



HEALTHCARE TASK FORCE

Governor's Commission on Alcohol and Drug Abuse, Prevention, Intervention, Treatment & Recovery

Task Force Co-Chairs: Seddon Savage & Lindy Keller

Thursday, June 28, 2018

Minutes

Present: Lindy Keller, Seddon Savage, Ann Branen, Jake Berry, Dr. Peter Mason, Jeanne Ryer, Dr. Gerard Hevern, Carol Furlong, Anna Ghosh, Sarah Freeman, Peter Danles, Kerry Nolte, Cynthia Kohen **On Phone:** Dr. Molly Rossignol

I. Minutes

- The May minutes were approved

II. 23 million dollars for opioid related harm

- DHHS will receive a grant that will be focused on opiate use disorder and likely largely on MAT
- This is two-year funding that then goes away; initiatives must be sustainable
 - The money cannot be used for workforce activities
- BDAS has given recommendations for the money that will be presented to the Commissioner by the Director of the Behavioral Health Division
- The money is intended to be released in September
- The Task Force makes the following recommendations for the money:
 - Support of ECHOs and COPs to support the current workforce
 - Promote the four priorities of the Task Force (explained below)
 - Increase MAT in primary care in hospitals and increasing MAT in ERs
 - Mandate hospitals to have drug take back programs
 1. This could be done at both a voluntary level and mandated through legislative action.
 - Seddon will touch base with Patrick and tell him that these are the recommendations of the Task Force

III. MAT Oversight Position

- The position has established the ability to contract with someone to provide oversight in order to fill the gap of the lack of a medical director at BDAS.
 - Since the legislation passed there has not been much discussion
- Dr. Ballard will not serve in the MAT oversight position as he is not board certified in addiction medicine.
 - However, he will oversee strategies to address the opioid epidemic
 - Seddon will invite Dr. Ballard to the next meeting of the Task Force

IV. Medicaid Rates

- The Medicaid rates through the MCOs are still a concern for behavioral health providers
- The 23 million dollars discussed above cannot be used to increase these rates however, it maybe could be used to alleviate other administrative burdens.
- The Treatment Community will negotiate with the MCOs, will comment on the RFA for the MCOs and will support behavioral health providers in a collective bargaining process.
 - Perhaps the MCOs could take on the administrative burdens
 - Treatment providers are struggling to make business decisions with so much uncertainty
- A potential solution may be to allow behavioral health providers to add additional rates like nursing homes do with OT and PT services. This is still unclear.

V. Legalization of marijuana

- An issue was raised at the last Governor's Commission meeting; there is a feeling that the Commission should discuss the legalization of marijuana.

- Some members of the Commission think that legalization may reduce overdose deaths, and that having an SUD should be considered an allowable condition for medical marijuana.
- These recommendations will come before the oversight board.

VI. Opioid Prescription Card

- Edits were provided and the Opioid Task Force has accepted those edits for the pilot.

VII. Workforce

- The IDN Workforce Committee is engaging in education and training activities through their subcommittees. They are making efforts to eliminate redundancy. There will be two repositories for information
 - The AHECs will keep calendars of trainings around the State.
 - Antioch College will keep a resource repository of trainers/curriculum/modules/etc.
 - There is a need to increase access to frameworks such as a reframing addiction training.

VIII. Naloxone Distribution

- The Harm Reduction Coalition is distributing injectable naloxone through Hand Up Health Services in Strafford County. They currently do not see an end to their ability to provide this.
- This may also be available to provide to other programs.

IX. Syringe Service Programs

- **There have been increases seen at the Seacoast program and Hand Up Health Services will be trying to expand to Rockingham County. This will involve a fundraising campaign which Kerry will send to the Task Force.**
- Hand Up Health Services has also decided to support additional programs. Hand Up Manchester will be started; Kerry will be the coordinator of the program.
 - The plan is to run volunteer and community trainings through August and start the program in September.
- There is also work being done with interested partners in Concord to set up a program there.
- Peter suggested putting together a printed “Playbook” that would instruct those that want to put together a program with the steps they should follow. Kerry shared that they have this information, it just has to be put together.
- A bill has passed which would allow a school board to grant permission for a syringe service program to exist in their school zone. However, this has not been able to happen until 60 days after the bill has signed.
- There is still a challenge of hospital systems not referring to syringe service programs; it may take legislative action to mandate programs.
- The State Division of Public Health Services will not fund SSPs. The State has interpreted “self-funded” language in the bill to mean that they cannot use State funds. New Futures will make this a priority for next year along with other harm reduction priorities including”
 - Requiring pharmacies to sell syringes
 - Requiring the sale of lock boxes
 - **New Futures will connect with the Harm Reduction Coalition and Jake will report back on continued conversations next month.**

X. Health Care Task Force Strategies

- Seddon reviews the identified priorities of the Task Force which include: SBIRT in high yield practice settings; initiating treatment in places where those with SUD are in distress; end stigma in health care systems; and harm reduction.
 - There was a suggestion to be explicit in Strategy 4 about supporting practices with payment issues. Seddon will change the language to “Provide strategic and financial support for practice transformation”

- At the next meeting of the Task Force the group will inventory current projects happening in the State related to these priorities.
 - Adelaide will send an email asking the Task Force to prepare for the July meeting and will send the priorities document.

XI. Other

- The Department of Insurance Oversight Committee has stopped meeting under the new Commissioner. The Health Care Task Force may recommend that this committee is needed and should continue meeting
- July 19 is the Annual Meeting of the Providers Association; the afternoon will be a training on Medicaid changes specific to the MCOs.
- RFPs have gone out for the Integrated Conference, please let Sarah Freeman know if there are ideas for presentations.
- The deadline to apply for the MAT ECHO is July 7, they are looking for increased participation from rural practices in New Hampshire.
 - Jeanne will send the recruitment information to Kerry Nolte and Adelaide will send the information to the Task Force
 - The perinatal ECHO is currently scheduled to end in September.
- There is an MAT waiver course on August 17 in Keene, NH.