

**\*\*\*APPROVED\*\*\***

**MINUTES  
CENTRAL UTAH COUNSELING CENTER  
AUTHORITY BOARD MEETING**

**DATE:** October 8, 2025

**PLACE:** 236 S. 100 E.  
Richfield, UT 84701

**TIME:** 4:30 PM

**PRESENT:** Commissioner Marty Palmer, Commissioner Sam Steed, Commissioner Scott Bartholomew, Commissioner Dennis Blackburn, Commissioner Ralph Brown, Commissioner Vicki Lyman, Nathan Strait, Richard Anderson, Lynnette Robinson, Jared Kummer, Chad Williams, Christian Matthews, Kory Meacham, Anna LaDamus, Samantha Payne

**EXCUSED:** Jace Ellsworth

**I. PUBLIC COMMENT:**

No Public Present.

**II. APPROVAL OF MINUTES:**

A motion was made by Commissioner Ralph Brown to approve the minutes of the August 27, 2025 Authority Board Meeting. The motion was seconded by Commissioner Scott Bartholomew. Votes by voice included Commissioner Scott Bartholomew, Commissioner Sam Steed, Commissioner Dennis Blackburn, Commissioner Vicki Lyman, Commissioner Marty Palmer, and Commissioner Ralph Brown. Motion carried.

**III. RURAL UTAH TRANSFORMATION GRANT:**

Nathan Strait provided an update on Utah's application for the Rural Utah Transformation Grant. He explained that the state is pursuing one of the \$500 million federal grants designed to support rural and frontier communities. The grant period begins with the federal fiscal year 2026, which is already underway. Utah's application was submitted by October 6, 2025. The Centers for Medicare & Medicaid Services (CMS) will announce awardees by December 31, 2025, with final decisions expected in January 2026. Each state will receive an initial \$500 million allocation, distributed equally, with additional funding awarded based on specific criteria. To guide the application process, Utah formed four committees: Technology, Population Health, Workforce Development, and Sustainable Access. Nathan serves on the Population Health committee, which worked closely with Technology to expand telehealth services, seen as critical for improving access to specialty providers in rural areas. Workforce

Development focused on a five-year commitment program offering scholarships and loan repayment for providers (including pediatricians, therapists, APRNs, PAs, and psychiatrists) who agree to serve in rural communities. Sustainable Access addressed long-term program viability. The funding distribution is broken down as follows with the first 50% guaranteed, and the remaining 50% depends on factors such as rural/frontier population, number of rural hospitals, and provider availability. Utah faces some challenges. While 55% of its land is frontier, only 3.5% of the population lives there. With 95% of Utahns along the Wasatch Front, Utah ranks as the seventh most urban state. Rural population accounts for 53% of scoring, which weighs heavily against Utah. Richard Anderson asked if poverty levels are considered. Nathan explained they are indirectly factored through hospital claim data, unpaid or denied claims raise the score. However, Medicaid expansion may reduce Utah's demonstrated need, which influences about 50% of decisions. Commissioner Vicki Lyman asked if public health is applying. Nathan confirmed the Utah Department of Health and Human Services (DHHS) is leading the application; private providers may apply only through the state. Commissioner Dennis Blackburn asked who oversees the grant. Nathan confirmed DHHS. Commissioner Sam Steed asked about Utah's chances. Nathan said the guaranteed portion is secure, but urban classification may limit additional funds. Still, other criteria strengthen Utah's application, and he believes the state is competitive. Nathan noted that applicants with a CNS are disqualified, a requirement eliminated federally in 1986 and by Utah in 1987, which benefits the state. Utah's proposal includes two rural receiving centers (one locally and one in Tooele). Iron County's request for a center was excluded to avoid weakening the application. The proposal emphasizes remodels rather than new builds, aligning with federal preferences. Finally, Nathan mentioned upcoming public meetings on November 9 and 10 and offered to share links for public comment. Organizations such as Intermountain Health (IHC) and Huntsman Mental Health Institute (HMHI) may also apply, but only through the state.

#### **IV. RATIFICATION OF HOLIDAY EXPENDITURES:**

An email had been sent out earlier to commissioners detailing the proposed holiday expenditures. The expenditures had already been reviewed electronically, and the board was now asked to formally ratify them during the meeting.

**A motion was made by Commissioner Ralph Brown to approve the ratification of holiday expenditures. The motion was seconded by Commissioner Vicki Lyman. Votes by voice included Commissioner Vicki Lyman, Commissioner Scott Bartholomew, Commissioner Sam Steed, Commissioner Dennis Blackburn, Commissioner Marty Palmer, and Commissioner Ralph Brown. Motion carried.**

#### **V. EDUCATIONAL PROPOSAL FOR DAVID BOEL, APRN:**

Nathan Strait reported that David Boel, the center's Medical Director, has been accepted to Frontier Nursing University to pursue a doctorate in nursing. Nathan emphasized that this advanced degree would be a significant advantage for the center, particularly because the program focuses on management. Dave has stepped into the medical director role and is currently overseeing the medical team, but he has expressed that he feels out of his element in certain aspects of leadership. The doctorate program would strengthen his ability to manage

effectively and provide higher-level clinical oversight. At present, the center's prescribing staff consists of two APRNs and two PAs, all mid-level providers. Dave's doctorate would represent the first doctoral-level credential among the staff, enhancing the center's professional capacity. Nathan outlined the financial proposal: the total cost is \$21,067.52, to be paid incrementally as tuition bills are submitted each semester. For the current fiscal year, the expense would be approximately \$4,000, with about \$12,000 expected in the following fiscal year. Commissioner Marty Palmer asked what measures would ensure Dave remains with the center after completing the degree. Nathan explained that there is a two-year commitment following the final payment; if Dave were to leave before fulfilling that obligation, he would be required to repay the funds. Richard Anderson noted that the center's budget already includes \$36,000 for educational assistance, of which only \$422 has been spent this year, leaving ample room to support Dave's request. Nathan added that Dave has expressed his intention to retire with CUCC, highlighting his long-term commitment. Dave joined the center from Valley Mental Health, bringing valuable behavioral health experience, and has proven to be an excellent hire. Commissioner Scott Bartholomew asked about the university's location. Nathan clarified that Frontier Nursing University is based in Kentucky, but the program is primarily online, with only one required week of in-person attendance. Dave will attend part-time while continuing to work full-time at the center, which extends the program's duration by about a year. Scott also asked whether the center currently has any staff with doctorates; Nathan confirmed that Dave would be the first. Finally, Scott inquired about a potential pay increase upon completion of the degree. Nathan responded that compensation has not yet been discussed, but acknowledged that a pay adjustment would most likely be appropriate.

**A motion was made by Commissioner Scott Bartholomew to approve the education proposal for David Boel. The motion was seconded by Commissioner Sam Steed. Votes by voice included Commissioner Vicki Lyman, Commissioner Scott Bartholomew, Commissioner Sam Steed, Commissioner Dennis Blackburn, Commissioner Marty Palmer, and Commissioner Ralph Brown. Motion carried.**

## **VI. FINANCIAL REPORT:**

### **A. FY2025:**

Richard Anderson presented the final numbers for FY2025, noting that these figures are preliminary and not yet audited. Adjustments such as journal entries are still expected. For Mental Health (MH), state contract funds came in slightly lower at 94%, though overall MH revenues reached 105% of budget. Substance Use Disorder (SUD) revenues were similarly strong at 102%. Importantly, no funds were drawn from reserves during the fiscal year. Richard anticipates additional funds from FY2024 once PRISM finalizes rate adjustments, which are still pending. On the expenditure side, MH travel was at 94% and SUD travel at 83%. Inpatient costs totaled \$741,724.17, representing 81% of budget, the lowest level seen in some time. Overall, MH ended the year with \$1.2 million in revenue over expenditures, while SUD showed \$142,000 in revenue over expenditures. Richard highlighted the significant progress made in billing Medicaid following PRISM's system improvements. He credited billing specialist Tammy Arellano for her diligent work, which has placed the center in a strong position. Medicaid

Fee-for-Service revenues reached 143% for MH and 135% for SUD, funds that historically were not billed. This additional revenue, along with insurance billing, has helped fill budget gaps. Commissioner Scott Bartholomew asked about the impact of the federal government shutdown. Richard responded that current federal contracts are expected to continue being paid, though new contracts could be at risk. He reassured the board that reserves are available if needed.

**B. FY2026:**

Richard provided the first FY2026 report, covering the first quarter of the year. MH Medicaid Capitated revenues are at 35%, while SUD Medicaid Capitated revenues are at 31%. Total revenues stand at 35% for MH and 22% for SUD. No reserves were budgeted for FY2026, and county budgets are currently at zero and that is to be expected. On the expenditure side, wages and fringe are trending slightly high. Travel is at 19% for both MH and SUD. A new MH Residential code has been created as this type of service has appeared more frequently, reflecting increased utilization. Inpatient costs are currently \$66,000, or 7% of budget. Richard explained that inpatient claims often lag several months, so while paid claims are modest, tracking suggests expenditures could trend toward one million once outstanding claims are processed. MH expenditures are on target at 25%, while SUD expenditures are slightly lower at 22%. Commissioner Marty Palmer asked whether the board would attend NATCON in Denver this year. Nathan Strait responded that the decision would be left to the board.

Richard reviewed the county match methodology. He explained that counties are provided with a budget number for the upcoming calendar year, intentionally set higher to avoid scrambling for funds later. Last year, counties paid approximately \$40,000 less than budgeted. Final allocation letters are issued in April, at which point the actual match amounts are confirmed. Preliminary numbers have already been sent to county clerks, and commissioners were encouraged to reach out with any questions. Richard noted that the updated figures reflect revised population percentages.

**A motion was made by Commissioner Scott Bartholomew to approve the Financial Report as presented. The motion was seconded by Commissioner Ralph Brown. Votes by voice included Commissioner Vicki Lyman, Commissioner Scott Bartholomew, Commissioner Sam Steed, Commissioner Dennis Blackburn, Commissioner Marty Palmer, and Commissioner Ralph Brown. Motion carried.**

**C. Direct Service Incentive FY2026 Q1**

Richard Anderson presented the results of the Direct Service Incentive program for the first quarter of FY2026. He acknowledged that he had initially been hesitant about the program but credited Jared and Nathan for championing its implementation. A total of \$13,560.00 was paid out this quarter, with \$11,158.00 distributed among therapists and case managers (17 employees) and \$2,402.88 awarded to office specialists (8 employees), whose bonuses are calculated based on the average performance of their teams. Richard highlighted that compared to the same quarter last year, the center delivered 802 additional direct service hours. To put this in perspective, 717 hours represents the average annual direct service workload of one full-time employee, meaning the incentive effectively generated the equivalent of one full-time position at a reduced cost. Commissioner Scott Bartholomew asked whether the incentive had improved performance among lower-producing staff. Richard responded that he believes it has elevated

performance across the board. Nathan added that during a recent administrative meeting, they discussed client no-shows. Historically, only 50–60% of clients attended scheduled appointments, but current rates have risen to 80–81%, reflecting stronger engagement. Commissioner Bartholomew asked about reasons for no-shows. Kory provided examples, while Chad noted that telehealth has significantly improved attendance. If a client misses an appointment, staff can quickly reach out, send a link, and still complete the session. Many clients now prefer telehealth, and although the center was slow to adopt it, COVID accelerated its use. The incentive program further encourages staff to follow up with clients who miss appointments. Chris reported that Sanpete County is seeing positive results, with half of the additional 800 hours coming from his team. Jared emphasized that the incentive structure is motivating because it rewards employees at multiple performance levels, 70%, 80%, and 90%, rather than only those at the very top. This approach ensures broader participation and sustained motivation.

#### D. ARPA AHD Status

Richard also provided an update on the ARPA AHD funds. Of the \$237,000 available from last year, all but \$48,596.18 has now been spent. He anticipates that the remaining balance will be fully utilized, ensuring the funds are effectively spent down.

### **VII. HUMAN RESOURCES REPORT:**

#### A. New Hires / Termination

Nathan Strait presented the Human Resources report on behalf of Jace, who was absent. He announced two new hires. Brian Scott has joined as the new maintenance employee. Brian resides in Sevier County and had previously been commuting to Utah County. He is a master electrician and has already been working effectively alongside the existing maintenance staff. Jocelyne Rojas was hired as a prevention specialist. The team had been seeking someone fluent in Spanish to better serve the Hispanic population, and Jocelyne was identified as an excellent fit. Richard Anderson noted that Brian's position was a newly budgeted role for this year, while Jocelyne's hire fills the vacancy left by Jan Reese following her retirement. Nathan also reported on staff separations. Kean Kelsey, who had been working part-time in maintenance, departed following Brian Scott's hire. Grace Haskell, a therapist, resigned due to health concerns. Michelle Zobell retired, and Bracken Nuzman was released from employment. Nathan added that if further discussion regarding any of these employees is needed, it could be addressed in closed session.

### **VIII. QUALITY ASSESSMENT & CLINICAL DATA:**

#### A. Clinical Services:

Jared Kummer reported that the Office of Substance Use and Mental Health will conduct its annual site visit on October 21, 2025. He noted that several documents have already been submitted in preparation, and the upcoming visit will focus on conversations and review.

#### B. Team Reports / Updates

Jared highlighted the dedication of team leaders and their commitment to both staff and clients. Each team leader was invited to share on the available programs.

Chad Williams, team leader for Millard-Juab, was asked to talk about Substance Use Disorder (SUD) treatment. Chad explained that work with SUD clients begins immediately upon intake, whether through a walk-in or phone call. Approximately 90% of SUD clients are justice-involved, often arriving with skepticism, reluctance, or shame. Staff prioritize treating clients with dignity and respect. High-priority cases include IV drug users, pregnant women, and clients with dependent children. Staff assist clients with Medicaid enrollment when needed and assess for co-occurring mental health issues. Treatment plans are individualized, incorporating legal and substance use history. Services include individual therapy, case management, evidence-based groups, skills development, early recovery programs, and Medication-Assisted Treatment (MAT) for opioid and alcohol use disorders. Chad explained that MAT uses minute traces of medication to reduce cravings without creating addiction. Nathan added that MAT can help fill neurological voids left by long-term substance use. Most referrals come from justice partners such as AP&P, judges, and DCFS. Collaboration has been positive, particularly through Recovery Court (formerly Drug Court), which diverts clients from incarceration if they successfully complete treatment. Chad reported 30 justice-referred clients in Juab and 20 in Millard. Richard raised concerns about funding gaps, as court-mandated clients often arrive without financial support, creating a balancing act.

Kory Meacham, team leader for Tri-County, presented on mental health treatment services. He described the range of care provided, including individual therapy, case management, residential programs, and day treatment. Case managers regularly report back to therapists to ensure coordinated care. Kory highlighted the role of the Mobile Crisis Outreach Team (MCOT), noting that when individuals are in crisis, MCOT does not ask about insurance or funding. The same principle applies when people walk into the office in crisis, services are provided without financial screening. Groups offered include Dialectical Behavioral Therapy (DBT), SUD groups, and groups addressing shame and guilt. Kory has observed that clients often arrive for their appointments hesitant but leave appearing more hopeful. Richard Anderson asked about the most prevalent mental health condition treated. Kory explained that staff meetings most often focus on complex trauma and PTSD, which frequently underlie depression. He emphasized the collaborative nature of the team, where cases are staffed and feedback is shared. Commissioner Vicki Lyman asked whether house calls are made for non-crisis situations. Anna responded that they occasionally occur, though Chris noted that telehealth has largely replaced in-home sessions. Commissioner Scott Bartholomew asked if staff ever feel unsafe with clients. Kory acknowledged that it happens occasionally, but Nathan Strait added that those actively engaged in treatment are rarely a concern; risks are greater among individuals not seeking care. Anna further explained that statistically, severely mentally ill individuals who are violent are more likely to harm themselves or close contacts rather than others. Commissioner Lyman asked about PTSD. Kory explained that trauma experienced in war, where danger is anticipated, can have different effects than trauma that occurs unexpectedly. Coping strategies, or the lack thereof, also influence how individuals respond to PTSD and trauma.

Chris Matthews, team leader for Sanpete, spoke about services for youth, noting significant overlap between SUD and MH populations. He highlighted that 1 in 5 children experience sexual abuse, and many youth face challenges related to domestic violence, family instability, and declining social structures. While psychology historically focused on adults,

emphasis on youth began in the 1970s. Chris serves as a play therapy supervisor, with Juab also having a play therapist. Richfield currently does not, though it has in the past. While not all therapists are certified play therapists, several have received training. Services include individual therapy, respite care, peer support specialists (mentors with lived experience), and youth groups for ages 7–12 focused on skill building and emotional regulation. Chris explained that even small shifts in behavior or resilience can make a difference, reducing the likelihood of incarceration or addiction later in life. Parent engagement remains a challenge, with only about 25% of parents actively participating. He emphasized the importance of the prevention teams, which address both SUD and suicide prevention, and reminded commissioners of the 988 crisis line.

Chris noted that suicidal ideation can be hidden among high-achieving youth in academics, sports, or religious communities. Commissioner Dennis Blackburn asked about the impact of social media; both Chris and Richard agreed it is negatively affecting youth, creating confusion and stress. Chris concluded by affirming that therapeutic relationships are the most effective tool for helping clients, and therapists should never doubt the value of their alliance with youth.

**IX. CLOSED SESSION:**

Not needed.

**X. CLOSED SESSION ACTION:**

Not needed.

**XI. MEETING SCHEDULE:**

The next Authority Board Meeting is scheduled for December 10, 2025 at 4:30 p.m., at Steve's Steakhouse in Richfield, Utah.

**XII. OTHER:**

**XIII. MATTERS FROM THE BOARD:**

A motion was made by Commissioner Dennis Blackburn to move to close the meeting. The motion was seconded by Commissioner Ralph Brown. Votes by voice included Commissioner Vicki Lyman, Commissioner Scott Bartholomew, Commissioner Sam Steed, Commissioner Dennis Blackburn, Commissioner Marty Palmer, and Commissioner Ralph Brown. Motion carried.

The meeting was adjourned at approximately 6:33 p.m.

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Samantha Payne, AP Clerk