroin Epidemic</u>. WhiteHouse.Gov
- Life Changes. One Day at a Time. The Boston Globe.
- C.D.C. Painkiller Guidelines Aim to Reduce Addiction Risk. The New York Times.
- Probing The Complexities Of Transgender Mental Health. NPR.
- Fantasy Sports Fueling A Rise In Online Gambling Addiction. Kaiser Health News.
- <u>Study: Primary Care Doctors Often Don't Help Patients Manage Depression</u>. Kaiser Health News.

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