Association Executives Meeting  
September 18, 2013  
Hyatt Regency, Washington, DC

Vic DiGravio, the National Council’s Association Executives Chair, began the meeting with a welcome to the group and an overview of the agenda for the day.

State Advocacy Strategies: Lessons Learned from a National Council Advocacy Award Winner

The meeting began with a presentation by Sue Abderholden, Executive Director, NAMI Minnesota. Sue gave a brief background of the legislative and financial climate within MN both now and at the time she stepped into her role at NAMI. Sue then explained how she orchestrated numerous advocacy campaigns resulting in legislation that supports increased access and funding for behavioral health services within her state.

Sue highlighted a few key grassroots strategies included creating the Mental Health Legislative Network, a group of 20 provider and consumer advocacy organizations; producing legislative updates for the community; sending consumers and families to the capitol every week, and holding coffee parties with elected officials during the non-election season.

Sue shared a number of achievements last year, such as: obtaining case management for transition youth; securing funding for Text 4 Life, a national suicide prevention lifeline; establishing funding for Mental Health First Aid in schools; increasing the rate for mental health providers; and doubling school funding for mental health services.

Sue ended by encouraging everyone to collaborate with their local NAMI chapters in an effort to further our shared goal of increased funding and access to behavioral health services.

State Regulations Discussion: Primary – Behavioral Health Integration

Laura Galbreath, Project Director of the SAMHSA-HRSA Center of Integrated Health Solutions, led a discussion around state regulations that create barriers in establishing integrated systems of health care. Laura explained that SAMHSA has tasked her office with exploring these regulatory issues in order to develop tools for states to navigate these problem areas. Laura then opened the floor for discussion. The following are highlights of comments from the Association Executives present:

- Regulations should support three integration options: The first is a simple agreement to co-locate, the second has integrated entities with designated liabilities and responsibilities, and the third entails an integrated license that shares liabilities and responsibilities.
- To fully integrate it is necessary to have the capital to create duplicate facilities.
- There is a need to revise statutory licensing to include behavioral health language while keeping it flexible enough to be applicable for future models of integration.
- Remove mileage limitations on reimbursement for telehealth.
- While there has been progress with partnerships among National Council members and Federally-Qualified Health Centers, in many states, there has not been equitable progress in our members’ engagement with health plans and hospitals. It would be helpful if there was further federal
guidance and information from CIHS to provide a pathway to facilitate financial, and not just clinical, integration for individuals with mental health and substance use disorders

Laura concluded the conversation by highlighting several CIHS resources:

- [Financing and Policy Considerations for Medicaid Health Homes for Individuals with Behavioral Health Conditions](http://www.integration.samhsa.gov/about-us/CIHS-Integration-Infographic_web.jpg)
- [Integrating Behavioral Health and Primary Care for Children and Youth](http://www.integration.samhsa.gov/about-us/CIHS-Integration-Infographic_web.jpg)
- [Behavioral Health Homes for People with Mental Health & Substance Use Conditions See this webinar](http://www.integration.samhsa.gov/about-us/CIHS-Integration-Infographic_web.jpg)
- [Webinar: Medicaid Health Home Implementation in Missouri: A Year Later](http://www.integration.samhsa.gov/about-us/CIHS-Integration-Infographic_web.jpg)

Helping Your Providers Improve their Business Operations: SAMHSA’s BHbusiness Initiative

Becky Vaughn, CEO, SAAS, gave a presentation on SAMHSA’s BHbusiness initiative, a free online technical assistance and training program funded by SAMHSA and led by State Associations of Addiction Services (SAAS) in partnership with NIATx, the National Council for Behavioral Health (National Council), and Advocates for Human Potential (AHP). Through dedicated coaching, peer networking, and access to online tools and resources, BHbusiness helps providers not only compete in a changing environment but create innovative products and services and capture new business opportunities.

BHbusiness offers courses in 5 topic areas including:

- Strategic Business Planning
- Third-party Billing and Compliance
- Third-party Contract Negotiations
- Eligibility and Enrollment
- Meaningful Use of Healthcare Technology

Becky emphasized that state associations have an important role to play in this project as they are well positioned to recruit providers in their state to participate in this initiative. In addition, Becky urged state associations to serve as conveners for their provider’s learning network, ensuring that their providers have the skills to improve their business operations and position their agencies for success.

Mohini Venkatesh, Senior Director, Public Policy, National Council, notified the Association Executives that we anticipate a call for applications in the next two weeks and that we would first notify the association execs so they can consider serving as a convener, prior to individual providers learning of this opportunity.