

ALCOHOL, DRUG ADDICTION AND MENTAL HEALTH SERVICES BOARD OF CUYAHOGA COUNTY

PLANNING & OVERSIGHT (P&O) COMMITTEE MINUTES

APRIL 11, 2012

Committee Chair, Pythias Jones, M.D., called the meeting to order at 4:00 p.m. Dr. Reginald C. Blue read aloud the Committee Mission Statement: *"The Planning and Oversight Committee, in cooperation with all partners, advocates for and monitors programs, policies and practices which are continually improved to meet the needs of consumers, their families and the community."*

Committee Members Present: David E. Biegel, Ph.D., Reginald C. Blue, Ph.D., J. Robert Fowler, Ph.D., Pythias Jones, M.D., Rev. Charlotte Still Noble, Harvey Snider, Ericka Thoms, Mary R. Warr, Anngela Williams
Absent: Leslie Nye O'Donnell, Mary Step, Ph.D.

Board Staff Present: William M. Denihan, C.E.O., Carole Ballard, Ada Cancel, Vivian Catchings-El, Danei Chavez, John Coleman, Craig Fallon, Cheryl Fratalonie, Dr. John Garrity, Myra Henderson, Judy Jackson-Winston, Carol Krajewski, Linda Lamp, Chris Morgan, Michelle Myers, Laura Simmons, Star Sizemore-Rice, Thomas Williams, Leshia Yarbrough-Franklin

1. APPROVAL OF MINUTES

The Planning and Oversight Committee minutes of March 14, 2012, were approved as submitted.

2. ODMH CAPITAL GRANT: ADULT CARE FACILITIES

Michelle Myers, Residential Specialist, reported that the Ohio Finance Agency has awarded \$1 million to the Ohio Department of Mental Health (ODMH) from the Ohio Trust Fund to pay for critical repairs to Adult Care Facilities (ACF) across the state. All project proposals are to be submitted to ODMH. The ADAMHS Board will not be involved since ODMH will handle the applications and award the dollars; however, it was noted that some of Cuyahoga County's ACF's may benefit from these funds. Of the approximate 600 Adult Care Facilities throughout Ohio, Cuyahoga County has the largest number of licensed ACF's--currently 179.

3. RECOMMENDED PROVIDER FOR THE PROVISION OF MENTAL HEALTH SERVICES IN THE JUVENILE DETENTION CENTER

Vivian Catchings-El, Children's Program Specialist, noted that the Mental Health Services in the Juvenile Detention Center Project is designed to provide 24 hour access, 7 days/week relative to mental health emergencies and psychotropic medication management in addition to providing training and support to Cuyahoga County Juvenile Detention Center staff. A mental health professional is on call to the staff and youth at the Juvenile Detention Center.

A Request for Proposal (RFP) was released on 2/6/12. Four proposals were submitted. The proposals were reviewed on March 19, 2012 by the RFP Review Committee comprised of ADAMHS Board and Juvenile Court staff. As Catholic Charities Services Corporation received the highest ranking, the recommendation was made and submitted to William M. Denihan, Chief Executive Officer. Board staff recommends awarding Catholic Charities Services Corporation a contract to provide mental health services in the Detention Center for the time period of May 1, 2012 to December 31, 2012; the amount of the contract is \$150,000.00.

Ms. Warr noted an interest in receiving a follow-up report on this program.

Follow-Up: Mr. Denihan concurred with the suggestion and noted that an effort will be made to determine the feasibility of a mid-year report regarding this program.

Motion to recommend approval of Catholic Charities Services Corporation, to provide Mental Health Services in the Juvenile Detention Center to the Finance & Operations Committee.

MOTION: C. Noble / SECOND: R. Blue / AYES: D. Biegel, R. Blue, R. Fowler, C. Noble, H. Snider, E. Thoms, M. Warr, A. Williams / NAYS: None / ABSTAIN: None / **Motion carried.**

4. REQUEST FOR PROPOSAL (RFP) FOR 2012 INDEPENDENT PEER REVIEW

Dr. John Garrity, Director of Evaluation & Research, noted that the ADAMHS Board is seeking to implement a comprehensive Independent Peer/Utilization Review as required annually through Ohio Department of Alcohol and Drug Addiction Services (ODADAS) regulations. This year's review will assess the quality, appropriateness and efficacy of Detoxification services within the Cuyahoga County Service Delivery System. The vendor selected will conduct a full provider review to include a representative sampling of clinical records to determine the quality and appropriateness of detoxification services from both an agency and service system perspective. This includes on-site record review at provider locations. The amount of the contract is not to exceed \$15,000.00.

Following the Independent Peer Review, results will be presented to the Board and provider system, including a comparative analysis with previous results as well as recommendations for changes and improvement.

Motion to recommend approval of the issuance of a RFP for the 2012 Independent Peer Review to the Finance & Operations Committee. MOTION: E. Thoms / SECOND: R. Blue / AYES: D. Biegel, R. Blue, R. Fowler, C. Noble, H. Snider, E. Thoms, M. Warr, A. Williams / NAYS: None / ABSTAIN: None / **Motion carried.**

5. LAPSED MEDICAID REPORT

Ms. Starlette Sizemore-Rice, Public Benefits Administrator, utilized a power point presentation to provide an overview of lapsed Medicaid and to illustrate the progress the system has made towards maintaining Medicaid entitlements.

Lapsed Medicaid refers to the discontinuation of Medicaid coverage. This issue became an acute problem with consumers who enter the state mental health hospital and have the possibility of qualifying for Medicaid benefits. Due to recent significant increases in the number of lapsed Medicaid cases, the ADAMHS Board has been monitoring this issue. Thomas Williams, Data Research Specialist, elaborated on report charts and their implications. (Details are included in the report attached to the original minutes in the Executive Unit.) A corrected figure was provided for slide #9, on page 5; the use of critical Non-Medicaid dollars increases State Hospital Bed Days at \$478 per day which equates to **\$174,470** for one bed over a year.

The ADAMHS Board is working diligently to decrease lapsed Medicaid by working closely with providers and outside entities to develop and implement processes that ensure our consumers are maximizing Medicaid benefits by:

- Streamlining the Medicaid renewal process
- Increasing lines of communication
- Monitoring/tracking the status of consumers benefits
- Resolving issues/concerns regarding benefits
- Collaborating/building relationships and partnerships
- Providing a link between providers and Employment & Family Services

Next Steps:

- Continue to monitor/track the benefit statuses of our non-Medicaid population.
- Share detailed Medicaid Redetermination Notification Process data with providers.
- Work with providers individually to decrease their percentage of lapsed Medicaid as well as increase their Medicaid enrollment.
- Host trainings for providers to discuss new Medicaid processes and changes.

Committee Member Feedback:

- With respect to insurance parity, is there a way to determine if consumers with insurance are utilizing their coverage? Mr. Denihan suggested that the Board wait to see if the Patient Protection and Affordable Care Act goes the full route.
- Mr. Denihan noted that periodically in the past private hospitals have tried to transfer challenging clients who had insurance to the state mental hospital system. Previous administrations would allow the transfer; however, it is unknown what the current administration's stance is. A question was posed, if this happens, can the state hospital bill the patient's insurance. Mr. Denihan noted that this would be his position.
- In answer to the question--how often is the redetermination process, Ms. Sizemore-Rice noted that the redetermination is an annual process.

Ms. Sizemore-Rice wished to acknowledge and thank Board staff--Cheryl Fratalonie, John Garrity, Tom Williams, and Beth Pfohl--for their assistance in gathering and analyzing data for the report.

6. AOD PREVENTION NEEDS ASSESSMENT

Dr. Garrity utilized a power point presentation to present the highlights of the AOD Prevention Needs Assessment and elaborate on each of the slides. The primary goal of the AOD Prevention Needs Assessment Study is to make recommendations toward the continued development of alcohol and other drug prevention services within Cuyahoga County. (Details are included in the report attached to the original minutes in the Executive Unit.)

Recommendations from the AOD Prevention Needs Assessment:

1. Prioritize the leadership role in alcohol and drug abuse advocacy at the federal, state and local levels.
2. Ensure effective leadership in the facilitation of a more collaborative prevention provider coalition.
3. Align the Cuyahoga County AOD Prevention Plan with ODADAS prevention goals.
4. Develop an effective, county-specific standardized prevention outcomes measurement system as a foundation for determining future prevention funding investment decisions.
5. Prioritize a youth only focus as its primary target demographic group for investment of prevention services.
6. Identify and invest in prevention provider organizations with demonstrated AOD prevention competencies and service delivery/outcomes effectiveness.
7. Develop and implement an AOD Prevention Marketing Plan/outreach campaign with an emphasis on all aspects of internet social networking media, blogs, e-mail & other youth-oriented means of communication.
8. AOD prevention planning should focus on strengthening community-based neighborhood linkages and activities to ensure a strong presence within Cuyahoga County neighborhoods.

Committee Member Feedback:

- Component missing was evidence-based practices. Dr. Garrity noted that use of evidence-based practices is a component of ADAMHS Board goals and will be part of this process as well.
- Regarding distribution of the report, Dr. Garrity noted that after presenting this information to the Board of Directors, the report will be disseminated to members of County Council, ODMH, ODADAS, state representatives and providers and will be used for advocacy purposes as well.
- With respect to targeting prevention activities for adolescents, the committee chair suggested considering collaboration with local celebrities/individuals who young people may listen to in order to share the information and favorably impact their behavior.
- Possible collaboration might be with YMCA's, Scouting organizations, and Boys or Girls Clubs of America.
- Look into the possibility, as a community, to address the sale of individual cigarettes to youngsters.
- The increase of cigar use in the African American community was noted as a unique target area.

7. ODADAS STATEWIDE FUNDING REDUCTIONS

Mr. Denihan reported that currently there is discussion at the state level to remove \$6.2 million from the Ohio Department of Alcohol and Drug Addiction Services (ODADAS) because of reductions defined in the SFY13 budget. This represents a 34% reduction at the local level. Statewide, approximately 3,800 people would be affected and in Cuyahoga County close to 400 people would not get services.

Mr. Denihan is working with our partners at the court and criminal justice. A bus will be chartered to go to Columbus either on April 18 or 19, 2012 with AOD provider advocates, Board members, consumers, and several judges to testify before the State Legislature focusing on two new key issues:

- A recent report from the Cuyahoga County Coroner indicates that deaths by prescription drugs and heroin overdoses have risen by 79% in the city of Cleveland and 176% in the suburbs over the past 5 years especially among white men between the ages of 40-50 who are most affected.
- Given Governor Kasich's emphasis on job creation, it is worthy to note that various Chambers of Commerce are starting to share that a significant barrier to creating business and jobs is the fact that between 75% and 90% of prospective candidates for employment are failing drug tests administered by employers.

Regarding H.B. 86, Prison Reform, an ODADAS white paper will stress that without behavioral health funding this bill and initiative will fail. Mr. Denihan noted that this is a unique time to have something different to say: (1) the prison reform bill will fail if behavioral health needs are not addressed; (2) you will not find successful candidates for jobs if people cannot qualify; and (3) different areas of your constituencies are being affected by increasing addiction and overdose fatalities. All interested individuals were invited to join this advocacy trip to Columbus.

8. FUTURE TOPICS FOR PLANNING & OVERSIGHT COMMITTEE

Dr. Biegel introduced the proposed list of future topics; the tentative review schedule is shown below:

- Early Childhood Mental Health Update - *(May/June)*
- Community Plan *(June)*
- Spend Down Project *(September)*
- Health Homes

Ms. Williams inquired about the subject of Domestic Violence which was previously included on the proposed future topics list. It was noted that this topic was partially addressed at a previous P&O Committee meeting when representatives from the Hitchcock Center for Women and the Cleveland Rape Crisis Center made their presentations.

9. OLD/NEW BUSINESS

- Mr. Snider asked Mr. Denihan for an update on the public records request made by the Black Caucus regarding the ODMH's funding formula regarding the distribution of funds. Mr. Denihan reported that the answer received was that there was no formula; the decision was made at the discretion of the ODMH Director. Potential litigation may be considered by a contingency of Boards.
- BRIDGEWAY UPDATE – At the 4/2/12 Emergency Meeting of the ADAMHS Board, Board staff and Directors were led to believe that if the agency's request for funding was not passed that it would file for Chapter 7 Bankruptcy proceedings immediately. Mr. Denihan reported that providers have stepped up to help along with the extraordinary work of the ADAMHS Board staff. Board staff recently learned that Bridgeway does not intend to file for Chapter 7 Bankruptcy for at least 90 days based upon new legal reasons.

- Consequently, this gives the ADAMHS Board a bit of breathing room regarding some of the properties.
- Yesterday, the first Provider Fair was held in the Ohio Room to link Bridgeway Medicaid consumers with other service providers. Approximately 65-75 consumers were matched up with other agencies based upon their choice/decision.
- Another issue identified is a difficulty in finding Bridgeway consumers who may not wish to attend Provider Fairs, who may have moved, who are incarcerated, admitted to a hospital, etc. Mr. Doud has been asked to utilize Bridgeway staff in locating consumers. Involving staff from the Visiting Nurse Association and/or other agencies may be an option to assist in connecting consumers with other service providers.
- Board staff met with the union that represents Bridgeway workers. A Memorandum of Understanding has been agreed upon that we will offer Bridgeway workers a job for a specific amount of time; however, there will be no assumption or guarantee that they will have a job after that time period expires. Each individual will be paid through an independent contract at 100% of their salary plus a percentage of what their benefits may have been.
- The Crisis Stabilization Unit will be re-opened for the time being. Legal advice will be sought on the bankruptcy issues and professional advice regarding the realty issues.
- Given the fact that Bridgeway is not declaring bankruptcy for 90 days, Dr. Biegel asked if the agency will be able to pay back pay to their workers. Mr. Denihan noted that yes; they have decided to pay back pay to workers. Efforts have been made to look into the possibility of utilizing COBRA for benefits; however, the independent contracts issued by the ADAMHS Board will be for a very short period of time.
- Several conversations have been held with Directors of ODMH and ODADAS and their legal staff regarding the Bridgeway Transition Plan. The Department Directors are fashioning an authorization document for the ADAMHS Board to provide services during this unique situation.

There being no further business, the meeting adjourned at 6:00 p.m.

Submitted by: Carol Krajewski, Executive Specialist

Approved by: Pythias D. Jones, M.D., Planning & Oversight Committee Chair