

# Fairfield County ADAMH Board

Minutes of the May 22, 2012, Board meeting held at 6:30 p.m. at the Board office pursuant to notice mailed to all Board members.

Chairman Bahnsen called the meeting to order at 6:35 p.m. with a quorum being present.

## ROLL CALL

### PRESENT

Jay Bahnsen, Caryl Caito, Jeff Gerken, Robert Masone, M.D., Sheri Perry, Phillip Prior, M.D., Marian Reitano, Erin Roylance, D.O..

### ABSENT

Tom Alexander, Cindy Bender, Tom Feisel, John Hoag, Ph.D., Pat Marshall.

### STAFF

Rhonda Myers, Don Mohler, Patricia Waits, Martha Pool, Nadine Carroll.

### GUESTS

Esther Branscome, Tony Motta, Jerry White, Brad Hedges, Ph.D., Suzanne Pelletier-Capitini, Trisha Saunders.

Chairman Bahnsen asked the audience if they had any questions or comments.

Tony requested a letter of support for the SAMSHA grant that New Horizons hopes will fund integrated basic physical health care in their facility. It is a 4 year, \$400,000 per year grant for a total of \$1.6 million but it is extremely competitive. Dr. Masone asked why they are asking the Board for a letter of support when we know nothing about it and are not involved.

Trisha said they are asking for additional funds to help meet their needs and she talked about the Recovery Center's program to reduce the relapse and death rate for people that are addicted not only to opiates but other drugs as well. Especially hard to get served are 18-35 year old males. There's just not enough funding to meet anywhere near the need. There was a year long waiting list when the opiate epidemic hit, it was very challenging. We started an open access model so we could get people in the door much quicker, within a day or two. She stated that the problem is opiate addiction treatment requires longer term treatment, at least a year to year and a half according to ODADAS. Now 60 percent of clients are voluntary, most of the women can get Medicaid but the men are underserved. They have started a community resource group, but they are asking very sick people to come to group every week and out of 192 people, 102 successfully completed then and 15 that initially dropped out came back and completed the group later. She added Fairfield County has been listed as a hotspot for heroin and that there has been a 1000 percent increase in the number of opiate pills. Fairfield County is number two on the list and deemed a hotspot for heroin. She stated that more money for intensive type services would be very helpful.

Tony said he has the same presentation he presented in January. He stated New Horizons is requesting \$262,000 to cover their proposal of continuing to see their 330 existing clients and 95 new aftercare clients. The numbers are creeping up. ODMH has new criteria and the new clients are meeting those criteria. They have two priority populations the SMD and now the aftercare population that the Board has stated is a priority. They have 425 clients and it costs about \$1515

per year for each client and on average they get 2-3 hours of psychiatric care and 10-12 hours of care management for that cost. Tony added that crisis intervention usage has also increased by 25 percent in the last two years.

Suzanne told the Board that the Lighthouse could use \$15,000 to help make up for the reductions made for SFY 2012. They treat residents and non residents.

Brad told the Board that MOPS would like to have \$40,000 to replace what was cut from their budget over the last three years. He said that they treat almost one-third of the SMD population but they also collect funds from other sources. He added that they are treating about half adults and half kids.

Chairman Bahnsen asked if there were any additions or corrections to the April Board minutes.

### **RESOLUTION NO. 5-22-12-1**

**Be it resolved upon motion by Dr. Roylance and second by J. Gerken to approve the April minutes. Motion was unanimously approved.**

Policy & Procedure Committee - Dr. Roylance reviewed the report from the Policy & Procedures Committee. She noted that some policies need updated because of changes to the HIPAA laws to include the provisions in the HITECH law. Another change is having to using the more restrictive of local or federal provisions.

- Assuring Privacy of Individual PHI 05.01
- Assuring Privacy of Individual PHI 05.01.01
- Designation of Privacy and Security Officer 05.02
- Designation of Privacy and Security Officer 05.02.01
- Changing Policies Related to HIPPA 05.03
- Changing Policies Related to HIPPA 05.03.01
- Development & Distribution of Notice of Privacy Practices 05.04
- Disclosure of Client PHI to Business Associates 05.05
- Disclosure of Client PHI to Business Associates 05.05.01
- Minimum Necessary Use and Disclosure of PHI 05.06
- Minimum Necessary Use and Disclosure of PHI 05.06.01
- Use of Client PHI for Treatment, Payment, and Operations 05.07
- Authorization and/or Disclose PHI for Other than TPO 05.08
- Use and Disclosure of Psychotherapy Notes 05.09.01

- Permitted Use and Disclosures of PHI 05.10
- Permitted Use and Disclosures of Protected HPI 05.10.01
- Use & Disclosures of PHI Required by Law 05.11
- Use & Disclosures of PHI Required by Law 05.11.01
- Use & Disclosures of PHI for Public Health & Health Oversight Activities 05.12.01
- Use & Disclosures of PHI for Specialized Government Functions and to Avert a Threat to Health & Safety 05.1301
- Use & Disclosures of PHI for Research 05.14.01
- Client's Right to Inspect & Copy Protected Health Information 05.17.01
- Client's Right to Request Amendment to PHI 05.18.01
- Client Complaints Related to PHI 05.22.01
- Sanctions for Breach of Privacy and Security of PHI 05.23.01
- Mitigating the Effects of Unauthorized Use/Disclosure of PHI 05.24.01
- Administrative Safeguards for the Protection and Security of PHI 05325
- Administrative Safeguards for the Protection and Security of PHI 05.25.01
- Physical Safeguards for the Protection & Security of PHI 05.27
- Physical Safeguards for the Protection & Security of PHI 05.27.01
- Technical Safeguards for the Protection & Security of PHI 05.28
- Technical Safeguards for the Protection & Security of PHI 05.28.01
- Workforce Training for HIPPA Privacy Compliance 05.29.01
- Workstations Use and Security 05.30
- Remote Access 05.31.01

She reviewed the research Patti had done since the Policy Committee meeting to clarify changes needed in the following policies:

**Recommended Resolutions to Policy Committee Questions from May 16 Meeting**

- 05.04.01 Development and Distribution of Privacy Practices
  - Section 2(A)(ii) To make consistent with 05.07.01: leave "15 business days"
  - Section 2(A)(iii) Delete "Administrative" and add "or designee"
- 05.07.01 Use of Client PHI for Treatment, Payment, and Operations
  - Section (2) To make consistent with 05.04.01: Leave as "15 business days"

- 05.18.01 Client's Right to Request Amendment to Protected Health Information  
-Section 1©(ii) "30" days instead of "60" days
- 05.19.01 Client's Right to Accounting of Disclosures of PHI  
-Section 1(D)(i) "30" days instead of "60 days"
- 05.22.01 Client Complaints Related to PHI  
-Attachment A, Page 3 – Changed from Rhonda's name to Patti's name.
- 05.23 Sanctions for Breach of Privacy and Security of PHI  
-Reprinted for clarity. When this was printed out for the committee meeting, it was difficult to read, but it does read the way the committee asked it to read.

Update to  
Letters of Support and Endorsement for Grants and Projects Procedure  
Section 1(D) Inserted "agencies as" in front of the word "providers"

Discussion followed primarily on the Letters of Support policy on the definition of "routine". It was decided to strike that word.

#### **RESOLUTION NO. 5-22-12-2**

**Be it resolved upon motion by J. Gerken and second by C. Caito to approve the first reading of the Letters of Support policy Thought HIPAA policies received a first reading, too?.**  
**Motion was unanimously approved.**

Finance Committee – S. Perry reviewed the Finance Committee report. She reported that with regard to the question of the Board setting aside money to pay for Peer Support training it is not necessary at this time. The Consumer Group has three people who are trained and being tested and certified. If more are needed, FMHCG may be willing to pay for this but there is a question of whether or not folks can find employment. Director Myers added that it would be beneficial to a health home.

S. Perry told the Board that a recent review found the county had overlooked two employees for Medicare and had not charged the agencies as appropriate.. Orman was one of them. They will bill us for approximately \$8,532 at some point: only going back a few years instead of the full time since Orman was hired.

S. Perry said the committee discussed the ReEntry and the VRP3 grant. She stated that the Board received a \$25,000 grant from ODMH to help people coming out of prison with high mental health needs. So far only about \$600 dollars were used so Patricia is checking on carrying these funds over. The VRP3 grant ends in September and we are checking on possibly carrying over the unused funds.

S. Perry told the Board that the hospital region we are part of will receive funds for crisis stabilization projects. Fairfield County's share is approximately \$225,000 although that may change. This is for a different type of emergency services; it is for 23 hour bed days to help defer hospitalization.

S. Perry said that the committee discussed issues around long term obligations and cash flow. Dr. Masone stated that there used to be a 90 day "guarantee" that the Board would cover 90 days worth of expenses but that was dropped to 60 days because we couldn't meet that level. He suggested instead of the Board having to keep track of funds to cover 60 days of expenses that the agencies should do that instead.

S. Perry reviewed the financial highlights including that we are still in good shape on bed days although usage has gone up.

#### **RESOLUTION NO. 5-22-12-3**

**Be it resolved upon motion and second by the Finance Committee to approve the April financials. Motion was unanimously approved.**

S. Perry said the committee discussed an increase in the Title XX allocation. This has traditionally gone to New Horizons for the sliding fee scale. Because of the emergency services demand, the committee is recommending that it go to New Horizons for crisis intervention services.

#### **RESOLUTION NO. 5-22-12-4**

**Be it resolved upon motion and second by the Finance Committee to increase New Horizon's allocation by \$9,928 so they could receive this extra Title XX money and use it for Crisis Intervention services. Motion was unanimously approved.**

The bad debt allocation was discussed. The allocation for New Horizon's bad debt was set when their bad debt was much higher. It is much lower now but the figures have not been adjusted. Director Myers stated that at the CHC meeting it was discussed and suggested not having bad debt but if we do, to have guidelines that are uniformly applied. She stated that if we continue to do bad debt we need to have criteria in place. She added that according to our trade association 3 of 4 boards who responded to a general inquiry do not cover bad debt. The fourth Board sent a copy of a policy regarding broader financial issues that needs to be reviewed. Tony said that it was for unpaid bills that they had to write off as they weren't allowed to build bad debt into their unit rate. The Board said it could help with that but that was 20 years ago. It was decided to have Director Myers draft a bad debt policy and have the Finance Committee review it prior to taking it to the Policy & Procedures Committee.

The committee discussed the SFY '13 System budget. It is mostly maintaining the same allocations. Director Myers reviewed the system budget assumptions with the Board and stated that ODMH's budget should be flat but ODADAS' budget will probably be less. She added that we hope to have definite numbers next week. She said that they anticipate a slight drop in levy funds because of the phase out of the Tangible Personal Property tax. She said that funds were set aside to start on pre-levy activities as there are only four cycles left before we can go for a levy. The budget also includes the \$237,000 set aside for bed day overage that we do not need now (specific agency breakdown to be decided in June). She said the regional hot spot funds for crisis intervention are included although we don't know the final amount for sure yet. Grace Haven's amount was increased and the Board already approved funds for Lutheran Social Services. Center of Hope's services needs discussion with New Horizons is pending. The other amounts are relatively flat with little or no change. The unallocated amount is only an assumption as there will be some changes as we get final numbers. Director Myers talked about wanting to establish a planning process starting in September with one committee for mental health and another for substance abuse with needs

assessments to gather information. She added that there is always a tension between community expectations and person(s) with highest need(s). She noted that these dollars will help us get through these transitional changes. Some funds will also be needed to cover SFY '11 Medicaid expenses still coming through the system.

#### **RESOLUTION NO. 5-22-12-5**

**Be it resolved upon motion and second by the Finance Committee to approve the SFY '13 System budget. Motion was unanimously approved.**

S. Perry told the Board that Grace Haven has a new FY based budget that is very transparent and detailed which she liked very much. She said that cost is \$300 per bed per month and we will be billed only for what is used with the \$21,600 being the maximum that can be billed.

#### **RESOLUTION NO. 5-22-12-6**

**Be it resolved upon motion and second by the Finance Committee to approve Grace Haven's SFY '13 request. Motion was approved. J. Gerken abstained.**

S. Perry said the committee discussed that since Grace Haven was faith based that another alternative was needed for those who aren't comfortable in going there and considered Lighthouse for that if they have room.

S. Perry said the Board Office Budget had some county fees added to it. They were moved from the System Budget to the Board Office Budget sheet, but were outside the Board Office expenses.

#### **RESOLUTION NO. 5-22-12-7**

**Be it resolved upon motion and second by the Finance Committee to approve the SFY '13 Board Office budget. Motion was unanimously approved.**

Director Myers discussed the letter from ODMH Director Tracy Plouck regarding the Board agreeing to collaborate with ODMH to minimize civil and forensic bed days to the best of our ability. A local decision to participate or not participate was pending receipt of the actual document wording that the Board would be asked to sign. The Board won't be held responsible for any bed day overages and that any bed day savings, as defined by ODMH formula, would be passed to the Boards who contributed to the State's savings on a proportional basis. If the department changes their stand in the future and wants Boards to be responsible for the psychiatric hospitalization costs for forensic patients then we need to decline.

Dr. Roylance raised the concern about the hospital being difficult to work with and that some people just cannot function outside the hospital or prison. She added that as a psychiatrist she thinks this is a bad idea. She just does not feel good about this. She added that the "extra" money is just a carrot they are dangling and like all the other government programs that every year they have to do more with less. These people are very sick and often very violent, they are in there for a reason. Brad said that we don't know what their motivation is, but if we can't reduce bed days they can't shut the hospital down. Dr. Prior said that he smells a rat also. They do not have your long term interests at heart. Director Myers stated she knows that at least one of the Boards has rejected this offer. J. Gerken said at least there is no penalty for not reducing bed day use. Brad commented that at the CHC meeting they discussed a competency restoration program that could be

started up for approximately \$5,000 and if it is effective it would be worth continuing. He added that we have about 15 people a year that could benefit from this program.

**RESOLUTION NO. 5-22-12-8**

**Be it resolved upon motion and second by the Finance Committee to approve signing the letter of agreement with ODMH and the opt-in letter for this year. Motion was approved. 5 ayes, 2 nays – Dr. Prior, Dr. Roylance.**

**DIRECTOR'S REPORT**

Director Myers told the Board that Board staff are working on the community plan update for FY 12-13. She added that it will be emailed out for board members to review and vote on at the June 19<sup>th</sup> board meeting.

Director Myers reviewed the calendar of events including the upcoming Board meetings with Policy & Procedures Committee on June 13<sup>th</sup> at 6:30 p.m., the Finance Committee on June 14<sup>th</sup> at 6:30 and the Board meeting on June 19<sup>th</sup> at 6:30. Also coming up is the Board sponsored Cruise-in in Pickerington on June 1<sup>st</sup> and a Mental Health First Aid training we are co-sponsoring with SOCIL on June 11<sup>th</sup> and 12<sup>th</sup> at OUL.

Director Myers talked about the Letter of Support from New Horizons for the SAMHSA grant. Director Myers said she felt comfortable signing a letter of support for New Horizons for this grant as we have worked with them for so many years.

**RESOLUTION NO. 5-22-12-9**


**Be it resolved upon motion by C. Caito and second by Dr. Prior to approve the letter of support for New Horizon's SAMHSA's grant application. Motion was unanimously approved.**

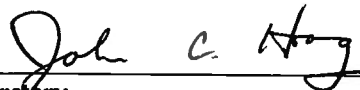
**ADJOURNMENT**

**RESOLUTION NO. 5-22-12-10**

**Be it resolved, upon motion by J. Gerken and seconded by C. Caito to adjourn the Board meeting. The motion was unanimously approved.**

The Board meeting adjourned at 8:50 p.m.

  
Chair

  
Secretary