

**Whatcom County Behavioral Health Advisory Committee (BHAC)**  
**Meeting Minutes**

**Meeting Date/Time/Location:** January 28, 2019 3:30 p.m. to 5:00 p.m., Whatcom County Courthouse Room 514, 311 Grand Ave, Bellingham

**Members Present:** Barbara Brenner, Dave Reynolds, Wendy Jones, Regina Delahunt, Chris Phillips, Dac Jamison, Susan Wood

**Members Absent:** Bill Elfo (Excused), Darrin Hall (Excused)

**Health Depart Staff/Guests:** Perry Mowery, Health Department Human Services Supervisor; Samantha Murdoch, Health Department Coordinator; Joe Fuller, Health Department Program Specialist; Katie Stanford, Health Department Program Specialist; Arlene Feld, Michael Massanari.

Agenda Item	Discussion	Action/Who
<b>1. Welcome and Introductions</b>	Members state names and positions.	
<b>2. Approve Minutes of July 2018</b>	Regina Delahunt moved to approve the minutes as presented. Dac Jamison seconded the motion. A vote was conducted with all present members voting in favor. The motion passed.	Vote to approve minutes: Ayes 7, Nays 0, Abstain 0
<b>3. Update on Crisis Stabilization Facility (CSF)</b>	<p>A draft resolution was presented by Chris Phillips. Chris clarified that BHAC is not passing the resolution, but is asking the Council to pass the resolution.</p> <p>The Incarceration Prevention and Reduction Task Force (IPRTF) has received capital funds from the legislature and approval from the Council for the Crisis Stabilization Facility (CSF) project. The needs have been met and “ground breaking” will take place in March.</p> <p>With regard to operational funds, in the past, the Behavioral Health Organization (BHO) provided funding to augment costs of operation when Medicaid funds fell short. Once the BHO becomes integrated as the “Behavioral Health - Administrative Service Organization (BH-ASO)”, the Health Care Authority (HCA) will be contracting with private insurance agencies to administer Medicaid. The focus of this discussion is to ask Council to lean on the governor and the legislature to approve to full funding for operating costs and to provide a mechanism of reimbursement that will pay the costs, even when beds are not completely full. The insurance companies want to pay fee for service, but the County wants funding to be based on the full costs of operating the facility 24/7.</p> <p>The state provides funding for crisis services, however the CSF is not defined by the HCA/MCOs as “Crisis Services”, it falls into the category of residential treatment facility, not crisis care. One option that was discussed was to request that the state redefine the CSF as a crisis service, especially after closure of other supportive facilities in the area.</p>	<p>Chris Phillips</p> <p>Regina Delahunt</p>

<p><b>Update on Crisis Stabilization Facility continued</b></p>	<p>The crisis stabilization component is a crucial part of the three tier program the governor’s plan. The steps include turning the state hospitals into forensic centers, moving civil commitment patients into community settings, and building additional civil commitment bed capacity through a combination of small state-run facilities and private facilities.</p> <p>Anne is putting together a cost avoidance model to compare cost savings of this facility to what is currently used for detox and triage with PeaceHealth Medical Center.</p> <p>In addition, we want to ensure that our messages are aligned with the BH-ASO and Washington State Association of Counties (WSAC).</p> <p>One option is to ask the state to provide operational costs for two years, which then provides a trend for volume and ability to negotiate a fee for service rate.</p> <p>Another thing that is changing occurring with integration is the move to an outcome or value-based system with “pay for performance” instead of pay on a fee for service model. It is in the interest of the insurance companies to continue to operate facilities like this in order to meet the metrics that will be required by contract.</p> <p>Susan Wood made a motion to advise Council to develop a strong resolution to recommend that the governor support the operational costs of the Crisis Stabilization Facility. Barbara Brenner seconded.</p>	<p>Vote to approve motion: Ayes 7, Nays 0, Abstain 0</p>
<p><b>4. Community Health Assessment (CHA) Presentation</b></p>	<p>Katie (Health Information Assessment (HIA) Division) provided an overview of the Community Health Assessment. With this assessment the Health Department looked at how trends differed when the County was compared to the state compared to trends for the state. The 7 school district boundaries in Whatcom County were used to compare and assess data. Through “community listening sessions” in each area, HIA was able to gather and compare data further. This plan is only the beginning, since we are continuing to gather, plan, and make improvements using these indicators. As the Committee analyzes this information consider what is missing, so that we can continue to develop this assessment for the following years.</p> <p>A component of the “Health Aging Initiative” is to gather tremendous amounts of data about the elderly community.</p> <p>Katie can be reached at <a href="mailto:KStanfor@co.whatcom.wa.us">KStanfor@co.whatcom.wa.us</a> or by phone at 360-778-6056</p> <p>HIA’s next steps are called the “Community Health Improvement Plan”. HIA will begin looking through and breaking down the current data to a manageable number in order to bring it to a larger community gathering for prioritization. The community gathering is called “Community Convening” and will be held on April 24<sup>th</sup>, 2019.</p>	<p>Katie Stanford</p>

<p><b>5. Discussion of Priority Behavioral Health Areas for Future Focus</b></p>	<p>Opioids was a major issue identified in the community a few years ago. As an example of how we addressed this, Adam Kartman started a nonprofit to train physicians in Medical Assisted Treatment and provide that treatment. He wanted to provide assistance of counselors and resources to support through issues that recovery brings up. The Hospital and Health Department partnered to pay for grant writers to help Dr. Kartman get a very large grant, and the hospital donated clinic space for him. In the last 16 months 152 people have undergone treatment and 20 physicians have been trained. The nonprofit is called Cascade Medical Advantage.</p> <p>We are having an Opioid Prevention Group meeting take place every one to two months, and there's another meeting coming soon. Although we do not address treatment, we discuss disposal. "Whatcom Has Hope" website has great information, including the new medication disposal sites.</p> <p>Opioid Prevention Meetings @ Unity Care 2 to 3:30 2/4</p>	<p>Chris Phillips</p>
<p><b>6. Public Comment</b></p>	<p>None</p>	
<p><b>Next Meeting:</b></p>	<p><b>April 29<sup>th</sup>, 2019, 3:30-5:00</b>  <b>311 Grand Avenue</b>  <b>Whatcom County Courthouse Room 514</b>  <b>Bellingham, WA</b></p>	



Whatcom County  
**HEALTH**  
 Department



**PUBLIC HEALTH**  
 ALWAYS WORKING FOR A SAFER AND  
**HEALTHIER WASHINGTON**