

Alcohol, Drug and Mental Health Services Update



Board of Supervisors Presentation
November 18, 2008

ADMHS Update

- Background
- ADMHS/State Issues
- Management of FY 08-09 Budget
- Service Delivery Changes
- Tracking of Client Transitions
- Business Practice Improvements
- Next Steps

ADMHS Goals for FY 08-09

- Maintain a balanced budget
- Manage available resources
- Offer mandated services to persons in greatest need:
 - Tighten client admission process
 - Manage type and frequency of services consistent with individual need
 - Foster client recovery through evidence-based services
- Strengthen internal controls for quality, fiscal stability and sound business practices

ADMHS/State Issues

- ADMHS Disclosures to State DMH
 - Network provider documentation
 - Retention of Federal Financial Participation funds
 - 15% Administrative Fee charges
 - Medicare/Medi-Cal claim submissions
- Ongoing State DMH Audit Appeals
 - Partner agency billing

ADMHS Budget Status: Qtr 1

| | <u>Actual</u> | <u>Adj. Budget</u> | <u>Variance</u> |
|------------------------|-----------------|------------------------|-----------------|
| Total Sources of Funds | \$12.12 | \$14.68 | \$ (2.56) |
| Total Use of Funds | <u>14.87</u> | <u>19.29</u> | <u>4.42</u> |
| Net Financial Impact | <u>\$(2.75)</u> | <u>\$ (4.61)</u> | <u>\$ 1.86</u> |

Favorable (Unfavorable)

ADMHS Service Delivery Principles

- Single point of access and clinical accountability
- Integrated treatment, rehabilitation and support services
- Foundation to build on in future years

FY 08-09 Adult Mental Health System of Care

- Homeless Services
- Intensive Residential Treatment
- Assertive Community Treatment (ACT)
- Supported Housing
- Consumer Recovery Centers
- Community Treatment Teams

Implementation of Service Delivery Changes

- RFP process and contract awards for ACT and Supported Housing
- Clinical review and assessment of each individual
- Matching each person to services, consistent with needs
- Team effort of ADMHS and providers to support 350 clients receiving new services

Client Follow-up

- Baseline data on key quality indicators collected for each client in transition
- Collection of data on a monthly basis for at least 6 months
- Electronic tracking system to review client changes over time

Business Operations Restructuring



Contracts Management

- Standardized contract provisions
 - Comprehensive scope of work
 - Financial terms & conditions
 - Service outcomes
- Monitoring tools
- Review of required contractor reports

Utilization Management

- Out of county inpatient bed days declined by about 30%*
- Pharmaceutical expenses in outpatient clinics reduced by 6.5%*
- Network providers' costs reduced

FY 07-08 compared to FY 06-07

Quality Assurance

- Completed ~1500 chart reviews to confirm medical necessity
- Conducted documentation trainings attended by 300 clinical and direct care staff
- Developed and updated critical UM/QA Policies and Procedures

Information Systems

- Completion of a complex system conversion
- Uploading of service claims data to the State in timely fashion
- Capacity to generate key reports to support ADMHS' fiscal and quality assurance responsibilities

Fiscal Management

- Improved oversight for fiscal compliance and Medi-Cal/Medicare billing procedures and internal controls
- Resolution of long-term vacancies in fiscal division
- Projects with Auditor-Controller staff
 - Cost reporting, fiscal system improvements, accounting procedures, etc

Outcomes/Evaluation

- Major feature of FY 08-09 adult and children's contracts
- Adopted MHSA outcome measures to standardize process:
 - Stable and permanent housing
 - Reduction in incidents of homelessness and hospital admissions
 - Decreased contact with criminal justice system
 - Improved physical health

Future Actions

- Maintain a balanced budget
- Continue to monitor service delivery changes and client outcomes
- Meet State/Federal compliance requirements

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