CSB Fiscal Oversight Committee

Pennino Building, 12011 Government Center Parkway, Suite 836 Fairfax, VA

December 13, 2019 at 9:30 a.m.

Meeting Agenda

Agenda Item	<u>Facilitator</u>
1. Meeting Called to Order	Jennifer Adeli
2. Review of November 15 th Meeting Minutes	Jennifer Adeli
3. Administrative Operations Report	Daryl Washington
 4. <u>Clinical Operations Report</u> A. Diversion First B. Time to Treatment 	Lyn Tomlinson
 5. Financial Status A. Pay Period Metrics B. Modified Fund Statement C. Variable Revenue Report D. Non-Billable Report 	Jessica Burris
6. <u>HR Update</u> A. Position Status	Daryl Washington Lyn Tomlinson
7. <u>Open Discussion</u>	
8. <u>Adjourn</u>	

Date: November 15, 2019

Attending: Chair, Jennifer Adeli; Basilio 'Sonny' Cachuela, Jr.; Ken Garnes; Suzette Kern;

Bettina Lawton, and Edward Rose

Staff: Daryl Washington, Jessica Burris, and Carolyn Ford

1. Summary of Information Shared/Decisions:

The meeting was called to order at 9:30 a.m.

2. Review of meeting minutes

The October 18, 2019 meeting minutes were offered for review. Recognizing no revisions were forthcoming, Suzette Kern made a motion to approve the minutes as presented, which was seconded and approved.

3. Financial Status

Jessica Burris provided the financial report, to include:

A. Pay Period Metrics Report

- No significant changes were reported, noting only a minor increase to Pay Period Actuals at approximately \$4.8M.
- A lower total for Compensation and Fringe was attributed to a decrease in the number of vacancies from 94 last reporting period to 77 in this reporting period, noting this is being closely monitored.

B. Modified Fund Statement

- The FY2020 Modified Funding Statement for October 2019 indicated no significant change from the last reporting period.
- The new FY 2020 Projection column, added last month was confirmed to include the FY 2019 carryover.
- The anticipated shortfall of approximately \$2.7M is primarily attributed to the shortfall in state funding, only some of which is projected to be recovered.
- Regular meetings with DMB (Department of Management and Budget) to consider realignment of some CSB Budget items are ongoing.

C. Revenue Analysis,

- A significant increase in revenue was attributed to identification of and correction to some billing errors resulting in increased revenue in October.
- Efforts to collect on older claims (back billing) resulted in a revenue increase of approximately \$100K in October

D. Revenue Maximation - Non-Billable Summary,

• Some significant changes to billing practices, projected to further decrease the number of non-billable services, include initiation of a functionality in Credible that simplifies obtaining a supervisor's signature where necessary. This impacts billing in several ways including an increase in the LMHP-Type billing, billing for services at the supervisor's rate, billing for injectables (medication applied through injection), and billing for some nursing services. This is anticipated to impact the January revenue.

The provided chart Revenue Maximization – Non-Billable Summary YTD
 October 2019 illustrates the submission errors for non-billable services. A
 reminder was offered that LMHP-Type billing will eventually be removed as
 billing procedures improve. Additionally, it was noted that further refinement
 of the non-billable summary will occur as regulatory requirements and the
 cost to bill for some services is anticipated to remain excessively
 burdensome.

4. Administrative Operations Report

Daryl Washington provided an overview of recent activities in Administrative Operations to include:

- Following consultation with committee members present, it was decided to make the Administrative Operations Report a standing agenda item.
- The recruitment ad for the Deputy Director of Administrative Operations is open until November 22. The interview panel is in development, with interviews to be scheduled for the second week in December.
- Candidate references are being checked for the vacant Public Information Officer (PIO) position with an expectation that an offer will be made by the end of November.
- Human Resources lead, Carolyn Ford was introduced and welcomed by the Committee.
- Acknowledging the recent resignation of DBHDS (Department of Behavioral health and Developmental Services) Deputy Commissioner for Facility Services, Daniel Herr, Mr. Washington reported efforts to meet with the retiring commissioner prior to his leaving office.
- Mr. Washington provided an update to a recent meeting with Credible staff. In attendance also, were the County HIPAA Compliance Officer, staff from DPMM (Department of Procurement and Material Management) and DIT (Department of Information Technology). Credible reported that efforts are ongoing to strengthen the Chicago and Loudoun platforms to avoid further catastrophic failure events and to ensure a seamless transfer of operations should one occur. Completion of these efforts is anticipated by the end of 2019.
- Workforce planning efforts include consideration of a new position to assist with Information Technology and Credible, the Electronic Health Record.
- A Project Manager has been hired and has begun work with a primary focus of the HMA (Health Management Associates) recommendations.

5. Clinical Operations Report

Daryl Washington provided updates to recent activities in the areas of Diversion First and Time to Treatment, some highlights for which are:

A. Diversion First:

- Efforts to fill staff vacancies on the jail-based and jail-diversion teams are ongoing and include Realistic Job Previews, expansion of recruitment efforts to include LinkedIn, and strengthening relationships with local universities including James Madison.
- Referring to the organizational charts distributed in the meeting materials, Mr.
 Washington clarified that a position noted as "pending establishment of

potential new cost center/transition to new org" reflects the time following a request to assign an individual cost center that will better reflect the expense of an expanded division and associated staff.

B. Time to Treatment

- Offering a reminder that some new data was requested at the October Fiscal meeting, Mr. Washington introduced a single Time to Treatment chart that includes data for both Adult and Youth. It was emphasized that a new methodology will be applied to collect the requested data. Additionally, it was reported that collection of First Appointment Offered data has not been previously tracked. Therefore, a change to Credible has been proposed to collect the requested data for future reports.
 - The Youth Outpatient Services chart includes a reference in the notes to Orientation to Services; it was clarified that this is a licensing term used to describe the initial appointment. It was further noted that it is approximately 60 days post hire before new staff can be assigned cases and a reduction in the number of days from assessment to initial appointment are reflected in the chart. It was further noted that there is another 60 days or so before an increase to revenue is reported.
 - The Adult Outpatient data presented as Direct Scheduling indicates that the first appointment was scheduled at 14 days or less following the initial assessment

Mr. Washington confirmed some dates for STEP-VA (System Transformation Excellence Performance in VA) reporting that Primary Healthcare Screening and Same Day Access were fully implemented by July 2019 and noting that the balance of the mandated core services must be implemented by July 2021.

6. Human Resources (HR) Update

Carolyn Ford provided an update to recent Human Resources activities, reporting a continued emphasis on hiring to include some group interviews that resulted in multiple hires and scheduling larger groups at onboarding sessions.

Expanded recruitment efforts include Realistic Job Preview and involvement in a LinkedIn pilot program

- A. A review of the vacancies in critical areas was provided, some highlights included:
 - Continued significant need for Support Coordinators.
 - Increased vacancies on the jail-based and jail-diversion teams.
 - The substantial reduction in Youth Outpatient vacancies will decrease the youth time-to-treatment as well as improve revenue.

Noting no further discussion was forthcoming, the meeting was adjourned at 10:41 a.m.

Action Items/Responsible Party Required Prior to Next Meeting:

<u>Issues to Communicate to CSB Board:</u>

Agenda Items for Next Meeting:

Next Scheduled Fiscal Oversight Committee meeting

Friday, December 13, 2019, 9:30 am. Pennino Building, 12011 Government Center Pkwy, Fairfax, VA Suite 836A

Date Approved Staff to the Board

FY 2020 Pay Period Metrics

Category/GL	FY 2020 Budget	PP Target July-Dec	PP Target Jan-June	Check	
		PP 14-26	PP 1-13		
Merit Salary	\$74,471,595	\$2,864,292	\$2,864,292	\$74,471,595	
Non-Merit Salary	\$6,229,264	\$239,587	\$239,587	\$6,229,264	
Shift	\$216,400	\$8,323	\$8,323	\$216,400	
OT	\$1,148,178	\$44,161	\$44,161	\$1,148,178	
Stipends	\$307,650	\$11,833	\$11,833	\$307,650	
Leave Pay-Out	\$600,000	\$23,077	\$23,077	\$600,000	
Fringe	\$37,075,699	\$1,391,208	\$1,460,769	\$37,075,699	
TOTAL	\$120,048,786	\$4,582,481	\$4,652,041	\$120,048,786	

Actual Data	FY 2019 Accrual Reversal	PP 14 Actual	PP 15 Actual	PP 16 Actual	PP 17 Actual	PP 18 Actual	PP 19 Actual	PP 20 Actual	PP 21 Actual	PP 22 Actual	PP 23 Actual	Year to Date
Merit Salary	(\$1,360,313)	\$2,766,680	\$2,855,099	\$2,863,081	\$2,856,421	\$2,852,830	\$2,864,928	\$2,826,770	\$2,942,330	\$2,925,343	\$2,874,010	\$27,267,178
Non-Merit Salary	(\$151,525)	\$272,607	\$301,083	\$301,845	\$301,917	\$325,371	\$296,708	\$308,548	\$302,365	\$293,591	\$272,799	\$2,825,309
Shift	(\$4,096)	\$7,442	\$7,784	\$7,923	\$7,752	\$7,885	\$7,691	\$8,209	\$8,073	\$8,337	\$8,356	\$75,354
ОТ	(\$29,713)	\$119,130	\$57,631	\$66,734	\$65,070	\$68,125	\$95,579	\$81,158	\$69,195	\$87,863	\$60,485	\$741,257
Stipends	(\$7,187)	\$11,885	\$13,885	\$13,942	\$12,378	\$13,590	\$14,640	\$14,520	\$16,812	\$12,568	\$12,552	\$129,584
Leave Pay-Out	(\$579)	\$19,784	\$1,871	\$2,490	\$19,559	\$1,382	\$74,447	\$39,520	\$21,848	\$24,304	\$51,346	\$255,971
Fringe	(\$654,746)	\$1,368,389	\$1,379,424	\$1,381,058	\$1,384,488	\$1,382,643	\$1,402,985	\$1,381,427	\$1,415,938	\$1,420,777	\$1,393,918	\$13,256,300
TOTAL	(\$2,208,158)	\$4,565,917	\$4,616,775	\$4,637,073	\$4,647,586	\$4,651,825	\$4,756,977	\$4,660,151	\$4,776,561	\$4,772,782	\$4,673,466	\$44,550,954

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Fairfax-Falls Church Community Services Board Fund 40040

FY 2020 November Statement

	FY 2020 Approved Budget	FY 2020 Revised Budget	FY 2020 Revised YTD Budget	FY 2020 Actuals Thru Nov 2019	Variance from Revised YTD Budget	FY 2020 Projection	Variance from FY20 Revised Budget	
Beginning Balance	15,166,254	26,444,773	26,444,773	26,444,773		26,444,773	11,278,519	
F Fairfax City	1,957,610	1,957,610	489,403	489,403	-	1,957,610	-	
F Falls Church City	887,299	887,299	221,825	221,824	(1)	887,299	-	
F State DBHDS ¹	11,886,443	11,886,443	4,952,685	5,575,153	622,468	9,087,285	(2,799,158)	
F Federal Pass Thru SAPT Block Grant	4,053,659	4,053,659	1,689,025	1,825,158	136,133	4,053,659	-	
V Direct Federal Food Stamps	154,982	154,982	64,576	54,542	(10,034)	154,982	-	
V Program/Client Fees	4,011,751	4,011,751	1,671,563	1,633,635	(37,928)	3,411,393	(600,358)	
V CSA	858,673	858,673	357,780	532,754	174,974	1,044,666	185,993	
V Medicaid Option	2,651,345	2,651,345	1,104,727	2,369,463	1,264,736	4,887,402	2,236,057	
V Medicaid Waiver	8,537,500	8,537,500	3,557,292	2,803,526	(753,766)	6,677,450	(1,860,050)	
V Miscellaneous	14,100	14,100	5,875	62,005	56,130	124,800	110,700	
Non-County Revenue	35,013,362	35,013,362	14,114,750	15,567,463	1,452,713	32,286,545	(2,726,817)	
General Fund Transfer	146,575,985	146,575,985	146,575,985	146,575,985	-	146,575,985	-	
Total Revenue	196,755,601	208,034,120	187,135,508	188,588,221	1,452,713	205,307,303	8,551,702	
Compensation	82,973,087	82,973,087	31,912,726	31,294,654	618,072	86,177,395	(3,204,308)	
Fringe Benefits	37,075,699	37,075,699	14,259,884	13,256,300	1,003,584	37,564,790	(489,091)	
Operating ²	63,279,541	71,977,301	29,990,542	24,072,994	5,917,548	58,953,316	13,023,985	
Recovered Cost (WPFO)	(1,738,980)	(1,738,980)	(724,575)	(220,754)	(503,822)	(1,738,980)	-	
Capital ³	-	291,855		145,927	(145,927)	300,000	(8,145)	
Transfer Out ⁴	-	6,100,000	6,100,000	6,100,000	-	6,100,000	-	
Total Expenditures	181,589,347	196,678,962	81,538,577	74,649,122	6,889,456	187,356,521	9,322,440	
Ending Balance	15,166,254	11,355,158				17,950,782		
DD MW Redesign Reserve ⁵	2,500,000	2,500,000				2,500,000		
Medicaid Replacement Reserve ⁶	2,800,000	2,800,000				2,800,000		
Opioid Epidemic MAT Reserve ⁷	300,000	300,000				300,000		
Diversion First Reserve ⁸	1,244,245	1,244,245				1,244,245		
Unreserved Balance	8,322,009	4,510,913				11,106,537		

Key

- F Fixed Annual Allocations
- V Variable Revenue based on number of services provided and total billing collections

Reserve

- 1 FY20 Budget for State Funds of \$11.9M is overstated and based on prior year fund allocations. Due to Medicaid Expansion, DBHDS reduced our revenue by ~\$4M (\$4.4M due to Medicaid Expansion, offset by ~\$400K for COLA).
- 2,3 Operating & Capital Revised Budget includes approved carryover request of \$8.9M for ongoing contractual obligations, medical detox and associated nursing services, housing assistance, building maintenance and repairs (\$8M), prevention incentive funding (\$525K), WIN implementation (\$250K), opioid (\$150K)
 - 4 Transfer Out Revised Budget was Approved during FY19 Carryover. It includes several projects for space reconfiguration to relocate staff and accommodate programs at the Merrifield Center (\$1.6M), replacement of security system system at the Juvenile Detention Center (\$2.5M) and space realignments to the third d floor of the Pennino Building (\$2M).
- 5 The DD Medicaid Waiver Redesign Reserve ensures the County has sufficient funding to provide services to individuals with developmental disabilities in the event of greater than anticipated costs due to the Medicaid Waiver Redesign effective July 1, 2016.
- 6 The Medicaid Replacement Reserve, for the implementation of Medicaid Expansion to a potential 600 consumers and will provide support with the transition of funding from the State support to Medicaid fees.
- 7 The Opioid Use Epidemic Reserve provides flexibility, consistent with the Board of Supervisors' FY 2018-FY 2019 Budget Guidance, as the County continues to work with national, state, and regional partners on strategies to combat the opioid epidemic.
- 8 The Diversion First Reserve represents one-time savings that were realized in FY 2017 as a result of longer than anticipated recruitment times to fill new positions and savings in operating expenses to pay for medical clearances. This funding will be reallocated as part of a future budget process based on priorities identified by the Board of Supervisors.

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FY 2020 Fiscal Notes

FY 2019 Adopted Carryover Actions - Board Hearing, Sept 24, 2019

\$6.1M General Construction Transfer -

- \$2.5M for the replacement of the security system at the Juvenile Detention Center
- \$2.0M for space realignment to Pennino 3rd floor
- \$1.6M for space reconfiguration at Merrifield Center

\$8.9M Operating and Capital Carryover -

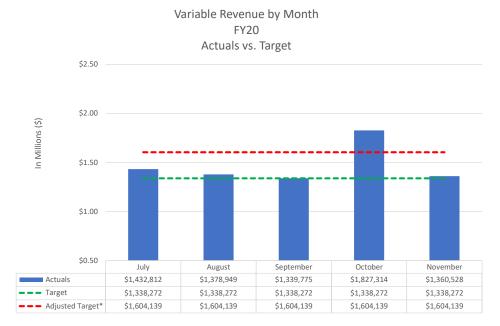
- \$8.0M for ongoing contractual obligations, medical detox and associated nursing services, housing assistance, building repair and maintenance
- \$525K for prevention incentive funding
- \$250K for WIN implementation
- \$150K for Opioid

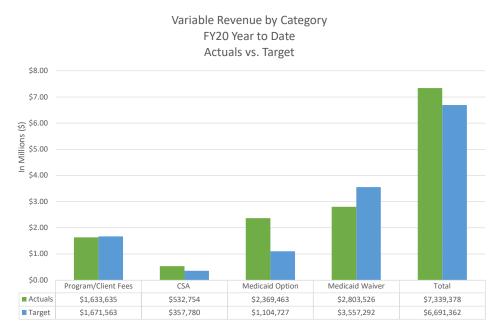
FY 2020 Adopted Budget — Board Hearing, May 7, 2019

An overview of the FY2020 Adopted Budget action items:

- The Board of Supervisors approved the following employee pay increases: 2.1% Market Rate Adjustment; 2% (average) Performance Increase and Longevity increases.
- \$2.5m for June 2020 special education graduates and other individuals eligible for DD employment and day services.
- \$2.1m second year funding to continue addressing the opioid epidemic.
- \$1.2m for 6.0 full time merit positions to expand Diversion First efforts, this includes 2.0 Crisis Intervention Specialists and 4.0 Jail Diversion positions.
- \$0.9m in contract rate adjustments
- \$0.6m for 5.0 full time merit positions to provide support coordination services for new individuals receiving a DD waiver.

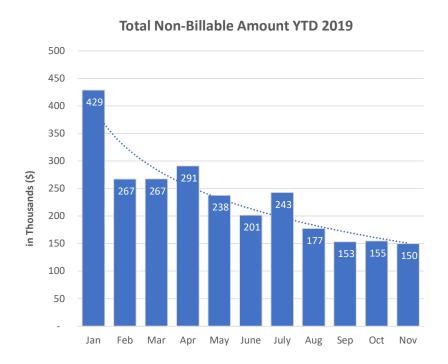
FY20 Revenue Analysis



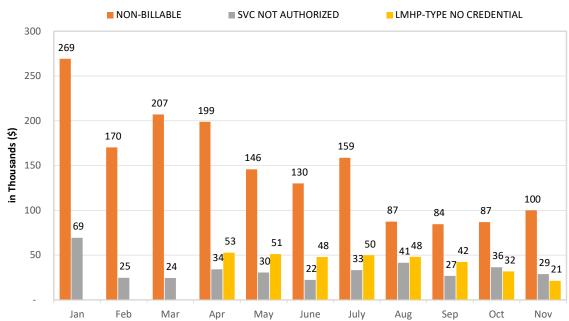


^{*}Adjusted target is reflective of expected Medicaid expansion revenue (\$4.4M for FY20)

Revenue Maximation - Non-Billable Summary YTD November 2019



Billing Error Types YTD 2019



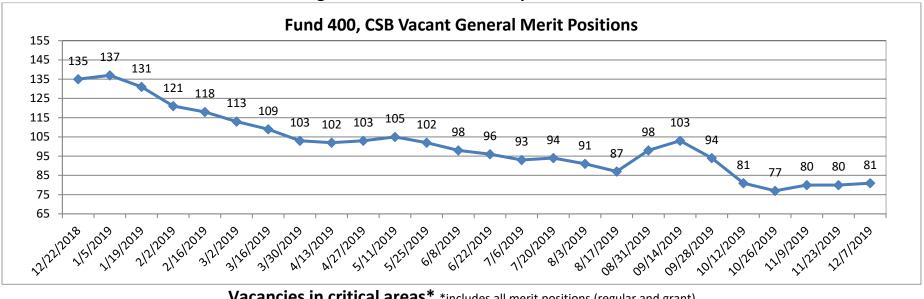
^{*} Billing error tracking for no credential for billing related to LMHP-type began in April 2019

Submission Error	Nov 2019 Adj Amt (\$)	
NON-BILLABLE	99,880	+
SVC NOT AUTHORIZED	28,702	
NO CREDENTIAL (LMHP-type)	21,260	
Total:	149,842	
Annualized:	1,798,108	

Service Typ 🚭	Service ProgramCode 🛂	Amt (\$)	Non-Billlable Reason	Note					
■ MH SK	ill-Build Resi	19,747							
•	RIC	19,747	CM program not credentialed to bill						
☐ Case N	/lanagement Resi	19,469							
	RIC	14,040	CM program not credentialed to bill						
	ANB	5,103	CM program not credentialed to bill						
	TRNGH NEWH	327	CM program not credentialed to bill						
■ MH SK	ill-Building	7,462							
	SHP	7,462	CM program not credentialed to bill						
□ PhysEx	kamResi NP40-64	6,513							
	DETOX SOC	3,006	Program-ARTS	Decision by leadership to make nonbill					
	DETOX MED	1,837	Program-ARTS	Decision by leadership to make nonbill					
	SUBOXONE	1,670	Program-ARTS	Decision by leadership to make nonbill					
□ PhysEx	kamResi NP18-39	6,179							
	SUBOXONE	3,006	Program-ARTS	Decision by leadership to make nonbill					
	DETOX SOC	2,505	Program-ARTS	Decision by leadership to make nonbill					
	DETOX MED	668	Program-ARTS	Decision by leadership to make nonbill					

Source: Credible Service & Adjustment Report November 2019
 Adjustment Amounts reflect current month of services and excludes prior month adjustments

Fiscal Oversight Committee • CSB HR Update - December 5, 2019



Vacancies in critical areas* *includes all merit positions (regular and grant)

Service area / program	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov			Dec		
Emergency Svcs/MCU	7	7	7	5	4	5	5	5	3	4	4	2	2 CIS	2	2 CIS		
													1 BH Sup.		1 BH Sup.		
Behavioral Health OP Svcs	7	6	5	6	2	2	3	4	2	7	6	10	2 BH Sr. Clin	5	1 BH Sr. Clin		
beliavioral nealth OP SVCS	′	0)	O	2		3	4		′	0	10	5 LPN)	1 BHN Sup.		
													2 BHS II		2 BHS II		
Vouth & Family OD Succ	8	8	8	9	9	9	8	6	7	8	2	2	1 BH Sr. Clin	2	1 BH Sr. Clin		
Youth & Family – OP Svcs	0	٥	٥	9	9	9	٥	0	/	٥		2	1 BH Sup.	2	1 BH Sup.		
	19														3 DDS I		1 DDS I
Support Coordination		20	21	10	11	13	14	13	15	22	21	21	15 DDS II	23	19 DDS II		
Support Coordination		20											2 DDS III		3 DDS III		
													1 DDS IV				
													8 BHS II		8 BHS II		
ADC/ Jail Diversion	11	11	7	7	3	4	4	3	4	7	9	11	1 BH Sup.	11	1 BH Sup.		
ADC/ Jali Diversion	11	11	,	,	3		4	3	4	'	9	11	1 BH Mgr.	11	1 BH Mgr.		
													1 Peer Spec		1 BHN Clin/Case Mgr.		
Commission O Diels B4	10	4.0	10	10	_		4	_	_	_	_	,		1	Compl. Coord.	2	Compl. Coord.
Compliance & Risk Mgmt.		10	5	5	4	5	5	5	5	2	2	2	1 MA II	2	1 MA II		

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