



Commission on Mental Health and Substance Use Disorder

Meeting Minutes

August 20, 2024

8:00 am – 4:00 pm

In-Person Meeting in Orlando, Florida and Virtual via Microsoft Teams

Members

Jay Reeve, PhD
Chairperson

Representative Christine
Hunschofsky, Co-Chair
Speaker of the House Appointee

Senator Darryl Rouson
President of the Senate Appointee

Clara Reynolds, LCSW, MBA
Governor Appointee

Ann Berner
Speaker of the House Appointee

Sheriff William Prummell
Governor Appointee

Kathleen Moore, PhD
President of the Senate Appointee

Kelly Gray-Eurom, MD
Governor Appointee

Larry Rein
Governor Appointee

Chief Judge Mark Mahon
Governor Appointee

Melissa Larkin-Skinner
Speaker of the House Appointee

Lee Fox
President of the Senate Appointee

Shawn Salamida
Speaker of the House Appointee

Secretary Shevaun L. Harris
Department of Children and
Families

Secretary Jason Weida
Agency for Health Care
Administration

Uma Suryadevara, MD
Speaker of the House Appointee

Richard Duggan
President of the Senate

Richard Weisberg, CRPS
President of the Senate
Appointee

Call to Order, Roll Call, Approval of Minutes and Meeting Information:

Dr. Jay Reeve, Chairperson, opened the Commission on Mental Health and Substance Use Disorder (Commission) by thanking the Governor, First Lady, and Florida Legislature for their support of the Commission and the state's behavioral health efforts. Roll call was taken by Chair Reeve and quorum was established. Chair Reeve recognized subject matter experts serving the Commission through the various subcommittees and provided a brief overview of the agenda and order of meeting operations.

The following members or designees were in attendance:

Jay Reeve, PhD, Chairperson (Governor Appointee: Apalachee Center)
Senator Darryl Rouson (President of the Senate Appointee)
Clara Reynolds, LCSW, MBA (Governor Appointee: Crisis Center of Tampa Bay)
Ann Berner (Speaker of the House Appointee: Southeast Florida Behavioral Health Network, Inc.)
Sheriff William Prummell (Governor Appointee: Charlotte County Sheriff's Office)
Kathleen Moore, PhD (President of the Senate Appointee: University of South Florida)
Kelly Gray-Eurom, MD-virtual (Governor Appointee: UF College of Medicine)
Larry Rein (Governor Appointee: ChildNet)
Chief Judge Mark Mahon (Governor Appointee: Fourth Circuit Court)
Melissa Larkin-Skinner (Speaker of the House Appointee: Centerstone of Florida)
Lee Fox (President of the Senate Appointee: All Points North)
Shawn Salamida (Speaker of the House Appointee: Lakeview Center)
Representative Christine Hunschofsky (Speaker of the House Appointee)
Richard Duggan (President of the Senate Appointee: Collier County Public Schools)
Richard Weisberg, CRPS-virtual (President of the Senate Appointee: Weisberg Wealth Management)
Austin Noll for Secretary Jason Weida (Agency for Health Care Administration)
Secretary Shevaun Harris (Department of Children and Families)

Opening Remarks:

- First Lady Casey DeSantis Video Remarks
- Kathleen Passidomo, President of the Florida Senate Video Remarks

System of Care Subcommittee Report Out and Discussion:

Subcommittee Chair Shevaun Harris presented ten recommendations from the three System of Care subcommittee workgroups for consideration by the Commission.

Deep-End Services Workgroup

1. Develop new care coordination teams that use the Critical Time Intervention (CTI) model for individuals who meet the high utilization threshold
2. Increase the number of Florida Assertive Community Treatment teams and Forensic Multi-disciplinary Teams statewide



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3. Increase Short-term Residential Treatment facility capacity for adults and children
4. Increase use of Long Acting Injectables prior to discharge from State Mental Health Treatment Facilities. *Commissioner Berner suggested including community providers and not just state hospitals. Commissioner Harris agreed.*
5. Increase capacity for residential level treatment facilities.

Individuals With Unique Needs Workgroup

6. Increase crisis response teams focused on seniors to divert older adults from deeper end services (e.g., emergency rooms, crisis stabilization units, etc.) and provide follow-up to ensure continued stabilization. *Commissioner Reynolds suggested including collaboration with community paramedicine with this recommendation. Commissioner Harris agreed.*
7. Increase emergency and respite housing options that will provide enough time for evaluation of longer term more appropriate services, including permanent housing options

Skills Based Training Workgroup.

8. Develop a comprehensive directory of statewide behavioral health training resources
9. Develop a plan to disseminate the statewide behavioral health training resources directory
10. Conduct an annual review to update the directory with new resources

Commissioners voted to adopt all System of Care subcommittee recommendations, with the proposed edits to recommendations 4 and 6, into the 3rd Interim Commission Report.

Children and Youth Subcommittee Report Out and Discussion:

Subcommittee Chair Representative Hunschofsky presented eleven recommendations from the three Children and Youth subcommittee workgroups for consideration by the Commission.

Behavioral Health Funding Mechanisms in Schools Workgroup

1. Provide technical assistance to all districts and encourage participation in the Medicaid in Schools Program
2. Continue multi-agency collaboration to efficiently utilize State resources
3. Review and update school-based Medicaid payment methodology for direct services delivered in the school setting

Behavioral Health Outcomes Workgroup Recommendations

4. Statewide implementation of the DLA-20 functional assessment tool to identify areas of need and measure progress over the course of care
5. State sponsored training program (perhaps the MMA plans) leading to a sustainable train the trainer model
6. Recommended increasing the allowable limit of the number of Functional Assessments annually
7. Include the DLA-20 in all new state contracts
8. Evaluate the DLA 20 for continued relevance every 2 years
9. Evaluate the marketplace for new or emerging tools every 2 years

Family Access and Entry Workgroup

10. Increase integration of Primary Care and Behavioral Health through the expansion of Florida's existing regional mental health access hubs (FPBHC).



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11. Assess and expand Florida school districts' implementation of school-based behavioral health access through Telehealth. *Commissioner delegate Austin Noll proposed this recommendation center on assessing telehealth and pausing the expansion until the assessment is complete. Commissioner Hunschofsky accepted the change. The revised language for this recommendation is "Assess Florida school districts and identify effective models of school-based behavioral health access through Telehealth."*

Commissioners voted to adopt all Children and Youth subcommittee recommendations, with the proposed edits to recommendation 11, into the 3rd Interim Commission Report.

Finance and Workforce Subcommittee Report Out and Discussion:

Subcommittee Chair Senator Darryl Rouson presented eleven recommendations from the System of Care subcommittee workgroups for consideration by the Commission.

Workforce Workgroup

1. Establish college mentors for middle- and high-school students interested in the behavioral health field
2. Increase the number of students admitted in public and private colleges and universities, and increase faculty instructional positions for the behavioral health field
3. Support professional associations to work with undergraduate programs and create practicums with school districts for middle schools and high schools
4. Stipends, compensation and/or support for clinical supervisors and/or employers, students, and registered interns
5. Local community and statewide incentives to attract and recruit behavioral healthcare professionals
6. Conduct a workforce compensation study (conducted by the Florida Center for Behavioral Health Workforce)
7. Conduct an analysis of health plan panels for mental health and substance use services.
8. Integrate primary care and behavioral health
9. Identify and promote cross-provider learning opportunities that support networking and collaboration across the continuum of care (crisis, inpatient, outpatient, community and institutional)
10. Create a Behavioral Health Leadership Academy to develop future leaders and provide mentorship.
11. Develop graduate-level Behavioral Health Leadership and Management certification program with input from today's leaders

Commissioners voted to adopt all Finance and Workforce subcommittee recommendations into the 3rd Interim Commission Report.

Access to Care Subcommittee Report Out and Discussion:

Subcommittee Chair Clara Reynolds presented seven recommendations from the Access to Care subcommittee workgroups for consideration by the Commission.



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Barriers to Utilization Workgroup

1. Increase awareness and knowledge of local behavioral health systems
2. Increase funding to expand capacity of the 988 Suicide and Crisis Lifeline System
3. Share Best Practices on mental health first aid and the use of de-stigmatizing person-first language and trauma-responsive care to improve the patient experience and engagement in treatment. *Commissioner Berner proposed bringing mental health first aid to the forefront when developing solutions to counter the stigma associated with seeking treatment for behavioral health. Commissioner Reynolds agreed.*

Solutions to Barriers Workgroup

4. Mass media and advertising campaigns
5. Awareness campaign – Direct messaging to individuals and family members
6. Circle of influence engagement campaign – Tailored training to empower community involvement

Acute Care Transport Workgroup

7. Continue to evaluate county and circuit transportation plans for best practices and evaluate emergency medical services and private transportation options. *Commissioner Larkin-Skinner proposed including Emergency Medical Services (EMS) in the continuing discussion and evaluation of behavioral health transportation models. Commissioner Reynolds agreed.*

Commissioners voted to adopt all Access to Care subcommittee recommendations, with the proposed edits to recommendations 3 and 7, into the 3rd Interim Commission Report.

Data Analysis Subcommittee Report Out and Discussion:

Subcommittee Chair Kathleen Moore presented four recommendations from the Data Analysis subcommittee for consideration by the Commission.

1. Create Statewide Coalition to determine optimal sources, uses and outcomes of data – defining key stakeholders
 - Conduct gap analysis to identify expertise needed when identifying key stakeholders for the statewide coalition
2. Secure administrative authority and commitment from stakeholders/agencies to establish the state-wide Florida Behavioral Healthcare Data Repository (FBHDR)
3. Determine structure of repository (centralized, federated, etc.) as well as protocols for data standardization, security and access
 - Establish FBHDR oversight steering committee that will identify appropriate behavioral health data sources and prioritize analytic direction and initiatives
 - Budget appropriate cost for initiative including fiscal analysis of elements/components of establishing and maintaining repository and possible addition of a qualitative component and analysis
4. Implement Pilot between AHCA and DCF or another relevant dataset to create a roadmap for an analytic plan before expanding statewide



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Commissioners voted to adopt all Data Analysis subcommittee recommendations into the 3rd Interim Commission Report.

Commission Vote on Interim Report:

Chair Reeve motioned to adopt all recommendations (with approved edits) for inclusion into the Commission on Mental Health 3rd Interim Report. The motion passed with all in favor.

Interim Report Outline and Discussion:

Chair Reeve provided a brief synopsis of the report writing process going forward. The Department of Children and Families is responsible for synthesizing the recommendations into report form. The Commission will have the opportunity to review the draft report and make suggested edits before final publication to ensure the spirit of the recommendations are appropriately maintained. The final report is due January 1, 2025. The Chair will meet with the Governor's Office and Legislative staff to discuss inclusion of these recommendations in legislation at the committee level.

2024 Substance Use and Mental Health Legislative Highlights:

Amanda Regis, DCF Substance Abuse and Mental Health Strategic Initiatives Advisor provided a high-level update on the 2024 Legislative Session and its impacts on the behavioral health system of care. Ms. Regis provided brief overviews of House Bill 7021, Senate Bill 7016, and Senate Bill 330. Chair Reeve highlighted how the work of the Commission on Mental Health and Substance Use Disorder has influenced legislative initiatives.

Florida's Behavioral Health Landscape, An Interactive Conversation:

Julie Serovich, Dean of the University of South Florida's (USF) College of Behavioral and Community Sciences provided an overview of the Florida Center for Behavioral Health Workforce Center. The four core components of the Center will be data reporting, recruitment, retention and, coordinating with hospitals regarding data utilization. There are other states that have created similar centers to increase their behavioral health workforce. USF will consult with these states to assist with modeling Florida's center. The Center has established a one-year data agreement with the behavioral health teaching hospitals to share data. Chair Reeve extended an invitation to Dean Serovich to utilize the expertise of the Commission on Mental Health and Substance Use Disorder.

Statewide Council on Opioid Abatement Update:

Seminole County Sheriff Dennis Lemma presented on the background of the Opioid epidemic and the subsequent creation of the Statewide Council on Opioid Abatement. Two important initiatives created for combating opioid abuse include the elimination of the X-waiver (8-hour DEA training on the prevention and treatment of opioid use disorder and other substance use disorders for those prescribing buprenorphine) and greater access to naloxone. Florida's efforts to combat the opioid epidemic are recognized nationally i.e. implementing laws that hold drug dealers of fentanyl accountable for overdoses. Chair Reeve pledged coordination between the Commission on Mental Health and Substance Use Disorder and the Statewide Council on Opioid Abatement.

Public Comment:

Carali McLean, Executive Director National Alliance of Mental Illness in Florida (NAMI); NAMI provides information and access to behavioral health services. Ms. McClean requested that NAMI be



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included in the regional collaboratives when they are developed. Ms. McClean also requested assistance with forming NAMI affiliates where there are none in rural parts of Florida.

Amy McClellan, Volunteer Vice President of the Florida Mental Health Advocacy Coalition: Ms. McClellan informed the Commission of a national report on barriers to access to behavioral healthcare through commercial insurance plans. This report highlights another barrier to access in the behavioral health arena.

Next Steps, Timeline and Closing Remarks:

Chair Reeve thanked everyone for the hard work and contributions to the work of the Commission. Commissioners were informed of statutory language mandating this as the final interim report and the next report will be due in September 2026. There are forthcoming changes within the subcommittee structure of the commission. Subcommittee Chairs may cancel all future subcommittee meetings until further notice. Chair Reeve requested Commissioners communicate suggestions for areas of focus in the final report to Aaron Platt.

Meeting adjourned.