BOARD OF MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES  
March 26, 2021  
Department of Mental Health and Substance Abuse Services  
Oklahoma City Oklahoma

Board members present via zoom:  
Courtney Knoblock, MPA, Chair  
Hossein Moini  
Shannon O’Doherty  
Jeanne Russell, Ed.D.  
Kristin Stacy, J.D.  
Kari Stomprud, M.Ed.  
Carisa Wilsie, Ph.D.

Others present in person:  
Tricia Everest, J.D., ODMHSAS, Board Member  
Rebecca Newman-German, ODMHSAS, Board Member  
Carrie Slatton-Hodges, ODMHSAS  
Durand Crosby, ODMHSAS  
Angie Patterson, ODMHSAS

Kelli Reid, ODMHSAS  
Heath Hayes, ODMHSAS  
Melissa Miller, ODMHSAS  
Tony Stelter, ODMHSAS

CALL TO ORDER  
Chair Courtney Knoblock called the meeting to order and stated that a quorum was present.

APPROVAL OF MINUTES OF THE JANUARY 22, 2021, BOARD MEETING  
Ms. Everest moved to approve the January 22, 2021, minutes. Ms. O’Doherty seconded the motion.

ROLL CALL VOTE
Ms. Everest  
Ms. Knoblock  
Mr. Moini  
Ms. Newman-German  
Ms. O’Doherty  
Ms. Stacy  
Ms. Stomprud  
Dr. Wilsie

Yes  
Yes  
Yes  
Yes  
Yes  
Yes  
Yes  
Yes

Dr. Russell joined the meeting at this time.

DISCUSSION AND POSSIBLE ACTION REGARDING APPROVAL OF PROGRAM CERTIFICATION RECOMMENDATIONS  
Kelli Reid, Director of Provider Compliance and Assistance, presented the programs recommended for approval listed on Attachment A as follows:
Alcohol and Drug Treatment Programs

A. Permit for Temporary Operation
Permit for temporary operation was recommended for: HomeCare Advisors, L.L.C. dba Pinnacle Care, Durant; and Second Chance Recovery Center, Inc.

Ms. Newman-German moved to approve permit for temporary operation for the above-referenced programs. Mr. Moini seconded the motion.

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B. Certification with Special Distinction
Certification with special distinction was recommended for: Oklahoma Mental Health Council, Inc. dba Red Rock Behavioral Health Services.

Ms. Everest moved to approve certification with special distinction for the above-referenced program. Dr. Wilsie seconded the motion.

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Chair Knoblock noted that Red Rock Behavioral Health Services was 100% compliant on all their standards and are eligible for a refund of their certification fee.

C. Two-Year Certification
Two-year certification was recommended for: Clay Crossing Foundation, Inc.; Total Life Counseling Foundation; and Valley Hope Association dba Cushing Valley Hope.

Mr. Moini moved to approve two-year certification for the above-referenced programs. Dr. Wilsie seconded the motion.

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D. One-Year Certification
One-year certification was recommended for: Youth and Family Services, Inc.

At this time there was discussion regarding Alcohol and Drug Treatment Programs, items B. Certification with Special Distinction, C. Two-Year Certification, and D. One-Year Certification as to why the Board approves programs that have a backdated approval date as far back as eight months - approval date July 2020 and September 2020. The question was raised as to whether it was an error in the report date and the dates should be 2021 to 2023, because it’s a two-year certification and as of now a year of their certification has expired.

Agenda Item III. The Discussion and Possible Action Regarding Approval of Program Certification Recommendations was tabled at this time to allow Ms. Reid to confer with her staff regarding effective dates prior to March 26th, 2021.

DISCUSSION REGARDING REPORT FROM THE ADMINISTRATIVE RULES COMMITTEE
Dr. Carisa Wilsie stated that the Administrative Rules Subcommittee met Friday, March 5, 2021. Ms. Melissa Miller, Director of Medicaid Behavioral Health Policy Planning, presented the rule changes to Chapter 1, 16, 17, 18, 21, 22, 23, 24, 27, 50, 55, 60, 65, and 70. The chapters were included in the Board book for the Board Members’ review.

A summary of Ms. Miller’s presentation is as follows:

- Proposed permanent rule revision include the changes to the chapters that I mentioned; 1, 16, 17, 18, 21, 22, 23, 24, 27, 50, 55, 60, 65, and 70.
- The majority of the changes were made to reorganize language by removing duplicative provider requirements and the provider-specific chapters and placing them back into Chapter 1, which contains general provider requirements.
- Chapter 22 is also revoked and removed and merged into Chapter 21, as those chapters are closely related.
- These changes have been done to comply with the Governor’s Executive Order for all state agencies to review and reduce their regulatory language.
- Substantive changes to align with the programmatic and/or procedural changes have been made to several chapters, including:
  - The removal of rules related to Behavioral Health Homes in Chapter 17, 27, and 55, as this Medicaid program is being sunset on October 1, 2021.
  - Changes to certain residential substance use disorder requirements in Chapters 18 and 24 to align with requirements related to the State’s recently approved Institutions for Mental Disease (IMD) waiver, including the emergency rule revision previously adopted, which was discussed at a previous Board meeting.
  - Clarification of required service planning documentation and timeframes for Certified Community Behavioral Health Clinics (CCBHCs) in Chapter 17.
  - Clarification of application requirements and criteria for certified behavioral case managers in Chapter 50.
• Rules were posted on the Agency website from January 15, 2021, through February 16, 2021, for the public comment period; during which written comments were accepted.
• A virtual public hearing was held on February 19, 2021.
• All comments were provided a response and certain changes were made due to the comments received, most notably changes to requirement documentation and timeframes for CCBHCs to allow more flexibility.

Dr. Wilsie stated that the Administrative Rules Subcommittee recommends that the Board accept the changes to Chapters 1, 16, 17, 18, 21, 22, 23, 24, 27, 50, 55, 60, 65, and 70.

Dr. Wilsie indicated that Ms. Miller was available to answer any questions, and she will explain each Chapter Rule change as the Board votes on each one individually.

Chair Knoblock requested Commissioner Slatton-Hodges discuss financial or operational issues for ODMHSAS regarding the proposed rule changes.

Commissioner Slatton-Hodges stated that the bulk of the Chapter changes are regarding streamlining regulations, making it easier for providers to understand the Chapters, less administrative burden and easier review. Commissioner Slatton-Hodges stated that through Ms. Miller's work on the chapters our overall footprint was reduced by approximately 30%, which is great for providers as they look to become certified and, in general, the amount of oversight that is required to review each of these chapters. She indicated that there is not a financial implication, per se.

Commissioner Slatton-Hodges stated that one chapter speaks to the sunset of the health home. At this point in time that chapter has some changes in the amount of obligation that we have on the Medicaid match, but as we continue to develop additional programs, in particular, comprehensive community behavioral health clinics, those end up as a comparable offset.

DISCUSSION AND POSSIBLE ACTION REGARDING APPROVAL OF ODMHSAS ADMINISTRATIVE RULES
Ms. Melissa Miller, Director of Medicaid Behavioral Health Policy Planning, presented the Administrative Rules recommended for approval listed on Attachment B as follows:

Ms. Miller stated that the changes to the rules were made to meet the Governor's Executive Order of reducing obligatory language, not making substantive changes.

Ms. Miller explained the process that was used to develop the Chapter changes as follows:

• An internal group consisting of provider certification, contracting and policy staff met to review language reduction. A rule change request form was put out last fall that allowed both internal and external parties to suggest rule changes, which was taken into consideration.
• A 30-day public comment period was held from January 15, 2021, through February 16, 2021, allowing individuals to review the rule changes available on the ODMHSAS website and provide comments. Every comment was provided a written response from ODMHSAS.
• A virtual public hearing was held in February.
• What happens next: Upon ODMHSAS Board approval of the rule revisions, Ms. Miller will electronically submit them to the Governor and the Legislature, notifying the Secretary of State. Once they are approved by the Governor and the Legislature, they usually have a resolution at the end of the session, which is when the ODMHSAS rules are officially adopted, can be filed and published.
• Our proposed effective date for these rules is September 15, 2021.

Ms. Newman-German asked how the public received the changes.

Ms. Miller stated that the ODMHSAS received several comments from the CCBHCS centered around changes to documentation requirements. She stated that the ODMHSAS made changes based upon those comments.

Ms. Miller stated that there were comments regarding the timeline for the care plans being a little bit too prescriptive, so changes were made to allow more flexibility.

Ms. Miller stated that there were several comments regarding proposed changes to residential level of care providers in Chapter 18. The ODMHSAS moved up some of the timeframes for service plans and updates on assessments. She stated that that language aligns with current Medicaid rules for the providers that are now Medicaid providers, which were reasonable and in align with other rules, so language was not revised.

Ms. Miller provided a summary of each Chapter as follows:

CHAPTER 1: ADMINISTRATION

SUMMARY: The proposed rule revisions to Chapter 1 add language to specify general provider certification qualifications and categorizes them to align with existing language regarding core organizational, core operational, and quality clinical standards. The intent is to consolidate duplicative language across other chapters within Title 450 to increase consistency and reduce regulatory language in accordance with Executive Order 2020-03.

Ms. Everest made a motion to approve the Chapter 1 rule revisions. Ms. O'Doherty seconded the motion.
ROLL CALL VOTE
Ms. Everest Yes Dr. Russell Yes
Ms. Knoblock Yes Ms. Stacy Yes
Mr. Moini Yes Ms. Stomprud Yes
Ms. Newman-German Yes Dr. Wilsie Yes
Ms. O’Doherty Yes

CHAPTER 16: STANDARDS AND CRITERIA FOR COMMUNITY RESIDENTIAL MENTAL HEALTH FACILITIES

SUMMARY: The proposed rule revisions to Chapter 16 amend language to remove duplicative language that is either addressed under another title or addressed under new proposed language in Chapter 1. The intent is to consolidate duplicative language to increase consistency and reduce regulatory language in accordance with Executive Order 2020-03.

Ms. Everest made a motion to approve the Chapter 16 rule revisions. Ms. Newman-German seconded the motion.

ROLL CALL VOTE
Ms. Everest Yes Dr. Russell Yes
Ms. Knoblock Yes Ms. Stacy Yes
Mr. Moini Yes Ms. Stomprud Yes
Ms. Newman-German Yes Dr. Wilsie Yes
Ms. O’Doherty Yes

CHAPTER 17: STANDARDS AND CRITERIA FOR COMMUNITY MENTAL HEALTH CENTERS

SUMMARY: The proposed rule revisions to Chapter 17 amend language to remove duplicative language that is addressed under new proposed language in Chapter 1 and language that is addressed in provider manuals or is otherwise unnecessary. Rule revisions also include amended language and removal of language to align with programmatic changes to Community Mental Health Centers, Behavioral Health Homes, and Certified Community Behavioral Health Clinics. Language regarding certification standards for Behavioral Health Homes is removed entirely, as the Medicaid program will sunset on September 30, 2021.

Dr. Wilsie made a motion to approve the Chapter 17 rule revisions. Dr. Russell seconded the motion.
ROLL CALL VOTE
Ms. Everest Yes Dr. Russell Yes
Ms. Knoblock Yes Ms. Stacy Yes
Mr. Moini Yes Ms. Stomprud Yes
Ms. Newman-German Yes Dr. Wilsie Yes
Ms. O'Doherty Yes

CHAPTER 18: STANDARDS AND CRITERIA FOR SUBSTANCE RELATED AND ADDICTIVE DISORDER TREATMENT SERVICES

SUMMARY: The proposed rule revisions to Chapter 18 amend language to remove duplicative language that is addressed under new proposed language in Chapter 1. Rule revisions also include amended language to align with programmatic changes for residential, halfway house, and medically supervised withdrawal management providers, including a requirement for all residential level of care providers to provide access to medication assisted treatment, changes to requirements for treatment hours for dependent children in residential and halfway house facilities, and the addition of language that describes the Certificate of Need assessment process applicable to certain newly certified providers intending to enroll as a Medicaid provider. Revisions also include other clean-up language regarding assessments, service planning and discharge planning.

Ms. Everest made a motion to approve the Chapter 18 rule revisions. Dr. Wilsie seconded the motion.

ROLL CALL VOTE
Ms. Everest Yes Dr. Russell Yes
Ms. Knoblock Yes Ms. Stacy Yes
Mr. Moini Yes Ms. Stomprud Yes
Ms. Newman-German Yes Dr. Wilsie Yes
Ms. O'Doherty Yes

CHAPTER 21: ALCOHOL AND DRUG SUBSTANCE ABUSE COURSES (ADSAC), AND ASSESSMENTS

Ms. Miller stated that the ODMHSAS is proposing a change to the title of Chapter 21. It was titled “Certification of Alcohol and Drug Substance Abuse Courses (ADSAC), Organizations and Facilitators.” The title will change to “Alcohol and Drug Substance Abuse Courses (ADSAC) and Assessments.”

SUMMARY: The proposed rule revisions to Chapter 21 amend and add language to merge content from Chapter 22 into Chapter 21. The intent is to consolidate duplicative language to increase consistency and reduce regulatory language in accordance with Executive Order 2020-03.
Ms. Everest made a motion to approve the Chapter 21 rule revisions. Ms. Newman-German seconded the motion.

**ROLL CALL VOTE**

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**CHAPTER 22: CERTIFICATION OF ALCOHOL AND DRUG ASSESSMENT AND EVALUATION PROGRAMS RELATED TO DRIVER'S LICENSE REVOCATION [REVOKED]**

**SUMMARY:** The proposed rule revisions to Chapter 22 revoke the chapter in its entirety. Language from Chapter 22 will be merged into Chapter 21 through proposed rule revisions to Chapter 21. The intent is to consolidate duplicative language to increase consistency and reduce regulatory language in accordance with Executive Order 2020-03.

Ms. Everest made a motion to approve the Chapter 22 rule revisions. Dr. Wilsie seconded the motion.

**ROLL CALL VOTE**

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**CHAPTER 23: STANDARDS AND CRITERIA FOR COMMUNITY-BASED STRUCTURED CRISIS CENTERS**

**SUMMARY:** The proposed rule revisions to Chapter 23 amend language to remove duplicative language that is addressed under new proposed language in Chapter 1. The intent is to consolidate duplicative language to increase consistency and reduce regulatory language in accordance with Executive Order 2020-03. Revisions also remove time restrictions on Urgent Recovery Clinic services.

Dr. Wilsie made a motion to approve the Chapter 23 rule revisions. Ms. Stacy seconded the motion.
ROLL CALL VOTE
Ms. Everest Yes Dr. Russell Yes
Ms. Knoblock Yes Ms. Stacy Yes
Mr. Moini Yes Ms. Stomprud Yes
Ms. Newman-German Yes Dr. Wilsie Yes
Ms. O'Doherty Yes

CHAPTER 24: STANDARDS AND CRITERIA FOR COMPREHENSIVE COMMUNITY ADDICTION RECOVERY CENTERS

SUMMARY: The proposed rule revisions to Chapter 24 amend language to remove duplicative language that is addressed under new proposed language in Chapter 1. The intent is to consolidate duplicative language to increase consistency and reduce regulatory language in accordance with Executive Order 2020-03. Rule revisions also add language regarding certificate of need requirements for certain residential, halfway house, and medically supervised withdrawal management providers and other clean-up language to address programmatic changes.

Dr. Wilsie made a motion to approve the Chapter 24 rule revisions. Mr. Moini seconded the motion.

ROLL CALL VOTE
Ms. Everest Yes Dr. Russell Yes
Ms. Knoblock Yes Ms. Stacy Yes
Mr. Moini Yes Ms. Stomprud Yes
Ms. Newman-German Yes Dr. Wilsie Yes
Ms. O'Doherty Yes

CHAPTER 27: STANDARDS AND CRITERIA FOR MENTAL ILLNESS SERVICE PROGRAMS

SUMMARY: The proposed rule revisions to Chapter 27 amend language to remove duplicative language that is addressed under new proposed language in Chapter 1. The intent is to consolidate duplicative language to increase consistency and reduce regulatory language in accordance with Executive Order 2020-03. Language regarding certification standards for Behavioral Health Homes is removed entirely, as the Medicaid program will sunset on September 30, 2021.

Mr. Moini made a motion to approve the Chapter 27 rule revisions. Ms. O'Doherty seconded the motion.
CHAPTER 50: STANDARDS AND CRITERIA FOR CERTIFIED BEHAVIORAL HEALTH CASE MANAGERS

SUMMARY: The proposed rule revisions to Chapter 50 amend language to clarify application requirements and certification criteria for certified behavioral health case managers. Revisions include clarification regarding transcript submissions, employment requirements and criteria regarding criminal convictions.

Dr. Wilsie made a motion to approve the Chapter 50 rule revisions. Ms. O'Doherty seconded the motion.

ROLL CALL VOTE
Ms. Everest  Yes  Dr. Russell  Yes
Ms. Knoblock  Yes  Ms. Stacy  Yes
Mr. Moini  Yes  Ms. Stomprud  Yes
Ms. Newman-German  Yes  Dr. Wilsie  Yes
Ms. O'Doherty  Yes

CHAPTER 55: STANDARDS AND CRITERIA FOR PROGRAMS OF ASSERTIVE COMMUNITY TREATMENT

SUMMARY: The proposed rule revisions to Chapter 55 amend language to remove duplicative language that is addressed under new proposed language in Chapter 1. The intent is to consolidate duplicative language to increase consistency and reduce regulatory language in accordance with Executive Order 2020-03. Language regarding certification standards for Behavioral Health Homes is removed entirely, as the Medicaid program will sunset on September 30, 2021.

Dr. Wilsie made a motion to approve the Chapter 55 rule revisions. Ms. O'Doherty seconded the motion.

ROLL CALL VOTE
Ms. Everest  Yes  Dr. Russell  Yes
Ms. Knoblock  Yes  Ms. Stacy  Yes
Mr. Moini  Yes  Ms. Stomprud  Yes
Ms. Newman-German  Yes  Dr. Wilsie  Yes
Ms. O'Doherty  Yes
CHAPTER 60: STANDARDS AND CRITERIA FOR CERTIFIED EATING DISORDER TREATMENT PROGRAMS

SUMMARY: The proposed rule revisions to Chapter 60 amend language to remove duplicative language that is addressed under new proposed language in Chapter 1. The intent is to consolidate duplicative language to increase consistency and reduce regulatory language in accordance with Executive Order 2020-03.

Dr. Wilsie made a motion to approve the Chapter 60 rule revisions. Mr. Moini seconded the motion.

ROLL CALL VOTE
Ms. Everest Yes Dr. Russell Yes
Ms. Knoblock Yes Ms. Stacy Yes
Mr. Moini Yes Ms. Stomprud Yes
Ms. Newman-German Yes Dr. Wilsie Yes
Ms. O'Doherty Yes

CHAPTER 65: STANDARDS AND CRITERIA FOR GAMBLING TREATMENT PROGRAMS

SUMMARY: The proposed rule revisions to Chapter 65 amend language to remove duplicative language that is addressed under new proposed language in Chapter 1. The intent is to consolidate duplicative language to increase consistency and reduce regulatory language in accordance with Executive Order 2020-03.

Dr. Wilsie made a motion to approve the Chapter 65 rule revisions. Ms. Newman-German seconded the motion.

ROLL CALL VOTE
Ms. Everest Yes Dr. Russell Yes
Ms. Knoblock Yes Ms. Stacy Yes
Mr. Moini Yes Ms. Stomprud Yes
Ms. Newman-German Yes Dr. Wilsie Yes
Ms. O'Doherty Yes

CHAPTER 70: STANDARDS AND CRITERIA FOR OPIOID TREATMENT PROGRAMS

SUMMARY: The proposed rule revisions to Chapter 70 amend language to remove duplicative language that is addressed under new proposed language in Chapter 1. The intent is to consolidate duplicative language to increase consistency and reduce regulatory language in accordance with Executive Order 2020-03. Rule revisions also include language to clarify service provision requirements for consumers in residential settings and the removal of language regarding testing for marijuana.
Dr. Wilsie made a motion to approve the Chapter 70 rule revisions. Dr. Russell seconded the motion.

**ROLL CALL VOTE**

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Dr. Wilsie stated that there was no further business discussed at the Administrative Rules Subcommittee meeting, and she acknowledged Ms. Miller's hard work on the rules.

**DISCUSSION REGARDING REPORT FROM COMMISSIONER**

Commissioner Slatton-Hodges presented her report as follows:

Ron Sims, Executive Director OCCIC and Sr. Director of Crisis and Residential Services; Michael F. Hogan, Ph.D., Hogan Health Solutions; Larry Gross; and Nisha Wilson, Senior Director of State Operated CMHCs and Criminal Justice Services – Crisis Meeting – Commissioner Slatton-Hodges stated that she continues to have ongoing meetings around the crisis continuum of care and where the Department will be with that prior to July 1, 2022, when the national 988 for psychiatric emergencies takes place. She noted that the ODMHSAS has been consulting with Dr. Michael Hogan, past chair of the President’s New Freedom Commission on Mental Health, previous long-time Commissioner of New York and Ohio and a trainer for the National Suicide Association. She stated that Dr. Hogan is a longtime friend of Oklahoma and the ODMHSAS, and consultation continues with him as the Department moves toward building our continuum of care and getting the national 988 number up and running statewide.

Commissioner Slatton-Hodges stated that she met with each of the managed care organizations that were awarded contracts in our state to work around elements pertaining to behavioral health and the implementation in Oklahoma. She stated that ongoing discussions will continue regarding how assessments, policies and credentialing can be streamlined across all those organizations as we move forward in Oklahoma.

James Hess, Ed.D., Chair and Director, OSU School of Healthcare Administration, OSU Center for Health Sciences – Commissioner Slatton-Hodges stated that she and Dr. James Hess from the OSU School of Healthcare Administration at OSU continue discussions regarding how the ODMHSAS can ensure that we are providing OSU video medication administrative services throughout our state to reach as many people as possible.

Kevan Finley, Chief Executive Officer and Brian Bair, SVP of Operations, Cottonwood Creek Behavioral Hospital – Commissioner Slatton-Hodges indicated that she met with Kevan Finley, the ODMHSAS former Director at the Oklahoma Forensic Center (OFC). She stated that Mr. Finley left OFC to take a job at the Cottonwood Creek Behavioral Hospital, a psychiatric hospital in Boise, Idaho. Commissioner Slatton-Hodges stated that
the meeting with Mr. Finley and several members of his organization surrounded the possibility of additional psychiatric hospital care for the city of Tulsa. She stated that ongoing discussions will continue with that organization.

Tricia Everest, Chair, Oklahoma County Jail Trust; Greg Williams, Administrator and Linda Johnson, Staff, Oklahoma County Jail; Tim Tardibono, Executive Director and Lyn Jackson, Staff, Oklahoma County Criminal Justice Advisory Council; Nisha Wilson, Senior Director of State Operated CMHCs and Criminal Justice Services, Stephanie Cottrell, Staff and Dedra Hansbro, Staff, ODMHSAS – Commissioner Slatton-Hodges stated that she met with Ms. Tricia Everest, the new sheriff and staff at the Oklahoma County Jail. She indicated that the ODMHSAS wrote, applied and received pilot project grants regarding provider connections within the jail and providing a smooth handoff as people in the jail need to be connected with care when leaving the jail. She stated that that meeting dialogue surrounds keeping this group abreast regarding moving the process forward.

Health and Human Services Budget Hearing – (Speaker) – Commissioner Slatton-Hodges stated that she presented the ODMHSAS budget at the Health and Human Services budget hearing.

Representative Kevin Wallace; Representative Marcus McEntire; Verna Foust, Executive Director, Red Rock Behavioral Health; Tony Long, Shawnee Police Department and Member of the Sac and Fox Nation; Charlie Dougherty, Sheriff, Lincoln County; Michael D. Booth, Sheriff, Pottawatomie County; Maggie Shaffer-Dan Harder, Director, Governmental Relations; and Heath Holt Hayes, Chief Communications Officer, ODMHSAS – Commissioner Slatton-Hodges stated that she met with Representative Kevin Wallace, Representative Marcus McEntire, staff from Red Rock Behavioral Health, Shawnee Police Department, Lincoln County Sheriff's Department and staff from the Sac and Fox Nation. She noted that discussion surrounded bringing crisis care and a crisis unit just east of the City, Lincoln and Pottawatomie County. She stated that this discussion has led to an ongoing partnership and development between the tribe, Red Rock and the Department to help ensure that we can advance crisis services in that area.

Jerry Moore, CIO, Office of Management and Enterprise Services and Durand Crosby, J.D., Ph.D., Chief of Staff and Operations, ODMHSAS – Commissioner Slatton-Hodges stated that she met and has had great dialogue with Jerry Moore, Chief Information Officer, OMES, regarding challenges that the ODMHSAS has had in procuring the necessary equipment across the ODMHSAS facilities.

Senate Health Subcommittee – Commissioner Slatton-Hodges stated that she met with each member of the Senate Health Subcommittee, which is the committee that her confirmation went through and successfully passed. She noted that her sponsor and mentor was Senator Rosino. Commissioner Slatton-Hodges stated that the meetings individually with the members and in the group setting were great. She stated that she heard their thoughts regarding mental health and addiction, ways to move forward in the state and item that they would like to see happen for Oklahoma.
Rob Morrison, Executive Director, National Association of State Alcohol and Drug Abuse Directors (NASADAD) and SSA Check In – Commissioner Slatton-Hodges stated that she met with Rob Morrison, Executive Director, National Association of State Alcohol and Drug Abuse Directors. Their discussion surrounded national and Oklahoma issues and the future direction that the federal government is taking in terms of addiction disorders.

ODMHSAS Employee Appreciation Celebration – Commissioner Slatton-Hodges indicated that the ODMHSAS Employee Appreciation Celebration was held in January. The celebration acknowledged the wonderful work that the ODMHSAS staff does across the agency and special noteworthy situations of individuals in certain categories that were specifically recognized. She noted that this was the first time this event was held virtually.

ODMHSAS Town Hall Meeting – (Speaker) – Commissioner Slatton-Hodges noted that the ODMHSAS has held staff-wide town hall meetings. She explained that the ODMHSAS staff, statewide, can participate in the meetings where updates are provided on what is happening in the Department and state, and the meeting also provides time for a question and answer session with staff.

Patricia Gann, Deputy Director, Arkansas Department of Human Services, Division of Aging, Adult & Behavioral Health Services – Commissioner Slatton-Hodges stated that she met with Patricia Gann, Deputy Director for Behavioral Health in Arkansas. She explained that Arkansas is a sister state that does the same types of work that the ODMHSAS does, and their discussion regarded the use of technology, in particular tablets, that we use across Oklahoma and how they may be able to move forward in Arkansas with similar initiatives.

Chair Knoblock explained that Commissioner Slatton-Hodges was asked very difficult questions at her confirmation hearing, and she praised her for her performance. She stated that Commissioner Slatton-Hodges’ confirmation was unanimously approved.

DISCUSSION REGARDING THE REPORT FROM CORPORATE ACCOUNTABILITY SUBCOMMITTEE

Ms. Everest stated that the Corporate Accountability Subcommittee met on Wednesday, March 17, 2021.

DISCUSSION AND POSSIBLE ACTION REGARDING THE INTERNAL AUDITOR’S REPORT

Ms. Everest continued the report from the Corporate Accountability Subcommittee as follows:

Ms. Everest stated that Misty Capps presented the Internal Audit report and updated the Subcommittee on the status of ongoing audits being conducted by her division. The report reviewed by the Subcommittee was included in the Board book.

Ms. Everest made a motion to approve the Internal Auditor’s report. Ms. O’Doherty seconded the motion.
ROLL CALL VOTE
Ms. Everest      Yes  Dr. Russell      Yes
Ms. Knoblock     Yes  Ms. Stacy       Yes
Mr. Moini        Yes  Ms. Stomprud    Yes
Ms. Newman-German Yes  Dr. Wilsie      Yes
Ms. O'Doherty    Yes

DISCUSSION AND POSSIBLE ACTION REGARDING THE ADVOCATE GENERAL'S REPORT
Ms. Everest continued the report from the Corporate Accountability Subcommittee as follows:

Ms. Everest stated that the Corporate Accountability Subcommittee met with the Department's Advocate General, Joey Mickey, who presented the report to the Subcommittee and discussed a recent site visit to one of the state-operated facilities. The report reviewed by the Subcommittee was included in the Board book.

Ms. Everest made a motion to approve the Advocate General's report. Ms. Newman-German seconded the motion.

ROLL CALL VOTE
Ms. Everest      Yes  Dr. Russell      Yes
Ms. Knoblock     Yes  Ms. Stacy       Yes
Mr. Moini        Yes  Ms. Stomprud    Yes
Ms. Newman-German Yes  Dr. Wilsie      Yes
Ms. O'Doherty    Yes

DISCUSSION AND POSSIBLE ACTION REGARDING THE INSPECTOR GENERAL'S REPORT
Ms. Everest continued the report from the Corporate Accountability Subcommittee as follows:

Ms. Everest stated that the Subcommittee met with the Inspector General. The report reviewed by the Subcommittee was included in the Board book.

Ms. Everest made a motion to approve the Inspector General's report. Mr. Moini seconded the motion.

ROLL CALL VOTE
Ms. Everest      Yes  Dr. Russell      Yes
Ms. Knoblock     Yes  Ms. Stacy       Yes
Mr. Moini        Yes  Ms. Stomprud    Yes
Ms. Newman-German Yes  Dr. Wilsie      Yes
Ms. O'Doherty    Yes
DISCUSSION AND POSSIBLE ACTION REGARDING THE LEGAL REPORT
Ms. Everest continued the report from the Corporate Accountability Subcommittee as follows:

Ms. Everest stated that the Subcommittee met with Durand Crosby, Chief of Staff and Operations. He presented the Legal report. The report reviewed by the Subcommittee was included in the Board book.

Ms. Everest made a motion to approve the Legal report. Ms. Stacy seconded the motion.

ROLL CALL VOTE
Ms. Everest       Yes     Dr. Russell     Yes
Ms. Knoblock      Yes     Ms. Stacy      Yes
Mr. Moini         Yes     Ms. Stomprud   Yes
Ms. Newman-German Yes     Dr. Wilsie     Yes
Ms. O'Doherty     Yes

DISCUSSION REGARDING THE REPORT FROM THE PERFORMANCE IMPROVEMENT COMMITTEE
Ms. Newman-German provided the Performance Improvement (PI) Committee report as follows:

The PI Committee met on March 18, 2021, via zoom. Nisha Wilson, Senior Director of State-Operated CMHCs and Criminal Justice Services; Jessica Hawkins, Senior Director, Prevention Services; and Wendy Bond, Director of Program Enhancement, presented the Oklahoma Department of Mental Health and Substance Abuse Services Cares Project Successes.

A summary of their presentation is as follows:

They presented on five projects funded with the Coronavirus Aid, Relief, and Economic Securities (CARES) Act funds. The funds were provided to states to support public services impacted or adjusting to the presence of COVID-19. The ODMHSAS completed the following five projects in five months:

- Mental Health Support for Law Enforcement
- Expansion of Technology
- Mental Health COVID Services
- Mental Health Training for Front Line
- Mental Health Integration

Project Data:
- 881 eLearning courses were completed by law enforcement officers.
- 5957 mobile devices were purchased for consumers to access services remotely.
- Training for more than 2,109 front line personnel, including first responders, schools, employers, health/behavioral health providers, and parents/caregivers.
• 1,234 healthcare professionals and school-based staff were trained in best practices.

Ms. Newman-German stated that the projects were successfully completed on time. Four of the five projects are on-going such as trainings for law enforcement officers, educators, and hospital administrators. In addition, ongoing services are provided through mobile devices to consumers. While the projects are complete from a funding standpoint, sustainability plans were incorporated for on-going trainings and access to behavioral health services to reach and serve as many people as possible throughout Oklahoma.

Ms. Newman-German added that after the formal presentations a Board member asked about the sustainability plan with the use of technology. What was realized was that with the iPads in particular the no show rates went down. The consumers stayed with their plans longer and investing in technology quickly paid for itself.

Ms. Newman-German stated that before the Subcommittee adjourned, Dr. Crosby reviewed the CIR summaries and circumstances around the reported incidents.

Ms. Newman-German stated that there is no further action required from the Board.

DISCUSSION AND POSSIBLE ACTION REGARDING THE CRITICAL INCIDENT REPORT
Dr. Durand Crosby stated that the Critical Incident Report was presented at the Performance Improvement Subcommittee meeting and is included in the Board book. He did not have anything further to add to his report.

Ms. Everest moved to approve the Critical Incident Report. Ms. O'Doherty seconded the motion.

ROLL CALL VOTE
Ms. Everest        Yes        Dr. Russell       Yes
Ms. Knoblock       Yes        Ms. Stacy        Yes
Mr. Moini          Yes        Ms. Stomprud     Yes
Ms. Newman-German  Yes        Dr. Wilsie       Yes
Ms. O'Doherty      Yes

DISCUSSION REGARDING THE REPORT FROM THE FINANCE COMMITTEE
Ms. Everest stated that the Finance Committee met on March 17, 2021.

Mr. Rich Edwards presented to the Committee the FY-21 finance report for the month ending February 2021. He presented the budget to actual comparison with revenue collections now trending below projections by 0.1% or roughly just under $358K, Expenditures are trending under budget by about 5%. The year-to-date net variance for the agency is a positive 5% or $28.8 million.
Ms. Everest stated that the Finance Committee recommends approval of the FY-21 February Financial Report.

DISCUSSION AND POSSIBLE ACTION REGARDING THE MONTHLY FINANCIAL REPORT
Ms. Everest made a motion to approve the Financial report. Ms. Newman-German seconded the motion.

ROLL CALL VOTE
Ms. Everest    Yes    Dr. Russell     Yes
Ms. Knoblock    Yes    Ms. Stacy      Yes
Mr. Moini       Yes    Ms. Stomprud   Yes
Ms. Newman-German Yes    Dr. Wilsie    Yes
Ms. O’Doherty   Yes

DISCUSSION AND POSSIBLE ACTION REGARDING BUDGET REVISIONS
Ms. Everest continued with the Financial report as follows:

Ms. Everest stated that the Committee reviewed the budget revisions for FY-21. She reminded the Board that the Department often revises the budget to recognize different revenues from different sources. In this case, revision #11, revision #12, revision #13, and revision #14 were recognized through new federal grants, CARES Act funding, interagency revenue and funds for processing prior year claims. Ms. Everest stated that the Committee recommends approval of revisions #11, #12, #13, and #14 to the FY-21 budget work program.

Ms. Everest made a motion to approve revisions #11, #12, #13 and #14 to the FY-21 budget work program. Ms. O’Doherty seconded the motion.

ROLL CALL VOTE
Ms. Everest    Yes    Dr. Russell     Yes
Ms. Knoblock    Yes    Ms. Stacy      Yes
Mr. Moini       Yes    Ms. Stomprud   Yes
Ms. Newman-German Yes    Dr. Wilsie    Yes
Ms. O’Doherty   Yes

Ms. Everest stated that there is no further business to discuss.

Chair Knoblock asked Board members and staff to join in congratulating Ms. Tricia Everest on her recent appointment as the Secretary of Public Safety for Oklahoma. Chair Knoblock indicated that Ms. Everest will oversee 55 state agencies, including the Department of Public Safety, Department of Corrections, Bureau of Investigation, Pardon and Parole, Emergency Management and Homeland Security. She stated that approximately 9,000 employees will be under Ms. Everest’s watch and a budget of over $1.2 billion. She noted that Ms. Everest’s appointment means that there are five women currently serving on the Governor’s cabinet.
DISCUSSION AND POSSIBLE ACTION REGARDING APPROVAL OF PROGRAM CERTIFICATION RECOMMENDATIONS

At this time, the Board resumed discussion and possible action regarding approval of program certification recommendations as follows:

Dr. Crosby apologized to the Board for any confusion that the dates may have caused regarding the certification recommendations.

Dr. Crosby stated that he is addressing the Board at this time to provide a historical perspective on this matter. He stated that every Permanent for Temporary Operation (PTO) and every certification that the ODMHSAS Board approves not only has an effective date, but it also has an expiration date. Dr. Crosby explained that, at times, the review process takes us beyond that expiration date, which could be due to several factors, including:

a) COVID, for example, has caused delays in the review process.

b) The Department gives programs opportunities to do plans of correction, which may take them beyond the expiration of their certification to implement.

c) The Department and provider may be involved in negotiations regarding whether a deficiency exists.

d) The Department has had a large increase in new programs applying, which has caused a burden on our staff to get them done in time.

Dr. Crosby stated that regardless of the reason, by rule, a certification will remain valid, even if it comes to its expiration date, until the time the Department takes action to revoke that certification. He stated that we may not move to revoke for many of the reasons stated previously. The dates that are on the certification recommendation document in the Board book reflect the original effective date and expiration date.

Dr. Crosby stated that years ago, the ODMHSAS Board decided that even though they may vote beyond the expiration date, they wanted certification to revert back and stay with the original dates that were in place. He stated that he reviewed the rules with certification staff and that this Board can choose the effective and expiration dates and not continue as has been done in the past. Dr. Crosby proposed that to avoid confusion it may be best to use the current date as the effective date, but he will abide with the Board’s decision.

Ms. Everest thanked Dr. Crosby and Ms. Reid for their quick work on this matter and the willingness to know that the Board does not have to continue doing things the way they have been done in the past.

Chair Knoblock stated that she would defer this matter to the Certification Subcommittee to review and decide, in concert with Dr. Crosby and Commissioner Slatton-Hodges, and then bring their recommendation to the Board.

Chair Knoblock stated that for today’s meeting, Dr. Crosby’s explanation answered the certification questions brought forth and the Certification Recommendations would continue from item I. Alcohol and Drug Treatment Programs, D. One-Year Certification.
DISCUSSION AND POSSIBLE ACTION REGARDING APPROVAL OF PROGRAM CERTIFICATION RECOMMENDATIONS
Kelli Reid, Director of Provider Compliance and Assistance, continued the presentation of the programs recommended for approval listed on Attachment A as follows:

Alcohol and Drug Treatment Programs
D. One-Year Certification
One-year certification was recommended for: Youth and Family Services, Inc.

Ms. Everest moved to approve one-year certification for the above-referenced program. Ms. Newman-German seconded the motion.

ROLL CALL VOTE
Ms. Everest Yes Dr. Russell Yes
Ms. Knoblock Yes Ms. Stacy Yes
Mr. Moini Yes Ms. Stomprud Yes
Ms. Newman-German Yes Dr. Wilsie Yes
Ms. O’Doherty Yes

Outpatient Mental Health Treatment Programs
A. Permit for Temporary Operation
 Permit for temporary operation was recommended for: HomeCare Advisors, L.L.C., dba Pinnacle Care, Durant; and Shine Bright Family Services, L.L.C., Oklahoma City.

Dr. Wilsie moved to approve permit for temporary operation for the above-referenced programs. Ms. Newman-German seconded the motion.

ROLL CALL VOTE
Ms. Everest Yes Dr. Russell Yes
Ms. Knoblock Yes Ms. Stacy Yes
Mr. Moini Yes Ms. Stomprud Yes
Ms. Newman-German Yes Dr. Wilsie Yes
Ms. O’Doherty Yes

B. Certification with Distinction
Certification with distinction was recommended for: Flow Counseling Services, L.L.C., Tulsa; The Mental Health Center, Inc., Idabel; Tri-City Youth and Family Center, Inc., Choctaw; and YCO Tulsa, Inc., Chickasha, Clinton, Cordell, Durant, Elk City, Mangum, Weatherford

Dr. Wilsie moved to approve certification with distinction for the above-referenced programs. Ms. Everest seconded the motion.
ROLL CALL VOTE
Ms. Everest        Yes       Dr. Russell        Yes
Ms. Knoblock       Yes       Ms. Stacy          Yes
Mr. Moini          Yes       Ms. Stomprud       Yes
Ms. Newman-German  Yes       Dr. Wilsie         Yes
Ms. O'Doherty      Yes

C. Two-Year Certification
Two-year certification was recommended for: Dedicated Outpatient Therapy Services, L.L.C., Chandler; Innovo Counseling and Consulting, Inc., Oklahoma City; and Millennium Community Services, L.L.C., Poteau, Tahkina, Hobart, Enid, Norman, Oklahoma City, and Duncan.

Mr. Moini moved to approve two-year certification for the above-referenced programs. Ms. Stacy seconded the motion.

ROLL CALL VOTE
Ms. Everest        Yes       Dr. Russell        Yes
Ms. Knoblock       Yes       Ms. Stacy          Yes
Mr. Moini          Yes       Ms. Stomprud       Yes
Ms. Newman-German  Yes       Dr. Wilsie         Yes
Ms. O'Doherty      Yes

D. One-Year Certification
One-year certification was recommended for: Oklahoma Mental Health Collective, L.L.C., Eakly.

Ms. O'Doherty moved to approve one-year certification for the above-referenced programs. Mr. Moini seconded the motion.

ROLL CALL VOTE
Ms. Everest        Yes       Dr. Russell        Yes
Ms. Knoblock       Yes       Ms. Stacy          Yes
Mr. Moini          Yes       Ms. Stomprud       Yes
Ms. Newman-German  Yes       Dr. Wilsie         Yes
Ms. O'Doherty      Yes

Ms. Reid inadvertently skipped three programs under Outpatient Mental Health Treatment Programs, C. Two-Year Certification and brought them forward at this time.

Outpatient Mental Health Treatment Programs
C. Two-Year Certification
Two-year certification was recommended for: Motiv8, Inc., Wynnewood; RiverBend Counseling Services, L.L.C., Atoka, Durant; and Southern Oklahoma Treatment Services, Inc., Ardmore, Durant, Madill, McAlester, Tishomingo, Checotah.
Ms. Everest moved to approve two-year certification for the above-referenced programs. Mr. Moini seconded the motion.

Programs of Assertive Community Treatment
A. Two-Year Certification
Permit for temporary operation was recommended for: Grand Lake Mental Health Center, Inc., Ponca City; and Grand Lake Mental Health Center, Inc., Stillwater.

Mr. Moini moved to approve permit for temporary operation for the above-referenced programs. Ms. O'Doherty seconded the motion.

ROLL CALL VOTE
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<td>Ms. Knoblock</td>
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<td>Mr. Moini</td>
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<td>Ms. Newman-German</td>
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PRESENTATION:
Ms. Melissa Miller, Director of Medicaid Behavioral Health Policy Planning presented on the Institutions for Mental Disease (IMD) Waiver. A summary of her presentation is below:

- The approval of the IMD waiver has removed a major policy barrier and set the stage for Medicaid expansion and managed care. Certain services previously funded with state dollars only can now receive federal Medicaid matching funds.
- Historically, federal regulations have prohibited Medicaid reimbursement for adult stays in facilities considered to be Institutions for Mental Disease, or IMDs.
- Through submission of a Section 1115 demonstration waiver of the IMD exclusion (IMD waiver), states can request Medicaid reimbursement for services provided in IMDs.
- Oklahoma's approval date is December 22, 2020. The waiver will be effective for five years from the date of approval, with a potential for renewal.
- The waiver allows Medicaid reimbursement for eligible individuals during inpatient/residential stays in IMD psychiatric hospitals, crisis units, and substance use disorder facilities.
- The waiver requires providers to meet certain requirements, including length of stay and provision of medication assisted treatment (MAT).
- The State must demonstrate how the waiver meets certain goals, including better access to and coordination of care.
- The State is pursuing an increased PRTF specialty rate with anticipated savings from the waiver.
- A separate federal mandate has required Medicaid coverage of Opioid Treatment Program services, effective October 2020.

Questions from Ms. Miller's presentation are as follows:
Ms. Newman-German asked if Medicaid would pay for individuals that need to stay longer than 60 days.

Ms. Miller indicated that Medicaid will not pay for any days for stays that exceed 60 days, but that the Department pays for those stays with state funds.

Ms. Stacy asked if the Department has any concerns that providers will release people at the 60-day mark because they won't receive those funds.

Ms. Miller indicated that that is not a huge concern, as individuals will still be able to receive that care and funding and that we don't have many that go beyond the 60 days.

Commissioner Slatton-Hodges stated that at this time we do not have a tremendous amount of adult psychiatric hospital providers; that has often fallen to the state facilities to provide that care due to the fact that Oklahoma has had a large uninsured population and because of the IMD exclusion that has been in place. She stated that it has not been feasible, from a business perspective, for folks to go into that line of work and that much of that work is provided by our state facilities. Commissioner Slatton-Hodges noted that those state facilities will continue to see folks for the length of care needed regardless of whether they are compensated.

Dr. Wilsie asked if Ms. Miller feels it is discriminatory that states must apply for a waiver to cover these services?

Ms. Miller stated yes.

Chair Knoblock asked if the waiver will increase the number of providers who seek certification.

Ms. Miller stated that yes, we anticipate we may see more providers seeking certification, and we are monitoring to ensure we have adequate staff.

Commissioner Slatton-Hodges stated that Ms. Melissa pointed out that it was often believed a discriminatory practice to not pay for care in what are classified as Institutes for Mental Disease. Commissioner Slatton-Hodges asked Ms. Miller if she would consider it still a discriminatory practice in the fact that a waiver must be applied for, as opposed to it being a general practice under Medicaid/Medicare services.

Ms. Miller stated that yes, she personally believes that. She stated that she would advocate that the federal government remove the regulations entirely from the federal regulations.

Ms. Knoblock remarked that the IMD exclusion along with the increased reimbursement rates could encourage things like the meeting Commissioner Slatton-Hodges referenced earlier with Cottonwood Creek, and she asked Commissioner Slatton-Hodges if others may be incentivized to come to Oklahoma and start providing additional services. Chair
Knoblock also asked Commissioner Slatton-Hodges if the Department will be staffed enough to meet the increased demand, if there are organizations applying for increased certification due to these new opportunities.

Commissioner Slatton-Hodges stated that many of the policy changes that are occurring in Oklahoma, whether that be a waiver for exclusion of IMD or the expansion of coverage for Oklahomans, will encourage this type of service to be more fully developed whether it be from our current providers in-state or from out-of-state providers who perhaps have avoided Oklahoma but might be willing to do specialized programs, etc. within our state.

Commissioner Slatton-Hodges stated that on the psychiatric inpatient care, that is not something for adults that the Department certifies; that is a required the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) certification. She indicated that it would not necessarily increase provider certification work in that area; however, we may see more residential substance abuse treatment services as well as detoxification services and/or halfway house services coming into Oklahoma, as they will be compensable, and that would create more work for our provider certification division. She stated that as of now they are not staffed at the level that would be needed; but that is something our Chief of Staff and Operations, Durand Crosby, is reviewing to make certain that we will have staff in place, if needed, for that increase.

PRESENTATION:
Commissioner Slatton-Hodges introduced Tony Stelter, Director of Recovery Supports for the Oklahoma Department of Mental Health and Substance Abuse Services.

Mr. Stelter gave a moving presentation on how his depression, low self-esteem and low self-worth made him dependent on others, which then led to a path of substance use at an early age. He spoke about the love his family had for him, which led him to receive services for his substance abuse issues and then later on, he received treatment for his mental health issues and continues working on his recovery every day.

Mr. Stelter stated that his recovery journey began approximately 11 years ago, and a little over 10 years ago he started working at the Children's Recovery Center where he began moving his way up to different positions, and he now works for the ODMHSAS Central Office as Director of Recovery Supports.

Mr. Stelter shared his passion for helping other individuals and reducing stigma surrounding mental health and substance abuse issues. He said, "Mental Health and Substance Abuse Services really helped save my life."

NEW BUSINESS
There was no new business.

ADJOURNMENT
Ms. Everest moved to adjourn the meeting. Ms. Newman-German seconded the motion.
ROLL CALL VOTE
Ms. Everest       Yes
Ms. Knoblock      Yes
Mr. Moini         Yes
Ms. Newman-German Yes
Ms. O'Doherty     Yes

Dr. Russell       Yes
Ms. Stacy         Yes
Ms. Stomprud      Yes
Dr. Wilsie        Yes

Tricia Everest, J.D.

Jeanne Russell, Ed.D.

Courtney Latta Knoblock, MPA

Kristin Stacy, J.D.

Hossein Moini

Kari Stomprud, M.Ed.

Rebecca Newman-German

Carisa Wilsie, Ph.D.

Shannon O'Doherty