



North Alabama Mental Health Coalition

Meeting minutes for July 8, 2025

Attendees (in person):

Daniel Adamek (Little Orange Fish)
Edward Becher (Invisible Warriors)
Annie Brasseale (VOP)
Rudolfo Chavez (SVDP)
Melissa Foster (UAH Nursing)
Tammy Goodwin (ALNG)
Maggie Howard (First Stop)
Nicole Leland (Blood Bought Ministries)
Keana Mitchell (NCAC)
Judith Moon (NAMI)
Tom O'Donnell (SVDP)
Leigh A. Sargent (New Vision)
Kendall Williams (First Stop)

Jessica Alford (First Stop)
Nancy Becher (Invisible Warriors)
Melissa Caldwell (Wellstone)
Roxanne Crawford (Bradford at Madison)
Jennifer Gentry (Long Leaf Centers)
Traci Harris (Elm Foundation)
Stephanie Jennings (Best Life Recovery)
Beth McAnally (NOMA)
Laurin Mitchell (Wellstone)
Krista Moulton (Therapist)
Letricia Ogutu (Wellstone)
Julie Schenck-Brown (Huntsville Police)
Mack Yates (SVDP/VOP)

Sarah Bailey (UAH RAN)
Jennifer Blazer (ALSP)
Selena Carter (Huntsville Hospital)
Gabriel Elias (Time Wellness)
Lucy Lollar (Ross)
Jessica Hays (Huntsville Hospital)
Kimberly Lamar (Magnolia Ranch Recov)
Heather McCaulley (VA)
Amber Moon (Unpack It Counseling)
Amy Nix (NCAC)
Alyssa Perry (Wellstone)
Audrey Smith (Tree of Life)

1. Welcome and Introductions – Daniel Adamek

Introductions are important because you need to be able find out who can help you.

2. Coalition Updates – Daniel Adamek

Daniel, Krista and Mack got together and using the Domain structure (introduced at the June 10, 2025 meeting), tried to identify gaps so we can work together to resolve them. Daniel is working on setting up a Google group to facilitate easier communication within the coalition. He wants to have a single mailing list.

There is now a PSA about the coalition airing on FM radio station WLRH, and it will announce our monthly meetings. We are also listed on the WLRH website's calendar.

Mack and Daniel attended the Human Relations committee meeting for the City of Huntsville. The topic was DEI-related issues and new challenges associated with recent executive orders and legislation.

Krista and Daniel focused on HR1 (the so-called "Big Beautiful Bill") which was signed into law on Friday, with potential impacts to be discussed in today's meeting.

Two members of the coalition went to Washington DC to attend the "Voices and Faces of Recovery" event. They met with Katie Britt and gave her a document concerning the importance of mental health funding. They encouraged her to visit Best Life Recovery in Huntsville and see how this bill affects them.

Nancy with Invisible Warriors (an organization that helps women that have PTSD and others) attended an event with Governor Ivey making June 12th a holiday in State of Alabama to recognize women veterans. They are now forming the Huntsville Women's Military Center which will be a hub for helping female veterans and service personnel to get jobs, transportation, day care, etc. They are also starting a clothes pantry so that women have a source for professional clothing for job interviews and such.

Mack is still working to get legislators to support a long-term mental health facility in North Alabama. Rex Reynolds and Nate Ledbetter (current speaker of the house) are interested in it.

3. Featured Presentation – Applying the 8 Domains: Preparing for the H.R.1 – One Big Beautiful Bill Act impact on Medicaid – Daniel Adamek

Daniel wants the coalition to work through the implications of HR1, i.e., the objective reality of the bill as it relates to the mission of the coalition. He used tools to identify items in the bill that affect the coalition, specifically Medicaid.

Daniel went through different sections of the bill and showed the impact to Alabama. The [presentation](#) and [briefing sheet](#) are on the website www.northalabamamentalhealthcoalition.org. Alabama's future Medicaid

growth will be limited. The funding for mental health crisis services is in jeopardy. Another section of the bill blocks incentives for Alabama Medicaid expansion and for All Help. It also reduces political liability of mental health access proposals. It will reduce funding, and as a result, over 100,000 Alabamians will fall through that gap.

No federal funds will be allowed to be used for Mental Health/SUD services unless there is a federal waiver. This impacts our mobile crisis and peer support groups. This increases the bureaucracy required to get mental health assistance and it is felt that the purpose was to get people off the roles to reduce the outflow of funds. This will decrease continuity of care.

HR1 is focused on verifying eligibility in order to reduce excess government spending. They are trying to make sure that people who are on Medicaid are qualified to be there. There will now be work requirements for eligibility. This is a big issue because there are some people who are unable to work. In order to verify who is eligible for Medicaid, it is going to require a full update of federal and local registers. If people are not registered properly, they will fall off the Medicaid role and it will be a bad situation. This is expected to cause a lot of problems for clients who have Medicaid. The bill introduces additional bureaucracy in order to obtain services.

Another section of the bill removes Federal funding of the new Alabama mobile crisis teams. This also threatens rural counties without mental health coverage.

It also bans emergency Medicaid for non-citizens. They will be banned from ERs.

It shifts the costs of safety net clinics (like Wellstone) to the State. The Huntsville Human Resource committee is looking into making sure that all people in the community (whether documented or not) are taken care of.

There will be a 5% of cap on Medicaid spending, and this will have an impact on the ability to get things done.

Stephanie talked specifically about women coming out of rehab and trying to find sober living. They need Medicaid to get help and SNAP assistance to eat. When someone is trying to get themselves stable, it is difficult to work or volunteer for 20 hours per week. Veterans who can't work or volunteer 20 hours per week will lose SNAP and benefits. Working 20 hours per week can also make you ineligible for some coverages and yet it is not enough money to live on and pay for private pay insurance. There is a gap and they are eliminating the bridge to cover the gap. The legislators are not personally affected, so they don't see the problems.

Veterans who are 100% disabled cannot work or volunteer and as a result, will lose all of their benefits.

Someone also brought up the fact that right now it takes up to two years to get disability. There are people who are unable to work, but they still have to wait in order to get disability.

Someone else brought up the fact that there is going to be a shortage of people who will be processing all of the paperwork to get things going. Where is the infrastructure to make this happen?

They made a work requirement in Georgia and it has been a real problem for people to verify that they are working. It varies how often it has to be done.

The VA is cutting 30,000 jobs and this will make everything worse for veterans needing assistance. Mack mentioned that things are already slow with Social Security and they are now going to cut back administrative staff, which will likely make things much worse.

Daniel said that this is the reality and we need to figure out how we are going to address the issues.

Someone asked how does this affects the children on Medicaid. The bill mainly affects adults over 18, but the adults who have children on Medicaid will be affected. If there is a requirement to work 20 hours, what about child care, transportation, and rent?

Krista feels like the stories in the community about the people who are directly affected by these changes are important to publicize. We need to bring awareness about how this affects everyone in the community. She asked a general question about what is the best way to advocate for change in the State. How do we organize to make a more powerful voice as a coalition? She suggested making a story about people who will be affected by this bill and use it as a tool to let people on the Hill know how it is affecting our community.

Advocating for policy change is so hard in this environment. Daniel feels that this organization will be most effective if we focus on the policies that affect the people we serve. Try to keep political ideology out of our work.

Someone mentioned that Senator Orr and Senator Givhan do support mental health and substance use disorder. They might be a good place to start. The personal stories are important and it does have an impact.

Krista suggested using the strategic approach to dealing with Medicaid changes and how they affect her clients. She put together a document that outlined the proposed changes and how we can come up with solutions. We need to create a Medicaid support network. Organizations may not have the staff to handle the Medicaid renewals. There is a potential to have a waiver for the Medicaid work requirement, especially if there is substance abuse. We need to be educated on HR1 and how it will affect our clients moving forward.

Daniel mentioned that we can evaluate an issue by looking at different aspects (or domains). This idea was presented at last month's meeting. Looking at a social problem by how it affects different domains is a way to categorize things. We want to try to figure out which members of the coalition can handle each of the different domains. (An explanation of domains is available on the resources page of the coalition website).

Any time there is a policy change or social issue, the 8 domains can be a helpful strategic method to evaluate and brainstorm responses. A Medicaid renewal support network is something we can consider to help navigate the changes. This would ripple across domain 7 (Community supports). We could reach out to church groups, libraries, and others to help educate the public. This could also affect domain 3 (Workforce development) by training and deploying community health workers and peer support specialists (among others) to help navigate Medicaid renewals.

Domain 8 (information systems and data) would be trying to be proactive before people fall off the Medicaid roles.

Using the 8 domains is a way to think through how to come up with responses to these policy changes.

Krista was curious if people in the meeting who deal with clients with Medicaid had discussed these changes in their organizations. The response was that because of the holiday it hasn't been talked about yet, but it will be happening this week.

Krista feels like the real need and challenge will be updating information systems. In order to prevent falling off the roles of Medicaid organizations need to look at their current roles, but it is only good if the State has updated their roles. Alabama is usually is behind the curve when updating technology and information systems. Alabama has not been a Medicaid expansion state. This is an opportunity to become an expansion State;

however, it has to be done by 2026, and that is not much time for the State to have all of the affected systems updated.

Someone asked (with the new policies coming along) if there is a benefit to becoming a Medicaid expansion state. Krista understands that the changes that are being made are essentially made to lower the costs of Medicaid by dropping people first. There is a possibility that we can push for expansion, but it needs to be done on a state level.

Krista admitted that she doesn't have the best grasp of how this is going to affect people, but there will have to be creative thinking about how to meet clients' needs. Krista and Daniel are working to help everyone understand how this new legislation will affect their organizations.

Daniel reiterated that all of this is on the website. He encouraged everyone to engage with the content of the website. He brought up that all the organizations we serve will have to be compliant to this new legislation and will have to understand what it will take to be compliant, as well filling in the gaps with those clients. We will have to be creative with our solutions.

4. Recap and Adjournment – Daniel Adamek

Daniel reminded people to use the resources on the website. He will try to take comments from today and put it on an action item.

UAH (in conjunction with UCP, Alabama Lifespan Respite and TARCOG) is sponsoring a Caregiving Conversation on **Tuesday July 22 at 1pm and 6pm**. They will talk about a recent film released on Caregiving on PBS and the caregiving resources in our community. It is free.

Wellstone has a committee book club called Well Read. Their next meeting is July 17th at Nativity Church and they will be discussing Brittney Spear's book "The Woman in Me". Information about the upcoming meeting is on the Wellstone Facebook page.

There is a "Back to school" workshop with the Kiss Your Brain Initiative. It will be **July 28th from 1-4:30pm** at the Richard Showers Center. They want to get kids ready for school and will be covering issues like dealing with bullying, the effects of bullying and identity challenges. She encouraged organizations to bring their children. They will feed the kids. For information contact Nicole Leland 614-674-4321 or www.bloodbought316@gmail.com

Daniel hopes the Google group will be set up soon and be able to have a calendar associated with it.

Next Meeting
Tuesday August 12, 2025
11:00 am at Wellstone

Minutes for past meetings can be found at:

<https://northalabamamentalhealthcoalition.org/stay-informed>