

Message from the Executive Director — 2014 Annual Conference is a Great Success!



Ellyn Wilbur
Executive Director

In early December, more than 200 people attended the TAMHO Annual Conference *Time for Change: one death by suicide is one too many*. We hosted an Awards and Recognition ceremony that allowed us to publically recognize individuals who have devoted their careers to improving our world and to celebrate individuals who are the real face of recovery.

David Covington taught us that we need to look at suicide differently by including

individuals with lived experience in our leadership and design; by starting our goal of ZERO Suicides from the other end; by having the goal emanate from leadership and by rejecting myths while we aspire for ZERO suicides.

Kevin Hines, author of *Cracked, Not Broken*, shared with us his emotionally moving story of surviving a suicidal jump from the Golden Gate Bridge and how today, some 14 years later, he focuses on his recovery every day and helps others do the

same. His life is an inspiration and a reminder of how strong the human spirit truly can be.

We also heard from our own Tennessee leaders in suicide prevention efforts and from individuals who address the very special needs of returning veterans and their families.

I agree with Mike Hogan, former Commissioner of Mental Health from New York, who said "Suicide represents a worst case failure in mental health care. We must work to make it a 'never event' in our programs and systems of care."

As this year comes to a close, I am grateful for the opportunity we have in Tennessee to truly transform the field of suicide prevention. Please join with us and find a way to personally support this effort. To learn more, visit www.tspn.org/zero-suicides.

On behalf of the TAMHO Board of Directors and staff, best wishes for a wonderful holiday season and New Year.

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Haslam Announces Insure Tennessee Plan

Provides health care coverage to more Tennesseans while addressing health outcomes and cost

Tennessee Gov. Bill Haslam recently unveiled his Insure Tennessee plan, a two year pilot program to provide health care coverage to Tennesseans who currently don't have access to health insurance or have limited options. The program rewards healthy behaviors, prepares members to transition to private coverage, promotes personal responsibility and incentivizes choosing preventative and routine care instead of unnecessary use of emergency rooms.

The governor announced that he plans to call a special session to focus on the proposal after the 109th General Assembly convenes in January.

"We made the decision in Tennessee nearly two years ago not to expand traditional Medicaid," Haslam said. "This is an alternative approach that forges a different path and is a unique Tennessee solution. This plan leverages federal dollars to provide health care coverage to more Tennesseans, to give people a choice in their coverage, and to address the cost of health care, better health outcomes and personal responsibility.

"Our approach is responsible and reasonable, and I truly believe that it can be a catalyst to fundamentally changing health care in Tennessee. It is our hope that this plan opens the door in the future for innovation within our existing Medicaid program. I look forward to working with providers across the state to advance payment reform and with members of the General Assembly to make this plan a reality."



Five key areas of the governor's plan include:

- A fiscally sound and sustainable program;
- Providing two new private market choices for Tennesseans;
- Shifting the delivery model and payment of health care in Tennessee from fee-for-service to outcomes based;
- Incentivizing Tennesseans to be more engaged and to take more personal responsibility in their health; and,
- Preparing participants for eventual transition to commercial health coverage.

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TAMHO 2014 Conference Speakers and Panelists



Everything We Knew About Suicide is Wrong

David W. Covington, LPC, MBA, Deputy CEO, Recovery Innovations, Phoenix, Arizona

Cracked, Not Broken: The Kevin Hines Story

Kevin Hines, Author/Speaker, The Parsons Company, Inc., Walnut Creek, California

Self-Care During Stress

Debra Rose Wilson, PhD, MSN, RN, IBCLC, AHN-BC, CHT, Associate Professor, Tennessee State University, Nashville, TN

Suicide Prevention in Tennessee

Sajel West, Assistant Commissioner Mental Health Services, Tennessee Department of Mental Health and Substance Abuse Services, Nashville, TN

Scott Ridgway, MS, Executive Director, Tennessee Suicide Prevention Network, Nashville, TN

Becky Stoll, LCSW, Vice President, Crisis & Disaster Management, Centerstone Tennessee, Nashville, TN

Zachery E. Bell, Outreach Specialist, Courage Beyond at Centerstone, Nashville, TN

Stacey Murphy, BS, TCPS, Senior Vice President, Tennessee Mental Health Consumers' Association (TMHCA), Nashville, TN

Facilitator: Kathy Benedetto, SPE, LPC, LMFT, Senior Vice President, Tennessee Children's Services, Frontier Health, Gray, TN

Transitioning from Deployment to Home Life

LTC Eric Goslowsky, J9 Director, Tennessee National Guard, Nashville, Tennessee

Wanda Castellaw, Senior Analyst, Science Application International Corporation (SAIC), Washington, D.C.

TAMHO Bestows Its Highest Honors for 2014

The Tennessee Association of Mental Health Organizations (TAMHO) recently bestowed its highest honors during their annual Annual Conference at Embassy Suites Hotel and Convention Center in Murfreesboro, Tennessee.

TAMHO PRESIDENT'S AWARD | The Honorable Lamar Alexander, U.S. Senator

The TAMHO President's Award is given at the discretion of the President of the TAMHO Board of Directors. is given at the discretion of the outgoing TAMHO President of the Board to recognize extraordinary contributions to the field of mental health.



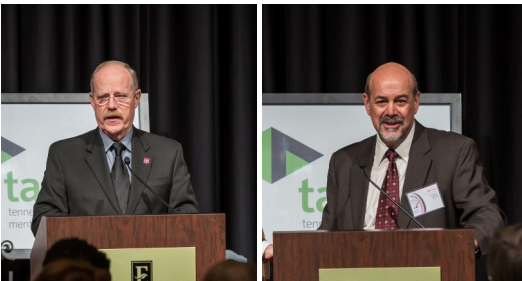
SPECIAL RECOGNITIONS | Same Day Access

In 2013, seven TAMHO members participated in a Same Day Access learning opportunity offered by National Council on Behavioral Health. The initiative provided technical assistance and support to assist providers in transforming their systems to offer individual appointments on the same day an individual requests it.

The importance of access to behavioral health services cannot be overstated. There is consensus among providers and payers that appointment timeliness leads to improved outcomes. For providers contracted with the TennCare managed care companies, appointments are required to be offered within specified periods of time.

The participating providers in this initiative: Alliance Health, Carey Counseling Center, Centerstone, Professional Care Services of West TN, Quinco Mental Health Center, Ridgeview and Volunteer Behavioral Health were all recognized during the TAMHO Awards Ceremony. * TDMHSAS Commissioner Doug Varney presented each organization with a Certificate of Appreciation from Governor Bill Haslam noting the impressive results of the initiative and their excitement in knowing that TAMHO members are taking the lead in transforming the way services are offered in Tennessee. He further noted that they are looking forward to additional service delivery improvements in the months ahead.

* While these providers participated in the initiative, other TAMHO providers also have same day appointments available.

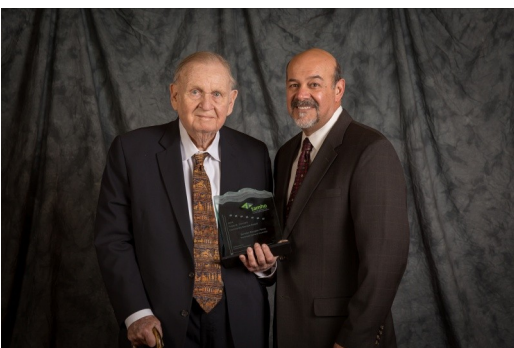


UPPER PHOTO: (L-R) Andrea Chase, Clinical Director, Carey Counseling Center, Paris, TN; Shana Parker, Millington Site Director and Clinical Supervisor, Professional Care Services of West TN, Covington, TN; Phyllis Persinger, Chief Administrative Officer, Volunteer Behavioral Health Care System, Murfreesboro, TN; Susan Bell, Vice President of Clinical Services, Alliance Healthcare Services, Memphis, TN; Stacy Park, Outpatient Services Director, Ridgeview, Oak Ridge, TN; James Fehrman, Clinic Manager, Centerstone Tennessee, Lewisburg, TN; Darvis Gallaher, Ph.D., Executive Director, Quinco Mental Health Center, Bolivar, TN

LOWER LEFT PHOTO: E. Douglas Varney, Commissioner, Tennessee Department of Mental Health and Substance Abuse Services, Nashville, Tennessee

LOWER RIGHT PHOTO: Robert N. Vero, Ed.D., Chief Executive Officer, Centerstone Tennessee, Nashville, Tennessee

FRANK G. CLEMENT COMMUNITY SERVICE AWARD | The Honorable Douglas Henry, Jr., Senator, Tennessee General Assembly, Nashville, Tennessee | The TAMHO Frank G. Clement Community Service Award honors individuals who have provided exemplary leadership and volunteer service on behalf of TAMHO or a TAMHO member organization to greatly benefit the community at large. Individuals nominated for this award are frequently known as the “unsung heroes” who provide a valuable resource that strengthens the community based behavioral health system and supports the mission of TAMHO and its members.



(L-R) Senator Douglas Henry, Jr., Tennessee General Assembly, Nashville, Tennessee; **Robert N. Vero, Ed.D.,** Chief Executive Officer, Centerstone Tennessee, Nashville, Tennessee

DOROTHEA DIX PROFESSIONAL SERVICE AWARD | Leann Human-Hilliard, Helen Ross McNabb Center, Knoxville, Tennessee

| The TAMHO Dorothea Dix Professional Service Award honors a behavioral health professional who has provided significant contributions over an extended period of time to the behavioral health system that will have a far reaching and long lasting positive impact on the quality and/or scope of behavioral health services in Tennessee.



(L-R) Leann Human-Hilliard, Vice President for Adult Services; Helen Ross McNabb Center, Knoxville, TN

DISTINGUISHED SERVICE AWARD | Charles E. Good, CEO, Frontier Health, Gray, Tennessee |

The TAMHO Distinguished Service Award recognizes extraordinary and long-standing dedication and achievement on behalf of TAMHO or a TAMHO member organization. Consideration is given to the longevity of service and the significance of overall contributions to the community behavioral health organization, TAMHO, and the community based system at the community and state level.



(L-R) Charles E. Good, CEO, Frontier Health, Gray, Tennessee; **Ellyn Wilbur, Executive Director, TAMHO, Nashville, Tennessee;**

The trusted voice for Tennessee’s behavioral health system for more than half a century.

The Tennessee Association of Mental Health Organizations (TAMHO) is a statewide trade association representing Community Mental Health Centers and other non-profit corporations that provide behavioral health services. These organizations meet the needs of Tennessee citizens of all ages who have mental illness and/or an addiction disorder. The TAMHO member organizations have been the virtual cornerstone of the Tennessee community-based behavioral health system since the 1950s and continue today as the primary provider network for community based care in Tennessee.

TAMHO member organizations provide mental health and addictions services to 90,000 of Tennessee’s most vulnerable citizens each month. Services provided by the TAMHO network include:

Prevention, Education and Wellness:

Includes programs for the prevention of addictions, violence, and suicide; early intervention; mental health and drug courts, jail diversion and community re-entry initiatives.

Psychiatric Rehabilitation:

Programs that include peer support, illness management and recovery services, supported employment, and supported housing.

Community Based Services:

Services include mental health case management, Programs for Community Treatment (PACT), intensive in-home services, school based services, therapeutic foster care, and jail liaison services

Clinic Based Services:

Services include psychiatric evaluation and medication management; monitoring of core health indicators; individual, couples and family psychotherapy; psychological assessment; specialized treatments for trauma and addiction disorders and co-occurring disorders; partial hospitalization; intensive outpatient services; and forensic services.

Residential Services:

Includes residential treatment services, group homes, independent housing.

Inpatient Services:

Includes hospital based mental health and addiction disorder treatment services.

Crisis Services:

Includes clinic based walk-in services, hospital based emergency evaluation, mobile crisis services, crisis respite, and crisis stabilization services.

Important Dates and Events

January

13 Convening of the 109th Tennessee General Assembly

February

17 Planning & Policy Council

19 Council on Children's Mental Health

March

10-11 Child Advocacy Days

18 Coalition (TCMHSAS) Day on the Hill

25 TAMHO Advocacy Day

Please visit the TAMHO website Calendar page at <http://www.tamho.org> for the most current listing of TAMHO meetings and events.

Contact the TAMHO Office to add your behavioral health association or advocacy group's statewide or national conference promotional information.

PERSONAL COURAGE AWARD | Two awards given for 2014: Kenneth L. Barton, Tennessee Mental Health Consumers' Association (TMHCA), Nashville, Tennessee, and, Linda Munday, Helen Ross McNabb Center, Knoxville, Tennessee

The TAMHO Personal Courage Award recognizes an individual who exemplifies courageousness in facing personal challenges presented by mental illness in order to provide effective leadership, advocacy, or support for programs that serve others through the public service delivery system.



LEFT PHOTO (L-R) Kenneth L. Barton, Tennessee Mental Health Consumers' Association (TMHCA), Nashville, Tennessee;

RIGHT PHOTO (L-R) Stephanie Rollins, Service Coordinator, Helen Ross McNabb Center, Knoxville, Tennessee; **Linda Munday**, Helen Ross McNabb Center, Knoxville, Tennessee

MEDIA AWARD | Two awards given for 2014: WCYB-TV, Johnson City, Tennessee, and Herald-Citizen, Cookeville, Tennessee |

The TAMHO Media Award – Best use of Social Media recognizes innovative marketing and public relations mediums using social mediums such as, but not limited to, Facebook, Twitter, LinkedIn, and Apps to promote the mission and/or messages of a TAMHO member agency or bring about and education or awareness to the communities they serve.



LEFT PHOTO: (L-R) Chris Wyre, CEO, Volunteer Behavioral Health Care System, Murfreesboro, Tennessee; **Vickie Harden**, Senior Vice President of Grants and Business Development, Volunteer Behavioral Health Care System, Murfreesboro, Tennessee; **Mike DeLapp**, Editor, Herald-Citizen, Cookeville, Tennessee; **Shelba Hodges**, Director Plateau MHC, Volunteer Behavioral Health Care System, Cookeville, Tennessee

RIGHT PHOTO: Accepting the Award on behalf of WCYB-TV . . . Randy Jessee, Ph.D., Senior Vice President of Specialty Services, Frontier Health, Gray, Tennessee

PROGRAMS OF EXCELLENCE AWARD |

The TAMHO Program of Excellence Award spotlights programs at TAMHO member corporations that have been exceptionally creative, exceptionally successful or have achieved exceptional outcomes.

Three recognitions for 2014 . . .

Volunteer Behavioral Health Care System – *Mission Accomplished: Stable Housing (M.A.S.H.)*

Ridgeview – *Scott/Morgan Targeted Outreach Program (S.T.O.P.)*

Lowenstein House – *Lowenstein House Psychosocial Rehabilitation Program*



Mission Accomplished: Stable Housing (M.A.S.H.) (L-R) Staff of Volunteer Behavioral Health Care System | Chris Wyre, CEO; **Vickie Harden**, Senior Vice President of Grants and Business Development; **Carla**

Mohammed-Lawson, MASH Outreach Coordinator; **Connie Farmer**, MASH Program Director; **Ronald Rohrbach**, MASH Outreach Coordinator; **Daniel Bailey**, MASH Representative Payee



Scott/Morgan Targeted Outreach Program (S.T.O.P.) (L-R) Staff of Ridgeview | Richard Chirip, Director of Community Services; **Shawn**

Yantis, Recovery Specialist; **Brooke Claborn**, Recovery Specialist; **Melody Morris**, STOP Program Director; **Hannah Samawi**, Recovery Specialist



Lowenstein House Psychosocial Rehabilitation Program (L-R) Lowenstein House, Memphis, TN | Brian Maxwell, **Adrenne Burton**, **April Hunter**, **June Winston**, Executive Director

Conference Photos & Award Recipient Videos

View the full conference photo gallery at:

<http://hisimage.shootproof.com/tamho>

View the award recipient video segments at:

https://www.youtube.com/playlist?list=PL1X0hrNzoJUGngDYsyK707v5wmkIWX_J3

Downloads are complimentary but we do ask that you provide credit to TAMHO www.tamho.org and our photographer, Tony Young with His Image Design www.hisimagedesign.com when publishing them in such things as your newsletters, communications, etc



Book Signing and Reception

December 2, 2014

Kevin Hines
author of *Cracked... Not Broken*



tennessee association of mental health organizations



Tennessee Department of
Mental Health and Substance
Abuse Services

PLANNING & POLICY COUNCIL

February 17, 2014

June 16, 2014

August 18, 2014

December 15, 2014

Meeting Times:

Approx. 10:00 a.m. to 2:30 p.m. CT.

Meeting location:

Conference Center

Middle TN Mental Health Institute

221 Stewart's Ferry Pike

Nashville, TN 37214

Direct questions/inquiries to **Avis Easley**

at (615) 253-6397 or by email at

Avis.Easley@tn.gov or **Vickie Pillow** at

(615) 253-3785 or email at

Vickie.Pillow@tn.gov

Meeting schedules and information are

available online at [http://www.tn.gov/](http://www.tn.gov/mental/recovery/meeting_sch.html)

[mental/recovery/meeting_sch.html](http://www.tn.gov/mental/recovery/meeting_sch.html).

Meetings are subject to change.

REGIONAL PLANNING & POLICY COUNCIL

Region I Second Tuesday/ quarterly
Harrison Christian Church, Johnson
City, TN
10:00 AM-12:00 PM

Region II Wednesday quarterly
Helen Ross McNabb Center, 201
West Springdale Avenue, Knoxville,
TN
11:30 AM-1:30 PM

Region III First Wednesday/quarterly
AIM Center, 472 W. MLK Blvd,
Chattanooga, TN
10:00 AM - 12:00 PM

Region IV First Wednesday/ quarterly
Nashville CARES, 633 Thompson
Lane, Nashville, TN
11:00 AM-1:00 PM

Region V Thursday/quarterly
Airport Executive Plaza -1321
Murfreesboro Pike, Suite 140,
Nashville, TN
9:30 AM-11:30 AM

Region VI Second Tuesday/quarterly
Pathways, 238 Summar Drive,
Jackson, TN
1:30 - 3:00 PM

Region VII Fourth Tuesday/quarterly
-Church Wellness Center, 1115
Union Avenue, Memphis, TN
11:00 AM-1:00 PM



To find resources for children in
Tennessee, visit <http://kidcentraltn.com/>.

Sponsors, Exhibitors and Advertisers are Key to the Success of the TAMHO Annual Conference

Platinum

- Janssen | Johnson & Johnson Health Care Systems, Inc.
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Gold

- Amerigroup
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- United Health Community Plan

Silver

- Centerstone Tennessee
- DATIS
- KidLink Treatment Services

- Tennessee Suicide Prevention Network (TSPN)
- Smith Harris Carr

Bronze

- Camelot
- Claims Review Corporation
- Frontier Health
- Genoa | a QoL Healthcare Company
- Inflexxion
- LWSI | Lavender & Wyatt Systems, Inc.
- LocumTenens.com
- Mental Health America Middle Tennessee
- NAMI Tennessee

- Netsmart
- Peninsula | a division of Park West Medical Center
- Tennessee Association of Alcohol, Drug and Other Addiction Services
- Tennessee Association of Drug Court Professionals
- Tennessee Co-Occurring Disorders Collaborative
- Tennessee Mental Health Consumers' Association
- UTK | Tennessee Vans
- Vanderbilt Behavioral Health
- Volunteer Behavioral Health Care System

Platinum



Gold



Silver



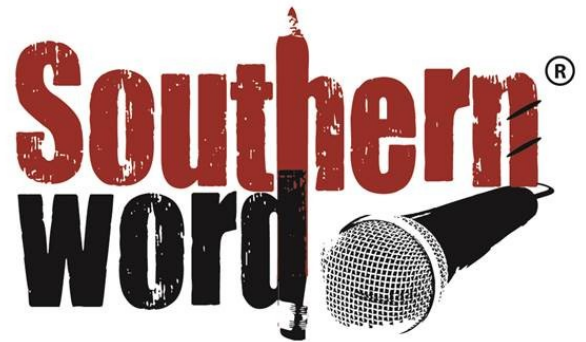
Bronze



A Special Thank You to . . .

Your contributions to the TAMHO 2014 Awards and Recognition Ceremony were phenomenal!

www.southernword.org



A huge “THANK YOU” to all of our conference sponsors. We appreciate your support in this year’s event and all of the great information and networking opportunities available throughout the exhibit hall area. . .



Statewide Happenings

... continued from page 1

Fiscally Sound and Sustainable Program

The program will not create any new taxes for Tennesseans and will not add any state cost to the budget. The Tennessee Hospital Association has committed that the industry will cover any additional cost to the state. The program will automatically terminate in the event that either federal funding or support from the hospitals is modified in any way.

New Private Market Choices for Tennesseans

Insure Tennessee offers several options of coverage for individuals below 138 percent of poverty (\$16,100 for an individual and \$27,300 for a family of three). Tennesseans 21 to 64 years old will be offered a choice of the Healthy Incentives Plan or the Volunteer Plan.

The Volunteer Plan would provide a health insurance voucher to participants that would be used to participate in their employer's health insurance plan. The voucher, valued at slightly less than the average TennCare per-enrollee cost, can be used to pay for premiums and other out-of-pocket expenses associated with participation in an individual's employer sponsored private market plan.

Participants in the Healthy Incentives Plan may choose to receive coverage through a redesigned component of the TennCare program, which would introduce Healthy Incentives for Tennesseans (HIT) accounts, modeled after Health Reimbursement Accounts (HRAs), which can be used to pay for a portion of required member cost-sharing.

Payment Reform Efforts

The governor's Delivery System Reform Initiative lays the foundation for reform by addressing the underlying quality and outcome deficiencies that contribute to growing health care costs and unaffordable insurance coverage. This initiative creates financial incentives for providers to provide high quality care in an efficient and appropriate manner so as to reduce costs and improve health outcomes. Insure Tennessee builds on this reform initiative by creating new participant incentives that align with the existing provider incentives. Ultimately, bringing the health care consumer into the equation is critical to successfully controlling cost growth.

Personal Responsibility and Patient Engagement

The voucher program provides a fixed contribution that can be applied to the costs of a person's private market plan. All costs incurred in excess of the amount of the voucher are the responsibility of the participant. This structure empowers individuals to make a choice about which plan is better for their needs and to manage their health care expenses to avoid additional costs.

Newly eligible individuals who choose to participate in the TennCare program and whose incomes are above 100 percent of poverty will be required to pay premiums and copays for services. All enrollees, including those with incomes below poverty, will have modest pharmacy copays. TennCare members "earn" contributions into their HIT accounts by performing healthy behaviors. The account then can be used to cover copayment expenses.

Prepares Participants for Commercial Health Coverage

The design of Insure Tennessee is based on private market principles

that provide incentives to participants to engage in their health care by actively managing their health care costs. Through both programs, Insure Tennessee introduces a commercial health insurance experience which can help Tennesseans prepare for independence from public assistance.

Haslam was joined for the announcement in the Old Supreme Court Chamber of the State Capitol by representatives from a coalition of business, health care and civic organizations who applauded the plan and its impact on Tennessee.

In June 2012, the Supreme Court ruled that the federal government could not mandate that states expand their Medicaid programs under the Affordable Care Act. In March 2013, Haslam announced that Tennessee would not expand the traditional Medicaid program but that he would work with the federal government on a plan for Tennessee that would take into consideration program cost, patient engagement, payment reform and health outcomes. Since that time, he has kept those principles as priorities in working toward the Insure Tennessee plan. Haslam has received verbal approval from the U.S. Department of Health and Human Services (HHS) on the plan. The next steps are for the state to submit a waiver to HHS and for the governor to take the proposal to the legislature for consideration.

Reactions to Medicaid Expansion Plan

State Republicans laud flexibility in Haslam proposal

ARTICLE REPRINT | The Nashville Post | by Emily Kubis | Posted on December 14, 2014

Gov. Bill Haslam announced Monday plans to expand Medicaid in Tennessee through a new program called Insure Tennessee.

The program expands Medicaid coverage to households with income up to 138 percent of the poverty level. Insure Tennessee is a two-track approach where eligible individuals can either receive federal funding to purchase private plans managed by insurance companies, or earn money in a health savings account to pay for premiums and copays by completing risk assessments and receiving preventative care.

Here are some reactions following the news:

Lt. Gov. Ron Ramsey | "When a state has an opportunity to take power away from the federal government and institute real conservative reform, that is an opportunity that must be taken seriously. Governor Haslam has negotiated a deal which returns tax dollars back to Tennessee while using conservative principles to bring health insurance to more Tennesseans. I look forward to sitting down with my fellow legislators to take a hard look at what has been negotiated to make sure that the final deal, which must be approved by the legislature, is in the long-term financial interest of Tennessee."

U.S. Rep. Jim Cooper | "Gov. Haslam's announcement is a step in the right direction. Expanding health insurance to more Tennesseans is the right thing to do for patients, hospitals and businesses."

U.S. Sen. Lamar Alexander | "Governor Haslam deserves credit for insisting upon a Tennessee plan that the state can afford, and Secretary Burwell deserves credit for being flexible enough to allow the governor to achieve that."

U.S. Senator Bob Corker | "I have had several conversations with Governor Haslam and appreciate the work he and his team have done to study this issue closely and negotiate a tailored solution that works for Tennessee. I'm glad the administration has finally allowed appropriate flexibility, and I'm pleased our state was able to adopt a

solution that will build off of the innovative ways we deliver quality health care.”

The Beacon Center of Tennessee | "The Beacon Center of Tennessee firmly opposes Governor Haslam's move to expand Medicaid and the reach of Obamacare's tentacles into our state. As our recent study with State Budget Solutions and Federalism in Action exposed, President Obama's Medicaid expansion would cost our state's economy \$3.6 billion, while causing more than 67,000 Tennesseans to lose their jobs."

Craig Becker, Tennessee Hospital Association president and CEO | "Today's announcement from Governor Haslam regarding his Insure Tennessee plan is welcomed news for Tennessee's hospitals. For the past two years, THA's number one priority has been securing Medicaid expansion in our state and today marks the beginning of this goal becoming a reality. I applaud the governor's thoughtful approach to this vitally important issue and am grateful for his hard work with the Department of Health and Human Services in recent months."

State Sen. Jeff Yarbro | "Any proposal that makes health insurance more affordable for more Tennesseans is a step in the right direction. Getting this program right is a win-win for working Tennesseans, for our hospitals and for our economy. Now, I look forward to hearing more about the Insure Tennessee plan and working with legislators in both parties to do what's best for our state."

Roy Herron, Democratic Chairman | "The governor's plan is too little, too late. Years of Republican delay have cost Tennesseans at least \$870 million, thousands of jobs, and has even cost thousands of Tennesseans their very lives. But now that the governor has received major concessions, legislators should end the stalling and suffering, delay and death."

State Rep. Craig Fitzhugh | "Today has been a long time coming. While it does not represent a full expansion of Medicaid, I am optimistic that this compromise plan will be something the entire General Assembly can support. I want to extend my personal thanks to Governor Bill Haslam and the Obama administration for working together on this plan. The Governor and I have often disagreed on how best to approach this issue, but today I'm happy to stand with him working to get this passed. The road will no doubt be bumpy and there will be disagreements along the way, but our caucus will do all we can to assure more affordable, better quality health care for all Tennesseans."

Haslam to Call Special Session on Medicaid Expansion

'Insure Tennessee' would create two-prong plan, capture federal health care dollars

ARTICLE REPRINT | The Nashville Post | by Andrea Zelinski, Emily Kubis | Posted on December 14, 2014

Gov. Bill Haslam isn't asking for commitments from legislators yet — nor has he filed an official waiver with the federal government — but he has a plan for expanding health care coverage to more than 200,000 low-income people in Tennessee.

His plan includes a two-year pilot program to reap millions of available federal dollars to create two new private market choices for people who are either not eligible for TennCare, not eligible for tax credits for buy health insurance on the federal marketplace or who cannot afford coverage.

"Regardless of where you are on the political spectrum, I think you can agree that we're not going to contain costs in our health care system

until incentives are better aligned than they are now," Haslam said at an announcement Monday.

Divided into two parts, the plan is meant to reward healthy behaviors, incentivize preventative and routine care, and prepare people to transition to private coverage, the governor said Monday. When Tennesseans would have access to the program is still unknown, he said.

Haslam said the program would not create any new taxes or inflate the costs in the state's budget. The Tennessee Hospital Association has agreed to cover any additional costs to the state and the plan would terminate if federal funding or support from hospitals drops.

Tennesseans who fall below 138 percent of the federal poverty level will qualify for the plan. They will have two choices: the Healthy Incentives Plan, which creates a health savings account to pay for preventive services, disease management programs and emergency room visits; and the Volunteer Plan, which would give plan members a voucher to purchase insurance on the private market.

Few Republicans attended the announcement at the Tennessee Supreme Court Chambers in the heart of the state capital building, although Lt. Gov. Ron Ramsey issued a statement that walks the line between whether he supports or is critical of the plan.

"When a state has an opportunity to take power away from the federal government and institute real conservative reform, that is an opportunity that must be taken seriously. Governor Haslam has negotiated a deal which returns tax dollars back to Tennessee while using conservative principles to bring health insurance to more Tennesseans. I look forward to sitting down with my fellow legislators to take a hard look at what has been negotiated to make sure that the final deal, which must be approved by the legislature, is in the long-term financial interest of Tennessee," said Ramsey.

Democrats, who outnumbered Republicans at the GOP governor's announcement, said they are willing to give Haslam whatever support he needs to get the plan approved by a Republican legislature loaded with lawmakers who have repeatedly spoken out against expanding Medicaid.

"Some are fearful going out forward, if the federal government backs off or they change their mind, what's going to happen, then? Is the state going to be stuck with something?" House Majority Leader Craig Fitzhugh said about his peers across the aisle who number 101 out of 132 total members.

"I personally, from looking at it, don't think that's going to happen. But if that's a fear that some of my colleagues has, [a two-year pilot program] certainly helps in that regard."

Haslam said he has gotten verbal agreement from the U.S. Department of Health and Human Services, but said his administration has yet to send an official waiver.

HHS has approved a privately managed Medicaid system already, known as the Arkansas Model. It uses federal funding to buy private plans managed by insurance companies, as opposed to a government-controlled plan.

For some, the plan is seen as a compromise, as it accepts federal funding and expands coverage to impoverished households without adhering to specifics mandated by the Affordable Care Act. State officials have estimated that expanding Medicaid in Tennessee would affect 180,000 people, but other reports have said that number could be as high as 300,000.

If the plan is approved, the federal government will foot the entire bill, but only for the newly insured under expansion. The state will still be on the hook for its portion of the existing TennCare program — 35 percent, or \$3.3 billion, according to state budget documents. The federal government already covers 65 percent of costs for TennCare, estimated at \$10.3 billion.

Furthermore, federal funding for expanded Medicaid will drop to 90 percent after 2017. The state will then be responsible for the rest.

Haslam has previously opposed expansion, citing financial concerns for the state. But in recent months, he said he was negotiating with the Department of Health and Human Services on an alternative. However, the governor has also cited challenges in getting any sort of expansion plan through the Republican-controlled legislature.

Pennsylvania is the most recent state to accept expansion. In September, it became the 27th state to do so, which was good news for local hospital operator Community Health Systems. Twelve percent of CHS' revenue comes from Pennsylvania. Tennessee's expansion could also boost profits for CHS, which gets about 7 percent of its revenue here. Fellow locals LifePoint Hospitals and HCA Holdings could also benefit, with the former getting about 11 percent of its revenue from Tennessee, and the latter operating 12 hospitals in the Middle Tennessee area.

Tennessee Receives Approval from HHS to Receive up to \$65 Million in SIM Funding

HHS announced today that Tennessee has received approval to receive up to \$65 million in State Innovation Model funding (SIM) to continue its efforts with health care innovation. For additional information, please visit <http://www.hhs.gov/news/press/2014pres/12/20141216a.html>. Here is an excerpt:

Tennessee | Over the next 48 months, the State of Tennessee will receive up to \$65 million to implement and test its State Health Care Innovation Plan.

Description: Tennessee will execute multi-payer payment and delivery reform strategies. The state will accelerate transformation in primary care by developing pediatric and adult PCMHs and health homes that will integrate value-based behavioral and primary care services for people with Severe and Persistent Mental Illness. In addition, Tennessee plans to implement 75 episodes of care over the test period. Tennessee will also implement quality and acuity-based payment and delivery system reform for long-term services and support (LTSS), targeting nursing facility services and home and community based services for seniors and adults with physical, intellectual and developmental disabilities. Finally, the state is planning to develop a statewide plan for improving population health in order to address disparities and state-specific population health needs.

BlueCross Foundation Commits \$1 Million to Neonatal Abstinence Fight

Grant funds specialty treatment unit at East Tennessee Children's Hospital

In response to a surge of babies being born dependent on drugs and suffering the painful symptoms of neonatal abstinence syndrome (NAS),

the BlueCross BlueShield of Tennessee Health Foundation has awarded a \$1 million grant for construction of a new NAS treatment unit at East Tennessee Children's Hospital in Knoxville.

"Our experience with our members has taught us how widespread a problem NAS is in East Tennessee," said Scott Pierce, president and CEO of BlueCare Tennessee, BlueCross' Medicaid subsidiary. "Most of those babies wind up at East Tennessee Children's Hospital and it's the right thing to do to help them upgrade their facilities to deal with this problem."

According to the Tennessee Department of Health, there were 921 NAS births in the state during 2013. The vast majority of those cases were in upper East Tennessee, where the rate per 1,000 live births in five reporting areas averaged 36.3. The rate for the rest of the state is 3.8.

"Babies experiencing withdrawal symptoms need specialized doses of medication and constant supervision," explained Carlton Long, Children's Hospital vice president for development and community services. "Our new NAS unit will provide private rooms and a neighborhood care design. This will allow for better patient monitoring, better staff visualization of the unit and enhanced security. Our current NAS unit will be converted back into inpatient rooms."

Babies with NAS often suffer painful tremors, sensitivity to light and diarrhea, among other symptoms.

East Tennessee Children's Hospital's staff is expert in treating NAS. The new NAS unit will, among other features, offer quiet, low-light spaces where trained volunteer cuddlers can hold and comfort the babies, a technique that helps them rest.

Construction of the NAS unit comes as part of a \$75 million expansion project being undertaken at East Tennessee Children's Hospital. Ground was broken for the expansion Aug. 19.

About BlueCross | BlueCross BlueShield of Tennessee's mission is to provide its customers and communities with peace of mind through affordable solutions for health and healing, life and living. Founded in 1945, the Chattanooga-based company is focused on reinventing the health plan for its 3 million members in Tennessee and across the country. Through its integrated health management approach, BlueCross provides patient-centric products and services that drive health improvement and positively impact health care quality and value. BlueCross BlueShield of Tennessee Inc. is an independent licensee of the BlueCross BlueShield Association. For more information, visit the company's website at www.bcbst.com.

REMINDER . . . Statewide Health Plan Transition effective 1/1/2015

What changes are taking place? | TennCare is transitioning from two health plans in each grand region of the state to three health plans statewide. Since January 1, 2009, UnitedHealthcare Community Plan and BlueCare have operated in East and West Tennessee and UnitedHealthcare Community Plan and AmeriGroup have operated in Middle Tennessee. **Starting January 1, 2015, UnitedHealthcare Community Plan, BlueCare and AmeriGroup will be operating statewide.** This will offer more options to our members. Since three instead of two health plans will be available to members, some members will transition to a new health plan to ensure even distribution of enrollment.

What is the timeline? | **November 14, 2014:** Notices were sent to transitioning members informing them of their new health plan assignments. | **December 31, 2014:** Members who were sent a notice have until this date to request to stay with their current health plan. There is information on how to do that included with their notice.

Members will continue to be enrolled in their current health plan until December 31, 2014. Members can only transition to their new plan or request to stay with their current plan, they cannot request to move to another plan. They will be able to choose any plan during their annual open enrollment period. | **January 1, 2015:** Members who were sent notices and did not request to stay with their current health plan will transition to their new health plan. This may mean they will have to see new doctors and health care providers if their new health plan does not contract with their current providers. Prior to this transition, members will receive welcome letters, member handbooks, provider directories and membership ID cards from their new health plan. | **February 14, 2015:** Members who transitioned to a new health plan have until this date to request to change back to their previous health plan. There is information on how to request to change back to their previous health plan included with their notice.

What if a member wants to change health plans after February 14, 2015? | Members can request to change health plans during their annual open enrollment period. Members in West Tennessee can change their health plan during the month of March. Members in Middle Tennessee can change their health plan during the month of May. Members in East Tennessee can change their health plan during the month of July. Information about open enrollment can be found at: <http://www.tn.gov/tenncare/mem-plan.shtml>

Do members need to “re-apply” for TennCare? | No. A member’s eligibility is not changing. If a member does nothing after receiving the notice he or she will remain on the TennCare program but will be assigned a new health plan.

Will there be any changes to the services TennCare covers? | No. TennCare covered services will remain the same.

What if a member is in the middle of getting care for a health problem on January 1, 2015? | Members should contact their health plan. Even if a member’s health care provider is not in the member’s new network, he or she may be able to keep getting care from the same provider: until the member can safely change to a provider who takes the new health plan, or, until the care is over (but no longer than 90 days after January 1)

What if a member is expecting a baby? | If a member is less than three months pregnant on January 1, 2015, she may have to pick a new provider who takes the member’s new health plan. If a member is more than three months pregnant on January 1, 2015, she can keep her same doctor while pregnant and six weeks postpartum.

Thank you for your participation in the TennCare program and for serving the healthcare needs of TennCare enrollees.

New KIDS COUNT

State of the Child: Are Tennessee Children Prepared to Learn?

At the beginning of the school year, children wait for the school bus or in the drop-off lane for their first experience of school. Many of them arrive with the skills they need to learn. Many, however, arrive with gaps in the foundation for learning that must be filled so they can make the most of their experience.

Children do not enter school as blank slates, each equally impressionable to educators’ efforts. Children enter school with figurative backpacks. Some children come with an eagerness to learn, good health, emotional security and a sense of safety fostered by a supportive family and community. Others come without important tools

for learning and already weighed down by the trauma of poverty, hunger, violence or abuse.

The latest edition of the Tennessee Commission on Children and Youth’s *KIDS COUNT: The State of the Child in Tennessee* report focuses on the importance of making sure children arrive at school with the cognitive, social and emotional skills they need to learn.

More than half the expenditures for children through the Tennessee state budget go to education, mostly for educating children ages 6 or older. The return on investment for this spending depends on the foundation formed in students’ first five years. During this critical time, children either develop the skills they need to learn or learn to cope with adversity in ways that undermine their opportunities for success in school and in life.

“The building blocks of learning – sensory awareness; motor and language skills; and social, emotional and cognitive abilities – are assembled through a process of nurturing interaction. Children develop best when they have access to health and mental health care and enriching environments,” said Linda O’Neal, executive director of the Tennessee Commission on Children and Youth (TCCY).

Ongoing research reinforces the importance of the early years when brain cell connections are developed – social and creative stimulation exercises the “muscles” of these connections. Trauma, lack of health care, stress caused by families’ child-care problems and erratic job schedules, inadequate nutrition, and a range of other conditions can combine to create a shaky foundation for learning.

The report expands on the work of the Tennessee Children’s Cabinet and the Early Childhood Advisory Council’s School Readiness Model, a compilation of elements needed to prepare children for K-12 education: Ready Communities, Ready Schools, Ready Families.

Policy recommendations in the *State of the Child* report include:

- Accepting federal Medicaid expansion funds;
- Expanding voluntary, high-quality pre-K opportunities for all at-risk Tennessee children;
- Expanding home visitation programs providing support to new parents;
- Developing strategies to prevent or reduce the effects of Adverse Childhood Experiences that cause toxic stress.

“We welcome the state’s application for much-needed federal pre-K funds for Nashville and Shelby County and steps to implement a Tennessee plan for Medicaid expansion to provide health care for Tennesseans left in the gap between coverage by the state’s current Medicaid program and the Affordable Care Act,” O’Neal said. “Tennessee is giving away \$4.7 million federal funds every single day by rejecting Medicaid expansion.”

The report, published annually, also lists county-by-county health, education, child welfare, demographic, economic and other data on Tennessee’s children. *KIDS COUNT: The State of the Child 2013* is available on TCCY’s website at www.tn.gov/tccy/kc-soc13.pdf. Interactive information from the book and additional data on child well being for all states is also available at <http://datacenter.kidscount.org>. The Tennessee Commission on Children and Youth is a small state agency created by the Tennessee General Assembly. Its primary mission is to advocate for improvements in the quality of life for Tennessee children and families. Partial funding for TCCY’s KIDS COUNT program is provided through a grant from the Annie E. Casey Foundation, the nation’s largest philanthropy devoted exclusively to disadvantaged children. For more information, contact (615) 741-2633 or a TCCY regional coordinator.



CERTIFICATION FOR PEER RECOVERY SPECIALISTS

Peer support is an evidence-based practice for supporting people with mental illness and substance abuse disorders. Peer support is provided by specially trained individuals who self-identify as having personally experienced a mental illness, substance use disorder, or co-occurring disorder and who have successfully accessed treatment and resources necessary to build their own personal recovery.

The Tennessee Department of Mental Health and Substance Abuse Services trains and certifies Peer Recovery Specialists to provide this unique service. Certified Peer Recovery Specialists:

- assist people by promoting self-directed recovery goals
- lead support groups, recovery groups
- teach recovery education classes
- serve as role models, mentors and advocates



WELCOMING PEERS WHO HAVE LIVED EXPERIENCE OF MENTAL ILLNESS, SUBSTANCE ABUSE, OR CO-OCCURRING DISORDERS

MEDICAID-REIMBURSABLE SERVICES BY PEERS WHO HAVE LIVED EXPERIENCE OF MENTAL ILLNESS, SUBSTANCE ABUSE, OR CO-OCCURRING DISORDERS

INITIAL WEEKLONG TRAINING PROVIDED BY TDMHSAS WITHOUT COST TO APPROVED APPLICANTS

TRAINING APPLICATIONS AND ADDITIONAL DETAILS CAN BE FOUND ON THE STATE WEBSITE:
<http://www.tn.gov/mental/recovery/oca3.shtml>

OR CALL 800-560-5767

TRAINING DATES 2015

Nashville, March 2-6
Chattanooga, March 16-20
Memphis, April 6-10
Knoxville, May 11-15
Nashville, June 22-26

National Happenings

The Latest Headlines from SAMHSA

www.SAMHSA.gov

Up to \$665K Available for Statewide Consumer Network Program

The purpose of this program is to improve mental health service delivery to people with serious mental illnesses. The program seeks to enhance statewide mental health consumer-run and -controlled organizations to promote service system capacity and infrastructure development that is consumer-driven, recovery-focused and resiliency-oriented.

Up to \$445K Available for Statewide Family Network Program

The program builds on the work of SAMHSA's Center for Mental Health Services which helped to establish a focus on children and families in programs serving children and adolescents with mental health challenges around the country. Further support will ensure self-sufficient, empowered networks that will effectively participate in state and local mental health services planning and health care reform activities.

Nearly 1 in 4 Mental Health Treatment Facilities Offer Services To Quit Smoking

New SAMHSA report shows only approximately 1 in 4 (24.2 percent) of the nation's 9,048 mental health treatment facilities that responded to the survey question about smoking cessation programs actually offered services to quit smoking.

SAMHSA Is Accepting Applications for the Performance Partnership Pilot

States, tribes, and municipalities can apply to become a Performance Partnership Pilot until March 4, 2015. These pilot communities will test innovative, cost-effective, and outcome-focused strategies for improving results for disconnected youth.

The Latest Headlines from

www.integrated.SAMHSA.gov

In addition to sharing the latest CIHS news, products, and information, CIHS aims to inform the healthcare field on the latest news on integrated primary and behavioral healthcare.

Building the Behavioral Health Workforce

The Affordable Care Act has made behavioral health care more accessible. It has also increased the need for trained service providers. SAMHSA recently launched a [new strategic initiative](#) to address the workforce shortage.

Strategies for Collaborating: Health Plans and Provider

A new fact sheet profiles four communities that brought together teams from safety net health plans with providers to integrate physical and behavioral health for Medicaid beneficiaries.

State Medicaid Interventions for Preventing Prescription Drug Abuse and Overdose

This National Association of Medicaid Directors (NAMD) [report](#) details pathways for the nation's Medicaid programs to turn the tide of prescription drug abuse.

Promoting Physical and Behavioral Health Integration: Considerations for Aligning Federal and State Policy

Case studies from several states are featured as well as strategies for achieving integration.

Finding and Getting Help for Alcohol Use

Covers the latest research-based treatments and what to consider when choosing among them.

Smoking cessation may support recovery

A study found that smoking cessation is associated with lower rates of mood, anxiety, and alcohol use disorders

HRSA awards \$51.3 million in Affordable Care Act funding

This year, more than 400 Health Centers nationwide have received HHS funding to add or expand access to mental health and substance abuse services.

Report Details Medicaid Strategies for Preventing Opioid Abuse

The report summarizes current practices and emerging opportunities for state Medicaid agencies to more effectively prevent prescription opioid abuse and overdose, offers helpful recommendations for states and providers.

TAMHO Member Organization Happenings

TAMHO Elects Leadership for 2015

The Tennessee Association of Mental Health Organizations (TAMHO) recently elected officers for 2015 at the organization's recent annual meeting held in Murfreesboro. Chris Wyre, chief executive officer/president, Volunteer Behavioral Health Care System, Murfreesboro, TN, will serve as President. He will succeed Robert N. Vero, Ed.D., chief executive officer, Centerstone of Tennessee, Nashville, TN, who will remain on the board as Immediate Past President. Robert Vaughn, chief executive officer, Carey Counseling Center, Paris, TN was elected President Elect and Liz Clary, chief executive officer, Peninsula Behavioral Health, Knoxville, TN will serve a two year term as Secretary. Mary Claire Duff, chief fiscal officer, Ridgeview, Oak Ridge, TN, remain on the board as Treasurer completing the second year of a two-year term.



(L-R) **Robert Vaughn**, (Secretary) CEO, Carey Counseling Center, Paris, TN; **Charles E. Good**, (Immediate Past President) CEO/President, Frontier Health, Gray, TN; **Elyn Wilbur**, Executive Director, TAMHO, Nashville, TN; **Robert N. Vero, Ed.D.**, (President) CEO, Centerstone Tennessee, Nashville, TN; **Chris Wyre**, (President Elect) CEO, Volunteer Behavioral Health Care System, Murfreesboro, TN
Not Pictured: Mary Claire Duff, (Treasurer) Chief Financial Officer, Ridgeview, Oak Ridge, TN; **Liz Clary**, (2015 Secretary) CEO, Peninsula Behavioral Health, Knoxville, TN

2014 TAMHO Recognizes the Committee & Section Chairpersons

Certificates of Appreciation were presented to TAMHO 2014 Committee and Section Chairpersons during the TAMHO 2014 Annual Conference.

Committees

Vickie Harden Addictions Committee
Wayne Greer Compliance & Quality Committee
Jimmie Jackson Legislative Committee

Sections

Kathy Benedetto Children & Youth Section
Julie Spears Fiscal & Administrative Section

Special Committees

Richard French Information Technology Committee
Phyllis Persinger Information Technology Committee
Kandy Templeton Recovery & Resiliency Committee
Randy Jessee, Ph.D. Data, Assessment, & Outcomes Committee
David Cook Data, Assessment, & Outcomes Committee

TAMHO Service Award

Robert Vaughn, Carey Counseling Center, 30 Years of Service

The TAMHO Service Award – established to annually honor those members of its Board of Directors who have contributed through longevity of tenure. The award recognizes tenure of service of ten or more years with presentations made at each five-year increment.



(L-R) **Elyn Wilbur**, Executive Director, TAMHO, Nashville, TN; **Robert Vaughn**, (Secretary) CEO, Carey Counseling Center, Paris, TN; **Robert N. Vero, Ed.D.**, (President) CEO, Centerstone Tennessee, Nashville, TN

TAMHO Bestows 2014 Volunteer Leadership Awards

The TAMHO Volunteer Leadership Award recognizes the extraordinary contributions of individuals through service on the TAMHO Board of Directors and/or TAMHO's Committees and Sections.



(L-R) **Vickie Harden**, Senior Vice President of Grants and Business Development, Volunteer Behavioral Health Care System, Murfreesboro, TN; **Robert N. Vero, Ed.D.**, (President) CEO, Centerstone Tennessee, Nashville, TN

New Hampshire's Largest Endowment Chooses Cherokee Health Systems to Complete Comprehensive Integrated Care Assessment on the State's Healthcare Provider System

The New Hampshire Endowment for Health recently tabbed Cherokee Health Systems (CHS) of Knoxville, Tenn., to lead a comprehensive statewide assessment of New Hampshire's healthcare system. The project will focus on the healthcare system's current status of primary behavioral health integrated care practice.

Cherokee Health Systems will contact and assess a variety of hospitals, primary care providers, health centers, substance abuse providers, mental health centers, and a number of stakeholders including policymakers and coalitions. The process will include interviews and site visits, which will result in a final report to include information on the current state of integrated care and recommendations for expansion and enhancement of the practice. "For many years we have shared our experiences with individual providers and organizations, but we're pleased to work with the Endowment for Health on improving statewide systems," said Dennis Freeman, Ph.D., Cherokee Health Systems' chief executive

officer. CHS has consulted and partnered in statewide initiatives in Iowa, Kansas and Texas in the past. The final report will be presented to the New Hampshire Endowment for Health in mid-November.

Cherokee Health Systems is both a Federally Qualified Health Center and licensed Community Mental Health Center. It is nationally recognized as a leader in the implementation of primary behavioral health integrated care. CHS has consulted with over 1,200 individuals from over 200 organizations from 48 states in the last several years. It serves over 63,000 patients annually in 57 clinical locations across 14 East Tennessee counties.

Since 2001 the New Hampshire Endowment for Health has awarded nearly 1000 grants totaling more than \$39 million in support to a range of health-related programs in the state. It is a statewide, private not-for-profit foundation dedicated to improving the health of New Hampshire's people, especially the vulnerable and underserved.

Centerstone and Manatee Glens Sign Letter of Intent to Affiliate

Agreement will create a five state behavioral healthcare organization committed to advancing quality care in local communities and across the nation

Centerstone and Manatee Glens have signed a letter of intent to pursue an affiliation. By joining forces, the two non-profit organizations plan to advance the delivery of mental health and addiction treatment in Manatee Glens' communities and nationwide.

The letter of intent allows Centerstone and Manatee Glens to complete due diligence and finalize an affiliation agreement. The affiliation may be effective as early as January 1, 2015, pending legal and regulatory reviews.

"Centerstone and Manatee Glens share a commitment to strengthening community care, enhancing client services and advancing the practice of behavioral healthcare," said David C. Guth, Jr., CEO of Centerstone. "Manatee Glens is well-respected as an innovator in inpatient and outpatient service delivery, and its team expands the depth of Centerstone's clinical services and expertise. We are excited to move this affiliation forward."

As part of the proposed affiliation, Manatee Glens would change its name to Centerstone of Florida. Its assets would be preserved as a local nonprofit organization with a local board of governance. Mary Ruiz, President/CEO of Manatee Glens, continues to serve as CEO of the organization. "This affiliation model is unique in that it maintains local governance of services while adding national resources and expertise," said Manatee Glens President/CEO Mary Ruiz. "This is a best-of-both-worlds opportunity to meet the demands of the new national healthcare environment while preserving our local mission, staff and services."

Centerstone is one of the largest non-profit providers of behavioral healthcare in the nation. In operation for nearly 60 years, it is

comprised of subsidiary organizations including:

- Provider organizations in Illinois, Indiana, Kentucky and Tennessee, which provide an array of treatment, support and educational programs and services to more than 84,000 individuals who have mental health and addiction disorders and developmental disabilities;
- Centerstone Research Institute, a unique organization specializing in improving healthcare through research and information technology;
- Centerstone Military Services, which provides specialized services and support to service members, veterans and their loved ones nationwide;
- Advantage Behavioral Health, which creates healthcare management solutions that improve access to services and advance patient care and outcomes;
- Centerstone Health Partners, which is establishing integrated care clinics to serve the physical and behavioral healthcare needs of patients; and
- Centerstone Foundation, the organization's philanthropic arm.

Manatee Glens is the leading community behavioral health hospital and outpatient practice in south Tampa Bay. It has a 60-year history working to change the lives of children, teens, adults and seniors who face trauma, addictions, psychiatric illnesses and emotional disorders, serving 16,000 clients each year.

When finalized, the Centerstone/Manatee Glens affiliation will create an organization with 155 locations in Florida, Illinois, Indiana, Kentucky and Tennessee and approximately \$189 million in annual revenues. It will employ more than 3,000 people and serve an estimated 100,000 individuals of all ages.

About Manatee Glens

Manatee Glens is Your Community Behavioral Health Hospital. It is the leading specialty hospital and outpatient practice for mental health and addictions in south Tampa Bay serving one out of every 30 local families. In addition to mental health and addiction services, Manatee Glens offers child abuse and neglect and adoption support services. For more information, visit www.manateeglens.org.

About Centerstone

Centerstone, a not-for-profit organization, is one of the nation's largest behavioral healthcare providers. It offers a range of treatment, support and educational programs and services to individuals who have mental health and addiction disorders and developmental disabilities. Each year, the organization serves more than 84,000 people of all ages at nearly 150 locations across Illinois, Indiana, Kentucky and Tennessee. It also operates the Centerstone Foundation, Centerstone Research Institute, Advantage Behavioral Health, Centerstone Military Services and Centerstone Health Partners. For more information about Centerstone, please visit www.centerstone.org.

Frontier Health CEO to Retire

Board of Directors Announces New CEO

Frontier Health's CEO Charles E. Good announced his plans to retire effective January 2, 2015, after 36 years of service in both senior leadership and clinical roles.

Frontier Health's Board of Directors Chair Gary Mabrey said of Good's role in developing community mental health services in Northeast Tennessee and Southwest Virginia, "Charlie saw



Charles E. Good
Retiring CEO
Frontier Health

advantages in local mental health and community organizations cooperating to meet regional needs and was one of the leaders who made sure services continued despite turbulent health care change. We're glad he's agreed to stay on as a consultant during this transition."



Teresa Kidd, Ph.D.
Incoming CEO
Frontier Health

The Board of Directors appointed Dr. Teresa Kidd as Frontier Health's new CEO. She has served as President since August 1 and will assume the additional responsibilities of CEO effective January 2. "Dr. Kidd's comprehensive clinical and administrative experience led the Board to unanimously appoint her as the next President and CEO of Frontier Health," Mabrey said.

"She sets the standards for clinical excellence, administrative efficiency and compassionate care. Dr. Kidd is an effective advocate for those who cannot always speak for themselves. She has served as Senior Vice President of Tennessee Outpatient Services and most recently was Senior Vice President of Operations. She is committed to improving the health status of some of the region's most vulnerable citizens by continuing Frontier Health's excellence in service development and delivery."

"Dr. Kidd is known and respected locally, regionally and statewide for her common-sense approach in evolving practical solutions to complex issues," Mabrey said. "Her leadership roles and history overseeing the development, coordination and operation of multiple programs and divisions within Frontier Health during the last 32 years make her a natural successor. The Board is very pleased Dr. Kidd has agreed to take the helm of Frontier Health."

Dr. Kidd is a licensed psychologist and received her Ph.D. from the University of Tennessee, Knoxville in 1980.

Frontier Health is the region's leading provider of behavioral health, mental health, substance abuse, co-occurring, intellectual and developmental disabilities, recovery and vocational rehabilitation services, and has been providing services since 1957. Its mission is to provide quality services that encourage people to achieve their full potential. For more information, visit www.frontierhealth.org or call 423-467-3600.

Ribbon Cutting Ceremony for New Veterans' Housing

Cedar Crossing, Knoxville, Tennessee

The Helen Ross McNabb Center recently held a ribbon cutting ceremony for veteran's housing at Cedar Crossing in Knoxville, Tennessee.

The Helen Ross McNabb Foundation has raised \$1.83 million to develop and sustain two different housing facilities in order to serve, at any given time, 21 homeless veterans with a mental illness and/or a behavioral health disability. Two phases of the project are currently underway, which include the newly constructed 8 units on Coster Road and the rehabilitation of 15 units located on Washington Pike in Knoxville. The new housing

facility on Coster Road has been named, Cedar Crossing.

As an essential service provider in East Tennessee, the Helen Ross McNabb Center's organizational experience serving low-income families is unmatched in the area. The Center is intimately involved with homeless intervention and prevention activities. Using a sustainable business plan, the Center began an effort in 1989 to develop housing units for specific populations. Today, the Center has developed and administers housing facilities in Knox and Hamilton counties to meet the particular needs of people with mental illnesses. Thousands of people have been helped out of homelessness through the Center's services.

The Center is committed to extending our supportive housing services to homeless veterans, a population that is currently underserved. For almost a decade, national studies have shown that one out of every four people living in homelessness is a veteran. The latest national figures now say around one in every five people who are homeless also served in the military. Although the numbers are decreasing, the nation is experiencing a troubling new trend. Veterans of the wars in Iraq and Afghanistan are going from serving their country to life on the streets much faster than the generation of veterans who served in Vietnam.

Not only is the Greater Knoxville area a crossroads of major interstates, but Knox County also has Tennessee's highest veteran population east of Nashville. The Center understands that veterans who are either homeless or at-risk of becoming homeless need access to integrated services to ensure the best possible outcomes for recovery and resilience. The Center's recent experiences in helping homeless veterans gain permanent housing has only revealed the vast void in our community of services specifically designed for veterans.

In order to qualify, prospective residents will be homeless on intake and are likely to have little to no income. The Center will collaborate with the Veterans Administration (VA) through the use of Veterans Affairs Supportive Housing (V.A.S.H.) vouchers for placement at both locations.

Considering that Knox County has Tennessee's highest veteran population east of Nashville, it is of the utmost importance that homeless veterans have access to integrated services to ensure the best possible outcomes for recovery and resilience. Supportive housing can be the first step in addressing complex factors like mental illness, addiction, and job loss that compound a homeless veteran's ability to be healthy and successful.

The Helen Ross McNabb Center is a premier not-for-profit provider of behavioral health services in East Tennessee. Since 1948, the Center has provided quality and compassionate care to children, adults and families experiencing mental illness, addiction and social challenges. As the Center celebrates more than 65 years of providing services to communities in East Tennessee, its mission remains clear and simple; "Improving the lives of the people we serve." For more information, visit www.mcnabbcenter.org or call 865-637-9711.

TAMHO Member Agencies Participating in the Reducing Adolescent Substance Abuse Initiative Meet in Nashville

Technical assistance provided by National Council representatives

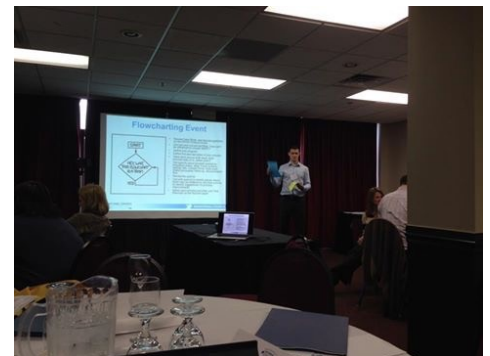
The four TAMHO member organizations participating in the Reducing Adolescent Substance Abuse Initiative (RASAI) gathered in Nashville on November 13 for a day of technical assistance and networking.

Participants included representatives from:

- National Council for Behavioral Health
- Health Management Associates

- TennCare
- TDMHSAS
- Alliance Health Services
- Professional Care Services of West TN
- Frontier Health, and,
- Helen Ross McNabb Center.

This two-and-a-half year project is designed to help providers systematically implement a screening, brief intervention, and referral to treatment (SBIRT) protocol to address substance use among adolescents ages 15–22 who receive services for an emotional disturbance or a psychiatric disorder. The project is supported by the Conrad N. Hilton Foundation.



- Suicide is the ninth-leading cause of death (2007 data) in Tennessee, claiming over 850 lives per year. Roughly 100 of these are between the age of 10-24 — suicide is the third leading cause of death within this age group.
- Nationally, suicide rates among youth (ages 15-24) have increased more than 200% in the last fifty years.
- The suicide rate is higher for the elderly (ages 85+) than for any other age group.
- Suicide is preventable. Most suicidal people desperately want to live; they are just unable to see alternatives to their problems.
- Four times more men than women kill themselves, but three times more women than men attempt suicide.
- People who have a dependence on alcohol or drugs in addition to being depressed are at greater risk for suicide.

Fast Facts

Fascinating facts and interesting information



REPRINT | Tennessee Suicide Prevention Network (TSPN) | <http://tspn.org/the-facts-about-suicide> | Source: Tennessee Department of Health and the American Association of Suicidology



TAMHO Advocacy Day on Capitol Hill

**The trusted voice of behavioral healthcare.
Making a difference for over half a century.**

www.tamho.org



THE TENNESSEE COALITION FOR MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES

HILL DAY

March 18, 2015

Stay tuned for more details!

Ensuring mental health and alcohol and drug treatment and support services are accessible to all individuals, regardless of age, and maintained at a funding level that assures quality care to those in need.

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Hope
As long as there is life, there is hope.

ACCESS
Staying informed will be helpful
when services are necessary.

RECOVERY
is real!

- Keep up with current co-occurring disorder events/ trends
- Access the latest perspectives related to the impact of co-occurring disorders on: 1) families, 2) communities; 3) local and state level policy and legislative matters, 4) judicial and criminal justice systems; and, 5) business and workforce
- Order educational and awareness materials
- Sign up with TNCODC to stay current on co-occurring disorder updates
- Request educational presentations
- Download a TNCODC link banner to place on your agency or organization website and so much more!

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