

MEETING AGENDA

San Miguel Behavioral Health Solutions Panel

January 25th, 2024 | 9:00 am -11:00 am

Regular Monthly Meeting on Zoom:

<https://us02web.zoom.us/j/88619402450>

Panel members present: John Pandolfo, Mandy Miller, Carol F, Andres, Chuck, Rob Whiting, Sharon Grundy

Panel members not present: Todd Bittner, Paul Reich

Other: Shelley Fourney, Melanie Montoya Wasserman, Kim Goodrich (EVBH), Jennie Thomas, Dr Casey-Wolfington(EVBH), Dana Erpelding(EVBH), Corrine Platt, Ariana Sites (TCHN), Amy Rowan (TCHN), Kerry Brock (TCHN)

1. Welcome
 - a. John mentions letter to county in which he requested information about funding
2. Approve December Minutes
 - a. Rob 1st, Carol 2nd,
All in favor
3. Public Comment
 - a. Kerry brings up Professional Development Grant Application submitted
 - b. Robin Kondracki, a student therapist, submitted an application for a two-part EMDR training in Durango. She is currently an unlicensed student therapist working at Collaborative Trauma Solutions, plans to continue working for them once she gets her LCSW.
 - c. Rob moves to approve the application, 2nd by Carol
 - d. Mandy notes that her preference is for people to be trained in EMDR after licensure
 - e. Andres thinks it makes sense what Mandy is saying, but we also know we don't have enough professionals and indicates his support
 - f. Carol thinks she will be getting EMDR experience under that group, indicates her support
 - g. Questions about whether she can practice EMDR even before licensure
 - h. Anne Brown vouches personal support for Robin, says she wants to stick around
 - i. John- can we adjust the motion upon confirmation that Robin will be able to use EMDR upon completion of the course?
 - j. Rob moves to approve application upon confirmation by Kerry that she will be able to begin practicing EMDR upon completion of training, Carol 2^{nds}, all in favor
4. BHCC MOU

- a. John references Paul's concerns sent by email
 - b. *Paul had been concerned that when divided by the number of clients (25) served, the BHSN contract is high*
 - c. Rob acknowledges Paul's concerns, but also feels there is a huge amount of value in having the Systems Navigator
 - d. Rob makes motion to extend contract, Mandy seconds
 - e. Sharon points out that the navigator position is not just serving individual patients, but helping complicated cases that may be in crisis, expects to see growth in the navigator position
 - f. Shelley asks questions about what the BHSN is available for, mentions Tammy J is to BHCC for SMC, also wants to emphasize that we're not capturing all the data of what happens when Tammy is doing community outreach. Emphasizes that BHCC spends a huge amount of time with each client
 - g. Sharon's feedback is to try to get the BHSN/BHCC out into all communities
 - h. Carol notes that position came from Behavioral Health Collaborative, asks that even though the role got absorbed into BHCC, the RFP does specifically look for a navigator,
 - i. John introduces motion to extend for 3 years with amendments to the language to emphasize navigator part
 - j. John asks for info on how many positions salary is being split between
 - k. Andres feels that one of the problems is the transitions that have happened to TCHN, he supports extending for another three years
 - l. All in favor
5. By-law amendment update
- a. Working with the county to try to figure out how to amend the bylaws to reflect what the panel wants
6. Eagle Valley Behavioral Health (9:30-10:30)
- a. Dana Erpelding introduces Vail Behavioral Health
 - b. Added retail marijuana tax as a revenue source for Behavioral Health, passed with over 70% approval in 2018
 - c. Brought community partners together to see how to make an impact on behavioral health
 - d. Vail Health Foundation pulled together 160 million to make EVBH a non-profit under Vail Health
 - e. Looked into how CMHC are created and legally structured, became licensed as a CMHC
 - f. Dr. Casey Wolfington- came to Vail as a private provider, 90% of clientele was doing private pay, references parallels in their community to nonprofits helping people through different systems
 - g. Goes through Vail's various Behavioral Health Services
 - i. Mtn Strong Employee Assistance Program

- ii. Wiegers MH Clinic
 - iii. Frisco Health Center
 - iv. VHBHIC
 - v. Precourt Healing center –inpatient psychiatric facility, first patient anticipated in February 2025
- h. Speaks on getting providers enrolled on insurance, speaks to the disparity of physical/behavioral health providers
 - i. Uniquely built IT systems to support EAP, Olivia’s Fund
 - j. Questions
 - k. John wants to know the population of the catchment area and funding amounts for services
 - l. Casey- Ski town, so hard to pin down, but year-round probably about 45000 individuals
 - m. Dana- important to determine where you see your scope, whether it's collaborating with existing practices. The gap we saw was that we had a robust private practice lineup, but none of them were accepting insurance or Medicaid
 - n. Dr. Grundy- Notes that SM is probably about a fifth of Eagle Valley population. Were you always through Vail Health or were you something different at one point? We’re missing out on billing insurances, if we don’t bill insurance for people in the community, there’s no record of what's happening in the community and the state doesn’t know that resources are needed
 - o. Casey- we were served by Mindsprings, with limited services available locally. A lot of people felt that the state needed to know it wasn't enough. On the statewide level, we’re really pushing for community driven services
 - p. Grundy- Is there a county wide tax on Marijuana here?
 - q. Anne B- Not that I know of
 - r. Grundy emphasizes the importance of consistent funding
 - s. Casey- When the clinicians were brought under EVBH, we had the opportunity to renegotiate contracts. We requested parity with medical rates for behavioral health rates and were ultimately able to get it. Nobody advocates for parity in rates.
 - t. Dana- emphasizes the importance of the rate parity, the fact that they are getting paid enough to cover their costs
 - u. Dr Grundy asks if they use insurance or Olivia's Fund first?
 - v. Casey- Insurance because we want consistency in rates, this also leaves Olivia's Fund open to people who have no other option
 - w. Dr Grundy asks who did gap analysis originally?
 - x. Mandy- echoes Sharon’s point about the benefit of the marijuana tax. From the CMHC perspective, that designation will go away, asks if they plan to seek the new one. Casey confirms they will

- y. Andres- Notes that the population is significantly bigger in Eagle, asks for more information on the Latino outreach and leadership?
 - z. Casey- speaks to the outreach they do with Latino community; they have first-generation and Spanish speaking executives. Tremendous impact from word of mouth over direct. They want to improve the amount of Spanish speaking providers. Look to prioritize reducing barriers for local Spanish speaking populations that want to become providers
 - aa. Anne Brown- This is exactly the kind of services we'd hope to have available to our community. The idea is also daunting, would you have any interest in partnering with our community?
 - bb. Casey- Yes. Also notes that their commercial insurance contracts are not county bound, meaning if they came here, they would bring their contracts with them.
 - cc. County allocated 250k separate from BHSP, so there is funding available.
 - dd. Some panel members are interested in connecting with EVBH further to learn and collaborate
7. By-law
- a. Jennie shares that Todd Bitner resigned as superintendent last night
8. Letter requesting interest on the fund be returned to the fund
- a. John will plan to share any updates from that letter
 - b. Mandy asks how much money we are talking about
 - c. John estimates 20k
9. Crisis response team
- a. Chuck- received letter from sheriff's department saying rocky mountain is discontinuing all contracts with integrated insight, which means mobile crisis is no longer active
 - b. Carol- Axis will not be taking up the contract, they are expecting more people in the crisis walk-in center
10. County Mill Reduction
- a. John shares ballot language for mill levy, notes that it says county will be taxed three-quarters of a mill, county has reduced that to .65 mills and he has great concerns about that.
 - b. Revenue should have been somewhere around 920, now reduced to 860
 - c. Would like to draft a letter for commissioners saying that we feel we should be getting the full .75 mills
 - d. Rob agrees with John, states his support for continuing to fund and expand services
 - e. John asks if anyone objects to him drafting that letter?
 - f. Andres says he is in agreement with John and supports drafting that letter.
 - g. Carol notes that she should maybe abstain from any vote
 - h. Vote is deemed not necessary, John plans to move forward
11. BOCC Presentation

- a. Carol notes that it might be useful to include any future planning
- b. John suggests mentioning the meeting with EVBH
- c. Mandy references changes to the BH Fund page, results from county survey

Panel Members:

John Pandolfo-- Superintendent, Telluride R1 School District, Chair

Sharon Grundy-- Telluride Medical Center, Vice Chair

Carol Friedrich-- San Miguel/Ouray County Social Services Director, Secretary

Chuck Porth-- CEO, Uncompahgre Medical Center

Paul Reich-- Community Relations Liaison, Axis Health Systems

Todd Bittner—Norwood Public Schools

Rob Whiting-- Community Member

Andres Jacinto Alonzo-- Community Member

Mandy Miller – Community Member

2024 Meeting Schedule

January 25 th	February 22 nd	March 28 th	April 25 th	May 23 rd
June 27 th	July 25 th	August 22 nd	September 26 th	
October 24 th	*November 21 st	*December 19 th		

*Third Thursday due to a holiday