

**Alcohol, Drug and Mental Health (ADAMH) Board
Levy Review
HSLRC Meeting Minutes
April 2, 2020**

CALL TO ORDER-CHAIR

The Human Services Levy Review Committee (HSLRC) meeting was called to order by Jesse Hemphill on April 2, 2020 at 11:03am.

ROLL CALL

HSLRC members present: Jesse Hemphill, James Bowman, Jean Carter Ryan, Michael Curtin, Jerry Friedman, and Zak Talarek.

HSLRC members absent: Rose Handon, Ph.D.

A committee quorum was present.

Office of Management & Budget (OMB): Rachel Buske and Madeline Gresham.

Alcohol, Drug and Mental Health (ADAMH) Board staff: Erika Clark Jones, CEO; Mark Lambert, Jonathan Thomas, Dr. Delaney Smith, Kythryn Carr Harris, Kevin Dixon, and Mackenzie Betts.

ADAMH Board Members: Peggy Anderson, Chair, Sharon McCloy-Reichard, Trudy Bartlett, and Scott Doran.

Franklin County Probate Court Guardianship Services Board (GSB): Jack Kullman.

INTRODUCTION

Ms. Buske thanked ADAMH for the detailed responses and supporting information sent by the agency in response to the request made by the HSLRC. She explained that the purpose of this meeting was to allow the Committee and ADAMH to further discuss the 2020 ADAMH Levy Request.

ADAMH began by providing a high-level overview of their responses.

Value-based Contracting Pilot

Mr. Thomas provided an update on ADAMH moving away from a fee-for-service model to an incentive-based payment model, which was one of the Committee's recommendations in its 2015 Levy Report. ADAMH is currently in phase 2 of their initiative to increase value-based contracting; phase 4 would be employing a risk sharing/managed care model if they choose to do so.

He discussed two of the four value-added contracting pilots initiated in 2019:

- Crisis: For individuals who need crisis services, the goal is to prevent repeated Netcare visits within 30 days of a prior visit. Research shows that for individuals that need to be readmitted, 80% of individuals are readmitted within 30 days. ADAMH looks for providers to stabilize them in the community with outpatient services to mitigate the need for readmission.

- The Same Day Incentive: For providers who offer Medication Assisted Treatment (MAT), Residential or intensive inpatient/outpatient services to consumers with opiate use disorders: the incentive is available for providers who can link consumers to community-based services on the same day that their more intensive services are completed.

Use of Strategic Prevention Framework and Evaluation

Dr. Dixon explained that ADAMH uses a Strategic Prevention Framework with providers. The Framework is a logic model used to assess community needs and evaluate implementation:

- Developed by ADAMH to align with the national framework created by The Substance Abuse and Mental Health Services Administration (SAMHSA)
- Designed to ensure that providers are self-monitoring and evaluating their services and their consumers.
- Helps providers identify best practices and evidence-based practices that can be tailored to specific populations
- Helps providers evaluate feedback from consumers
- Major goal is to increase consumers served. ADAMH reviews performance and intervenes early on if providers are not meeting targets (ADAMH recently ended funding for a provider that spent too much on high level staff and did not meet targets).
- ADAMH and providers work to assess if consumers will need additional services

Demand Growth Projection

Mr. Thomas discussed the demand growth factor in the levy model and how prevention programs impact the demand for other services:

- The model does not account for the specific portfolio of ADAMH investments. It looks more at the overall payer market and overall community and policy initiatives. For example, it looks at how the business market environment, including premiums, the Affordable Care Act (ACA), etc. impact the demand for services.
- The model does try to consider how prevention programs work to reduce the stigma related to mental health and addiction and does assess how prevention programs encourage people to get help and seek care.

The Probate Court Guardianship Services Board (GSB)

Mr. Lambert reminded the Committee that the levy request calls for ADAMH to provide the GSB with \$2 million a year, with an increase of 3% each year after the first year, for the term of the levy.

Mr. Kullman, Director of the GSB provided more detail:

- The GSB was created in the summer of 2015.
- There are approximately 320 clients with additional clients that are pending. The Court has 1,000 cases they could refer if the GSB had the capacity, with a projection of 2,000 over time.
- Approximately 80% of people under guardianship have mental health diagnoses but not all of them use or have used ADAMH services.
- The GSB has a current staff of 20 with a current budget of approximately \$1.9 million.
- Of the 20 staff members, 12 are licensed social workers and the recommended caseload is 40 clients for each social worker. For a projected increase of 1,000 cases, the GSB would need 25 additional caseworkers and additional administrative staff.

- The GSB receives funding support from:
 - Franklin County Board of Commissioners (\$250,000 to pay for employee benefits)
 - Franklin County Job and Family Services (for Adult Protective Services cases on a sliding scale)
 - ADAMH (\$500,000/year for ADAMH consumers)
 - Franklin County Board of Developmental Disabilities (BDD) (\$300,000 for clients of BDD); the GSB has discussed increasing the BDD contribution with BDD.
 - All of the major hospital systems (other than Children's Hospital). OSU Wexner contributes \$500,000 over two years. OSU Wexner is the biggest contributor among hospitals, but Ohio Health and Mount Carmel also provide funding. Hospitals need guardians to make discharge decisions for persons who are incapacitated or unable to do so for other reasons. Hospitals have a need to discharge people to maintain available capacity, which is particularly important now due to the Covid-19 pandemic.

Indigent Defense Fund

Mr. Kullman stated that the Probate Court has an Indigent Defense Fund to pay for guardianships for people who cannot afford them on their own. Attorneys are paid to be guardians at a rate of \$350 for an initial hearing and then an additional \$420/year. Many attorneys have submitted pending resignations to stop being guardians as soon as new guardians are identified.

Mr. Talarek explained the Indigent Defense Fund is not sufficient to cover all expenses and it is backfilled by Special Trial Expenses from the General Fund. This is part of the reason that the BOC provides funding to support employee benefits.

Actual/Projected Consumers and Allocations 2017-2020 (projected)

Ms. Buske asked ADAMH to provide more information on the Actual/Projected Consumers and Allocation Amounts by provider document that was shared with the Committee.

Mr. Thomas and Ms. Carr Harris provided the following information:

- Community for New Direction: ADAMH has worked with this provider to expand their capacity and provide additional programming. They were originally only providing prevention services but had started to provide substance use disorder services. They were able to absorb the clientele from Neighbor House which had closed its doors. This expansion also served to fill the need for severe and persistent mental illness services on the Near Eastside. This expansion occurred before Columbus Area closed.
- Southeast: Southeast has worked in the County Jail to assess people who have behavioral health disorders and provide linkage to services. For people suffering from opiate addiction, Southeast can ensure they are started on MAT programs before release and then be connected to community services after release. In addition, Southeast and Primary One Health have worked to stand up services on the near eastside to continue services that were impacted by the closure of Columbus area.
- Netcare: there is a substantial increase of consumers served from approximately 13,000 in 2017 to a projection of over 100,000 in 2020.
 - For every investment ADAMH makes, regardless of type, the providers project how many consumers they will serve during a contract year. For Netcare, this includes the Crisis hotline. However, they do not enroll everyone who calls the Crisis line, so they do not have a unique count of people who use the hotline. There will mostly be an increase for

2020 but the actual data for consumers served might not be as drastic an increase as the projection looks.

- Additionally, Netcare has seen an increase in crisis holdover and stabilization consumers, as well as an increased need for Probate Court pre-screenings.
- For the reach out van, there is a change in the way data are counted. The reach out van drives around and picks up public inebriants and drive them to the engagement center at the Maryhaven Addiction Stabilization Center. For 2017 and prior years, they used to count unique individuals (there were 492 unique individuals picked up in 2017). After 2017, they began counting the number of van runs. In 2019, the number of van runs was 11,356.

ADAMH Collaboration with the Franklin County Sheriff's Office

Ms. Carr Harris and Mr. Lambert explained that ADAMH has a MOU with Naphcare (the current medical provider for the jail), as well as Southeast and the Franklin County Office of Justice Policy and programs for inmate services. They try to link inmates to services before they are released to ensure a warm handoff. While the major focus is on providing services in the community, there are additional opportunities to expand opportunities and they will continue to work with the Sheriff's Office moving forward.

ADAMH Response to Covid-19

Mr. Lambert, Ms. Carr Harris, and Dr. Dixon provided the following overview:

- ADAMH has recognized that its system of care has an inadequate supply of personal protective equipment.
- ADAMH and providers have been able to pivot very quickly to modify business practices to allow for telehealth and telemedicine services for consumers whenever possible, but it is noted that some providers and clients do not have appropriate equipment.
- Prevention providers are continuing to reach out and work with schools to send materials electronically. They are making sure that families and children have access to prevention materials.
- Netcare continues to run its 24/7 crisis line and is beginning to increase outreach to make sure that people know the hotline service exists. The hotline is staffed by clinicians and can help people get ongoing treatment if needed or provide temporary emotional support.
- The Peer Center offers drop-in services and did not have space to continue doing so within appropriate social distancing guidelines, but they have expanded the hours of their warmline from 9am-3am for consumers who can no longer drop-in for services.
- The Community Shelter Board is working to provide services to people with illnesses.
- ADAMH has received feedback that the minority community, particularly African-Americans and new Americans are very concerned about Covid-19. Many people need services but are not connected to providers. ADAMH is working to bring awareness and education, while also ramping up services with providers to ensure coverage. ADAMH may need to employ paraprofessionals in certain communities to provide inreach.
- Overall, there is increased depression, anxiety, and the use of alcohol/drugs as coping mechanisms.
- ADAMH's Public Affairs department is being proactive to provide information on available services.

With no additional questions from the Committee, Ms. Buske thanked ADAMH staff, Board members, and Mr. Kullman for taking the time to meet with the Committee and answer additional questions.

Ms. Clark Jones thanked the Committee and staff for the opportunity to meet to discuss the 2020 ADAMH levy request.

ADDITIONAL INFORMATION AND ANALYSIS

Ms. Buske referred the Committee to the additional materials in the meeting packet:

- Human Services levy requests and HSLRC recommendations
- Election Results for HSLRC recommended levies
- Household Tax Impact Comparison ADAMH 2020 vs. FCCS 2004

Ms. Buske explained that, since 2014, the only time the Committee has recommended an increase in millage was for the Office on Aging in 2016 (1.3 mill renewal with a 0.45 mill increase). For other requests, (2014 and 2019 for FCCS; 2015 for ADAMH), the Committee had only recommended renewals with no increases in millage or in effective millage.

ADAMH's request for a 2.2 mill renewal with a 1.09 mill increase would be the largest increase in millage the Committee has ever recommended (if it chooses to do so). Previously, the largest Committee recommended millage increase occurred in 2004 when the Committee recommended a 1.1 mill replacement levy with a 0.8 mill increase for Children Services. Comparing the two, the tax increase to taxpayers in 2004 was higher from a percentage standpoint (150.0%) than the 2020 ADAMH potential tax increase (63.7%).

The Committee and staff discussed the fiscal climate in Franklin County, particularly considering the Covid-19 pandemic, and concerns to whether it was feasible to recommend such a large tax increase, even if service demands necessitate such an increase.

Action Items

The Committee and OMB staff discussed additional analysis that staff should develop:

- Projections on the end of the current ADAMH levy cycle as well as more detailed projections for the various millage scenarios for the next levy cycle.
- Additional information as to how Covid-19 is impacting revenues and service delivery/expenditures.

CLOSING REMARKS

The next HSLRC meeting will be on Thursday, April 16th, 2020 for further discussion related to the levy request.

A motion was made and seconded to adjourn the HSLRC meeting.

The meeting was adjourned at 12:58pm.