



Commission on Mental Health and Substance Abuse Data Analysis Subcommittee

Commission on Mental Health and Substance Abuse Members

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Dr. Uma Suryadevara
Speaker of the House Appointee

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May 18, 2022

10:30 a.m. to 11:30 a.m.

Call to Order and Welcome

Commissioner Jay Reeve called the Data Analysis Subcommittee to order at 10:30 p.m.

Roll Call

The roll was called by Jeff Cece, quorum established.

Attendance Summary

Members in Attendance

Commissioner and Chairman, Jay Reeve
Suzette Fleischmann for Commissioner Shevaun Harris
Commissioner Simone Marsteller
Sue Gallagher
Commissioner Kathleen Moore
Annette Christy, PhD.
Paul Stiles, PhD.
Commissioner Uma Suryadevara
Commissioner Ray Gadd
Heather Flynn, PhD.

Discussion

Commissioner Reeve – Pat Smith transitioning out of staff support roll, Jeff Cece has stepped in temporarily.

Jeff Cece – Aaron Platt will be the Department’s primary point of contact for this commission going forward.

Approval of Minutes

The minutes from March 16, 2022, motion for approval from Commissioner Gadd, second by (in audible). Minutes approved.

Status Update on DCF/AHCA Data Sharing Agreements

Commissioner Reeve – Asks Suzette Fleishman to update sub-committee on status of DCF/AHCA data sharing agreement. Conversation regarding developing robust data system/data pool, first place to look will be DCF and AHCA.



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Suzette Fleischmann – Current agreement expires June 18; agencies are working to finalize agreement. Expects agreement to remain in effect through June 2023 and forward.

Commissioner Reeve – Waiting for agreement to be signed so we can have the legal basis to look at cross tabulation at a system level between the two agencies.

Commissioner Marstiller – Working on extending that data exchange agreement. Since last meeting, have checked into the work AHCA is doing with DCF and Deloitte, that work is part of the multi-year health care connections project (FX). AHCA's project team is collaborating with DCF, Elder Affairs and all our HHS agencies to ensure as we build system, that all agency's needs can be accommodated, and the system will contain clean and accurate data for all to utilize and share. In addition to that data sharing agreement (between AHCA and DCF) there are a few others that could be relevant to what we are trying to accomplish here.

- Agreement related to behavioral health services that are reportable or funded by DCF for purposes of evaluating the behavioral health services delivery system and to improve outcomes of persons served.
- From HB 945: To identify children and adolescents who are high utilizers of crisis stabilization services for collaboration to improve the quality of behavioral health services. There is a quarterly report sent to legislature.
- Another agreement establishes minimum requirements for operating the behavioral health network in-order to receive Title XXI federal financial funding for those services.

There are others but these are three main and long-standing agreements in various stages of effectiveness and renewal.

Annette Christy – Baker act data from the Baker Act Reporting Center has not been included in the quarterly reports, wants to know if there has been discussion for including this data. Baker Act Reporting data is unique because it includes data/forms from both publicly funded and privately funded facilities. This would be good data to include in the agreement.

Commissioner Marstiller – Baker Act Center data should be included in the conversation. Could possibly be a recommendation made by the Data Analysis subcommittee.

Commissioner Gadd – Data sharing related to specific children. Pasco County has developed a universal release signed by parents that allow us to come together and discuss specific issues related to the children. Problems, not widely accepted by everyone. Some see it as a mechanism for invading individual privacy. There are macro and micro levels for data sharing. For people on the ground, sharing data around individual kids is a problem. Don't want the commission to lose the opportunity to address the micro level.



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Sue Gallagher – Echo Commissioner Gadd comments. Creating state level approvals for local level data sharing.

Commissioner Reeve – Foresee federal challenges and not such state level challenges. But we still must move forward and try to address.

Update Regarding Data Sharing Agreement Model Matrix – Kathleen Moore, PhD. and Heather Flynn, PhD.

Commissioner Flynn – Have put together a draft of guiding principles and preliminary research questions. Overall goal of data analysis subcommittee is to serve as a resource for behavioral health outcomes in the State. Will follow these processes and principles; generate an initial list of research questions to guide data acquisition, cleaning, and analyses; prioritize data science innovations; attend to all legal and data use requirements and laws; prioritize bioethics of data science, especially precluding the perpetuation of health care inequities in the data aggregation, acquisition, analysis and reporting; and engage, educate and outreach to community stakeholders at all phases of the work. Aim to formalize a stakeholder coalition to determine optimal sources, uses and, outcomes of data, provide information on availability and adequacy of behavioral health data sources for high-risk individuals served through Medicaid or DCF and evaluate costs, access, quality, and outcomes, create a behavioral health data repository, provide descriptions of behavioral health service use and expenditures. Initial Research questions to look at behavioral health services clients and outcomes. What are the demographic, diagnostic characteristics of clients served in the systems, prevalence rates, array and timing of services, client outcomes and much more. Factoring other variables that may be unseen. Did not review all but provided a brief overview.

Diaz-Dorsey – Will incarceration data be included in preliminary studies?

Suzette Fleischmann – DCF does capture that data for individuals in our forensic system.

Diaz-Dorsey – There are high rates of mental illness for people coming out of incarceration. Want to make sure the commission incorporates mental health and how it is treated in jails. Look at the medications, must include in the discussion on mental health outcomes for incarcerated individuals.

Suzette Fleischmann – DCF does have memorandum of understanding (MOU) in place with DOC for reintegration efforts, also MOUs with DJJ. Echo the need for inclusion.

Commissioner Marstiller – Recommends that we invite representatives from DOC and DJJ to discuss what they are doing in terms of behavioral health and to get them on board for a conversation about data sharing and analysis.



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Commissioner Reeve – Will check with Commission Chair to ensure he is on board with that recommendation. Reviewed draft Dr. Flynn produced and thinks it is all inclusive. Recommends draft is shared with sub-committee and invite comments and questions to come back to Jeff and then to Dr. Flynn. Would like to see final draft by next meeting.

Commissioner Moore – Looked at counties in Florida and other states already implementing data sharing collaborations. Might be helpful to examine MOUs from counties/states that are already data sharing. Need to look at how they are funding this, how they have overcome barriers and challenges. Reviewed barriers and solutions by county/state. What agencies/departments do we want involved? Will follow-up with Oregon to see how they are operationalizing this. Reviewed spreadsheet with list of counties and states with data sharing agreements. To recommended state data collaborative would take a lot of organization, coordination and funding.

Diaz Dorsey – Question for clarification, while looking at other state programs, we should consider population size as a potential barrier. Vermont's population is a lot smaller vs. our state.

Commissioner Moore – Agree

Commissioner Gallagher – Will serve as a fellow for AISP with Oregon and King County for their integrated data systems and racial equity. Happy to share resources from that effort with this data group. Is the focus of this work to make recommendations for a state level data committee? What do we want to get out of this?

Commissioner Reeve – Come up with a set of recommendations to include in the report to the legislature. For the Data Analysis subcommittee, what do we recommend to establish high quality data so we can answer some of the questions the commission asked. What model do we promote.

Commissioner Suryadevara – With the increase in data sharing, we are going to improve the quality of care. In regard to child psychiatry, do we have data on the number of child psych units and the number of beds? Are we good at the treatment end?

Commissioner Reeve – That is one of the areas central to the question at hand. What we have struggled with is what kind of utilization do we see with those beds? Child bed utilization has historically been based on DCF utilization of beds but does not account for Medicaid and commercial insured kids who are utilizing beds. We also want to know what type of treatment outcomes exist from place to place. We hope to get some of this out of the data collaboration.



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Suzette Fleischmann– Between the Baker act Reporting Center data, DCF and AHCA data we would be able to capture some of the acute care data.

Commissioner Reeve – Requests’ Jeff to share the data presented by Commissioner Moore. Do we want to recommend a statewide data collaborative that’s sort of an umbrella for everything or, recommend a model for local data sharing that is promulgated throughout the state?

Commissioner Moore – Would like to contact counties and states doing this to find out more. Maybe start with a pilot model with the goal of moving towards a statewide model.

Commissioner Rein – Why would it be either or? Both should be considered in the recommendation.

Review of Commission Timeline

Commissioner Reeve – Review of proposed timeline, nothing written in stone. Want to pull back and revise based on today’s discussion.

Jeff Cece – Interim report due January 1, 2023. Department typically requires 2 months to route a document before it goes downtown. Target date is November 1 for draft.

Commissioner Reeve – Ask for reviewable draft by mid-October, and volunteers to take point on draft.

Commissioner Flynn – If we can only work in the background, it is difficult with the ambitious timeline. Is it possible to get documents out to everybody and then get feedback so we can work before the meeting that would really help progress with timeline? Do we have any data sets that to start analyzing so we can produce preliminary results?

Commissioner Reeve – I think we do, between DCF/AHCA/FSU I think we can ask some questions about utilization and acuity, I think we can do an initial draw.

Commissioner Marstiller – We do have data that we can work with initially. Ask committee to agree on three to five specific parameters that you want us to pull out of our data. Need to know what we are looking for.

Suzette Fleischman – Agree with Commissioner Marstiller

Public Comment

Sylvia Quintana – As you are doing the inventory of psych beds, you should also look at the inventory of step-down beds for kids and other adults. Part of problem is step down beds are not available, which results in recidivism. Kids are being sent to inappropriate levels of care.



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Take-Aways

Commissioner Reeve – Jeff will share documents from Commissioner Flynn and Commissioner Moore. I will revise timeline to reflect today's discussion. Strongly encourage consideration of serving as point on development of initial draft.

Commissioner Flynn – Volunteers to work with USF (Commissioner Moore) to take lead on developing draft.

Next Meetings

Full Commission – June 15, 2022

Criminal Justice Subcommittee – July 20, 2022

Meeting Adjourned