



**MEETING OF THE
REGIONAL GOVERNING BOARD**

Friday, August 22, 2025
9:30 a.m. - 12:00 p.m.

**REGION 3 BEHAVIORAL HEALTH SERVICES
4009 6TH AVE., SUITE 65
KEARNEY, NE**

*The Mission of Region 3 Behavioral Health Services is to foster recovery and
resiliency for individuals and their families who experience a behavioral health challenge.*

MINUTES

1. Welcome and Introductions

Rich Nelson welcomed everyone and called the meeting to order at 9:30 a.m.

2. Roll Call

Roll Call was taken by Jean Starman.

Present:

Adams – Lee Hogan
Buffalo – Bill Maendele
Custer – Tammy Kleeb
Furnas – Dennis Tegtmann
Garfield – Jerome Zulkoski
Greeley – Jordan Foltz
Hall – Gary Quandt
Hamilton – Rich Nelson
Howard – Jesse Urbanski
Loup – Donna Steckel
Merrick – Carolyn Kucera
Nuckolls – Jerry Grove
Phelps – Theresa Puls
Sherman – Ken Kaslon
Wheeler – Roy Plugge

Excused:

Harlan – Jeff Bash
Webster – Trevor Karr

Absent:

Blaine – Craig Thompson
Clay – Jesse Mohnike
Franklin – Josh Johnson
Kearney – Jeff England
Valley – Max Magiera

Also Present:

Tiffany Gressley – Region 3 Behavioral Health Services (BHS)
Kerry Slaymaker – Region 3 (BHS)
Kayl Dahlke – Region 3 BHS
Jill Schubauer – Region 3 BHS
Nathan Canfield – Region 3 BHS
Shyanne Adams – Region 3 BHS
Jean Starman – Region 3 BHS

3. Review of Open Meetings Act

The Open Meetings Act sign is posted in the meeting room. Two weeks prior to the August 22, 2025 Regional Governing Board meeting, advanced publicized notice was listed in the Kearney Hub, the Grand Island Independent and the Hastings Tribune.

4. Comments from Public

There were no individuals from the public in attendance.

5. Approval of Agenda

Motion by Gary Quandt to approve the August 22, 2025 meeting agenda, seconded by Carolyn Kucera, motion carried.

6. Approval of May 23, 2025 Meeting Minutes

Rich Nelson asked if there were any questions, comments or oppositions to the May 23, 2025 RGB meeting minutes. There were no responses. Rich stated that the May 23, 2025 RGB minutes stand as presented.

7. Executive Committee Report

Rich Nelson reported that the Executive Committee met on August 22, 2025 at 8:30 a.m. The committee reviewed Region 3 expenditures for FY25.

The Executive Committee conducted the annual performance review of the Regional Administrator, Tiffany Gressley. Each Executive Committee member shared his/her comments with the Executive Committee members only and then held a group discussion. Afterwards, Tiffany joined the group and the Executive Committee members shared their comments with Tiffany. Rich reported that the Executive Committee believes Tiffany is enhancing and improving the job of the Regional Administrator. She works well with the other Behavioral Health Regions, the Division of Behavioral Health, the Governing Board and legislative representatives. The Executive Committee rated her performance as exceptional. Rich added that Region 3 has a strong Regional Governing Board and the services provided to our twenty-two counties are valued and appreciated.

Rich asked if there were any questions for the Executive Committee. No questions were asked.

8. Region 3 Fiscal Reports

a. FY25 Year-End Network Expenditures

Kerry Slaymaker reviewed a handout, *Region 3 Behavioral Health Services Network Expenditures Report July 1, 2024 – June 30, 2025*. Mental Health services expended 93% of the budgeted amount with 100% of the fiscal year elapsed. Kerry reported that many services show 100% expended. Typically, services that show 100% of funds spent indicate that we have shifted funds into that service throughout the year to meet the demand. Kerry noted that the 24-Hour Crisis Line and Day Support are Expense Reimbursed services and 100% of the budgeted funds were expended.

Kerry reviewed some of the services with a lower percentage expenditure. Housing Landlord Risk Management, a new line item in recent years, paid out 0%. This provides funds to repair any damages to an apartment by a Housing Program participant while maintaining good relationships with property owners. It is typically not used but a small amount of funds are available if needed.

Interpreter Services spent 33% of the budgeted amount.

Emergency Protective Custody (EPC) expended 88% of the budgeted amount. Kerry stated that we like to see this expenditure under 100%. The number of EPCs in FY25 was lower than the number of EPCs in FY24.

Substance Use Disorder services expended 90% of the budgeted amount. Outpatient Psychotherapy Youth shows -25% paid which is due to a refund that Region 3 received dealing with a retroactive Medicaid payment. Recovery Supported Housing spent 29% of the budgeted amount which is largely due to a staff vacancy which has now been filled. Funds continue to be shifted to Halfway House and Supported Housing Women and Children to cover utilization. Therapeutic Community is provided by the Bridge in Hastings. The service spent 0% because all the individuals served in FY25 were Medicaid eligible so Region 3 funds were not used.

Overall, Region 3 spent \$10,844,881 which is 92% of the budgeted amount. This was the largest percentage of funds spent since the COVID epidemic. Region 3 had intentions to spend the remaining funds. An expansion was planned for the Crisis Stabilization Unit at Mid-Plains Center, however, it has been delayed.

b. FY25 and FY26 Contract and Shift Ratifications

Kerry Slaymaker referred to a handout, *Region 3 Behavioral Health Services Contract Ratifications by Regional Governing Board*, which includes contracts signed by Tiffany Gressley since the Regional Governing Board (RGB) meeting on May 23, 2025. Tiffany receives the contracts electronically, signs and returns them to the Department of Health and Human Services/Division of Behavioral Health. The contracts are then signed by the RGB Chairperson and brought to the Regional Governing Board for ratification. This is the process approved by the RGB.

Kerry explained the budget shifts completed and the FY26 Division of Behavioral Health Contract and the Tobacco Free Nebraska Contract 2025-2027.

Motion made by Theresa Puls to approve the Contract and Shift Ratifications, seconded by Bill Maendele, motion passed. A roll call vote commenced.

Lee Hogan - Yes
Craig Thompson - Absent
Bill Maendele - Yes
Jesse Mohnike - Absent
Tammy Kleeb - Yes
Joshua Johnson - Absent
Dennis Tegtman - Yes
Jerome Zulkoski - Yes
Jordan Foltz - Yes
Gary Quandt - Yes
Rich Nelson - Yes
Jeff Bash - Excused
Jessie Urbanski - Yes
Jeff England - Absent
Donna Steckel - Yes
Carolyn Kucera - Yes
Jerry Grove - Yes
Theresa Puls - Yes
Ken Kaslon - Yes
Max Madiera - Absent
Trevor Karr - Excused
Roy Plugge - Yes

c. FY26 Provider Contract Amounts

Kerry Slaymaker reviewed a handout, *Region 3 Behavioral Health Services FY26 Contracted Services* which includes a list of the Region 3 contracts with network providers and their contracted amounts. The Lutheran Family Services contract is pending because changes are being worked out with the Buffalo County Co-Responder Program.

Plans for One is a Region 3 Managed Service. The Division of Behavioral Health added \$474,160 after our budget approval. Region 3 is working with one individual who was discharged from the Lincoln Regional Center (LRC). The plan is to connect the individual with community services to provide supports and services. When individuals are discharged from LRC, they often require a high level of care and gradual step-down services to slowly transition into the community. A portion of the Plans for One funds will also be used for expenses for services for two additional individuals to be discharged from LRC later this year.

Kerry explained that Mental Health Unallocated Funds are related to the changes with the Co-Responder Program, the Crisis Stabilization Unit expansion and funding set aside for Emergency Protective Custody services. SUD Unallocated Funds involves one of our providers that we previously contracted with in Region 5 in Lincoln. Their services are no longer needed because we will have the services available in Region 3.

FY26 Grand Total Contracted: \$12,307,700.

d. National Opioid Settlement Funds

Kerry Slaymaker reviewed a handout, *Region 3 Behavioral Health Services National Opioid Settlement Funds Report as of July 31, 2025*.

Kerry reviewed Prior Year Funds expended, the Current Grant Year Funds Expended and the Total 2024/2025 Grant Year Funds Expended.

Two grant recipients will be unable to implement their program funding so those funds will go back into the pool for the next round.

The amount of Funds Remaining is \$1,567,818.94

Another round of grant funds were recently released and the applications will be reviewed at the end of August 2025.

9. Quality Improvement Report

a. FY25 Network Performance Measures Annual Report

Kayl Dahlke thoroughly reviewed a handout, *FY25 Network Quality Improvement Plan: Performance Measurement and Reporting, FY25 Annual Report*, which included Satisfaction, Access Measures and Performance Measures for the Region 3 Behavioral Health Services Network. Kayl reported that more individuals were served in FY25 than in FY24.

b. FY26 Network Performance Measures Plan

Kayl Dahlke reviewed a handout, *FY26 Network Quality Improvement Plan: Performance Measurement and Reporting, July 1, 2025 – June 30, 2026*, and noted a few changes and/or adjustments to some measures as well as goals removed and a new goal added.

c. FY24 Division of Behavioral Health Consumer Survey Results – Adult

Kayl Dahlke referred to a handout, *Region 3 Adult Consumer Survey, Comparison from FY20 to FY24*. The survey received input from 276 adults receiving services through Region 3 Network Providers. The survey questions were related to seven areas, including, Access, Quality and Appropriateness, Outcomes, Participation in Treatment Planning, General Satisfaction, Functioning and Social Connectedness.

d. FY24 Division of Behavioral Health Consumer Survey Results – Youth

Kayl Dahlke referred to a handout, *Region 3 Youth Consumer Survey, Comparison from FY20 to FY24*. The survey received input from 96 caregivers receiving services through Region 3 Network Providers. The survey questions were related to seven areas, including, Access, Family Involvement, Cultural Sensitivity, Satisfaction, Improved Functioning, Social Connectedness and Positive Outcomes.

10. Youth Systems/Professional Partner Program

The Professional Partner Program (PPP) was established in Nebraska in 1995 in the six Behavioral Health Regions. A 30-year celebration will take place in October with a state-wide meeting at ESU 10 in Kearney. The PPP uses the wraparound model that is family-centered and focuses on services around youth and keeping

them in-home. Jill Schubauer, Youth Systems Director, explained that the program is completely voluntary. Youth must have a mental health diagnosis for participation in the PPP. Region 3 has eight professional partners, one supervisor and one intake/referral coordinator. Each partner works with a maximum of twelve families at one time.

Jill reviewed the program's goals, referral sources, diagnoses of the youth and young adults, county of residence, presenting problems, reasons for graduation/discharge and satisfaction scores of youth and families participating in the program. Diagnoses vary; some include neurological disorders such as autism or ADHD, anxiety disorders, disruptive, impulse-control and conduct disorders. Presenting problems at admission vary, however, a higher percentage of youth present with non-compliance, anxiety and academic problems. Youth often have multiple presenting problems at admission. A total of 163 youth and families were served by the PPP in FY24.

A question was asked about the family dynamics of youth participating in the program and the frequency of meetings. Jill explained that many participants are living in single parent households and a number of youth are being raised by grandparents. Many of the youth have experienced trauma or witnessed trauma. Professional Partners have contact with each family a minimum of one time each week and a team meeting is held a minimum of one time each month. Comprehensive safety planning is involved and Suicidal Risk Assessments are completed once a month or once every three months, depending on youth risk factors. Jill said communication with all team members is vital so everyone is updated, informed and working toward the same goals for the youth and family. In addition to the youth and professional partner, team members can include family members, school representatives, therapists and others.

11. Student Health and Risk Prevention Surveillance System (SHARP) Survey Information

Shyanne Adams, Region 3 Prevention System Specialist, reviewed three youth surveys that are administered every other year to students in 8th grade, 10th grade and 12th grade. The surveys include the 1) Nebraska Risk and Protective Factor Student Survey 2) Youth Tobacco Survey 3) Youth Risk Behavior Survey. Many schools that participate in the surveys use the data to monitor student health trends, guide school policy and curriculum decisions and apply for grants. Schools that participate receive valuable insights that can help secure funding, identify trends and inform student support programs and policies.

Shyanne reviewed data collected from the surveys from Region 3 area schools in the areas of student substance use, alcohol use, e-cigarette use, overdose reversal and feelings of anxiety, depression and suicide. Many Region 3 schools choose to not participate in administering the surveys. School concerns include time involved for staff and students, surveys too lengthy, too many other surveys, administration changes and parental concerns.

Shyanne asked for the help of Regional Governing Board members to help schools understand the value gained by the survey data. How to help:

- Contact Shyanne at sadams@region3.net to learn the number of schools in your area who choose to not administer the surveys.
- Contact school superintendents, principals and/or guidance counselors to discuss the surveys.
- Talk with local health departments, foundations, crime commissions and other organizations about how they might use the youth data for their organizations or communities.
- Continue to share the importance of the SHARP surveys and support recruitment and administrative efforts.

12. Fiscal Year 2025 Waitlist Report

Nathan Canfield reviewed a handout, *Region 3 CDS Waitlist Report, July 1, 2024 – June 30, 2025*. The waitlist is used to document an individual who has been assessed as needing the level of care provided by the agency but who is awaiting admission due to lack of capacity available or consumer needs. The waitlist and persons on the waitlist are continuously monitored by the agency/location as identified in the agency policies and procedures. Thirty-three individuals were placed on the waitlist in FY25 compared to forty-six individuals in

FY24 and seventy-four individuals in FY23. Nathan said the number of individuals on the waitlist has been trending down in the last few years. Nathan reviewed the Primary Funding Source and Waitlist Service Type for the individuals on the waitlist. The thirty-three individuals on the waitlist were all waiting for Short Term Residential SUD services. Nathan reviewed data for the Priority Waitlist by Priority Population, Average Days on Waitlist by Service Type and Waitlist Removal Reasons.

13. Regional Administrator's Report

a. Region 3 CARF Survey

Tiffany Gressley referred to a letter from the Commission on Accreditation of Rehabilitation Facilities International (CARF) stating that Region 3 Behavioral Health Services achieved a three-year national accreditation in the Professional Partner Program, Emergency Community Support Program and Network. The highest level of accreditation is a 3-year accreditation of which Region 3 achieved during our first accreditation process in 1998 and has maintained this status ever since. Our latest accreditation survey was conducted at Region 3 on June 23 and June 24, 2025.

Tiffany explained that the survey is very comprehensive as the surveyors look at how we are providing services and that we are complying with the numerous national standards. The three CARF surveyors talked to several individuals, including Rich Nelson, an employee at the Department of Health and Human Services, Region 3 staff, Network Providers, families who have family members being served by Region 3 and individuals currently participating in Region 3 services. Tiffany shared that the two-day survey went very smoothly and that she is proud of the Region 3 staff as they did a great job preparing for the survey and during the survey.

b. Legislative Interim Studies

Tiffany Gressley reviewed a handout, *Legislative Report - Interim Studies*, and discussed all of the Legislative Resolutions.

LR 201 is a study to examine the rates, revenues and uses of the documentary stamp tax. Tiffany said this study is important to watch as the documentary stamp tax is the funding source for the Region 3 Supported Housing Program. The Behavioral Health Regions expressed their interest to be involved in any discussions and/or workgroups pertaining to LR 201.

LR 224 is a study to examine the effectiveness of programs addressing health related social needs which are unmet adverse social conditions that contribute to poor health, including food insecurity, unemployment and housing instability. We are interested in monitoring LR 224 as it includes a housing component.

LR 227 is a study to examine the recommendations presented to the Legislative Mental Health Care Capacity Strategic Planning Committee. Much of this study involves discussion of the Regional Center System. We asked to have Regional representation and participate in a workgroup if one is formed.

c. Region 3 Opioid Grant Application

Tiffany Gressley explained that a second round of Opioid Grant Applications have recently been received by Region 3. Six applications were received requesting \$382,457. There is \$200,000 to award with a potential for more funds because there were some projects from the first round of grants that were not able to be completed. Region 3 will review the applications at the end of August 2025.

d. Statewide Opioid Infrastructure Application

Tiffany Gressley stated that the Division of Behavioral Health (DBH) released an Opioid Infrastructure Grant Application. At the state level there is a significant amount of opioid settlement funds available for organizations to access through an RFP process. The focus of the DBH grant is infrastructure building projects. Three organizations asked Tiffany if she would provide a letter of

support to be included with their applications. Tiffany provided a letter of support to the three organizations, which were Mid-Plains Center, Revive and Bonsai Health. Bonsai Health, a medical clinic specializing in medication-assisted treatment for opioid addiction, would like to expand to the Grand Island area.

e. Budget Shift Process Change

Tiffany Gressley explained that the Division of Behavioral Health asked all the regions to consider a process change regarding budget shifts. With the change in process, the need for the Regional Governing Board Chairperson to sign budget shifts would be eliminated. Ratification of the shifts would still occur at RGB meetings.

Tiffany referred to a handout, *Region 3 Governing Board for Behavioral Health Services, Resolution*, which states that the Regional Administrator can sign budget shifts and bring them to the Regional Governing Board for ratification. This Resolution was signed on June 22, 2018 by Gary Quandt, Chairperson at that time, and approved by the Regional Governing Board. The 2018 Resolution stands as there has been no Resolution reversal.

Tiffany explained that a budget shift handout including type of shifts, dates and amounts will continue to be presented at Regional Governing Board meetings for ratification.

Rich Nelson asked if there were any questions or concerns about the Resolution. No questions or concerns were voiced.

14. Other Business

Jill Schubauer stated that middle-aged males living in rural areas are a high-risk demographic for deaths by suicide. She encouraged everyone to reach out to others, offer support and share resources. Suicide prevention/988 materials to support, educate and help spread awareness were available after this meeting. Jill can be contacted at jschubauer@region3.net for additional information.

15. Date of Next Meeting

October 31, 2025

9:30 a.m. – 12:00 p.m.

Region 3 Behavioral Health Services

4009 6th Avenue, Suite 65

Kearney, NE

Meeting Schedule for 2026

- January 23, 2026
- March 27, 2026
- May 22, 2026
- August 28, 2026
- October 23, 2026 *

16. Adjourn

Motion by Gary Quandt to adjourn the August 22, 2025 meeting, seconded by Theresa Puls, motion carried. Rich Nelson adjourned the meeting at 11:45 a.m.