



Specialty Care Work Group Meeting Notes

April 14, 2026

9:00 a.m. - 10:30 a.m.

Paso del Norte Health Foundation

221 N. Kansas, 19th Floor

El Paso, Texas 79901

Meeting Room C

Attendees:

Rafael Aguilera
Merissa Amerete-Soliz
Sharon Butterworth
Josue Lachica
Betty Marín
Enrique Mata
Nicole Schiff
Rebecca Sanchez

Representing:

UTEP – REAS Center
El Paso County Juvenile Probation Dept.
Paso del Norte Center at Meadows Institute
Paso del Norte Center at Meadows Institute
El Paso Center for Children
Paso del Norte Center at Meadows Institute
Paso del Norte Center of Hope
Texas DFPS, Child Protective Services

E-Mail:

raguilera3@utep.edu
mamerete@epcountytexas.gov
sharonbutterworth@mac.com
jlachica@mmhpi.org
bmarin@epccinc.org
emata@mmhpi.org
nicole@pdncoh.org
Rebecca.sanchez@dfps.tx.gov

Welcome and Introductions

Nicole Schiff welcomed the group and called for introductions.

Overview of Last Meeting

Josue Lachica provided an overview from past work group discussion highlighting key areas for potential priority focus and thanking those who contributed data to help with strategic planning.

2030 Opportunities for Change

Mr. Mata briefly reviewed a list of data informed Opportunities for Change and related strategies. He explained that the feedback from work group partners is vital to recognize items identified as priority for the next few years, the final document will be a living document and would be posted the <https://healthypasodelnorte.org> website. The Opportunities for Change would be anchor actions while still allowing for opportunistic solutions to develop through Consortium Leadership Council gatherings. Mr. Mata asked that any edits or additions come to the Paso del Norte Center at Meadows Institute in the next few weeks. The group discussed the items presented. Mr. Mata responded to questions. **The slides related to this presentation are included with these notes.**

May 14th Consortium General Meeting

Josue Lachica and Mr. Mata shared that the next Consortium General Meeting is scheduled for Thursday, May 14th and will be held at the Endeavors Health and Wellness Center, 12135 Pebble Hills Blvd, El Paso, TX 79936.

A save the date flyer is included with these notes.

Eating Disorders

Mr. Mata provided an overview of the series of meetings a small task force has been having to try to identify program and policy options for a growing concern and gap related to eating disorder treatment, follow up, and support. He responded to questions from the group. The Meeting notes from the last meeting of the Eating Disorders Task Force are included with these notes.

Next Steps

- **Meeting Structure**

Nicole Schiff shared that attempts at developing a graphic representation of the continuum of care with areas where significant opportunities for improvement in policy and practice exist. She reinforced that future meetings would be called at least every other month with subcommittees meeting as needed.

Adjourn

Ms. Schiff adjourned the meeting at 10:25 am. **Presentation slides are included with these notes.**



Family Leadership Council Eating Disorders Task Force

Tuesday, April 7, 2026

From 8:30 – 10:00 am

Rio Vista Behavioral Health Hospital System

1390 Northwestern Dr

El Paso, TX 79912

Meeting Notes

Attendees	Representing	Email
Sharon Butterworth	Paso del Norte Center	sharonbutterworth@mac.com
Sandra Day	Paso del Norte Foundation	sday@PdNfoundation.org
Cathy Gaytan	El Paso Child Guidance Center	cgaytan@epcgc.org
Mario Herrera	Rio Vista Behavioral Health	marioherrera.herrera@riovistabh.com
Josue Lachica	Paso del Norte Center	jlachica@mmhpi.org
Jose Luis Lopez	Rio Vista Behavioral Health	JoseLuis.Lopez@Riovistabh.com
Dr. Jorge A Marquez	University of Texas at El Paso	jamarquez1@utep.edu
Amanda Munoz	El Paso Child Guidance Center	amunoz@epcgc.org
David Pineira	Rio Vista Behavioral Health	David.Pineira@Riovistabh.com

Welcome and introductions:

Enrique Mata started the meeting at 8:40 am and called for introductions from the group

Identifying program models that could be scaled into the region

Mr. Mata reflected on the past two meetings reinforcing that while the numbers of youth diagnosed with and eating disorder might be low, the need for services in a region as large as the Paso del Norte region is just as important to make available as Level I Trauma services. It is likely that numbers of individuals battling this type of condition are higher than might be recognized. The group discussed the need for more accurate data in the region.

- *Workforce training programs:* Since the last meeting no promising workforce training programs were identified that could be scaled into the region. The one program discussed was Cognitive Behavioral Therapy – E (CBT-E) Are best or promising practice with a base of evidence that the programs work to

address an aspect of eating disorders. The [National Center of Excellence for Eating Disorders](#) was identified as a resource as well as the [National Traumatic Stress Network](#) and the [National Eating Disorders Association](#) (NEDA). Mr. Mata and Josue Lachica will continue the search for programs to scale into the region such as credential or certification type programs for workforce or education support for individuals and families. David Pineira

- *Continuum of Care:* Cathy Gaytan, Amanda Munoz and Mr. Pineira shared their experiences with individuals identified with eating disorders. They shared the local challenges with outpatient support for these conditions once the individual leaves inpatient care. It was identified that these conditions require the full network of medical and behavioral wraparound support. A first step could be to strengthen the local continuum of care by identifying those professionals who currently have knowledge and skill to address the needs of the clients. The group discussed the different professions that encounter eating disorder conditions including pediatricians, child psychiatrists, psychologists, counselors, school faculty, and others. It was recognized that pathways to support are fragmented and in need of improved coordination. For example, individuals with chronic disease, such as diabetes, especially youth and young adults may not be diagnosed with an eating disorder, yet may be in need of an integrated approach for the most effective long term positive outcomes. The future needs for improved treatment and support for those who are taking GLP1 medications and those with bariatric related surgical history. Mr. Mata and Mr. Lachica will work on a framework to merge the current continuum(s) of care for eating disorders (e.g., prevention - timely and accurate diagnosis - inpatient, partial hospitalization, intensive outpatient, and outpatient treatment - recovery maintenance) and include the workforce skills and knowledge or licensure requirements needed to provide service at each level.
- *Family Support:* The group discussed the importance of support for families and identifying any existing group or local parents with lived experience who would be willing to explore developing a support group. It was identified that NAMI El Paso might be able to help in connecting families, and perhaps in building a local alliance with NEDA. Joe Lopez, as a NAMI El Paso Board Member will reach out to Isidro Torres to explore possibilities.
- *Policy Approaches:* The group discussed the current challenges with addressing the complex need for appropriate reimbursement and safety net support. There is a need to improve reimbursement options, not just for Medicaid, but all third party payors and for all levels of treatment within the eating disorder continuum of care. There is also a need to create lasting funding streams for training and credentialing of individual and organizational providers. The group discussed the challenges with current program reimbursement. For example, Medicaid currently has no option to gain additional reimbursement for more complex inpatient care needed when an individual is identified with an eating disorder. The current reimbursement only allows for a rate that covers a 7-10 day stay. There is also a need to identify more specific diagnoses as there are different types of eating disorders and different plan of care approaches for each.

- *Additional representation on this Task Force:* The group discussed who else might need to be included as we continue exploring this arena. The following were mentioned:
 - Texas Tech HSC Child Psychiatry representative
 - VA and Active Duty military representation to identify their continuum of care for this condition.
 - Dr. Betty Richeson, Psychologist in El Paso who has been treating eating disorders in the region for more than 20 years.

To Do by the next meeting:

- Seek out program models that could be scaled into the region
- Seek out policy opportunities such as the status of Medicaid Reimbursement and possible improvements through outliers or other waiver options.

Next Meeting

The Next Meeting is targeted for Tuesday, June 2nd at 8:30 am at Rio Vista Behavioral Health unless otherwise indicated.

Meeting adjourned at 9:50 am

Family Leadership Council Specialty Care Work Group As of May 20, 2026

Attendee	Representing	Email
Rafael Aguilera	UTEP – REAS Center	raguilera3@utep.edu
Merissa Amerete-Soliz	El Paso County Juvenile Probation Department	mamerete@epcountytexas.gov
Tanya Berry	Texas DFPS Child Protective Services	tanya.berry@dfps.texas.gov
Sharon Butterworth	Paso del Norte Center at Meadows Institute	sharonbutterworth@me.com
Cynthia Henry	Paso del Norte Center of Hope	cynthia@pdncoh.org
Josue Lachica	Paso del Norte Center at Meadows Institute	jlachica@mmhpi.org
Claudia Lopez	UTEP – REAS Center	cilopez16@utep.edu
Beatriz Marin-Olivarez	El Paso Center for Children	bmarin@epccinc.org
Enrique Mata	Paso del Norte Center at Meadows Institute	emata@mmhpi.org
Natalie Mendez	CASA of El Paso	nmendez@casaofelpaso.org
Olivia Narvaez	EPISD Social Worker-McKinney-Vento Liaison	oanarvae@episod.org
Sandra Oviedo-Ramirez	UTEP – REAS Center	sloviedoramirez@utep.edu
Mia Reza	CASA of El Paso	mreza@casaofelpaso.org
Rebecca Sanchez	Texas DFPS, Child Protective Services	Rebecca.sanchez@dfps.tx.gov
Nicole Schiff – Chair	Paso del Norte Center of Hope	nicole@pdncoh.org
Beth Senger	El Paso Center for Children	bbbsofep@yahoo.com bsenger@epccinc.org
Ivonne Tapia	Aliviane, Inc.	itapia@aliviane.org
Kathie Valencia	El Paso Center for Children	kvalencia@epccinc.org
Guillermo Valenzuela	Aliviane, Inc.	gvalenzuela@aliviane.org

PLEASE JOIN US

FOR THE "CONSORTIUM 2030" GENERAL MEETING

Thursday, May 14, 2026

8:30 am - 11:30 am,

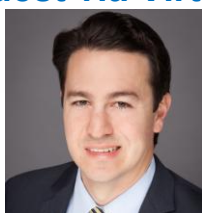
At

Endeavors Health and Wellness Center

12135 Pebble Hills Blvd

El Paso, TX 79936

With Special Guest via Virtual Connection:



**Nelson Jarrin, JD, Senior Vice President of State Policy
for The Meadows Mental Health Policy Institute**

and

Consortium progress Presentations by Community Leaders including:



Tracy J. Yellen

President and CEO

*Paso del Norte Community Foundation
Paso del Norte Health Foundation*



Rene Hurtado

Chief of Staff

Emergence Health Network



The Honorable Anna Perez

Judge of the 41st District Court



Ivonne Tapia

CEO

Aliviane, Inc.

[TO REGISTER CLICK HERE](#)

We look forward to seeing you all there!

For Questions Contact

Enrique Mata (915) 253-0287 or Josue Lachica jlachica@mmhpi.org

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**Family
Leadership Council**
OF THE EL PASO BEHAVIORAL HEALTH CONSORTIUM

FLC Specialty Care Meeting April 14, 2026

Agenda:

- 🌸 Welcome and Introductions
- 🌸 Overview Since Last Meeting
- 🌸 2030 Opportunities for Change
 - 🌸 May 14th Consortium General Meeting at Endeavors
- 🌸 Eating Disorders
- 🌸 Next Steps
 - 🌸 • Meeting Structure
- 🌸 Adjourn

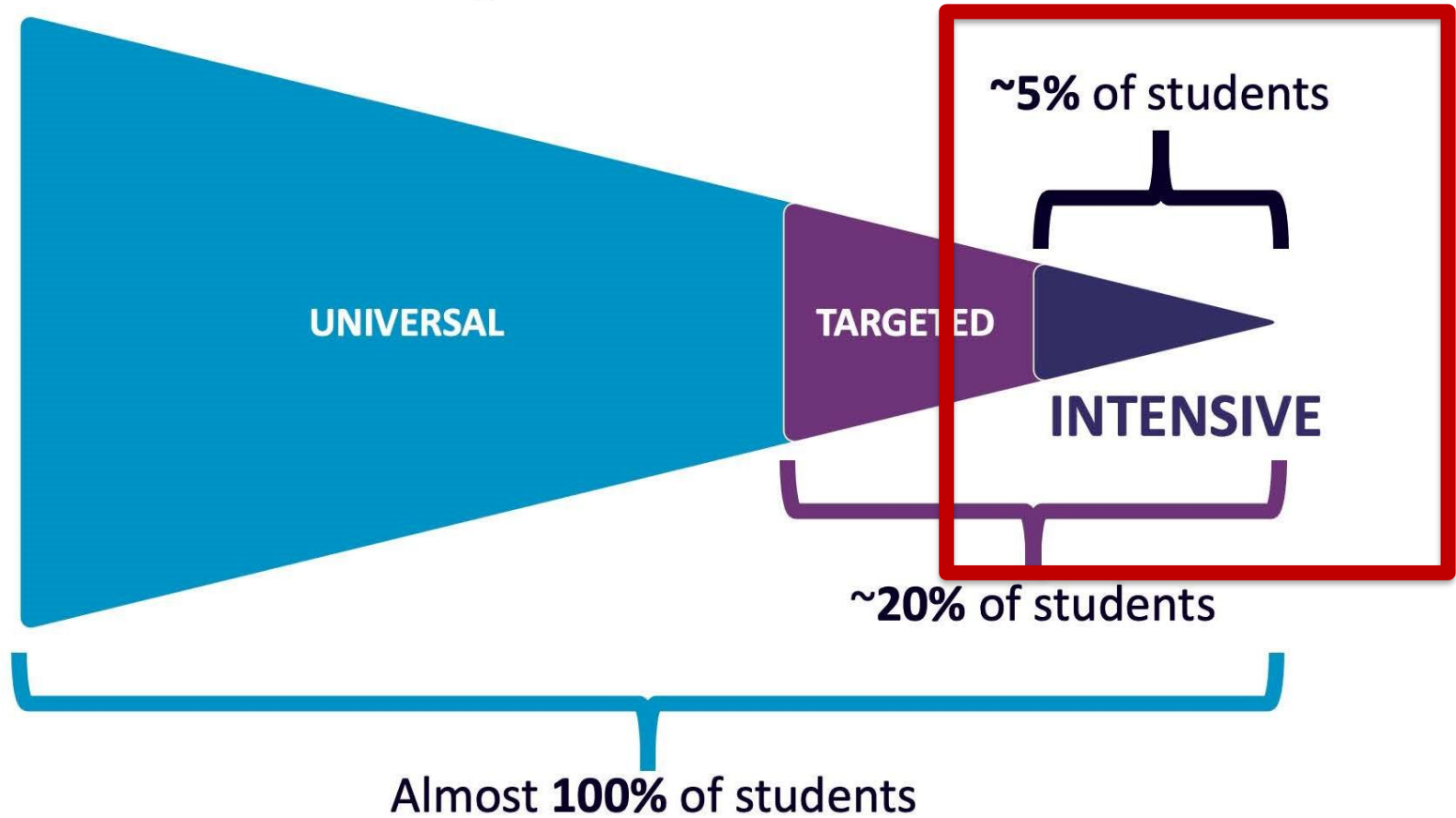


Welcome and Introductions

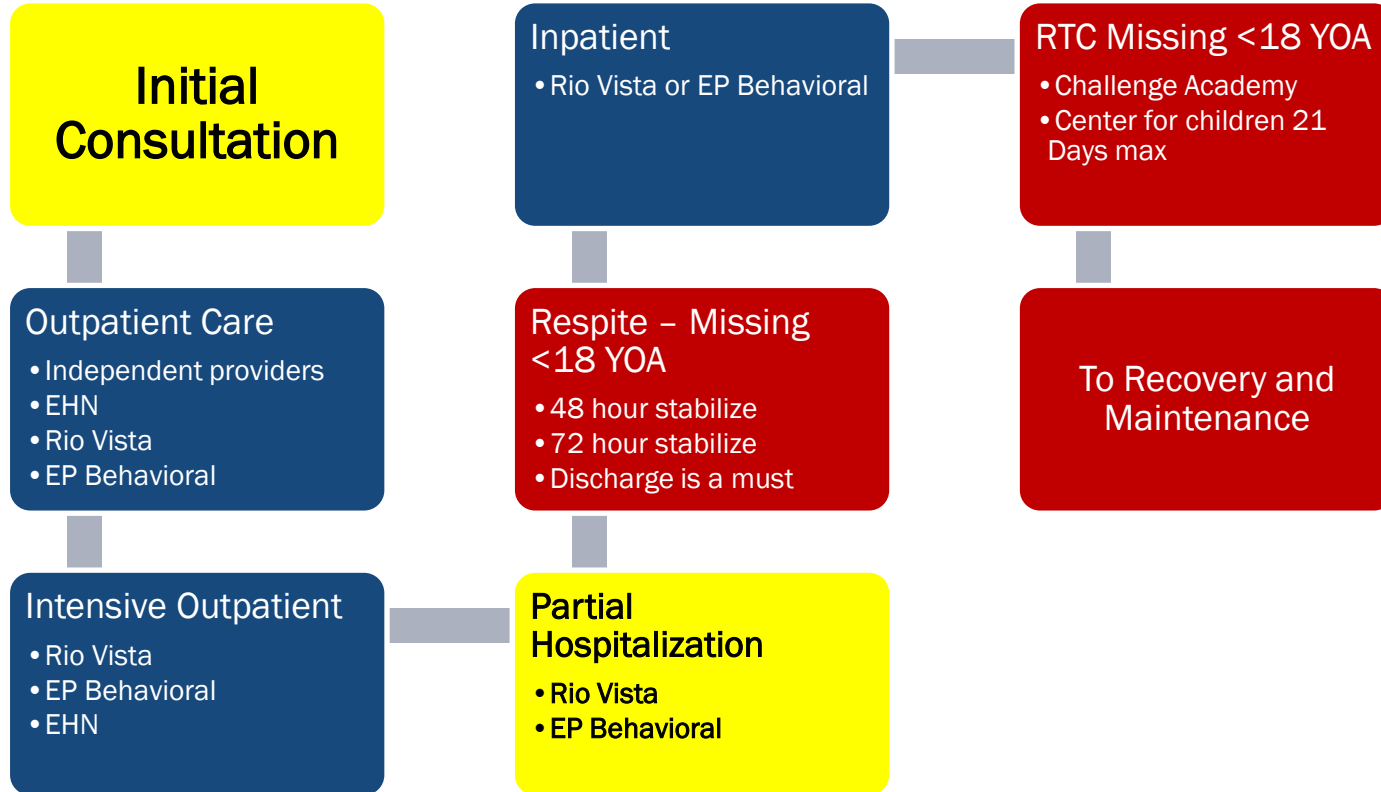


Overview Since Last Meeting

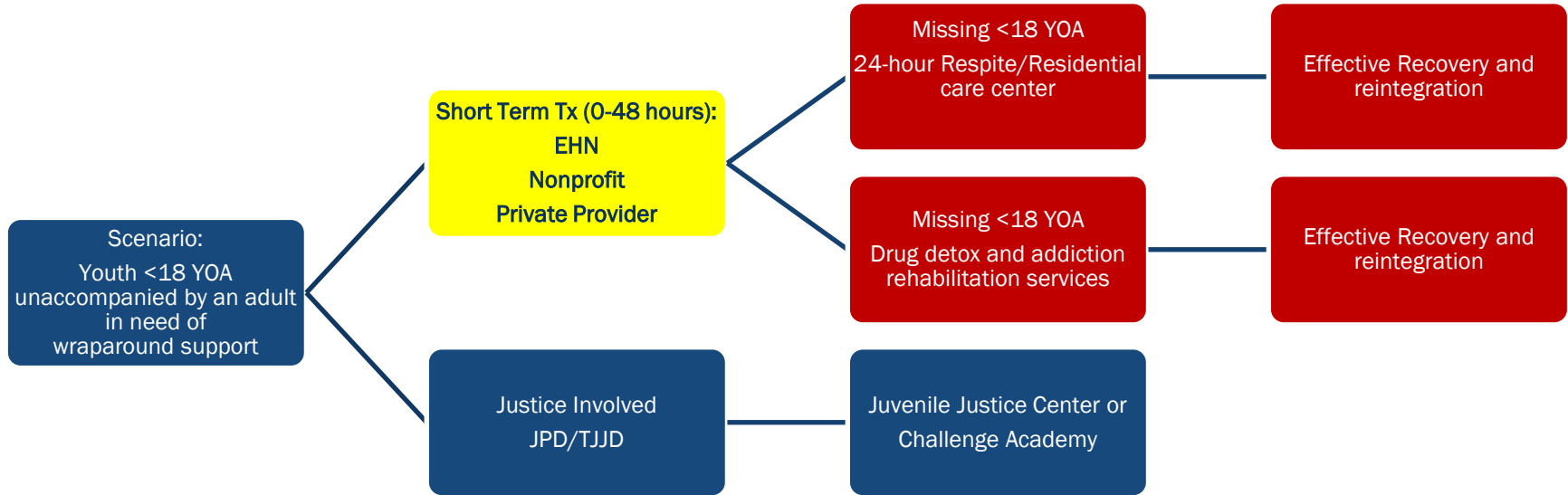
Figure 2: The MTSS Tiers



Treatment Continuum Of Care Under 18 Years of Age



Gap in Child and Youth Mental Health and Substance Use Services



Youth SIM Behavioral Health Supports

PUBLIC HEALTH

Intercept 00 COMMUNITY PREVENTION & INTERVENTION, BEHAVIORAL HEALTH SERVICES

Youth/Family Programs

- Lee Moor Children Home
- Ciudad Nueva Community Outreach
- Community Solutions of El Paso
- El Paso Child Guidance Center
- Child Crisis Center of El Paso
- El Paso Center for Children
- NAMI El Paso
- Emergence Health Network

Afterschool/Mentor/Career

- UTEP's El Paso Collaborative for Academic Excellence (Opportunity Youth Initiative)
- Big Brothers/Big Sisters
- Faith-based Institutions
- Boys & Girls Club
- YMCA, YWCA and Community Centers
- Workforce Solutions
- Emergence Health Network

Housing

- El Paso Coalition for Homeless
- Housing Opportunity Management Enterprises (HOME)
- Multiple Shelters (full list at epchomeless.org)

Prevention/Collaboratives

- Family Leadership Council (& Consortium)
- Paso del Norte Health Foundation : Smoke Free EP
- System of Care Grant
- CRCG Referral/Diversion- JPD referrals for youth under 11
- JPD Prevention and Intervention Program 30-45 day, 6-17-year-olds
- Youth Mental Health First Aid
- Emergence Health Network

Behavioral Health & EHN

- Crisis Lines (988)
- Warm Lines/Resource Lines
- MCOT (see Intercept 1)
- Intensive Services: YES Waiver, Multisystemic Therapy, Level of Care 4
- Coordinated Specialty Care for First Episode Psychosis
- Crisis Extended Observation Unit 24/7
- Youth & Family Partners

Counseling Services

- Pinnacle Social Services
- Texas Tech University Health Sciences Center
- New Leaf Counseling
- Counseling Center of Expressive Arts
- Family Services of El Paso
- Living Hope Christian Counseling Service
- Catholic Counseling Services, Inc.
- Amistad Family Counseling Center
- Steven A Cohen Military Family Clinic Endeavors
- La Familia del Paso, Inc.

Case Management

- Methodist Children's Home EP Outreach
- El Paso United Family Resiliency Center
- Project Amistad
- La Mente Behavioral Health
- El Paso Child Guidance Center
- Emergence Health Network

Youth SUD & Peer Supports

- Aliviane Outpatient & Youth Services
- National Alliance on Mental Illness (NAMI)
- Children's Grief Center of El Paso
- Sovereign Health of Texas
- Emergence Health Network

Medical/BH Supports

- Project Vida
- Centro San Vicente
- Centro de Salud La Fe
- University Medical Center
- El Paso Behavioral Health
- PEAK Behavioral Hospital
- Northeast Counseling Services
- Behavior Health Support Services
- El Paso Psychiatric Center
- RVBH PRISM Program
- Emergence Health Network

Child Welfare/Family Crisis

- CASA
- Paso del Norte Center of Hope
- Center against Sexual and Family Violence
- Advocacy Center for the Children of El Paso
- El Paso Center for Children Runaway Center Against Family Violence Family Resource Center
- El Paso Human Services, Inc.
- Sexual Trauma and Assault Response Services (STARS)

Intercept 0 SCHOOLS

School-based Supports, Systems, and Services:

YISD | SISD | EPISD

Exclusionary School Discipline & Alternative Schools

YISD | SISD | EPISD

INTERCEPT 1: LAW ENFORCEMENT



 **2030 Opportunities for Change**

 **May 14th Consortium General Meeting at
Endeavors**

Family Education and Support

Opportunity for Change: Individuals and families will have the information needed to understand and address factors that contribute to a nurturing environment children and youth.

- **Strengthen and maintain an efficient early childhood resource referral system** that promotes optimal healthy development services for children ages 0-8 years of age in collaboration with “Help Me Grow El Paso” Partners.
- **Increase availability of information and resources for families** to understand and address the developmental health and behavioral well-being of infants and children.
- **Expand and enhance knowledge and skills of community health professionals** to practice “Family Engaged Developmental Monitoring” to support the universal identification of developmental concerns and connection to a network of community-based supports.
- **Expand and enhance collaboration with Strong Families Partners** to improve family cohesiveness and child abuse prevention with emphasis on 5 Protective Factors: Parental resilience, Social connections, Knowledge of parenting and child development, Concrete support in times of need, Social and emotional competence of children.

First Connection - Primary Care Services

Opportunity For Change: Expand and Enhance Integrated and Collaborative Care models for mental healthcare and related support access in the pediatric and primary care settings.
Strategy: Expand and enhance Integrated and Collaborative Care models for mental healthcare and related support access in the pediatric and primary care settings.

- **Increase availability of tools and trainings for community health professionals** on models best suited to their provider practice.
- **Increase the number of pediatric and primary care providers connected with the Child Psychiatry Access Network (CPAN)** to more than 80%.
- **Clearly identify mental health and substance use care** and support that can be coordinated or directly **provided in the primary care setting.**
- **Improve coordination of mental health and substance use specialty care** with Integrated Primary Care.

Specialty Care Services

Opportunity for Change: Expand and enhance mental health and substance use care and support that is beyond the scope of practice and cannot be directly provided within the primary care setting.

- **Increase availability of well-established evidence-based interventions for youth with more severe behavioral problems related to willful misconduct and delinquency.**
- **Increase availability of providers who are credentialed to provide specialty services** that have been shown to have benefit in treating and supporting children and youth with specialty care needs.
- **Expand and enhance Multisystemic Therapy and other wraparound programs to promote timely and comprehensive support for children with complex needs** to prevent entry into the Foster Care or Justice systems.
- **Improve residential support options to prevent children from inappropriately leaving for residential treatment out of town**, including increasing compensation for foster parents and reimbursement options for nontraditional programs and expanding intensive Medicaid services to support foster families.

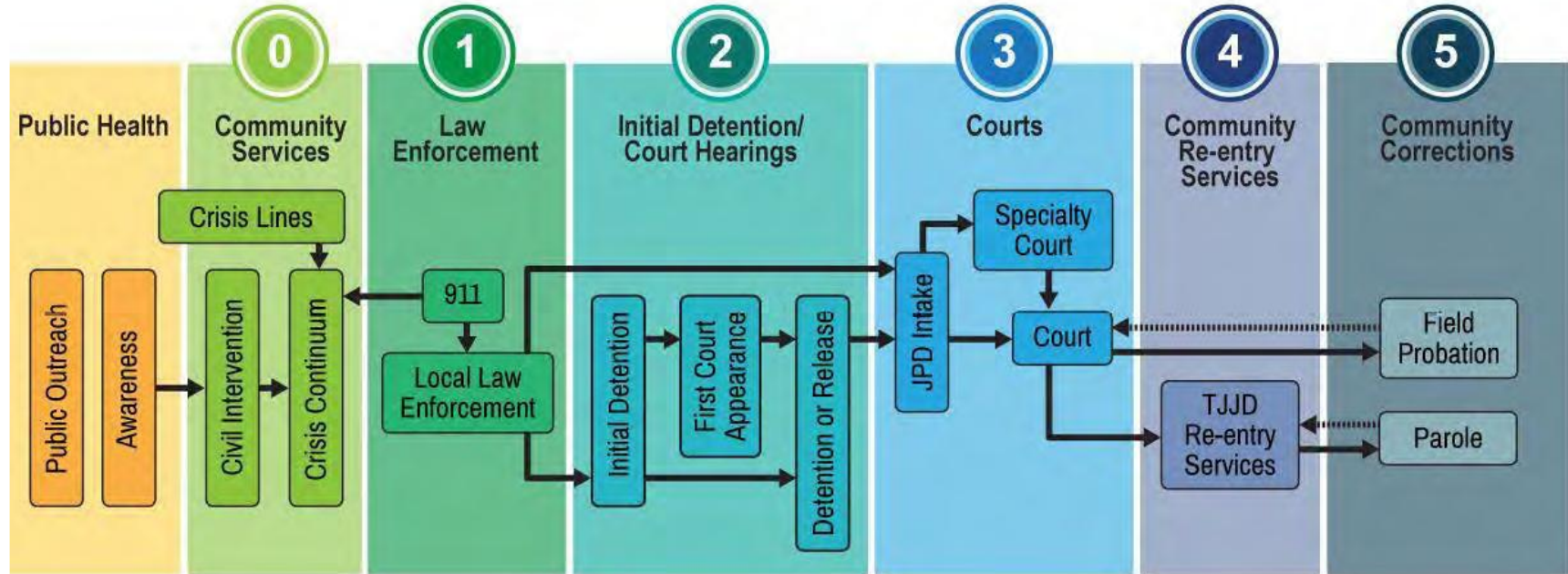
School and Out of School Time Programs

Opportunity For Change: Expand and enhance programs that promote emotional well-being, nurturing environments, and prevention of adverse childhood experiences.

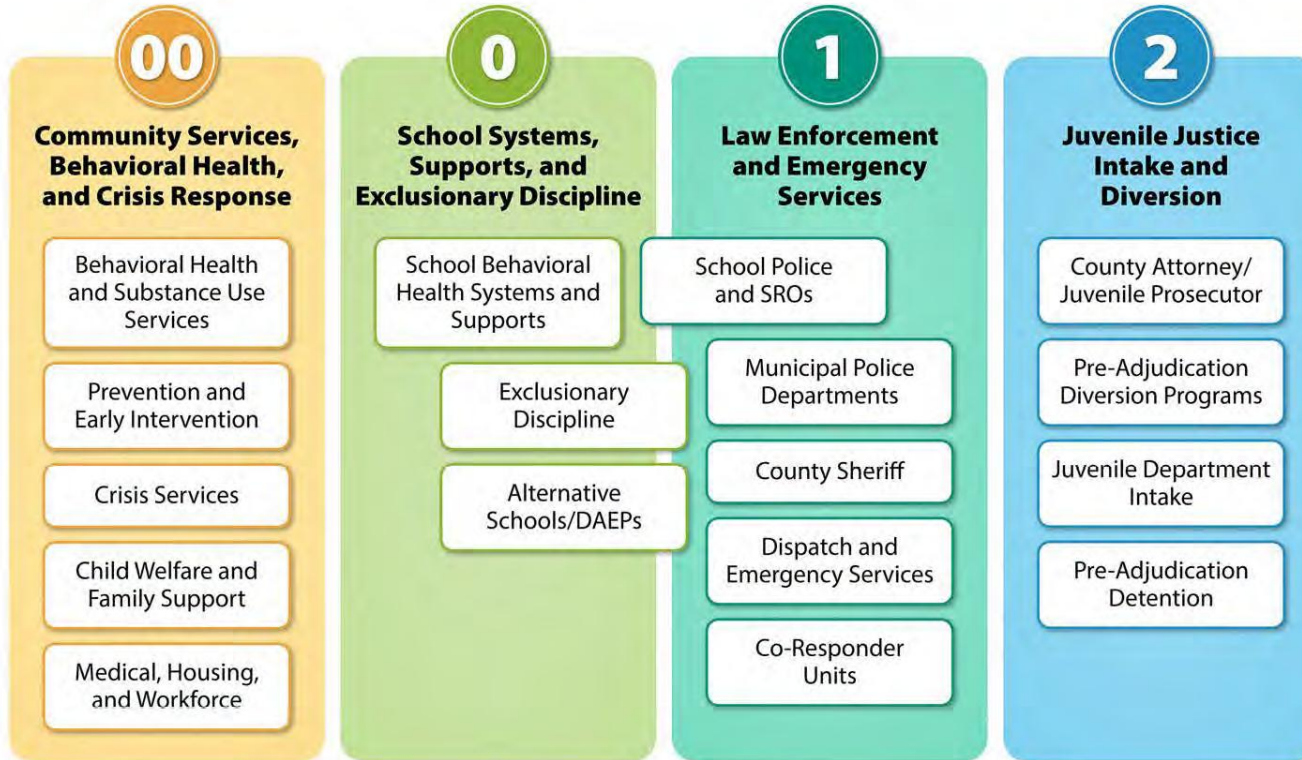
- **Increase capacity and collaboration among schools and community organizations** for a robust Multi-Tiered System of Supports model as endorsed by the Texas Education Agency's Long-Range Plan.
- **Increase promotion and availability of interventions that promote kindness and caring**
- **Strengthen Region 19 support and related school Liaison functions**
- **Expand and enhance promising practice school-based coordination of care (e.g., TCHATT).**
- **Increase school coordination with community services to provide emotional well-being (e.g., resilience support, universal upstream interventions)** and timely access to screening and access to treatment (e.g., recognizing mental health treatment access as an excused absence).

Mapping Out Road Maps For Success

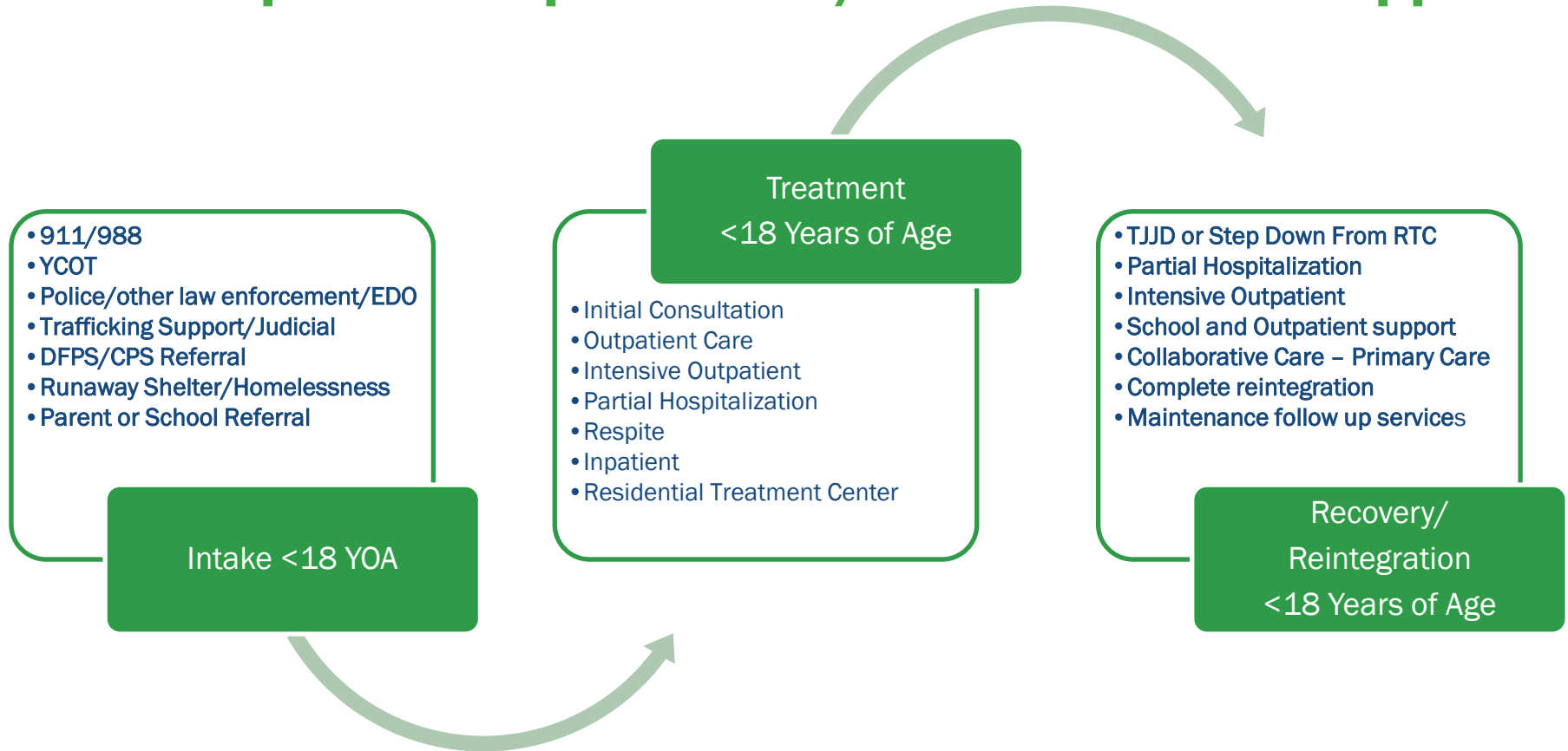
Youth Sequential Intercept Model



Youth SIM Community Services



Roadmap For Complex needs/Crisis Care and Support



Crisis Entry Into Specialty Care System <18 YOA

911/988

YCOT

Police/
other law
enforcement/
EDO

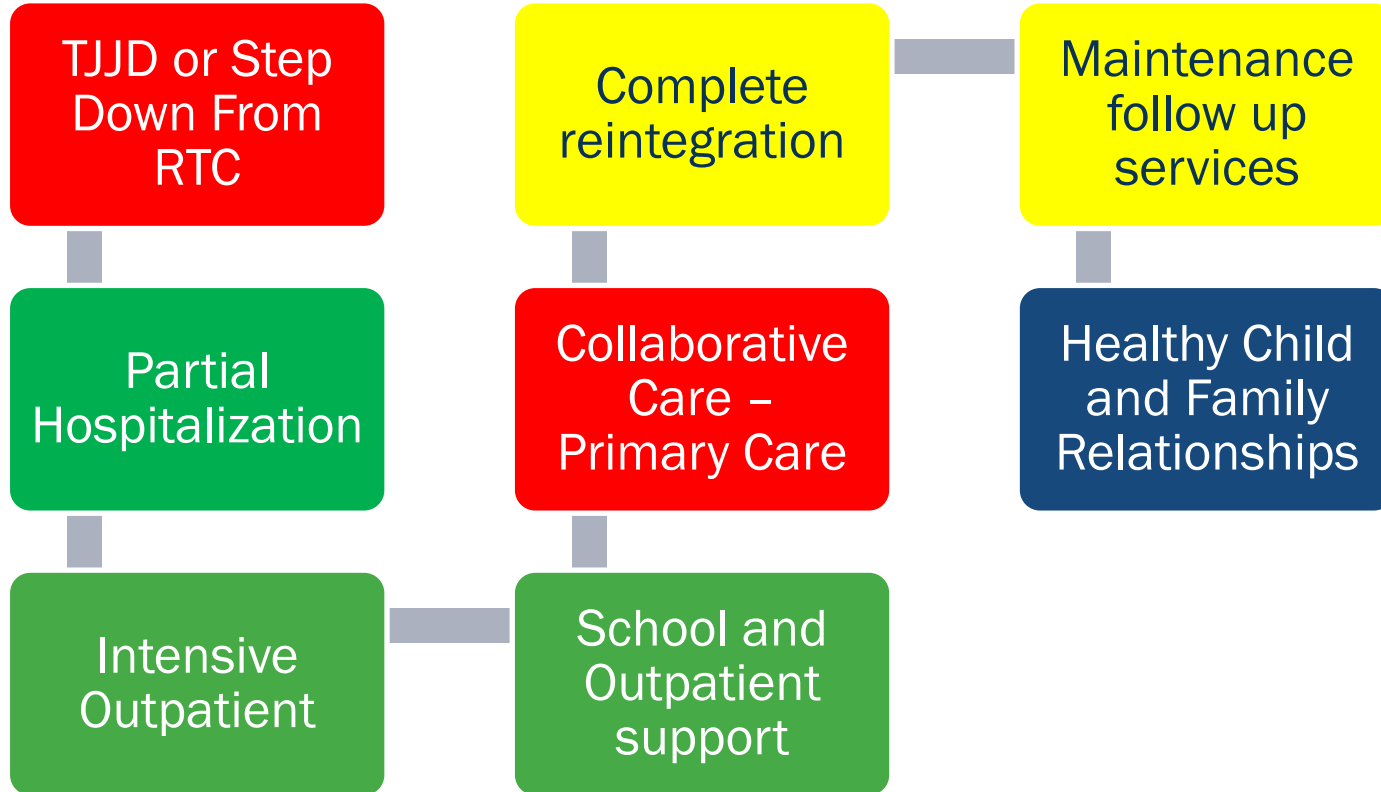
Trafficking
Support/
Judicial

DFPS/CPS
Referral

Runaway
Shelter/
Homelessness

Parent or
School Referral

Discharge to Recovery Continuum Of Care





Progress Indicators

Since July 2022

FLC – First Connection (Primary Care)

Opportunity For Change: Expand and Enhance Integrated and Collaborative Care models for mental healthcare and related support access in the pediatric and primary care settings.

Strategy I -Clearly identify mental health and substance use care and support that can efficiently and effectively be coordinated or directly provided within the primary care setting. For example, pediatrician's and staff trained for assessment and care planning to address early child anxiety symptoms providing care and support or coordinating with counseling and specialty care as needed (e.g., CPAN, Collaborative Care Managers).

- The PdN Center has been offering Collaborative Care Educational Sessions to primary care providers to share the reimbursement opportunities with Behavioral Health Care Manager support.
- Texas Tech Health Sciences Center connects with providers to share CPAN and Peri-Pan opportunities.

FLC - Crisis Care

Opportunity For Change: Expand and Enhance Existing or Develop a non-forensic cross agency mobile crisis team model to respond to a range of urgent needs outside the normal delivery of care.

Strategy I - Analyze what types of needs are unique to children, youth, and families and how response to those needs must be designed. A definition for the phrase "range of urgent needs outside the normal delivery of care" will be necessary with focus both on what the particular needs are and then why they lie outside the "normal delivery of care".

Efforts to expand Youth Crisis Outreach Teams, 9-1-1 and 9-8-8 coordination, and other interventions to improve accuracy and precision in response to crisis for youth and adults.

Strategy II - Explore community capacity to serve those experiencing First Episode Psychosis (FEP) as part of the child, youth, and family service array.

First Episode Psychosis Programming now exists, and service delivery is coordinated with crisis care systems

FLC - Specialty Care

Opportunity For Change: Reframe the concept of mental health and substance use specialty care as secondary to Integrated Primary Care (e.g., 25% of care).

Strategy I -As with primary care, clearly identify mental health and substance use care and support that is beyond the scope of practice and cannot be directly provided within the primary care setting. For example, serious mental health conditions that require an intensive coordinated approach with psychiatry, psychology, counseling, or substance use specialty care.

Work to bring better therapeutic approaches to the region continues. For example:

- There is improved availability of options to address trauma and grief related conditions.
- There is also expanded availability of programs such as Multi-Systemic Therapy

FLC - Specialty Care

Opportunity For Change: Reframe the concept of mental health and substance use specialty care as secondary to Integrated Primary Care (e.g., 25% of care).

Strategy II - Expand and enhance availability of well-established evidence-based interventions for youth with more severe behavioral problems related to willful misconduct and delinquency (e.g., increase availability of child psychiatrists and child psychologists, increase availability and effective use of collaborative care model options (psychiatry, counseling, and primary care services)).

- Schools are improving training, support and availability of programs to divert youth with misconduct and delinquency.
- The Texas Tech Health Sciences Center at El Paso has increased the number of Child Psychiatry residents, fellows and practicing psychiatrists in the region.
- Organizations such as EHN, El Paso Child Guidance Center, Aliviane, El Paso Center for Children, El Paso Children's Grief Center and others are increasing diversity of therapeutic approaches for youth and families.

FLC - Specialty Care

Opportunity For Change: Reframe the concept of mental health and substance use specialty care as secondary to Integrated Primary Care (e.g., 25% of care).

Strategy III - Utilize the Multisystemic Therapy (MST) Rider to promote timely wraparound support for children with complex needs to prevent entry into the Foster Care or Justice.

The Juvenile Justice Center and area mental health providers are working to improve options to divert youth away from the justice system.

While MST is a good program, it is not always the most appropriate for the situation due to its required rigor.

More work in this area is needed.

FLC – Recovery Care – Strategies folded into First Connection and Specialty Care as appropriate

Opportunity For Change: Improve integration of acute inpatient care within the broader health system continuum of care (e.g., appropriate, and well-coordinated transition care and support from inpatient to outpatient to Integrated Primary Care settings).

Strategy I - Expand on-site integrated primary care (IPC) capacity. (e.g., upgrade technology and HIE, Explore Child Psychiatry Access Network (CPAN) scaling).

The CPAN Program has expanded and now includes Peri Pan.

Strategy II - Increase membership within the PdN Health Information Exchange, especially large provider networks and behavioral health hospitals (e.g., Rio Vista and El Paso Behavioral Hospitals).

There are now over 400 clinical locations signed on that represent about 50 organizations/integrations.

FLC - Emotional Well-Being

Opportunity For Change: Expand and enhance programs that promote emotional well-being, nurturing environments, and prevention of adverse childhood experiences.

Strategy I - Increase capacity and collaboration among schools and community organizations for a robust Multi-Tiered System of Supports model as endorsed by the Texas Education Agency's Long-Range Plan.

Region 19 has increased its efforts to train “Tier II Teams” in recent years to be prepared for students who might show early signs and symptoms of mental health conditions thereby creating a timely referral system within schools.

FLC - Emotional Well-Being

Opportunity For Change: Expand and enhance programs that promote emotional well-being, nurturing environments, and prevention of adverse childhood experiences.

Strategy II - Increase promotion and availability of interventions that promote kindness and caring (e.g., random acts of kindness activities).

Efforts to increase Universal Level program interventions are part of MTSS efforts within schools.

Data on specific emotional well-being programs or other kindness activities being promoted in school and during out of school activities is needed to confirm progress to date.

FLC - Emotional Well-Being

Opportunity For Change: Expand and enhance programs that promote emotional well-being, nurturing environments, and prevention of adverse childhood experiences.

Strategy IV - Expand and enhance promising practice school-based coordination of care (e.g., TCHATT).

- The Texas Child Health Access Through Telemedicine (TCHATT) program is now signed up with 32 Districts in the 16 county service region.
- There is improved capacity now including the option for medication management psychiatry support.
- Referrals from September 2024 to September 2025 have doubled.
- The Team is now equipped with a direct connection option to support the school counselor.
- Parents can connect through the TCHATT phone line. The process will still connect with the school designated officials who are charged with tracking the youth progress.
- The TCHATT Team is also working to accommodate situations where youth supervision during therapeutic sessions is optional.



May 14th Consortium General Meeting – Morning Event

At Endeavors Health and Wellness Center



Other Business and Next Meeting



Next Meeting Target:

Tuesday, May 12th at 8:30 am



 **ADJOURN**