



**ALCOHOL, DRUG AND MENTAL HEALTH BOARD
OF FRANKLIN COUNTY
MEETING MINUTES
March 24, 2009**

MEMBERS PRESENT: Derek Anderson, Thomas Bonasera, Dr. Tamara Davis, Dona England-Afek, Kim Kehl, Mitzi Kirkbride, Dennis Lieb, Dr. Kathleen Pajer, Ron Rotaru, Jonathan Sadler, Preston Stearns, Dr. Jill Steuer, Eric Troy

MEMBERS ABSENT: Laurel Beatty, Vicki Dukes, J.S. Jindal, D.D.S.

Dr. Jill Steuer called the meeting to order at 5:34 p.m.

Ronald Rotaru moved to approve the minutes of the following meetings:

- ADAMH Board MeetingJanuary 27, 2009
- Consumer & Family Advocacy Council.....February 2, 2009
- Consumer & Family Advocacy Council.....March 2, 2009
- Coordinating Committee.....March 9, 2009

Dona England-Afek seconded; MOTION CARRIED

**REPORTS &
PRESENTATIONS:**

Community Participation

A request for public speaking was received from Dr. David Weaver.

A. Financial/Audit Committee Report

Jonathan Wylly explained that the financial reports begin on page 21 of the Board packet. He stated that ADAMH had been operating in two fiscal periods due to the closeout process of 2008 fiscal year, and some reports in the packet will be reflective of 2008 and others for 2009. Mr. Wylly explained that page 31 was indicative of a financial snapshot for the ADAMH Board finances through February 2009.

Mr. Wylly explained that the tax portion is indicative of the property tax levy revenue. The first deposit for the levy revenue is not reflected because it is not received until March.

Mr. Wylly explained that the first page of the handout of dashboard dials is reflective of page 21 of the financial report. He stated that the report is the final for 2008 because all claims have been paid, and grand total for the statement is -4.59%. Billing for 2008 Medicaid was over the original projection.

Mr. Wylly explained that the second page of the dashboard dials is reflective of page 25 of the financial report. The dial is representative of approximately \$18 million in levy fund balance. The balance would provide approximately 60 days of operating cash. He stated that ADAMH only receives two large levy installments per year.

Thomas Bonasera asked if the levy was in a segregated account.

Mr. Wylly replied that the levy fund balance was part of the non-discretionary account that is separate from non-levy.

Mr. Wylly explained that the third page of the dashboard dials is reflective of page 22. The report is year ending and revenues are down approximately two percent from original levy model projections. He stated that the indicators are reflective of Medicaid growth and state hospitalization utilization increases within the last year. The growths coupled with state reductions have contributed to lower fund balances than originally projected for the levy model.

Kim Kehl asked for clarification on intergovernmental reimbursement taxes on page 31 of the financial report.

Mr. Wylly replied that the intergovernmental reimbursement taxes are representative of roll backs on property taxes that are not collected from the tax payer. The state of Ohio subsidizes the payments of the roll backs to the ADAMH Board.

Dennis Lieb explained that the Audit Committee met in January. The committee approved a draft charter for preliminary submission to the By-Laws workgroup. The Audit Committee discussed the corrective action plan in regards to the 2007 audit. The committee is currently preparing for the 2008 audit.

The Audit Committee is discussing the recommendation of four meetings per year. Three meetings have already taken place.

Mitzi Kirkbride asked if the Audit and By-Laws Committee's were combined into one.

Mr. Lieb replied that the Audit Committee and By-Laws Committee are separate committees'. He explained that the By-Laws Committee would be composed only to review and re-write the ADAMH Board By-Laws.

Derek Anderson moved to approve the Financial Report as given; Eric Troy seconded; MOTION CARRIED.

BOARD CHAIR REPORT:

Dr. Steuer introduced and welcomed Misti Crane from The Columbus Dispatch.

Dr. Steuer announced that she would be presenting Bernadine Hunter with a proclamation in recognition of her retirement. Ms. Hunter has committed 28

years of public service to the Alcohol, Drug and Mental Health Board of Franklin County.

CONSENT AGENDA:

Dr. Steuer announced that all items on the *Consent Agenda* have been previously reviewed by the Coordinating Committee. She asked if there were any questions or requests to remove the following items from the *Consent Agenda: Central Ohio Trauma System (COTS), Contract Year 2008 Medicaid Spending Authority, and Acute Care Unit Capital Project.*

No questions or comments were received.

Dr. Tamara Davis moved to approve all actions listed on the Consent Agenda; Ronald Rotaru seconded; MOTION CARRIED.

ACTIONS:

A. Response to State-Imposed Funding Reduction.

Mr. Royer explained that the Local Response to State Imposed Funding Reductions-Contract Providers action is relative to a recommendation to implement 2009 provider allocations reductions by approximately \$1.67 million. The reductions will directly affect 26 contract providers. The action is in conjunction with an \$88,500 Board administrative budget reduction action also being recommended.

Mr. Royer explained that the action is in response to recent state revenue losses, growth in inpatient hospitalization and higher than projected increases in Medicaid match commitments. The ADAMH Board worked conjunctively with the Provider Leadership Association (PLA) in identifying a mutually acceptable response to the recent revenue changes. King Stump, Kathryn Mihelich-Helms and Steve Votaw are the elected leadership representing providers throughout the reduction process. Across the board reduction was the consensus for 90 percent of the reductions, 5 percent credit for historical provision on behalf of the SMD and SED population and 5 percent performance indexing.

Mr. Royer explained that 90 percent of the reductions would impact the mental health delivery system because the state reduction originated from the 505 mental health line item. The action reflects a necessitation to implement reductions based on more than \$3 million in state cuts.

Mr. Royer explained that the ADAMH Board cannot sustain the state reductions and simultaneously maintain the commitment to the community relative to the ADAMH Board levy. He stated that he is recommending the adoption of the action to impose the reductions effective immediately.

Ronald Rotaru moved to approve the Response to State-Imposed Funding Reductions action. Dona England-Afek seconded; MOTION CARRIED.

Thomas Bonasera commended Mr. Royer and ADAMH Board staff for working conjunctively with providers to identify reduction areas. He thanked providers for their understanding, cooperation and participation during the difficult reduction process.

Mr. Rotaru also commended ADAMH staff for their commitment to implementing performance standards during the reduction process.

Mr. Royer explained that the performance index portion of the method was a benchmarking for the process.

Mr. Stearns asked if the five percent performance indexing indicated that providers were not good performers.

Mr. Royer explained that the ten percent was relative to an adjustment factor allowing smoothing for mandated treatment population or performance.

Mr. Stearns asked if the population served was considered when implementing the variables.

Mr. Royer answered explained that an attempt was made to sustain geographic presence throughout the county. Mr. Royer stated that no provider has lost current contracts with the ADAMH Board due to the recent reductions.

Dr. Tamara Davis asked how the ADAMH Board will respond to providers when narratives are submitted, and what specifics will be considered regarding the narratives.

Mr. Royer replied that correspondence regarding reduction amounts will be sent to providers within 24 hours. He explained that core services have been identified that are consistent with the mandated populations required by ORC 340. The identified services should provide guidance to providers regarding ADAMH's beliefs on what services should be protected within the delivery system. The providers will have the opportunity to respond regarding where they are proposing to reduce their budgets, what the impact will be, and any efficiencies will be implemented to minimize the impact to the service capacity. Technical questions or concerns regarding implementation of the reductions could constitute a meeting with the provider.

Mr. Royer explained that the responses are required to be received at the ADAMH Board of Franklin County by April 17, 2009. Finalization is likely to occur by the end of April.

Mr. Bonasera asked if the reduction efforts were collaborative.

Mr. Royer explained that the ADAMH Board has worked diligently to make the process as collaborative as possible.

Mr. Bonasera asked if the ADAMH Board is aware of any providers that may be at financial risk due to the recent reductions. He also asked what the current status is on the crisis management team for providers at risk.

Mr. Royer replied that the ADAMH Board reviews providers' annual audits. ADAMH providers' are not required to submit monthly financial statements. Providers' billing and cash draw down process are monitored through the Provider Stat process. It would be difficult to determine which providers' may be more adversely impacted than others.

The ADAMH Board is continuing to work on the crisis management team as it relates to the impact on providers. Julie Erwin Rinaldi is responsible for coordinating the development of the crisis management team. Mr. Royer explained that there is consultation with other county boards regarding similar matters.

Steve Votaw stated that he believes the process used for the last round of reductions was as much of a positive approach as possible. He thanked the ADAMH Board for their willingness to receive input and suggestions from the Provider Leadership Association (PLA).

Dr. Steuer stated that getting adequate services to the public may be difficult during a good economic climate, and collaboration is even more important during an economic downturn. She extended appreciation to the ADAMH Board and the provider network for working to complete a difficult task.

Eric Troy asked if there is a way of looking at success stories relating to stimulus dollars. He stated that it will be a significant effort to learn to do more with less.

Mr. Royer replied that the most immediate benefit of the stimulus package will come in a form of Medicaid relief. The relief will be retroactive to October 1, 2008. ADAMH currently pays for Medicaid at \$0.40 and federal government reimburses \$0.60. The unemployment situation may cause the Federal Financial Participation (FFP) to rise from its current level to \$0.72. The rise would provide relief for the current match demands.

Mr. Royer explained that Franklin County Board of Commissioners has submitted capital application to the federal stimulus request on behalf of the ADAMH Board of Franklin County. The third portion of the stimulus package is being proposed in the Governor's budget for SFY 2010. The 505 line item has been reduced at the state level as a state disbursement. The 505 was approximately \$100 million in the beginning of 2009 and has been reduced by \$40 million leaving a balance of \$60 million. The Governor will be proposing keeping approximately \$25 million in the 505 line item and add a new line item with approximately \$65 million of federal stimulus money.

The caveats about the stimulus money are that the monies may only be available for 18 to 24 months.

Mr. Royer explained that waiting for the stimulus monies may create further utilization of levy funds.

Mr. Troy asked if the total of stimulus was a combination of \$65 million and \$25 million.

Mr. Royer answered that the amount was approximately \$90 million to \$100 million. He stated that the actual amounts could be sent to Mr. Troy.

Mr. Bonasera asked to what extent is ADAMH being required to subsidize the state mandated Medicaid program.

Mr. Royer replied that ADAMH is being required to subsidize the state mandated Medicaid program.

Mr. Bonasera stated that without the levy and generosity of the Franklin County residents that approved the levy ADAMH would not be able to subsidize the Medicaid program. He asked how many county boards in Ohio are in similar situations that require levy dollars to subsidize the Medicaid program.

Mr. Royer replied that he believed with the total 505 reductions that many boards with current operating levies are already or close to subsidizing the Medicaid program. He stated that the number is uncertain but there are counties that are not subsidizing.

Mr. Bonasera asked whether counties that had failed levies are unable to participate in the subsidization of the Medicaid program.

Mr. Royer explained that what the Ohio Department of Mental Health (ODMH) does in such situations is redistribute money to other areas that are unable to pay for the Medicaid program. There are approximately six boards that ODMH transfers funds to. Mr. Royer stated that if that was not occurring the ADAMH Board of Franklin County would not be cutting as much as currently recommended.

Mr. Bonasera asked for clarification on the current Medicaid subsidy process. He asked if the process was to take funds from boards that have received levies dollars from their residents and redistribute them to other Ohio counties that are unable to meet the requirements of the Medicaid subsidy program.

Dr. Tamara Davis asked if federal stimulus dollars would be used to reimburse providers that have been cut, or the levy fund.

Mr. Royer explained that the ADAMH Board is currently holding further actions until the Governor's final budget is released. He stated that it is possible that the ADAMH Board may be rewarded dollars that are in excess

of the current revenue. The monies would be a mixture of General Revenue Fund (GRF) and stimulus. If the awarded monies are a mixture it would allow ADAMH to decide how the dollars are used. Mr. Royer explained that the caveat is whether the federal stimulus is going to be matchable. By law federal dollars cannot be matched with federal dollars.

Mr. Royer explained that he met with the ODMH Director and asked if stimulus dollars would be matchable. The Director was unsure and unable to provide an answer regarding the matchability. Mr. Royer explained that there is a possibility that ADAMH may have excess revenues over the 2009 contract appropriations after the proposed action is factored into the allocation model.

Mr. Rotaru asked if Mr. Bonasera was implicating that the ADAMH Board of Franklin County levy dollars are being used for items other than the original intention.

Mr. Bonasera explained that he was not making any conclusions. Mr. Bonasera stated that he is highlighting the fact that the ADAMH Board is not being reimbursed by the state mandated program. Mr. Bonasera explained that Franklin County residents were not informed that the levy dollars would be used in other parts of Ohio. Mr. Wylly had previously explained that the levy dollars are not segregated from other discretionary funds that ADAMH may have.

Mr. Bonasera explained that he was pointing out that Franklin County residents are subsidizing state mandated programs in other parts of Ohio. He stated that Franklin County residents were not informed of the possibility of this happening when they originally voted to approve the levy.

Mr. Royer explained that there is a caveat associated with using the levy dollars for subsidization of the state program. He reported that levy dollars were not used until recent significant losses in state revenues. The ADAMH Board was historically reimbursed for the Medicaid program. The situation was not contemplated as a possibility during the campaign levy because there was sufficient state General Revenue Funds (GRF). The state budget reductions have created a need to use the levy dollars for subsidization purposes.

Mr. Bonasera explained that other agencies are utilizing Franklin County dollars for their mandated programs. He stated that with the stimulus the Franklin County discretionary funds are still being used. Without the stimulus funds the levy dollars will continue to decline if proper reimbursement is not received from the state. Mr. Bonasera stated that equities and balances need to be discussed. He stated that the failure of the ADAMH Board would have resulted in Franklin County possibly receiving discretionary funds from other Ohio counties that had operating levies.

Mr. Royer explained that the levy dollars were not directly transferred to other counties. They are sent to the state GRF to and then disbursed to other

obligations. The law currently states that Ohio Department of Mental Health, Ohio Department of Alcohol, Drug and Addiction Services or county boards shall pay the local match if it is available.

Mr. Bonasera stated that if Franklin County residents had foreseen the current state mandated requirements that the levy may have not passed.

B. Calendar Year 2009 Board Administrative Budget Adjustments.

Mr. Wylly explained that the Calendar Year 2009 Board Administrative Budget Adjustments is proposed to reduce the ADAMH Board Administrative Budget. The reductions maintain the ADAMH Board's original pledge of the administrative budget not exceeding 5% of revenues. The \$88,300 total is a 1.2% cut and conjunctive with the recent state reduction, and 95.37% of provider contract services and 4.63% of administrative services are the ratios for the current Board operations. The financial specifications table within the action provides a breakdown of the proposed ADAMH Board Administrative Budget reductions.

Dr. Kathleen Pajer moved to approve the Calendar Year 2009 Board Administrative Budget Adjustments action. Preston Stearns seconded; MOTION CARRIED.

C. Resolution approving the submission of the biennial Community Plan for Mental Health and Alcohol and Drug Addiction Services for State Fiscal Year 2010-2011.

Mr. Royer explained that a revised resolution was given to the Board of Trustees to reflect the current date. The adoption of the resolution will give Mr. Royer permission to approve and submit the combined 2010-2011 plan on the behalf of the ADAMH Board of Trustees.

Mr. Royer explained that ODMH is currently conversing with county boards regarding reformulation of the 408 line item. The 408 line item is utilized for inpatient bed days and community flex dollars. The formula has been in effect as a settlement from a lawsuit in Clairmont County by a group of boards against ODMH. The 408 formula is over nine years old and many changes have occurred since the original implementation.

Mr. Royer explained that the state association has sought legal counsel in requesting mediation with ODMH regarding whether the formula is still effective.

Mr. Royer explained there are currently several scenarios related to the federal stimulus, 408 formulation or further budget reductions. These scenarios may affect the ability to project planning numbers for revenues that must be submitted in the Community Plan.

The adoption of the resolution would permit Mr. Royer to submit the 2010-2011 Combined Community Plan on behalf of the ADAMH Board.

Dr. Steuer read the resolution as given to all Board of Trustee's with a revised date of March 24, 2009.

Dr. Kathleen Pajer moved to adopt the Resolution Approving the Submission of the biennial Community Plan for Mental Health and Alcohol, and Drug Addiction Services for State Fiscal Year 2010-2011; Dona England-Afek seconded; MOTION CARRIED.

Dr. Steuer announced that Dr. David Weaver submitted a public speaker request and would be speaking before the Board of Trustees.

Dr. David Weaver stated that he wanted to invite the start of a new levy campaign. The ADAMH Board committed to refraining from beginning a new levy until 2016. He stated that many organizations are receiving stimulus funds. Dr. Weaver asked when the mentally ill or chemically dependent will receive their stimulus.

Dr. Weaver stated that the ADAMH Board has been historically underfunded and unable to reach the community with sufficient services. The systems have recently received multiple cuts.

Dr. Weaver stated that he believed the last levy was approved by a very wide margin and ADAMH did not ask for enough money. Dr. Weaver explained that he believed the community respects and appreciates the ADAMH Board. Dr. Weaver believes the community knows the need for mental health and addiction services and is willing to pay for it.

Dr. Weaver stated that he envisioned the system of care moving to a group system rather than individual treatment. He stated he is looking forward to agencies emphasizing the use of group treatment for consumers. The waiting list for groups can help educate and support consumers while waiting for treatment. Dr. Weaver stated that there is a lack of support for trauma victims. He stated that the system is in need of an agency devoted solely to trauma services for consumers.

Dr. Weaver stated that he looks forward to FirstLink publishing a list of groups for each specialized area that consumers or providers may need. He encouraged the ADAMH Board and provider agencies to advertise self-help groups for community accessibility and use.

Dr. Weaver stated that ADAMH and providers do not broadcast group availability for public use. He asked how consumers can find group availability within the provider agencies. Dr. Weaver stated that he looks forward to a better future through the use of professionally led and self-help groups.

OLD BUSINESS:

None.

Ronald Rotaru moved to adjourn the meeting; Dennis Lieb seconded; MOTION CARRIED

The meeting adjourned at 6:35 p.m.

Recorder: Lucinda Kuhlwein

Approved:

Dr. Jill D. Steuer, Chair

Dona England-Afek, Secretary