



Behavioral Health Services Advisory Council

December 7, 2022

Held at OASAS locations in Albany, NYC and Syracuse

BHSAC Minutes

Members Attending:

Glenn Liebman, Chair
David Woodlock
Diane Blohm
Roxanne Lewin
Joe Turner
Kathy Gardini
Sabina Lim
Michael Martin
Connie Wille
Robert Russell

John Kastan
Kerry Whelan-Megley
Ian Shaffer
Debra Pantin
Michael Orth
Donna Mae DePalo
Hilda Rosario Escher
Laura Kellemen
Patrick Seche

Received Notification Not Able to Attend:

Brianna Gower
Trish Marsik
Chacku Mathai
Warren Ng
William LeCates
Angelica Paige

Meeting notes:

Chairman, Glenn Liebman welcomed the Council members and voted on the approval of the September 22nd BHSAC Minutes. The Chair noted the importance of the agency's presentations on capacity, certification and planning process for the member's discussions and voting on projects. He indicated he will put together a letter to the Commissioners sharing the members concerns to have a greater role and engagement with the State to help make the most responsible decisions about various projects and regulations that impact the behavioral health services. The Chair then turned the meeting over to Carmelita Cruz to provide an update on the Treatment Equity Committee.

Treatment Equity Committee Update:

Carmelita Cruz indicated the Treatment Equity Committee officially is in place with seven BHSAC members serving and if anyone else is interested to please let Jennifer Farrell know.

Four additional members will be appointed by Legislature and will need to go through Senate confirmation before they can join the Committee. The By-laws have been approved and a committee meeting will be scheduled in January before the BHSAC meeting in February with the focus on the mission, goals, charge, discussing relevant data, developing an action plan and interest for the Chair and Vice Chair position. The first report of the Committee is due in June.

Certification Process Overview:

Kelly Bevins of OMH and Jennifer Berg of OASAS presented a PowerPoint on each agency's certification process. Members discussed concern with provider application and process with state, LGU's and the other programs in the surrounding areas. They also spoke on if there are county waiting lists and the state indicated some counties do and some don't have waiting lists. It was indicated the vast majority of counties gather monthly reports from providers to have a strong pulse on need. Members spoke about anti-competition and consumer choices, as well as looking at need with cultural competence, special needs and language barriers. In addition, members want to make sure the programs are viable and sustainable and ensure diversity, inclusion, equity etc. Chair Liebman thanked the Kelly and Jennifer for an informative presentation.

Regulations:

OMH Regulations:

Repeal of Title 14 NYCRR Part 513: OMH proposed the repeal of Title 14 NYCRR Part 513, which implemented Executive Order 38. Executive order 38 required limits on administrative costs and executive compensation for certain individuals or entities that receive state funds or state authorized payments. The BHSAC unanimously accepted OMH's recommendation.

Title 14 NYCRR Part 514: OMH also proposed Title 14 NYCRR Part 514 to formally adopt the standards and processes by which OMH has engaged New York State regulated insurers to obtain and approve their clinical review criteria for the treatment of mental illness. Part 514 regulations adopt existing standards and processes contained primarily in an OMH guidance document entitled, "Guiding Principles for the Review and Approval of Clinical Review Criteria for Mental Health Services," which was issued in 2019, and will now be incorporated by reference in these regulations. The regulations also formally establish that OMH will not approve clinical review criteria which is applied in a manner that does not comply with federal and state parity laws, which shall be determined in consultation with DOH and DFS. The BHSAC unanimously accepted OMH's recommendation.

OASAS Regulations:

Amend 14 NYCRR Part 853: Credentialing of Addictions Professionals: OASAS is proposing to amend Part 853 to add the CASAC Provisional (CASAC-P) credential, revise renewal requirements, add reinstatement, and make other administrative changes. At the Regulations Committee, the majority of discussion was focused on the applicability of the

CASAC-P and efforts to ensure providers could make use of it. The committee also discussed changes to the renewal standards and how the proposed attestation differed from current requirements and those required by other state-issued licenses. There were no recommendations from the committee regarding the language. The committee requested that OASAS ensure guidance is prepared quickly so that providers can make sure relevant staff apply. The committee did not have a quorum so no vote was available.

At Full Council, members discussed the issue of quorum and lack of attendance at the regulations committee meeting. It was then agreed that the Full Council would review the regulations and then make the recommendation from there.

The Council discussed proposed changes to OASAS Part 853 which relate to credentialing for addiction professionals. OASAS Counsel briefly explained the rationale behind the proposed regulatory changes; to create more flexibility by adding a CASAC provisional (CASAC-P) which allow someone to get a credential faster and to make it easier to get and renew a CASAC by mirroring those of other professionals within the State. Per OASAS, CASAC-P is meant to be a slightly more expedited way to get people who need credentialing get started. There were questions about residency requirements for CASACs, OASAS Counsel clarified that the residency standard was if someone lived or worked in New York State (not just lived). Chair asked that the discussion on this part of the issue be tabled until the next meeting for further feedback from OASAS about the rationale behind the proposal. Motion was made to approve Part 853 changes, motion was seconded and approved.

Amend 14 NYCRR Part 819: Substance Use Disorder Residential Services: OASAS is proposed to amend Part 819 to sunset the regulation effective December 31, 2023. Part 819 has been largely replaced by Part 820. The Committee members discussed whether providers would be lost in the transition to Part 820 and whether current Part 820 providers were doing well under the regulation. There were no specific recommendations for agency consideration. The committee did not have a quorum so no vote was available. At Full Council, the members agreed to table those changes based upon previous committee discussion. Those changes will be discussed again at a subsequent meeting.

Project Reviews:

OASAS Projects:

2022.066– Artemis Partners LLC requested OASAS approval to become a new OASAS provider of Part 822 Outpatient Services of two existing OASAS certified programs, Mountainside Chappaqua and Mountainside Huntington. There will be no changes to the population served, physical plant, staffing, operational budgets, or policies and procedures as a result of this application. Each location serves approximately 170 individuals annually in their outpatient programs. The proposed ownership consists of Martin Fedor with 100% of the shares, and three individuals listed as members, David Mattieni, Alexandra Helfer, and Dr. Randall Dwenger. Ms. Helfer holds the OASAS required experience in the Field. The Westchester

County Department of Community Health , Suffolk County Department of Health Community Mental Hygiene Services' and OASAS recommended approval, with the following contingency: Copy of filing receipt from the State of Connecticut indicating that the amended Articles of Organization, including the OASAS required corporate purpose language, have been filed. The Project Review Committee unanimously recommended approval to the BHSAC Full Committee and the Full Committee gave a unanimous recommendation of approval for this application.

2022.072 – Farnham Inc. d/b/a Farnham Family Services requested OASAS approval for a capital project with total construction costs for a new 18,000 square foot building estimated to be \$7,748,000, with total project costs of \$10,448,000. This is for the construction and relocation of its existing Part 822 Outpatient and OTP programs as well as their administrative offices. The proposed address is 12-98 George Street Oswego. The proposed project will allow for the continuance of substance use disorder prevention, treatment, & recovery needs of Oswego County. The proposed project aims to facilitate service and staff expansion in response to growing community needs in Oswego and the surrounding region. Farnham, an OASAS certified, private, not-for-profit organization has served the Oswego County community for over 50 years and is in good standing with OASAS. Oswego County Division of Mental Health and OASAS recommended approval with one contingency: OASAS final approval of the physical plant once construction is completed. The Project Review Committee unanimously recommended approval to the BHSAC Full Committee and the Full Committee gave a unanimous recommendation of approval for this application.

2022.047 – The Jewish Board of Family and Children's Services, Inc. (JBFCs) requested OASAS approval to become a new OASAS provider of Part 822 Outpatient Treatment Services at 1007 Quentin Road, Brooklyn. The Jewish Board of Family and Children's Services, Inc. is a not-for-profit organization and was founded over 145 years ago and currently operates an Article 31 clinic at this location. Services will be provided to their current client population as well as to members of the community at large. In addition to counseling, patients will be afforded medication assisted therapy and peer support services. Services will be provided in person as well as through telehealth and the hours of operation will be Monday, Tuesday and Wednesday 11:00 AM to 7:00 PM, Thursday 9:00 AM to 5:00 PM and Sunday 9:00 AM to 5:00 PM. The City of New York Brooklyn Community Board 15 was notified of the proposed new services and submitted a letter not in favor of the proposed services. Additional letters not in support of this application were also submitted. However, The New York City Department of Health and Mental Hygiene and OASAS recommended approval with the following contingencies: Verification of the hiring of sufficient staff to meet regulatory requirements, and a copy of the filing receipt from the Department of State indicating that the amended Certificate of Incorporation, including the OASAS required language, has been filed. The Project Review Committee unanimously recommended approval to the BHSAC Full Committee and the Full Committee gave a unanimous recommendation of approval for this application.

2022.036 – The Neighborhood Center, Inc. (TNC) requested OASAS approval to become a new OASAS Provider of Part 822 Outpatient services located at 628 Mary Street, Utica. TNC will integrate the outpatient treatment service with their existing Office of Mental Health licensed program. Services will be offered to TNC's current patient population as well as to members of the community. In addition to counseling services, patients will be afforded

Medication Assisted therapy, and Peer support services. Services will be provided in person as well as through telehealth and the hours of operation will be Monday, Thursday, and Friday from 9:00 AM to 5:00 PM and Tuesday and Wednesday from 10:00 AM to 6:00 PM. TNC became established as a not-for-profit in 1969. In addition to their OMH licensed programs, they are also licensed by the Office of Children and Family Services and are in good standing with both agencies. The Oneida County Community Services Board and OASAS recommended approval with the following contingencies: Verification of the hiring of sufficient staff to meet regulatory requirements, OASAS approval of the facility, and a copy of the filing receipt from the Department of State indicating that the amended Certificate of Incorporation, including the OASAS required language, has been filed. The Project Review Committee unanimously recommended approval to the BHSAC Full Committee and the Full Committee gave a unanimous recommendation of approval for this application.

2022.065– Seek Counseling, LLC requested OASAS approval to become a new OASAS provider of Part 822 Outpatient Treatment Services to be located at 408 77th St, Brooklyn. Applicant is purchasing The Resource Counseling Center, an existing OASAS Certified Program which is currently located at this address. Seek intends to offer the same services currently provided by The Resource Counseling Center which include counseling, medication assisted therapy, and peer support services. The proposed owners are Yehoushua “Josh” Greenfeld with 25% ownership interest and Marvin Rubin with 75% ownership interest. Josh Greenfeld has been the CEO of Success Counseling, LLC, which is an existing OASAS provider since March of 2020 and holds the OASAS required experience in the Field of SUD. Success Counseling was last reviewed on October 21, 2022, resulting in partial compliance, and were issued a two-year operating certificate. Marvin Rubin is owner of seven nursing and rehabilitation centers in the New York City area and one home health care agency. According to New York State Department of Health, all are in good standing. The New York City Department of Health and Mental Hygiene and OASAS recommended approval with the following contingencies: Copy of the filing receipt from the Department of State indicating that the amended Certificate of Incorporation, including the OASAS required language, has been filed, verification of the hiring of staff and copy of the bill of sale. The Project Review Committee recommended approval with one abstention to the BHSAC Full Committee and the Full Committee recommended approval with one abstention for approval of this application.

2022.076 - Syracuse Recovery Services, LLC requested OASAS approval for a change in ownership of their Part 822 outpatient service located at 319 East Water Street in Syracuse, with additional locations in Auburn, and Cortland. The current owner, Lisa Forshee, is retiring and selling the business to Megan Stiles and Daniel Stiles, who are both current employees of Syracuse Recovery Services. Megan Stiles will own 51% and have 51% and Daniel Stiles will own 49%. Megan is a CASAC Advanced Counselor and has been working at Syracuse Recovery Services since 2011 and holds the OASAS required experience in the Field of SUD. There will be no changes to the population served, physical plant, staffing, operational budgets, or policies and procedures as a result of this application. The Onondaga County Department of Children and Family Services and OASAS recommended approval. The Project Review Committee unanimously recommended approval to the BHSAC Full Committee and the Full Committee gave a unanimous recommendation of approval for this application.

OMH Projects:

MH-B-2878 Champlain Valley Family Center for Drug Treatment and Youth Services, Inc. (CVFC) seeks to establish an Article 31 clinic treatment program to be located at 20 Ampersand Drive, Plattsburgh, NY to serve individuals and families with mental health issues, of all age groups, in the rural communities of Clinton, Franklin & Essex Counties. Clinton County alone is an area of 1,038 square miles with a population of 81,224. Proposed hours of operation are Monday – Thursday, 8 am – 8 pm and Friday, 8 am – 5 pm with additional hours of availability by appointment to accommodate family schedules. CVFC is an established provider of services in the community with substantial links with the local mental health system and other service providers including departments of social services, probation services, parole services, primary health care providers, and hospitals. CVFC has identified an increasing number of individuals presenting at their Article 32 clinic with co-occurring mental health disorders. In 2021, for example, 68% of admissions had experienced or witnessed trauma, 59% had a co-existing psychiatric disorder, and 67% had been treated for mental health issues. Comparatively, those numbers in 2017 were 40%, 33% and 49% respectively. The 2019-2021 Clinton County Community Health Assessment noted that the top health concern for Clinton County was Mental Health Conditions, with the top 5 contributing factors identified as: poverty, food insecurity, addiction to illegal drugs, lack of mental health services, and inadequate physical activity. Over half of the respondents (50.3%) reported experiencing at least one barrier to medical care for themselves or their family in the past year. The data also indicates a shortage of health professional, providers of primary care, dental care, and behavioral health care.

Of the two other OMH certified programs in Clinton County, there is often a waitlist of two weeks for intake and rescheduling of appointments, which further delays intakes. These providers also offer a limited schedule for walk-ins in the morning, but CVFC would allow walk-ins daily from 8:30 am – 3:30 pm and will provide evening hours to accommodate individuals and families' busy schedules. CVFC will closely monitor referrals, admissions and services and will evaluate the need to add hours or Saturday services. The Regional Psychiatry Transitional Care Manager at the University of Vermont Health Network - Champlain Valley Physicians Hospital, has estimated that once approved, CVFC should expect to receive at least 75 referrals for mental health treatment. An integrated article 31 clinic treatment program would enable CVFC to facilitate the delivery of services to those in the community in need of behavioral health services. The Medical Director and all other clinical staff will be required to have at least one year experience working with children and adolescents, preferably American Board of Psychiatry and Neurology Child & Adolescent certification.

All reviewers are recommending approval with the following condition:

1. Complete a satisfactory pre-occupancy visit.

Committee members asked the applicant to elaborate on their relationship with area hospitals, how they plan to meet the prescriber time needs and the use of the Psychiatric Nurse Practitioner and Psychiatrist. The integration of barrier to care were discussed, with pre and post assessments. Food insecurities, housing concerns, stigma, and familial relationships were

discussed, with the provider responding with their plans to address these concerns and provide the much-needed services to the community. The demographics of the community to be served were discussed as well, and that while the community is primarily Caucasian, they are working on developing committees/advisors for diversity, equity, and inclusion regarding their programs. The committee chair made a motion to vote, this was seconded, and the committee unanimously recommended approval to the full council.

MH-D-2868 Eprine Community Services NY, Inc.

Eprine Community Services NY, Inc. (Eprine) is a minority lead community-based organization and licensed healthcare agency that provides mental health and behavioral health services to children, adults, and families in New York and Connecticut. Their programs enable individuals to get the care they need in their homes and communities that reduce the need for an out-of-home placement. By using strength-based and family-focused approaches, they work to build and improve the successes of each individual served. They work collaboratively with referring agencies to ensure that the combined strength-based clinical interventions and community-based intensive support management strategies are effective, empowering, and promote long-term success for the individuals served.

The proposed clinic treatment program will help address the chronic and emergent needs in the targeted neighborhoods where more than 86% of residents are people of color, suffer from profound health, economic, and social inequities, and need increased access to mental health services. Northeast and Central Brooklyn communities (Bedford Stuyvesant, Brownsville, Bushwick, Crown Heights, East Flatbush, East New York, and Ocean Hill) have been described by New York State's Vital Brooklyn Initiative as an area having measurably higher rates of need for physical, social, and mental health services. Access to the treatment resources and opportunities available have historically lacked equitable distribution for the population in these neighborhoods and have created barriers to these much-needed services.

Children are particularly at risk in the neighborhoods Eprine serves and show a need for the specialized mental health services that the proposed Article 31 mental health clinic would provide. The Citizen's Committee for the Children of New York (CCC) Child & Family Wellbeing in NYC Report ranks risks and resources across 59 community districts measuring indicators that ensure children and families are healthy, housed, educated, safe, and economically self-sufficient. The targeted communities were found to have NYC children with the highest levels of risk and lowest life expectancy in Brownsville and highest infant mortality rate in East Flatbush. Those in East New York have the largest number of children in homeless shelters and the second highest number of Domestic Violence Reports. The impact of COVID-19 has disproportionately impacted the targeted population and revealed "deep-seated inequities in health care for communities of color and amplifies social and economic factors that contribute to poor health outcomes." People of color are at an increased risk for serious illness if they contract COVID-19, and are more likely to be uninsured, work in service or healthcare industries, and live in housing situations that make it difficult to social distance or self-isolate. Also, while Blacks and Latinos don't show rates of behavioral health disorders that differ significantly from the larger population, the National Survey on Drug Use and Health (NSDUH) indicates they have substantially lower access to mental health and substance use treatment.

The proposed Article 31 clinic will be conveniently located in a fully ADA compliant building in the heart of the intended service area, accessible through multiple means of transportation. Clinic staff will be representative of the population of the area to be served, including professionals that are fully competent and conversant in Spanish and Haitian Creole, as well as Urdu and Bengali. The agency will build upon community relationships and partnerships established through their community-based behavioral health services over the years.

Eprine has served 200 children and their families in the targeted service area as a Designated Provider of Children and Family Treatment and Support Services (CFTSS) and Home and Community Based Services, (HCBS) since May of 2018. The services provided include Psychosocial Rehabilitation, Family Peer Support and Services for the General Mental Health population, in addition to the HCBS of Prevocational Services, Caregiver Family Support and Services, Community Self Advocacy and Support, Community Habilitation, Supported Employment, and Planned Respite

All reviewers are recommending approval with the following conditions:

1. Resubmit the floor plan identifying the number and location of security camera installed in the space and confirm whether the cameras transmit video-only images.
2. Outline the process for individuals receiving services via Telehealth to transition to in-person services.
3. Describe how the staffing pattern for year two will accommodate the projected volume, as the number submitted seems high.
4. Confirm the NPP has a collaborative practice agreement with a child and adolescent psychiatrist per NYSED requirements.
5. Describe how the language needs of recipients will be met should the staff language directory not be able to provide the necessary language services.
6. Submit a copy of the 24/7 after-hours plan.
7. Successful completion of background checks for staff and owners.
8. Successfully complete a preoccupancy visit

The committee asked for clarification regarding the telehealth condition as it read as if telehealth was to be phased out. OMH clarified that our concern was related to the provider's process for transitioning individuals to in-person services when requested or deemed clinically appropriate. The committee also expressed concerns about the expected deficit of over \$76,000 and how the provider planned to address the deficit. The provider stated that they plan to work with natural strengths of the community and seek out funding streams that would include health fairs, fundraising events, working with local businesses, grant opportunities, and social media. They also stated that having an OMH license will put them in a stronger place to raise funds, and that they are dedicated to raising the money needed to meet the gap while the program grows and develops. Committee members asked OMH what is being done to ensure programs serving Children and Adolescents are viable and available in NYS, including incentives for Behavioral Health providers to offer services for youth. The response was that OMH is aware of the challenges and is working on it. The committee chair moved for a vote, this was seconded, and the committee unanimously voted to recommend approval to the full council.

Closing:

Chairman Glenn Liebman thanked the Council for their great discussions. He indicated again he would be drafting a letter to the Commissioners on the need for the Council to have a greater role in the improvement of behavioral health services. The Chair also spoke about the request to have the 8.5% COLA and the concerns with the NYC Mayor's proposal to address the homeless and mental health with involving law enforcement and no clinical assessment. Members indicated this is a systems problem and also the workforce crisis has led to a workforce that can't work appropriately with the population, and the state continues to stigmatize them. Chairman Liebman closed by wishing everyone a wonderful holiday season and seeing them in February.

The Council adjourned at 3:00 pm. The next meeting will be scheduled for February, 2023.