



*The Ohio Council
Insight Newsletter*

August 2020 COVID-19 EDITION

Due to the ongoing pandemic this issue continues to primarily contain COVID-19 related policies and resources. *However, there are non-COVID related items included at the beginning and end.*

Additionally, the [March 2020](#), [April 2020](#), [May 2020](#), [June 2020](#), and [July 2020](#) editions are available for historic references and resources.

Ohio Council 2020 Annual Report

The Ohio Council is pleased to share our [2020 Annual Report: Navigating a New Normal](#). We look back on what we have accomplished and look forward to our continued partnerships as we advocate for policies and financing that supports a full range of addiction, mental health, and family services. Together, we will continue to face the unrelenting storm of COVID-19 amid the behavioral health pandemic and forge new practices that support individuals living with mental illness or the disease of addiction so they can experience recovery, wellness, and connection.

2020 Census Deadline Change

The 2020 Census was interrupted by the COVID-19 pandemic, but there is still time to be counted and your response is crucial! The census is only completed every 10 years and is important because the data is used to determine congressional representation and districts; the funding distribution of more than \$675 billion of federal funds used for schools, public transportation, hospitals, fire departments, and many other critical programs; and provides data that will impact your community until the next census. You can make a difference today by completing the 2020 Census and encouraging others to do so as well.

If you have not completed the Census please take time to do so, it is a very quick process. The Census Bureau is working to complete data collection as quickly and safely as possible, while ensuring a complete and accurate count as it strives to comply with the law and statutory deadlines. **All Census offices are scheduled to complete their work by September 30, 2020.**

On 8/12/2020 census workers in Ohio began follow up with households that have not yet responded to the 2020 Census. The current [self-response rate in Ohio](#) is 68.8%, including 53.2% who have responded online. The Census Bureau will need to visit the remaining addresses to collect responses in person. Households can still respond now by completing and mailing back the paper questionnaire received by mail, by responding online at 2020census.gov, or by phone at 844-330-2020. Households responding online or by phone can do so in one

of 13 languages and find assistance in many more. Those who respond online or by phone will not need to be visited to obtain their census response.

Please share this information with your networks and clients and encourage everyone to complete the Census!

COVID-19 Federal Policy and Resources

President Trump Issues Executive Orders in Response to Congressional Stalemate on COVID-19 Economic Package

With negotiations on the next round of COVID-19 relief legislation at a standstill, President Donald Trump issued a series of executive orders on pandemic-related priorities on August 8th. The orders seek to restore the enhanced federal unemployment benefits at a rate lower than the CARES Act allocation, defer payroll taxes until early 2021, renew the moratorium on evictions, and continue deferring student loan payments and accrued interest under the CARES Act Statute. The orders do not touch on any health-specific priorities such as testing and treatment.

The unemployment insurance (UI) order notably proposes reducing the UI enhancement to \$400 a week, with states responsible for 25 percent - or \$100 - of the enhancement. The order contemplates redirecting \$80 billion in unspent funds from the CARES Act State, Local, and Tribal Coronavirus Relief Fund and \$40 billion from the Federal Emergency Management Agency's Disaster Relief Fund to finance this action. The payroll action only defers payroll taxes and does not release employers from their federal payroll tax obligations. Our partners at Vorys released a COVID-19 Task Force Update on [Deferring Social Security Tax Withholdings](#) that is worth reviewing.

The orders were met with immediate skepticism from Democratic lawmakers, who questioned their legal standing. Legal challenges to the orders are expected. However, in the short term the orders are the only relief option as Congress entered August recess without striking a deal and delaying action until after Labor Day or even later.

Federal Healthcare Workforce Act Introduced

Florida Senator Marco Rubio and Illinois Senator Dick Durbin introduced The Strengthening America's Health Care Readiness Act intended to incentivize more people to choose careers in healthcare and expand access to qualified health care providers in underserved and rural areas. This legislation would make a historic investment to restore the pipeline of health professionals by providing scholarships and loan repayment funding through the National Health Service Corps and Nurse Corps programs for tens of thousands of clinicians who commit to serve in urban and rural communities facing a shortage of providers. It would also emphasize recruitment from populations that are historically underrepresented in health care to address health disparities. Lastly, the bill would enhance our health emergency preparedness by providing loan repayment for clinicians who serve in a reserve capacity-akin to the National Guard-with the National Disaster Medical System, our nation's primary mechanism of deploying health workers from the private practice to disaster locations.

SBA Economic Injury Disaster Loans Capped

According to an article published in *the New York Times*, the SBA placed a limit of \$150,000 on EIDL loans even though the loan program has historically permitted loans up to \$2 million. Since March, SBA has been overwhelmed with more than 8 million applications, including those for the new Paycheck Protection Program (PPP) and reportedly approved \$164 billion in EIDL payments to 3 million businesses, more than double what it has previously distributed in its entire existence and through all other disasters. However, nearly \$200 billion is currently unused while many small businesses are struggling to overcome the losses associated with surviving the impact of the coronavirus pandemic. This is yet another concern about the SBA as Congress considers how to provide additional economic relief to small businesses.

Paycheck Protection Program Loan Forgiveness

The PPP loan forgiveness process is being managed by financial institutions. However, lenders are stating they are not ready to accept these forgiveness applications currently. The SBA recently posted an [Updated FAQ](#) on the Paycheck Protection Program (PPP) offering some additional guidance on loan forgiveness. However, it does not contain anything substantial in the newly updated information. Banks are continuing to work through their internal process for accepting loan forgiveness applications. More changes are expected to this program as Congress will eventually negotiate another economic stimulus package. According to a recent article in *Non-Profit Quarterly* the banking industry is seeking administrative relief in the form of automatic loan forgiveness for loans of \$150,000 or less and a streamlined process for loans less than \$2 million. While most of this remains up in the air until Congress reaches an agreement on the next economic stimulus package, the banking industry is continuing to seek relief and support for automatic forgiveness. More change is likely coming it is just a matter of when. As we have said many times, please keep in contact with your lender and do not rush to submit your loan forgiveness application.

HHS Provider Relief Fund Deadline Extended

HHS has [again extended the application deadline](#) for Provider Relief Funds until Sunday, September 13. We strongly encourage you to apply if you have not done so already. If you billed Medicare fee-for-service in 2019 and received ANY relief monies, but have not yet received ~2% of patient care revenues, we encourage you to check your application status via the CARES Provider Relief line at (866) 569-3522, and to **REAPPLY to the Phase 2 portal open now.**

Note: Now there is only **ONE PORTAL** open to ALL eligible providers, regardless of billing. The Portal is referred to on the HHS website as the Provider Relief Fund Phase 2 General Distribution.

All providers **must make an application to the portal** by **Sunday, September 13**, including providers who previously submitted an application to the Medicare portal, but who have not yet received ~2% of revenues from patient care.

Bottom line: All eligible providers, including Medicaid or Medicaid Managed Care or CHIP or Medicare billing providers may now make an application to the Phase 2 General Distribution portal. **You may need to reapply to the portal to receive funds.** [See FAQ for additional information.](#)

If you have questions, call the CARES Provider Relief line at (866) 569-3522 but act soon. **This opportunity will close after Sunday, September 13th.**

Reporting Requirements: On 7/20/2020, HHS posted a [Notice of Reporting Requirements](#), applicable to Provider Relief Fund recipients that received on or more payments exceeding \$10,000. Detailed instructions regarding reports will be released “soon” and the reporting portal will become available on 10/1/2020.

SAMHSA Grants - COVID-19 Update for Grant Recipients

SAMHSA is allowing flexibility for grant recipients affected by the loss of operational capacity and increased costs due to the COVID-19 crisis. These flexibilities are available during this emergency time-period. Flexibility may be reassessed upon issuance of new guidance by the Office of Management and Budget post the emergency time-period. Grant recipients have the flexibility to re-budget (e.g. 25% or less of the current budget or \$250,000, whichever is less) as long as the activities are allowable under the FOA, within the scope of your grant application, and in line with the statutory requirement of the award. Grant recipients must keep documentation of all costs and SAMHSA may request this documentation during the grant period. Continue to check for [updated information and resources](#) to assist grant recipients during the COVID-19 emergency and review the [COVID-19 FAQs for SAMHSA Grant Recipients](#).

COVID-19: Resources on Indoor Ventilation Best Practices

As school restarts and many businesses are looking toward cooler weather that fall/winter brings, the topic of ventilation best practices has increased as a means of reducing spread of COVID-19. The [CDC](#) and [EPA](#) have provided guidance. The CDC and EPA Guidance along with OhioBWC, OSHA, and NIOSH all point to recommendations from the American Society of Heating, Refrigerating and Air-Conditioning Engineers (ASHRAE) which has a set of [FAQs specific to COVID](#) and includes specific recommendations regarding HVAC filters/airflow cycling and for healthcare settings.

New Tools from the Suicide Prevention Resource Center

The Suicide Prevention Resource Center ([SPRC](#)) has released several new publications, including information sheets on older adults and mental health, and a video series on treating suicidal patients during COVID-19.

- [Reducing Loneliness and Social Isolation Among Older Adults](#) covers the risk factors for and impact of loneliness and social isolation on older adults, tools to identify loneliness in older adults, and interventions and resources to reduce loneliness and isolation.
- [Increased Access to Mental Health Care for Older Adults: Getting Support During COVID-19](#) provides information on the potential effects of the COVID-19 pandemic on the mental health of older adults, relevant services now available through telehealth and Medicare, and links to tools and tips for finding local providers.
- [Treating Suicidal Patients During COVID-19](#), a video series with concrete tips on treating patients at risk of suicide during the COVID-19 pandemic. Adapted from an [SPRC webinar](#), the series includes three brief videos on initiating and maintaining remote contact with clients, assessing suicide risk, and developing a safety plan remotely.

CDC Releases Data on COVID-19 Impact on Mental Health

The Centers for Disease Control and Prevention (CDC) released [new data](#) showing the COVID-19 pandemic is creating devastating collateral damage to our nation's mental health, particularly for young people. Among people ages 18-24, one in four (25.5%) "seriously considered suicide in the past 30 days," according to the survey. Furthermore, 40% of U.S. adults reported struggling with mental health or substance use in the prior 30 days, according to the CDC data. The poll was conducted between June 24-30, 2020 as COVID-19 infection rates continued to spike around the country.

COVID-19 State Policy and Resources

[ODH Coronavirus Website](#) – Primary Source for All Ohio Information

State Coronavirus Provider Relief Funds

OBM posted updated information on the state's Coronavirus Relief Fund. To access the updated information visit the [Ohio Grants Partnership](#) page, select Funding Opportunities and then scroll down to select "CARES Act - Coronavirus Relief Fund - Provider Relief Payments". Then scroll down to the "attachments" section to obtain the [Updated FAQ](#) and [List of Eligible Providers](#). As a reminder, **all eligible providers must complete the application process on this page in order to receive these funds**. This application is open until 9/30/2020.

On August 18, ODM Director Corcoran reported that OBM was releasing the first wave of state CARES Act - Coronavirus Relief Fund payments via EFT. Many PT 84/95 did receive EFT payments from this fund during that week. OBM also shared that the 1,100 providers that applied for the Coronavirus Relief Fund payments did not fully match the validation file. The state department teams will be reaching out to these providers individually in the upcoming days. So, if your organization applied and does not receive an EFT payment this week, please be patient while the state works through this outreach process.

Any questions about registration or these state distributed Coronavirus Relief Funds should be sent to CRFprovider@obm.ohio.gov.

OBM Reports Improved July Revenues

The Office of Budget and Management (OBM) released Ohio's [monthly budget report for July](#). Ohio's unemployment rate decreased to 10.9 percent in June from 13.7 percent in May. While positive, it also reveals continued claims seem to have plateaued in recent weeks at levels well above the peak of the Great Recession. July's revenues were \$722.9 million above what they were in July 2019, although OBM attributed \$550.1 million of that to the postponement of the 2019 income tax filing deadline to July 15 because of the pandemic. GRF non-auto sales and use tax collections were \$97.1 million (11.4%) above estimate in July, which was \$138.0 million (17.0%) from the previous year. Auto sales tax revenue in July was \$48.6 million (36.3%) above estimate and \$37.4 million (25.7%) higher than last July. OBM Director Murnieks indicated the July numbers are a positive sign, but the economic recovery appears to be following the "Nike swoosh" model with a steep decline and slow gradual recovery. It largely reflects a surge of consumer spending from the end of June and beginning of July driven by pent-up demand after the reopening of the economy, coupled with federal stimulus money in the form of \$1,200 checks to individuals and an additional \$600 per week in unemployment benefits.

BWC Dividend Payment and Additional Mask Distribution

The Governor announced that he asked the Bureau of Workers' Compensation (BWC) to send an additional \$1.5 billion in dividend payments to Ohio employers this fall. This dividend equals approximately 100% of the 2019 policy year premium payments. If approved by the BWC Board of Directors, checks would be distributed in late October. Additionally, BWC is asking its Board of Directors for approval to send a second distribution of 23 million masks as part of the [BWC's Protecting Ohio's Workforce - We've Got You Covered](#) program.

Responsible School Restart

Governor DeWine invited Dr. John Barnard from Nationwide Children's Hospital in Columbus, Dr. Patty Manning from Cincinnati Children's Hospital, and Dr. Adam Mezoff from Dayton Children's Hospital to discuss the prevalence of COVID-19 among children; how to prevent disease spread in schools; and what schools can do if a student or staff member tests positive. Data from Ohio's Children's Hospitals found an 8.6% positivity rate in testing when symptoms are present and 2.9% positivity rate in tests for asymptomatic children in the past month. They stressed that children do get the virus, spread the virus to others, but generally do not become seriously ill. These experts also recommended the best practice strategies, in order of importance, to reduce spread and keep kids and teachers safe in school is to be wearing masks, practicing social distancing, maintaining and scheduling good hand hygiene, keeping surfaces clean, and ensuring good ventilation. Finally, they presented an evidence-based flow chart to help schools and local public health departments make decisions about quarantine and isolation practices. Essentially relying on the standard of 15 minutes of exposure within 6 feet of a person testing positive. Both Governor DeWine and the medical professionals expressed high praise for local school officials and teachers in their efforts to support the variety of back to school plans. They also stressed that schools would reflect the community at large and if we want schools to be safe, everyone in the community must do their part - "back up, mask up, and wash up".

K-12 COVID REPORTING - Governor DeWine announced that the Ohio Department of Health will be issuing an order that requires K-12 schools to establish a mechanism for parents and guardians to report confirmed cases of COVID-19 among their children. Schools should notify parents/guardians in writing about each case and include as much information as possible without disclosing protected health information. Schools should also make non-identifying information about positive COVID-19 cases publicly available. The forthcoming order will also direct all K-12 schools to report confirmed cases to their local health department, which will then report new cases and cumulative case data for students and teachers to the Ohio Department of Health. This aggregate data will be published at coronavirus.ohio.gov each Wednesday.

[ODH Director's Order Requiring the Use of Facial Coverings in Child Education Settings](#): Outlines the requirements for students in K-12 to wear masks.

[ODH COVID-19 FAQ - Face Shields](#): Provides updated information and CDC recommendations regarding use of masks and face shields. It clarifies that face shields have not been shown to be an adequate substitute for masks.

Special Education and Telehealth Reset and Restart Resources

The Ohio Department of Education posted four new pages with information and resources for those serving [students with disabilities](#) and providing [special education services](#), including a collection of special [education-specific resources](#). In addition, a separate page provides [guidelines for telehealth](#) services. Please continue to check the [Reset and Restart Education webpage](#) for more updates.

Revised Health Order Allowing Sports

The Governor released a [revised health order](#) allowing all sports (contact and non-contact) to move forward. The revised order became effective on August 19th, and applies to not only high school sports, but all forms of organized sports and teams, at all levels. Each school district will be able to determine the best strategies for moving forward with sports this fall, move team sports to the spring, and/or other strategies to have a season. Spectators will be limited to immediate family members or caretakers of students and each school will set their own implementation protocols. Health and safety guidance is consistent with other requirements. The Governor stressed that the decision in each community and school to move forward with sports seasons should not be made in a vacuum. The rate of community spread, and positivity must be taken into consideration. As with restarting schools, sports teams can anticipate increased risk of COVID-19 cases when community rates are higher. Schools and coaches are encouraged to work with local health officials as seasons plan to start. Finally, the Governor expressed hope that students, families, coaches, and communities desire to have a season that will inspire young people and the community to focus on mitigation strategies (i.e. mask up, back up, and wash up) to keep COVID out of their teams and reduce the spread in their communities.

Adult Day Care and Senior Centers

Governor DeWine announced that adult day care centers and senior centers may open at a reduced capacity beginning on September 21, if the facilities can meet certain safety standards outlined in a forthcoming health order. Work is also currently underway to develop the Responsible Restart Ohio plan for these programs and facilities.

Testing in Assisted Living Centers

Governor DeWine announced a [new order requiring all assisted living](#) facilities to participate in a testing initiative. Ohio will offer baseline saliva testing to all staff and residents at no cost to the facilities. Tests can be self-performed or with assistance while observed by medical staff. Results are generally provided within 48 hours of being received by the lab. Governor DeWine announced that Ohio is pausing its work to test residents and staff at assisted living facilities through saliva testing instead of nasal swabs due to inconsistent test results. The Ohio Department of Health will investigate the issue through controlled validation testing to determine if the irregularities can be attributed to the test kits themselves, the labs, or the specimen collection process. Additionally, the Governor indicated the state policy for testing will continue to allow for the testing of people who are not exhibiting symptoms of COVID-19.

COVID-19 Testing Guidelines and Testing Sites

Access to testing has been limited in many areas of the state even with the expansion to allow any individual to obtain a test, some testing sites are still requiring doctor's orders. Additionally, access to test results is very slow and some facilities are not sharing test results with providers and citing HIPAA. One-way organizations have been able to obtain test results is by having an agency medical director/physician order tests for clients/staff or get an ROI. Testing locations, including pop-up sites, continue to be updated on the ODH Coronavirus interactive Testing and Community Health Centers map. Individuals are encouraged to call their healthcare provider or these testing sites to seek instructions for obtaining a test. Updated testing information and locations, including pop-up sites, can be found on the [ODH Coronavirus Testing webpage](#)

[which identifies](#) many community sites (CVS, Kroger, Rite Aid, and Walmart) and health centers where testing is provided with links to access these sites and information about scheduling.

Minority Health Strike Force Report

Governor DeWine released the final Minority Health Strike Force report and the state's executive response. The Minority Health Strike Force was formed in April to examine the disproportionate impact of the coronavirus on minority communities, as well as broader health disparities and racial injustices. Currently, African Americans represent 14 percent of Ohio's population but are 24 percent of positive COVID-19 cases, 32 percent of COVID-19 hospitalizations, and 19 percent of COVID-19 deaths in Ohio. Similarly, at least 6 percent of those who have tested positive for COVID-19 in Ohio are Latino, despite only representing 3.9 percent of Ohio's population. The [COVID-19 Minority Health Strike Force Blueprint](#) lists 34 recommendations on dismantling racism, removing public health obstacles, improving the social/economic and physical environments, and strengthening data collection to better track disparities.

In response to the Strike Force's report, Governor DeWine issued [Ohio's Executive Response: A Plan of Action to Advance Equity](#). The action plan outlines efforts and his Administration's commitment to advancing health equity and establishing Ohio as a model for justice, equity, opportunity, and resilience. Governor DeWine announced the creation of the new Ohio Governor's Equity Advisory Board. The Board will work to improve Ohio's work to dismantle racism and promote health equity. Board members will draw on the expertise within Ohio's communities of color and will represent diverse viewpoints from sectors like education, healthcare, public and private business, community organizations, and members of the criminal justice community.

MHAS Certification Emergency Rules

Governor DeWine signed an [Executive Order](#) to emergency file several MHAS certification rules in response to the continuing COVID pandemic. One rule applies to PASSAR, another to MHAS licensed residential programs, and three rules are specific to licensed Opioid Treatment Programs (OTPs). These rules will remain in effect for 120 days or through December 7, 2020.

[5122-21-03](#) *Pre-admission screening and resident review (PASRR) for nursing facility applicants and residents with serious mental illness.*

Permits the Level II review to be conducted as a desk review rather than in-person at the nursing facility at the discretion of the Department.

[5122-30-27](#) *Transfer and discharge rights*

Prohibits MHAS licensed residential programs for issuing involuntary discharges during the COVID-19 declared state of emergency.

OTP Programs

[5122-40-07](#) *Program policies and patient records*

Adds three new provisions: 1) Grants permission via a waiver process for another agency or OTP physician or CNP to meet the medical director 40% requirement; 2) permits substitution of cheek swabs for urine drug screens; and 3) Permits delay of hepatitis B and C, HIV, TB, and syphilis and monthly toxicology screening if PPE is unavailable.

[5122-40-09](#) *Non-medication services*

Permits use of telehealth as defined in OAC 5122-29-31.

[5122-40-12](#) *Disaster plan*

Increases the requirement to maintain a 10-day supply of methadone to 15 days and gives permission to store the additional supply outside the safe but within the locked medications room with DEA approval.

The rules above and the MHAS telehealth rules that were issued in July ([5122-29-31](#) Telehealth; [5122-29-10](#) Crisis Intervention; [5122-29-29](#) ACT) were filed with CSI as part of the process to make these changes to the rules permanent. The Ohio Council [submitted comments](#) on these rules and made the following recommendations:

- Inclusion of MH day treatment and SUD residential to 5122-29-31 so there is no confusion on payment or allowable telehealth services.
- Exclusion of Class I Residential Providers (MH residential) from the changes to discharge requirements during the COVID emergency as outlined in 5122-30-27
- Remove the proposed changes to methadone supply requirements in paragraph D of 5122-40-12.

Through our continued partnership and collaboration with MHAS, we were able to make progress in advocating for these changes and they will be made in the permanent rules.

Behavioral Health Surge Planning Resources

In August, the Ohio Department of Mental Health and Addiction Services (MHAS) released documents on the behavioral health surge planning efforts the department has been working on since the onset of the pandemic in Ohio. MHAS is committed to meeting the behavioral health needs of all Ohioans across the full continuum of care and services and shared these new resources: [Responding to the Behavioral Health Surge](#) and [Literature Review: Impact of COVID-19 Pandemic on the Behavioral Health of Ohio's Residents](#).

State COVID Related Legislation

Neither chamber of the Ohio General Assembly met during August for any legislative activity. However, both the House and Senate recently announced plans that will bring them back to the Statehouse next week September 1st and 2nd – in addition to their previously scheduled mid-month sessions (Tuesday, Sept. 15 through Thursday, Sept. 17). While the House and Senate voting agendas have not been formally set, there is an expectation that the chambers plan to address a series of high priority and time sensitive issues. Such measures under consideration for action are the following:

- **HB 606/SB 308** – legislation to address COVID-19 civil immunity.
- **SB 346** – legislation to repeal the controversial renewable energy bill (the legislative bill central to the corruption charges brought against former Speaker Householder and other associates).
- **HB 357** – a bill to authorize and direct \$650 million in federal CARES funding to local governments.

Telehealth & Billing

ODM/MHAS Telehealth Training Part 2

The Ohio Department of Medicaid (ODM) and the Ohio Department of Mental Health and Addiction Services (MHAS) hosted a second training on telehealth services this month. [The slides](#) and [recording](#) are posted on <https://bh.medicaid.ohio.gov/> for review, if you were unable to attend. The training was specific to telehealth services when Medicaid is the payer. However a representative from the Ohio Department of Insurance (ODI) reviewed [guidance ODI](#) has released to all health plans encouraging the early adoption of Ohio law requirements that will be effective 1/1/2021, allowing services by telehealth if they are otherwise covered under the health plan. Additionally, ODI encouraged providers to refer clients to the ODI Consumer Hotline (1-800-686-1526) if they are experiencing issues related to restriction of telehealth services by their health plan, regardless of payer type.

The training provided clarity on the second round of emergency rules related to telehealth from both departments that became effective 7/16/2020 and expire 11/14/2020. The MHAS rule [5122-29-31](#) was updated and renamed telehealth, maintained asynchronous activities, and removed face-to-face requirements. The MHAS rule has been submitted through the permanent rule making process. The ODM rule [5160-1-18](#) covers all providers, but the new rule more fully incorporates BH providers into the rule by adding BH providers as eligible provider types and including BH services in the appendix which includes covered telehealth services. (MHAS certified providers were previously covered in 5160-1-21 which has now expired.) ODM will be submitting this rule through the permanent process as well and will be hosting a webinar to review the rule changes. Both rules require providers to follow current Federal guidance on HIPAA and 42 CFR Part 2. As a reminder, due to the national public health emergency, current Federal guidance on [HIPAA](#) and [42 CFR Part 2](#) allow for enforcement discretion and allow flexibilities for providers.

Additionally, this training provided clinical recommendations for providing services via telehealth with the help of two of our members, Ohio Guidestone and Greater Cincinnati Behavioral Health. They provided strategies and tips for working with children and adults using telehealth, as well as providing clinical supervision.

Billing guidance related to telehealth has not changed since the [April training](#). The allowed place of service (POS) can reflect EITHER the location or the practitioner or client but must be an allowable POS for the service as indicated in the [BH Provider Manual](#). Providers have the flexibility to make the decision whether to bill office or community for telehealth. The covered services remain unchanged and the GT modifier should be used to indicate a service was provided via telehealth. Although, ODM has not set a deadline that providers must use the GT modifier they strongly emphasized the use of it during the training. If your organization has not made necessary changes to include the GT modifier for telehealth services, it would be prudent to begin planning for this change.

For questions related to changes to OhioMHAS telehealth policy as well as questions related to clinical and technical implementation of telehealth, please e-mail COVID19BHTelehealth@mha.ohio.gov. Questions about the Medicaid coverage, billing, and reimbursement under the new policy can be submitted to BH-Enroll@medicaid.ohio.gov.

President Trump Issued Executive Order to Rural Health and Telehealth

On 8/3/2020, President Trump issued an [Executive Order on Improving Rural Health and Telehealth Access](#) that make permanent many of the Medicare telehealth changes enacted under the public health emergency to support access to telehealth services, particularly for individuals living in rural America. While the order is specific to rural health and telehealth access, it also requires the HHS Secretary to review within 60 days additional temporary measures put in place during the public health emergency and propose a regulation to extend these measures more permanently. Shortly after the Executive order was announced, [CMS released a set of Medicare rule changes](#) that would more permanently replace temporary rules related that enabled wider use of telehealth, relaxed E/M billing requirements, expanded the list of eligible Medicare providers (but does NOT include licensed counselors or MFTs), and offers chronic disease management and diabetes management programs. While much of this is currently targeted at rural health providers, there are strong signals this will expand to include broader continuation of telehealth coverage. The [Vorys Coronavirus Task Force](#) has released a summary describing telehealth impact.

Trauma Teletherapy Guide for Youth in the Era of the COVID-19 Pandemic: Adapting Evidence-Based Treatment Approaches

A [comprehensive guide](#) created by the University of Southern California Adolescent Trauma Training Center for providing teletherapy during COVID-19 to youth who have experienced trauma. It considers social maltreatment (e.g., racism, homophobia, transphobia, institutional violence, poverty) as it adds to the trauma, exacerbates COVID-19 effects, and interferes with access to mental health services.

ODM Aged Accounts Receivable Project Update

Although the deadline to submit claims to the Ohio Department of Medicaid (ODM) for the Aged Accounts Receivable (AR) project has passed, we are aware that several providers are still engaged in the process of resolving the concerns for claims submitted through the ODM complaint portal for the Aged AR project. ODM reports receiving 746 total complaint files with over 205,000 claims to be reviewed. 291 files were submitted in the last 2 days of the project resulting in a significant backlog for ODM and MCOs. Approximately 160 claims files are yet to be reviewed at this time and ODM is working with the plans to ensure review and a plan for payment for claims that were inappropriately denied previously. ODM is not closing the complaints submitted through this process without provider approval and will be reaching out to providers directly. Additionally, we discussed concerns related to prompt pay of current claims as we have heard many providers are experiencing a significant slowdown in the last 2 months and some are being told it is directly related to the AR project. ODM reviewed their prompt pay data for July and did not indicate any abnormalities, however, they will continue to monitor the data for August as the month closes out and follow up with any MCOs that are having issues with meeting the prompt pay requirements.

Accessing Supplies and Personal Protective Equipment

As COVID-19 cases continue across the country, access to PPE remains difficult in some areas, and the long term costs for PPE supplies are challenging budgets. MHAS shared that ODH and the state emergency management agency (EMA) have been stockpiling PPE supplies. BH Providers, as essential health care providers, needing access to PPE are encouraged to reach out to your local EMA to seek access to supplies via the stockpiles. You should also connect with your local ADAMH Board, who may be able to support your request to the local EMA. Additionally, the following is the best guidance and creative problem solving available currently for obtaining supplies from reputable sources.

- Contact your local health department(s) or emergency management agency (EMA). To request access to cleaning supplies and personal protective equipment. Here's the list of [Ohio County Emergency Management Directory](#).
- Reach out to local schools (K-12, colleges/universities, cosmetology), restaurants, bars, salons, specialty medicine (dentists, veterinarians, etc.), and through your organization's social media account(s) to inquire about availability of supplies for purchase or donation.
- The State of Ohio is asking residents and businesses who can donate PPE, or any other essential service or resource, to email together@governor.ohio.gov. Please share on your websites and via social media.
- [Ohio Manufacturers Retooling and Repurposing to Create PPE](#) - alternative sources for some PPE items. Items available here include face shields, hand sanitizer, cotton (reusable) face masks, gowns, non-cotton face masks, gloves, and other items.
- [JobsOhio has created a PPE Database](#) (scroll down the page) which includes information on manufacturers, distributors, and potential contract manufacturers to connect with PPE resources.
- #GetUsPPE is a grassroots movement founded by physicians and medical researchers on the frontlines of the COVID-19 pandemic. They are working to ensure healthcare facilities have access to supplies they need. Several members have had success with this site. <https://getusppe.org/request/>
- A local company, Aunt Flow, is currently leveraging their network and resources to help provide PPE. Right now, they have available FDA Approved Masks. You can learn more and [order HERE](#). Order limits are currently 2,000. If you have questions or need larger orders, please contact Claire Coder at claire@auntflow.org.
- An Ohio-based company members can contact for N95 masks is Accord Medical Staffing at (440) 205-1930 or www.accordmedstaffing.com. Please contact Ashley with questions at: ashleyg@accordmedstaffing.com.
- [WB Mason](#). This company appears they have hand sanitizer, thermometers, and surgical masks. Shipments appear to be 2-3 weeks.
- Thermometers: Through our discussions with MHAS and OPS, they have provided us with a source to purchase no-touch thermometers. <https://ihealthlabs.com/>. They currently have stock and can ship supplies quickly. It is recommended to order through their website. Questions can be sent to Jeff Li at Jeff@ihealthlabs.com
- A grassroots effort is underway to assist medical facilities, health care providers (including behavioral health care settings, ACFs, etc.), and first responders who do not have face masks available. [Operation Face Mask](#), launched by Air Force veteran and nurse Jenn Andrade and local partners, is recruiting individuals with sewing skills to donate homemade masks to be distributed. The group encourages donors to follow the [recommended guidance](#) from the CDC for sewing a homemade face mask. The group cannot pay for material, sewing supplies, shipping, or time, but welcomes any contributions. Masks may be mailed to Jennifer Andrade, P.O. Box 141415, Columbus, OH 43214. Click [HERE](#) to request masks.
- The National Council partnered with Panacea Life to deliver the items you need at reduced rates – [explore their online store](#) today! Questions? [Contact](#) NC.
- Report any unscrupulous vendors or price gouging to the [Attorney General](#).

COVID-19 State Orders and Guidance

Orders

- [All Public Health Orders related to COVID-19](#)
- ODH [Director's Order Extending the Expiration of Various Orders \(Business and Sector Specific Requirements\)](#) – expires when the State of Emergency ends or when rescinded by the Director of Health
- [Executive Order Extending Access to Telehealth](#) – expires 11/14/2020
- ODH [Director's Order for Facial Coverings throughout the State of Ohio](#) - expires when the State of Emergency ends or when rescinded by the Director of Health
- [ODH Director's Order Requiring the Use of Facial Coverings in Child Education Settings](#). In effect until the ODH Director rescinds or modifies the order.
- [Executive Order limiting the sale of alcohol in licensed establishments after 10:00PM and allowing consumption of purchased beverages through 11:00PM](#) – expires 11/29/2020
- ODH Director's Order: [Mandatory Requirements for Youth, Collegiate, Amateur, Club, and Professional Sports](#) – in effect until the Director of ODH rescinds or modifies the order
- [ODH Director's Order: Testing of the Residents and Staff of all Residential Care Facilities](#) – expires when the State of Emergency ends or when rescinded by the Director of Health
- [Director's Order that Provides Mandatory Requirements for Entertainment Venues](#) – in effect until rescinded by the Director of Health

Non-COVID Policy Resources

42 CFR Part 2 Changes Effective 8/14/2020

On 7/13/2020, the [Substance Abuse and Mental Health Services Administration \(SAMHSA\) announced](#) the adoption of revised Confidentiality of Substance Use Disorder Patient Records regulation, otherwise known as 42 CFR Part 2. The revised rule became [effective on August 14th](#). As a reminder, this was the first set of changes that will be made to 42 CFR Part 2. Additional changes will be made prior to March 2021 due to requirements passed within the CARES Act earlier this year. The changes effective this month closely align with HIPAA and continue to prohibit law enforcement's use of SUD patient records in criminal prosecutions against patients without a court order. Also, the rule maintains restrictions on the disclosure of SUD treatment records without patient consent, unless it is a bona fide national medical emergency, an audit, scientific research, or program evaluation, or appropriate court order. SAMHSA created a [fact sheet](#) outlining all the changes in the revised rule effective 8/14/2020.

[Significant changes](#) include:

- Treatment records from non-Part 2 providers are not covered by Part 2, as long as the records are based on the non-Part 2 provider's own patient encounters, unless the records include previously received records from Part 2 programs that are incorporated into the records.
- SUD patients may consent to disclosure of records to an entity (such as the Social Security Administration) without having to name a specific individual to disclose to, allowing patients to apply for benefits and resources more easily.
- If a SUD patient sends an incidental message to the personal device of a Part 2 employee, the employee can now fulfill Part 2 requirements by deleting the message; confiscation or destruction of the device is no longer required.
- The definition of "payment and health care operations" has been expanded to clarify when disclosures for that purpose are appropriate.

- Non-Opioid Treatment Program (OTP) providers can query a central registry to see if patients are already receiving opioid treatment.
- OTPs may enroll in state prescription monitoring programs to report prescription and dispensing information to the program consistent with state laws. *It should be noted that on August 3, the Ohio Board of Pharmacy issued a resolution delaying enforcement of this reporting requirement pending further review of this policy issue.*
- Disclosures for research under Part 2 are permitted by HIPAA covered entities or business associates to individuals or organizations who aren't HIPAA covered entities or subject to the research common rule.

Gun Violence Legislation

Following the one-year anniversary of the tragic shooting in Dayton's Oregon District, there has been renewed interest in passing [SB 221](#), also known as "Strong Ohio". As a reminder, this bill would create a "pink slip" to allow the involuntary hold of people who appear intoxicated and present a substantial risk of harm to self or others. We have been involved in early discussions on this bill when it was proposed last year and will continue advocating for a solution that seeks to provide safety without stigmatizing people with substance use disorders as being violent or dangerous. Governor DeWine again called on the Ohio General Assembly to consider SB 221 as a solution to address gun violence.

State Policy & Resource Updates – Non COVID Related

Ohio House Addresses Leadership Issues - Elects Rep. Bob Cupp, Speaker

Ohio's state government and political environment experienced significant chaos and change as [Larry Householder, Speaker of the Ohio House of Representatives](#) was indicted on federal bribery charges, along with a host of other individuals. As a result, the Ohio House Republicans voted unanimously to remove Larry Householder as Speaker of the Ohio House. After internal discussion, the Ohio House reconvened to elect Rep. Bob Cupp of Lima as the next Speaker of the Ohio House. There is discussion amongst the House Republican Caucus that not all are satisfied with the new leadership team and a new challenge may emerge after the November election to determine who will lead the caucus in the next General Assembly.

ODM Provider Enrollment System

The Ohio Department of Medicaid (ODM) [posted notification on their website](#) related to upcoming changes in the provider portal and credentialing process. On March 8, 2021, ODM will launch its Provider Network Management (PNM) module and a new provider portal. Together these tools will offer a streamlined, user friendly interface for enrollment and revalidation. The PNM module will:

- Allow providers to submit change requests online vs. submitting by mail or e-mail
- Introduce a single-entry provider portal to support claims, prior authorization, and cost report submissions, as well as eligibility verification

At the same time, ODM will launch a centralized credentialing process. ODM is in the early stages of provider outreach. In coming weeks, more information will be shared about what these changes mean to providers and how to prepare. Surveys will be sent to a randomized group of providers to identify the needs and concerns in managing this change. Results will then shape how ODM informs and trains providers for a successful, on-time transition.

In the meantime, providers with questions or comments should send them to ODM's dedicated email boxes:

- Centralized credentialing: Credentialing@medicaid.ohio.gov
- PNM Module: PNMCommunications@medicaid.ohio.gov

ODM Releases Interactive Medicaid Data Dashboard

ODM released a new online [Medicaid Data Dashboard](#) to help the public visualize the scope of the health care program in terms of demographics (enrollment) and spending. The interactive dashboard allows the user to look at data on spending, enrollment, and by disability type, provider type, and plans/payers. It allows a look into the details and effects of the program on a statewide and local basis.

ODJFS and MHAS File QRTP Rules

As required under the federal Family First Prevention Services Act (FFPSA), both ODJFS and MHAS filed rules with JCARR to define and designate child and adolescent residential treatment programs as “qualified residential treatment programs” or QRTPs. These new rules [5101:2-9-42](#) and [5122-30-32](#) and [5122-29-09.1](#) are aligned with the federal requirements for QRTPs and are expected to have an effective date of October 1, 2020. ODJFS licensed group homes and residential providers as well as MHAS licensed adolescent mental health programs and certified SUD adolescent residential services will need to comply with the updated background check requirements by this date. Existing providers will have until October 2024 to comply with these rules. However, FFPSA will require states to ensure compliance with the QRTP definition by October 2021 in order to use federal Title IV-E funds more flexibly. Any new provider seeking licensure or certification under ODJFS or MHAS after October 1, 2020 will need to comply with these rules immediately.

The Ohio Council worked closely with MHAS and ODM to address a significant and immediate issue related to a policy statement and timelines in these rules that created Medicaid reimbursement concerns that would impact access to residential treatment in not resolved. Our [ODJFS public comments](#) and [MHAS public comments](#) yielded positive results and the rules were refiled with the recommended changes in (A) of each rule. The Ohio Council is continuing to partner with state and national advocacy groups to address the larger federal Medicaid reimbursement concern. Further, will also work closely with our state partners to continue to address challenges related to new discharge planning requirements included in the rule.

OBHIS Implementation Update

The Ohio Department of Mental Health and Addiction Services (OhioMHAS) has developed a new data collection system to comply with the requirements of the Substance Abuse Prevention and Treatment (SAPT) and Mental Health Block Grants. The Ohio Behavioral Health Information System (OBHIS) platform will launch on Oct. 1, 2020. The current OHBH system will remain operational until that date to capture the required data. On October 1st, 2020 and after all new client information will be entered in OBHIS. To prepare providers, boards, and stakeholders for the launch of OBHIS, a series of trainings was scheduled throughout August and early September. There are presentations that have already been recorded and placed onto the OBHIS webpage:

- [Introduction to OBHIS](#)
- [Introduction to OBHIS Batch Upload with User Interface](#)
- [Introduction to OBHIS Manual Data Entry with User Interface](#)

A calendar of additional trainings can be found [HERE](#). The trainings will be recorded and made available on the [OBHIS web page](#) for those who cannot attend. Additionally, the OhioMHAS Office of Quality, Planning and Research will be providing ongoing training and technical assistance to ensure a smooth transition from OHBH to the new OBHIS platform. If you have any questions, please contact the OBHIS Administration team at OBHISAdmin@mha.ohio.gov.

MHAS Media/Reporter Guidelines for Reporting on Suicide and Overdose Deaths

Earlier this month, MHAS sent a number of resources to members of the press on best practices for reporting on suicides and overdose deaths. *Responsible reporting on suicide and overdose death has the power to save lives* - was the message. How they shape a story - the details given, words used, and resources provided - will minimize suicide contagion for vulnerable individuals and increase awareness of this major public health issues. Social media presents new challenges and opportunities to also shape our understanding of and response to this largely preventable form of death. Mental health and addiction treatment providers may also find these resources valuable and they can be found here: [Ohio Suicide Reporting Guidelines](#) and Reporting on Opioids in the Media.

Additionally, the press was encouraged to push out information on local and national crisis hotlines and text message resources, included below. MHAS also shared the [COVID-19 social media toolkit](#). As you know, we are seeing a spike in depression, anxiety, suicidal behavioral, suicide and overdose deaths as the COVID-19 pandemic marches on. Many of you are actively engaged in making crisis and emergency response services available and routinely promote these resources. If you have relationships with your local newspapers, reporters, or social media bloggers, now would be a good time to reach out and encourage them to engage in sharing these resources and other prevention strategies.

- **Ohio Crisis Text Line:** Text the keyword 4HOPE to 741741 (24/7)
- **National Suicide Prevention Lifeline:** 1.800.273.TALK (8255) (24/7)
- **COVID Careline:** 1.800.720.9616
- **SAMHSA Addiction Treatment Finder:** <https://findtreatment.gov/> or 1.800. 662.HELP (4357)
- **Ohio Toll-Free Help & Information Line:** 1.877.275.6364 (M-F 8a-8p)

Medical Care Advisory Committee Resources

The Medicaid Medical Care Advisory Committee (MCAC) met this month and shared resources that may be helpful for your organization. Presenters discussed Healthcare Barriers and Disparities related to [working with patients with disabilities](#). In this presentation Maria Matzik, from the Access Center for Independent Living, detailed both the medical and social models of disability, in addition to providing insight on healthcare needs, barriers, and recommendations for providers working with patients with disabilities.

Another presentation was presented focusing on [Patient-Centered Clinical Care for African Americans](#). Dr. Gregory Hall, the Director of the National Institute for African American Health, shared data and statistics specific to Ohio on the importance of patient-centered care for African Americans. Additionally, he shared the state of current health outcomes for African Americans and opportunities for approaches to improve care by establishing and increasing awareness of genetic and epigenetic differences.

Governor Announces Leadership Change at the Ohio Department of Insurance

On August 24, Governor Mike DeWine announced that Jillian Froment, Director of the Ohio Department of Insurance, resigned her position to pursue other opportunities. Froment joined the department in 2011 and has served as director since 2017.

Governor DeWine appointed Tynesia Dorsey to serve as interim director. Ms. Dorsey has worked at the department for over twenty years, many of them as Chief Administrative Officer and Director of Consumer Advocacy. A link to Dorsey's bio can be found [here](#).

ODJFS and PCSAO Release Caregiver Supports, Training, Recruitment and Retention Recommendations

PCSAO, in partnership with ODJFS is releasing a new report, [Phase II: Caregiver Supports, Training, Recruitment and Retention Recommendations](#) to offer solutions and guidance on expanding Ohio's treatment foster care system and implementation of Family First Prevention Services Act (FFPSA). This report builds on the [Tiered Treatment Foster Care Workgroup Report and Recommendations](#) and was developed through a key stakeholder process with the support from the Casey Family Programs. Additional work is underway to look at professionalizing the foster care workforce and financing foster care services across all tiers.

Other Resources – Non COVID Related

Spravato Approved for Adults with a Second Subtype of Major Depressive Disorder

Earlier this month, Janssen Pharmaceuticals, Inc., announced that Spravato is now approved for use, in conjunction with an oral antidepressant, for the treatment of depressive symptoms in adults with major depressive disorder (MDD) with acute suicidal ideation or behavior. Spravato is the first and only NMDA receptor antagonist approved in conjunction with an oral antidepressant for treatment-resistant depression in adults. Spravato is a nasal spray and is indicated, in conjunction with an oral antidepressant, for the treatment of:

- Treatment-resistant depression in adults.
- Depressive symptoms in adults with MDD with acute suicidal ideation or behavior.

To learn more about Spravato, visit www.spravatohcp.com

The Alliance for Strong Families and Council on Accreditation Announce Potential Merger

The boards of the Alliance for Strong Families and Communities (Alliance) and the Council on Accreditation (COA) voted in August to sign a Nonbinding Letter of Intent to explore a merger of the two organizations, creating a new organization. The two organizations have been in discussions with multiple task forces of their boards since May 2019 and believe they have the agreements necessary to move to due diligence.

The Alliance is a strategic action network of thousands of committed social sector leaders who through their excellence, distinction, and influence are working to achieve a healthy and equitable society. COA is an international nonprofit accreditor of community-based behavioral healthcare and social service organizations. COA accredits the full continuum of child welfare, behavioral health, and community-based human and social services for children, youth, adults, and families. COA has developed separate accreditation programs for private organizations, public agencies, Canadian organizations, military programs, and child and youth development programs. Currently, COA accredits or is in the process of accrediting over 1,600 organizations or programs that serve more than 10 million individuals and families each year.

A Joint Negotiation task force made up of selected members of both boards and executive leadership will be working throughout the remainder of the year on due diligence. Both organizations will be keeping their staff, networks, customers, funders, and partners informed along the way and it is estimated that if the decision to proceed is made, the new organization will be created in early 2021.

The CEO of the Alliance [released a video statement](#) on this potential merger. For more information click [HERE](#).

OTP Division Meetings

The Ohio Council's OTP Division, otherwise known as the Ohio Association for the Treatment of Opioid Dependence (OATOD), early on during the pandemic established a routine virtual meeting schedule. The bi-monthly Zoom meetings have supported our OTP member's ability to stay connected, share industry challenges and develop advocacy strategies aimed at reducing burdensome regulations and offering practical solutions. OATOD, which is Ohio's recognized affiliate of the national OTP trade association (AATOD) currently consists of 17 organizations, representing nearly 50 sites throughout Ohio. If interested in learning more about Ohio's OTP system and OATOD please contact Geoff Collver at collver@theohiocouncil.org or Steven Smith of Sunrise Treatment Center at Steven.Smith@sunrisetreatmentcenter.net who is the current OATOD president and Ohio's liaison to the AATOD board.

Ohio Parity Coalition Meeting

The next meeting of the Ohio Parity Coalition is scheduled for Wednesday, September 2, 2020 at 1pm. The meeting will be held virtually to accommodate travel and scheduling challenges and support COVID-19 safety precautions. Agenda items include a review of HB 443/SB 254, legislation aimed at raising awareness and increasing enforcement of the federal Mental Health Parity and Addiction Equity Act of 2008; discussion of the legislative and political environment given the leadership changes at the Ohio House and Ohio Department of Insurance; and the recently issued [2020 ODI/OhioMHAS Parity Report](#).

Trainings and Conferences

Ohio Crisis Academy –August Training Materials

The training PowerPoint and recording from The Ohio Crisis Academy: Crisis Stabilization & Residential Services webinar on August 5, 2020 is now available on the [OhioMHAS' Crisis Services webpage](#). The training materials can be found under the August 5th Crisis Stabilization accordion at the bottom of the page. Please save the date for the next Crisis Academy which is currently scheduled for 11/18/2020.

Ohio Postvention Workshop Going Virtual – Oct. 13

The Ohio Postvention Workshop has been re-scheduled to a virtual training on Oct. 13 from 9:30 a.m.–3:30 p.m.

In this training, participants will:

- Hear from Dr. Campbell about the important mission of LOSS Teams
- Discuss programs supporting survivors after the initial response
- Learn how to help people decide if they are ready to volunteer
- Roll out the new postvention section of Ohio Mental Health and Addiction Services website.

This workshop is appropriate for staff and volunteers of existing LOSS Teams, individuals or agencies considering launching a LOSS Team, those currently or considering supporting loss survivors in any way, and anyone interested in learning more about the importance of supporting suicide loss survivors. The session is supported by OhioMHAS and the Ohio Suicide Prevention Foundation. Click [HERE](#) for more information and to register.

Mental Health America 2020 Annual Conference

Mental Health America will host its 2020 Annual Conference, [COVID-19, Mental Health and the Need for Equity](#) on Sept. 3-4. U.S. Surgeon General, Vice Admiral Jerome M. Adams, M.D., M.P.H., is among the featured speakers. Click [HERE](#) for more information and to register.

September ASAM Criteria Training

As part of Ohio's State Opioid Response project, OhioMHAS is sponsoring a series of two-day ASAM Criteria trainings throughout September. This application-focused training provides participants with an in-depth look at the theoretical foundations of the Criteria, including clinically driven services, biopsychosocial assessment, the six dimensions, continued stay and transfer/discharge criteria. Incorporating the use of the new edition of The ASAM Criteria, participants have opportunities for skill practice at every stage of the treatment process: assessment, engagement, treatment planning, continuing care and transfer or discharge. All participants receive a **FREE** copy of The ASAM Criteria and an in-depth Training Journal to guide the training experience and as a resource for continuing skill application, as part of the training. This opportunity is free of charge and offers 13 CME/CEU credits. Click [HERE](#) for the training schedule and registration links.

NIMH Virtual Workshop on Social Disconnection and Late-Life Suicide

National Institute of Mental Health is hosting a virtual workshop on *Social Disconnection and Late-Life Suicide* on Sept. 17-18. Participants will discuss: current science on social disconnection and suicide; the mechanisms by which social disconnection confers risk for suicide in older adulthood; potential treatment targets for future intervention development; and opportunities for and obstacles to effective implementation of interventions to address and prevent late-life suicide. Click [HERE](#) for more information and to register.

Free WHAM Trainings for Peer Recovery Supporters

The Ohio State University College of Social Work and OhioMHAS are sponsoring five Whole Health Action Management (WHAM) trainings geared for Peer Recovery Supporters. These 2-day trainings will prepare a peer recovery supporter for how to lead WHAM in their peer organizations. Trainings will take place on Sept. 1-2, Sept. 3-4, Sept. 15-16, Sept. 17-18, and Sept. 22-23. Click [HERE](#) to learn more about these trainings and to register online.

Cincinnati Children's 2020 Pediatric Mental Health Symposium

Cincinnati Children's Hospital Medical Center will host its virtual 2020 Pediatric Mental Health Symposium on Sept. 21 from 8 a.m.-3:30 p.m. Dr. Brian Sims, senior medical advisor, National Association of State Mental Health Program Directors, will discuss trauma's effect on the developing child and how it can lead to changes both behaviorally and intellectually in his keynote presentation, "The Neurology of Mental Health." Click [HERE](#) for more information and [HERE](#) to register.

2020 State of Ohio MI/DD Conference

Registration is open for the 18th Annual State of Ohio MI/DD Conference "Mental Health Aspects: Treatment and Support." The virtual conference hosted by the National Association for the Dually Diagnosed (NADD) is scheduled for September 14-16. Cost is \$115 for NADD members; \$140 for non-members. Click [HERE](#) to see the conference booklet and [HERE](#) to register online.

Adopting the National Standards for Culturally and Linguistically Appropriate Services (CLAS)

The Substance Abuse and Mental Health Services Administration (SAMHSA) Region VIII Office is committed to enhancing the competence and capacity of the behavioral health workforce to advance outreach, engagement, and quality of care for minority and underserved populations. The Office recently sent a communication recommending incorporating the [National CLAS Standards](#) in behavioral health education curriculums and continuing education systems as an important step to ensure that behavioral health practitioners are prepared and competent to meet the needs of all patients, families, and communities.

The U.S. Department of Health and Human Services offers free, continuing education e-learning programs to help promote the adoption of CLAS standards. The programs offer 4-5.5 contact hours for counselors, nurses, psychologists, psychiatrists, and social workers. Click [HERE](#) to learn more.

From Research to Recovery 2020: Racial Disparity, Social Justice and the Opioid Crisis Webinar Series

The Alcohol, Drug Addiction and Mental Health Services Board of Cuyahoga County, in partnership with Case Western Reserve University has announced the *Research to Recovery 2020: Racial Disparity, Social Justice and the Opioid Crisis is a Live Webinar Series*, which will be held August-November 2020. The series brings together leading healthcare professionals, physicians, researchers, judges, social scientists, individuals with substance use disorders, criminal justice reform activists, policy experts, and diversity and inclusion advocates to discuss equity in the health sector and criminal justice system. This webinar series will address how the current opioid

crisis is increasingly impacting communities of color, particularly Black Americans, who have been disproportionately stigmatized and incarcerated for substance use. The specific goal with this webinar series is to create meaningful conversations and collaborations to address the structural racism preventing communities of color from receiving treatment, recovery, and wraparound social services for opioid and other substance use disorders. Click [HERE](#) for webinar dates and to register online.

Virtual Fatherhood Summit - Sept. 2-5

The [Ohio Commission on Fatherhood](#) and the Ohio Practitioners Network for Fathers and Families ([OPNFF](#)) are partnering to host a virtual Fatherhood Summit on Sept. 2-5. Participants will learn how to implement fatherhood programming from OPNFF subject matter experts, receive grant writing training from a certified grant writer, hear from guest speakers implementing fatherhood programming and services in other states, learn from subject matter experts during breakout sessions and from the virtual vendor table room and attend the Fatherhood and Government Plenary Session, moderated by former WBNS-TV news anchor Jerry Revish.

You must register for each day. Click the links below for more information and to register.

September 2

9 a.m.-Noon – [ONPFF Fatherhood Practitioner Training](#)

1-5 p.m. – [Grant Writing Training](#)

September 3

8:30 a.m.-4 p.m. -- [Ohio Fatherhood Summit](#)

September 5

9 a.m.-Noon -- [Virtual Breakfast with Dad Event](#) featuring guest speakers William Green, formerly with the Cleveland Browns, and Elbert "Ickey" Woods, formerly with the Cincinnati Bengals.

Ohio Council Staff Contact Information

The Ohio Council Staff are continuing to work remotely, but we want to make sure you can reach us. If you need help - have questions - or ideas to share, use the below emails to contact us:

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