

Dear Senator Ray Holmberg,

Schulte Consulting, LLC is seeking the bid for consulting services to study the behavioral health needs of youth and adults in North Dakota. The final report, due July 1, 2014, will include input from stakeholders of the system, geographical needs of the state, availability of supports and services throughout the state, availability of insurance coverage, review of communication between public and private systems, and the integration of physical and behavioral health care.

Background:

Schulte Consulting, LLC has experience including building a trend proposal for youth services in Iowa used to garner grant awards and legislative appropriations for programming. In addition, Schulte Consulting, authored the administrative rules to implement the mental health reform in Iowa. Additional work includes consulting the children's disability and advocacy workgroups, and shaping the peer support training program in Iowa.

Deliverables:

The plan to complete the project is as follows:

- 1) Review all the previous interim, committee, and subcommittee recommendations to date and any implementation.
- 2) Determine stakeholders who have historically been part of discussions of behavioral health care in North Dakota and identify any gaps in persons at the table.
- 3) Obtain any maps, budgetary information available to assess statewide access and needs.
- 4) Review current law related to mental health coverage and the Affordable Care Act.
- 5) Request any outcomes data from the eight regional facilities.
- 6) Work with stakeholders to determine gaps and needs across the state.
- 7) Develop a plan with recommendations to implement behavioral health reform in North Dakota.

Responsibilities:

In order to complete the project, Schulte Consulting, LLC will need access to previous Human Services committee meetings, interim committee, and subcommittee minutes, reports and recommendations. In addition, support from the Legislative Council will be necessary for additional needs such as maps, budget information, outcomes data, and review of current legislation and any changes due to implementation of the Affordable Care Act. Also, lists of providers, stakeholders, and human service center contact information will be needed for gathering data and face to face visit.

Fees:

This proposal for 5.5 months of work, beginning Feb 1, 2014, includes four trips to North Dakota at the rate of \$8000 a month.

Experience:

As the owner of Schulte Consulting, LLC, Renee Schulte uses her experience as a mental health professional and a state legislator to build trust and respect among groups from differing backgrounds and perspectives. Renee brings knowledge and understanding of the legislative process necessary to create and implement change. Renee has a Master of Counseling and Educational Psychology degree, specializing in systems theory and group processing. As a Licensed Mental Health Counselor, Renee worked in most levels of the behavioral health system including disability services, inpatient psychiatric, in home family therapy and foster care. As a legislator, Renee spearheaded sweeping mental health reform in the State of Iowa. She currently contracts with the Iowa Department of Human Services implementing the reform.

Working as a subcontractor for Schulte Consulting, LLC, Elle Victoria-Gray has a Master of Social Work degree. Her experience includes work in Welfare-to-Work programs and youth offender work in California; family counselor and psychotherapist work in Illinois and Iowa; and clinical social worker at University of Iowa Hospitals and Clinics.

Schulte Consulting, LLC is equipped and prepared to complete your behavioral health needs project. Thank you for your time.

Sincerely,

C. Renee Schulte
Schulte Consulting, LLC

Iowa Mental Health & Disability Services Reform: A unique Perspective

Researching--Recognizing & Defining the Problem

Prior to redesign in Iowa, changes to code had been going on for years by consultants, workgroups, in reports, by interim committees and others. Stakeholders and experts had written reports outlining in detail the problems and issues. The Iowa Department of Human Services was not able to implement many of the suggestions without significant Iowa Code changes. Legislators were continually frustrated with poor to non-existent data from the State, all the while waitlist got longer and cost got increased. The need for reform became evident.

Renee Schulte, MA, Counseling & Educational Psychology, and CEO of Schulte Consulting, LLC lead the way through the process of change in Iowa to implement a system-wide reform. Once a professional mental health service provider, Renee understood the issues from multiple points of view. She was able to successfully collaborate with issue groups, legislators, providers and state departments. Countless hours of research on past recommendations and current needs was completed. Weekly meeting with stakeholders began, with the purpose of listening to their concerns and to build a plan of action. True reform began when courageous (or crazy) legislators in both Chambers agreed to sunset the Iowa code on the mental health system, in exchange for funding waiting lists. Iowa had no choice but to change.

Navigating--Defining the Solution & Gathering Support to Make Changes

Iowa is a purple state. We supported George W. Bush for President in 2004 and Barrack Obama in 2008 and 2012. We maintain a split legislature. In the 83rd General Assembly the Governor, Chet Culver was a Democrat. The House and Senate were also Majority Democrat. In the 84th General Assembly, the Governor, Terry Branstad is a Republican. The Senate was Majority Democrat, the House was Majority Republican. To pass reform meant to create a bill that both parties could support.

As a legislator, in the minority in the 83rd General Assembly, Renee sponsored many bills in order to improve the behavioral health and disability services system that were included in the state reorganization initiative. Bills included:

- 1) Medicaid waiver services. Legislation that required the Department of Human Services to amend the Medical Assistance Program Home & Community Based Services Waiver for persons with intellectual disabilities so that evaluations made, subsequent to the initial diagnosis of mental retardation, were for the purpose of determining the appropriate level of care rather than confirming the original diagnosis.

Results: Cost savings by not repeating unnecessary tests.

- 2) Lean Government Exchange. The department of human services participated in the Lean Government Exchange through consultation with the Department of Management, Office of Lean Enterprise, to improve the speed and efficiency of departmental and program processes by eliminating waste.

Results: Cost savings and efficiencies including shortened time for paperwork processes.

- 3) Standardized processes. The department implemented standardized procedures for determining income eligibility for all programs under the purview of the department.

Results: Cost savings and coordination of services

- 4) Medicaid eligibility. The Iowa Medicaid enterprise required that in any procurement or re-procurement of a contract to provide program eligibility services, procedures were implemented to ensure that eligibility information provided by an applicant or recipient is independently verified or supported by sufficient documentation to prevent an ineligible individual from receiving medical assistance program benefits.

Results: Cost savings and efficiencies

- 5) Electronic Documentation. The Department of Human Services shall accept electronic documentation.

Results: Cost savings, staff time savings, efficiencies achieved.

- 6) Transportation Services. The Department of Human Services amended the Medical Assistance Program Home & Community Based Services Waiver for persons with intellectual disabilities, as necessary, for employment related transportation to be covered by the supported community living services provider.

Results: Cost savings, integrated services

In the 84th General Assembly in the Majority, Renee was tasked by the Speaker of the Iowa House to reform the mental health system. Additional bills to improve behavioral health services in Iowa were sponsored, including the following:

- 1) Mental health workforce. This bill directed the Department of Human Services to adopt rules entitling Licensed Mental Health Counselors to payment for behavioral health services provided to recipients of medical assistance, subject to limitations and exclusions

the department finds necessary on the basis of Federal laws and regulations. The bill also directed the Department of Human Services to amend the Medicaid state plan to allow Licensed Mental Health Counselors to be participating behavioral health providers under the Medicaid program.

Results: Additional trained mental health providers reimbursed by the Iowa Plan.

- 2) Alzheimer Disease Task Force. This bill directed the Department on Aging to develop a schedule for implementation of the recommendations submitted by the Alzheimer Disease Task Force to the governor and the general assembly in January 2008 relating to education and training, funding and reimbursement, services and housing, and wellness and disease management.

Results: Progress toward an integrative service model for persons with Alzheimer's disease.

In 2011, Renee authored the House version of year-one of Mental Health Reform. The bill was amended to Senate File 525. Topics addressed included the following:

- 1) Changing the Medicaid payment system
- 2) Creating a stakeholder input process into the system redesign
- 3) Establishing goals of the redesigned system
- 4) Expanding workforce in Psychiatric Medical Institutes for Children
- 5) Clarifying roles of Community Mental Health Centers
- 6) Cleaning up policy language in code for persons with substance related disorders

Results: Consultants were brought in to Iowa to facilitate the aggressive workgroup structure and aid in capturing policy changes needed to be implemented for redesigning the system. Medicaid payment structure was changed.

In 2012, Renee spearheaded the House version of additional Mental Health Reform legislation. Senate File 2312 addressed the following topics:

- 1) Mandating treatment for law enforcement in mental health
- 2) Changing admission policies for residential care facilities
- 3) Creating a coordinated definition and qualifications for mental health professionals
- 4) Screening assessments prior to admission
- 5) Coordinating proceedings for involuntary hospitalizations
- 6) Studying comprehensive jail diversion services

Results: Studies were completed to determine recommendations for jail diversion programming and Mental Health training became more robust for the law enforcement professionals. Efficiencies in processes were created.

In addition, Renee authored the House version of the core redesign policy bill. Senate File 2315 addressed the following topics:

- 1) Defining the new regional system of delivery of mental health and disability services
- 2) Requiring a specific set of core services to be provided
- 3) Building evidence based practices within core services
- 4) Creating access standards for services throughout the state
- 5) Gathering data to assess outcomes and needs
- 6) Financing plan for the newly developed regional service system
- 7) Continuing stakeholder meetings for children and judicial services
- 8) Establishing an outcomes and performance measures committee
- 9) Creating an appeal process for individuals receiving services
- 10) Changing residency rules and appeals process
- 11) Implementing new levels of care to fill continuum gaps

Results: A timeline for the creation of a regional delivery system for mental health and disability services was created. An independent appeal process for individuals receiving services was created. Home Based Community Services were strengthened. Practices were implemented to align with the Olmstead vs L.C. ruling, with co-occurring treatment needs and evidence based practices. Uniform data collection began to assist in tracking funding and finding efficiencies in the system.

In the Statehouse, Renee used her skills in system change and group facilitation to build coalitions for support of significant reform. Partnering with unlikely allies in both parties and in both chambers, paved the way for a complete overhaul of the system. The goal of the redesign was achieved: Efficient, effective, person-centered, individualized care, no matter where you live in the state of Iowa.

Implementing--Consulting for Regulatory Change

In the 85th General Assembly, Renee serves as a consultant to the Iowa Department of Human Services. She has been tasked with implementing the mental health redesign effort that she passed while serving in the State House. Specific assignments include:

- 1) Writing the regulations for the core services in Iowa. This involved defining the set of services that Iowans can expect no matter where they live in Iowa. Also, access standards were created to assure availability of services. Workforce issues were addressed

- including expanding the use of peers, persons with lived experience with a serious and persistent mental illness and parents of a child with a severe emotional disturbance.
- 2) Writing the regulations for the regional service system. This included defining the roles of governance of the regions. Also, required documentation was outlined for the new performance based system.
 - 3) Working with the peer community to create a training system for peer support specialists and family peer support specialists.
 - 4) Consulting with the consultants working on the Children's Workgroup, specifically on the political realities of group recommendations.
 - 5) Writing the regulations for the new crisis stabilization level of care and regulations for state accreditation of providers.

Schulte Consulting, LLC has a unique perspective as a former professional mental health provider, state legislator, and regulatory consultant to guide as North Dakota navigates the system changes of behavioral health into a new era of service.

Professional Clinical Social Worker Medical Psychiatry Setting: Understanding the Issues

Encountering the Problem

Over the last decade Iowa has been experiencing an increasingly critical shortage of rural mental health resources, professional providers and continuity of care for patients and families suffering with mental illness. During this time Elle Vitoria-Gray, MSW, LMSW, has delivered high-quality evidenced based education, advocacy and support to these patients, families and communities struggling with lack of resources, adjustment, addictions and psychiatric illness within the community mental health systems, veterans centers and university hospital settings.

Needs Assessments, Resource Management & Cultural Competencies

Elle Vitoria-Gray, CEO of Minds Matter Education & Research, LLC, is licensed clinical social worker, private consultant and mental health advocate. She received her undergraduate degree from Norwich University, Vermont College in Social Psychology with an emphasis on child welfare and poverty. She then attended the University of Iowa, School of Social Work, as a Diversity Fellow for the Office of Graduate and Ethnic Inclusion, receiving her Masters in Social Work with an emphasis on trauma-informed, evidence-based mental health and cultural competence. As a bi-lingual, bi-cultural Native American and Mexican scholar, one of Elle's research projects was conducting a mental health needs assessment of ethnic minorities and mono-lingual residents in the community, creating a network of resources and implementing recommendations for improvement within community mental health networks. Elle provides a unique, personal and professional understanding of the intersection of rural and ethnic populations with institutions, professional practice, cultural identity and resource management.

Diversity of Experience & Medical Psychiatry Model of Treatment

Elle's clinical work has included professional practice and collaboration with area Community Mental Health Centers, the University of Iowa Hospitals & Clinics (UIHC) Department of Psychiatry, the Veteran's Affairs Health Care Systems and Outreach Centers of Iowa and Illinois, and as a private mental health and wellness consultant for youth programs in California and North Carolina. In addition to a solid educational background in mental health, trauma and adjustment disorders, Elle has advanced training and experience in trauma-informed, evidence based treatment models of care and significant exposure to current research driven, evidence based psychiatric treatment methods.

In California, prior to her clinical work in mental health and medical psychiatry, Elle participated in a number of federal demonstration projects, non-profit program development/design, project implementation and management. Elle's work assignments, in the last 20 years, were often in response to the passage of significant federal legislations. The following are examples initiatives that

she successfully participated in from initial program design, through implementation and management:

- **Departments of Labor/Employment and Training Administration (DOL) in collaboration with the Department of Justice/Office of Juvenile Justice and Delinquency Prevention (OJJDP) and Health and Human Services:** The Youth Offender Initiative: Reentry Grant Program Demonstration Project (YODP)—A strong peer-to-peer mentoring, alternative sentencing program for first time offenders and at-risk intercity youth 14-24. Nonprofit: Metro United Methodist Urban Ministries, San Diego, California
- **Personal Responsibility and Work Opportunity Reconciliation Act, Welfare-to-Work** funded: Family Self-sufficiency program—Serving generational welfare recipients job creation and self-sufficiency serving immigrants and children. Nonprofit: Chicano Federation, San Diego, California & Metro United Methodist Urban Ministries, San Diego, California
- **Employment Training Panel, CalWORKS** Welfare Reform funded education, training, life skills and job placement for 500+ TANF recipients. Nonprofit: Foundation College Mission Valley, San Diego, California
- **Job Opportunities and Basic Skills Training (JOBS)** funded, Welfare-to-Work, job creation and training for youth. Nonprofit: Metro United Methodist Urban Ministries, San Diego, California
- **Workforce Investment Act, Welfare Reform** funded 11 agency nonprofit collaborative providing intensive case management to thousands of TANF families in San Diego County. Provided oversight and contract compliance for the collaborative. Nonprofit: Metro United Methodist Urban Ministries, San Diego, California

Elle Vitoria-Gray, MSW, LMSW is passionate about mental health in rural communities and brings a unique, culturally sensitive and professionally trained perspective to research, collaboration and mental health resource creation and management. Her goal is to optimize mental health care and access for all citizens of North Dakota, using the resources available.



www.reneschulte.org





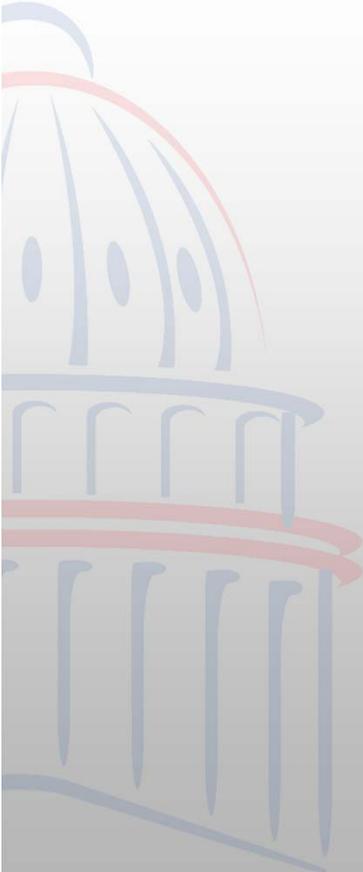
Behavioral Health System Reform

A Unique Perspective

www.reneeschulte.org



In the Same Boat...



The Storm Around Us



Navigating the Waters of Policy and Practice





renee@reneeschulte.org
319-431-6150

www.reneeschulte.org
www.facebook.com/renee.schulte

