

We agree with the National Association of State Mental Health Program Directors that a core element of a successful Office of Consumer Affairs is that its “establishment, planning, and hiring must be supported by and involve consumers”.⁶⁵

Recommendation 27

Support the establishment of an Office of Consumer and Family Affairs.

C. TRANSFORMATION ROADMAP

We have assessed the current system against our recommended service delivery design. As compared with the current system, the model we propose is more business-focused and has a greater emphasis on maximizing revenue, measuring results or outcomes, and stressing productivity. Our recommended strategies to achieve the transformation include: financing strategies to optimize resources, outcomes and performance measures, and key supports for governance/leadership, workforce, and technology.

1. FINANCING STRATEGIES TO OPTIMIZE RESOURCES

The Code of Virginia defines three types of community services boards: **administrative policy**, **operating**, and **policy-advisory** boards. Fairfax-Falls Church has an **administrative policy** board that was established to set policy for, and administer the provision of, mental health, mental retardation, and substance abuse services. Services are provided through local

⁶⁵ NASMHPD. Core elements of a successful office of consumer affairs. Accessed 14 July 2008. http://www.nasmhpd.org/general_files/CORE.HTM

government staff or through contracts with other organizations and providers. Financing options may differ based on the type of board.

Fairfax County's overriding interest is to assure the provision of appropriate services and supports to residents with psychiatric disabilities in order to promote recovery and resilience. As the county grows in population and complexity, it becomes obvious that the most advanced policies and procedures for increasing revenues must be utilized, and measures of efficiency and results must become drivers in the operations of the system.

After consideration of the current financing of the CSB, the Commission recommends the following financing strategies:

a. Maximize Non-Local Revenue

County general funds contribute 67% of funding for CSB's mental health services. The CSB should maximize existing federal and state safety net revenue and track progress in this area.

In Virginia, 50% of adults receiving mental health services are enrolled in Medicaid; within the Fairfax-Falls Church CSB, however, the Medicaid enrollment rate is only 33%. We believe that the CSB can improve this rate to match, and perhaps exceed, the state enrollment rate.

In order to maximize revenue and reimbursements from Social Security Income (SSI) and Social Security Disability Income (SSDI), the Commission encourages Fairfax County to work to increase access to Social Security benefits for its homeless population. It is important to reach the county's homeless population because 72% of homeless individuals were identified in a 2008 Point in Time

Survey as having serious mental illnesses and/or substance abuse disorders, which may qualify them for SSI or SSDI.⁶⁶

Social Security Benefits: Outreach, Access, and Recovery (SOAR) is a program for people who are homeless that is supported by the Substance Abuse and Mental Health Services Administration (SAMHSA) and the Health Resources and Services Administration which might enable the county to achieve increased access. SOAR helps states and communities “develop strategies and provide training to case workers who counsel individuals in preparing accurate and complete SSI or SSDI applications”.⁶⁷

Recommendation 28

Maximize revenue from Medicaid and other entitlements for individuals receiving mental health services, including Medicare, State Children’s Health Insurance Plans (S-CHIP), CSA, Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI) to complement local, state, and federal grant/tax dollars.

b. Maximize Grant Opportunities

We recommend a strategic approach in seeking grant funding, to include adequate planning in order to assure the CSB’s readiness to take on and sustain the work.

⁶⁶ Fairfax County Department of Systems Management for Human Services. (Mar 2008) *2008 Point in Time Survey Summary Report*, Fairfax-Falls Church Annual Homeless Count. 6. Accessed 17 June 2008. <http://www.fairfaxcounty.gov/homeless/>.

⁶⁷ Clay, Rebecca A. (Mar/Apr 2007) Social Security Benefits: Outreach, Access, and Recovery. *SAMHSA News*. Accessed 8 July 2008. http://www.samhsa.gov/samhsa_news/VolumeXV_2/article1.htm

Recommendation 29

Maximize opportunities for grant funding and assure that the CSB is prepared to sustain initiatives which are originally financed by grants after the grant money is depleted.

c. Maximize Philanthropic Endeavors

A robust system of mental health care would require the collaboration of public, private, and nonprofit service providers and utilization of all funding streams. Private philanthropic donations are one important aspect of overall funding and there are a number of different ways to maximize the philanthropic initiatives within the community. These strategies include: exploring the establishment of a foundation, facilitating development of privately-funded organizations, and creating a housing development fund.

i. Foundation

Virginia Code would allow Fairfax County to establish and operate a foundation as a regional entity. The purpose of establishing an outside foundation is to receive private contributions for which only 501(c)(3) entities are eligible (monies for which Fairfax County government organizations, including the CSB, are not eligible). The foundation would function as a repository for funds, increase opportunities for working with other foundations such as the Greater Washington Council on Foundations, and work to develop public and private partnerships and resources that will promote and assure an accessible, affordable, and integrated mental health system for Fairfax-Falls Church area residents.

We understand that there are similar nonprofit charitable organizations such as CareFaxLTC (long term care) and Fairfax Futures (early childhood education) with strong commitments to

targeted county populations. We believe creation of a foundation would help facilitate support from the county's large and diversified business community.

Recommendation 30

Explore the establishment of a foundation whose purpose would be to assure an accessible, affordable, and integrated mental health system.

ii. Privately-funded organizations

Privately-funded service delivery organizations, as well as the creation of new privately-funded service delivery organizations, create increased community capacity to deliver mental health services and supports. Privately-funded organizations also represent another mechanism to generate financing through the fees they charge, the grants they receive, the contracts into which they enter, and the charitable donations they receive.

Recommendation 31

Facilitate development of new, and continue to utilize existing, privately-funded organizations.

iii. Housing development fund

A tool that may aid in the housing specific recommendations of this report is the establishment of a fund that is dedicated to housing for persons with psychiatric disabilities. Financing mechanisms that could be explored to establish this housing development fund include, but are not limited to, proceeds from zoning proffers, general fund appropriation transfers, and grant money.

Recommendation 32

Create a housing development fund to support housing for persons with psychiatric disabilities.

d. Safety Net Enhancement

As noted in the Primary Health Care section of this report, we support the modification of the status of the county's primary care centers to Federally Qualified Health Center (FQHC) Look-Alike. This would allow the county to establish Medicaid reimbursement rates directly with the federal government, which would cover the cost of services rendered and thereby leverage Medicaid dollars to increase access to behavioral health care. While modification to FQHC Look-Alike status would enhance the safety net, there would still be individuals unable to access behavioral health care because they have neither Medicaid coverage nor private insurance. The Commission therefore recommends that Fairfax County explore, perhaps through the Fairfax Health Safety Net Commission, the possibility of a locally-developed, group health insurance plan. This would require collaboration with the Commonwealth of Virginia, small businesses, hospitals, private insurance companies, and nonprofit organizations.

Recommendation 33

a. Utilize Medicaid resources to finance the delivery of mental health services in a primary care setting.

b. Explore the possibility of a locally-developed group health insurance plan.