

CSB Fiscal Oversight Committee Virtual Meeting Minutes

Date: October 15, 2020

Members in Attendance:

In-Person: Chair, Jennifer Adeli; Karen Abraham; Andrew Scalise; Daniel Sherrange; and Sandra Slappey

Audio Bridge: Captain Derek DeGeare; Ken Garnes; and Bettina Lawton

Staff: Michael Neff, Jessica Burris, and Barbara Wadley-Young

1. Summary of Information Shared/Decisions:

The meeting was called to order at 4:00 p.m. Noting this is a resumption of this meeting after several months of cancellations due to the impact of COVID, Jennifer Adeli provided some guidance for attendee actions. It was noted that some members and staff were attending virtually via an audio bridge line. It was further noted that in an effort to assist audibility, attendees would temporarily remove their face masks when speaking. Ms. Adeli, acknowledging the number of new members and the substantial amount of information being provided, encouraged attendees to ask questions and for clarification as needed.

All in person attendees introduced themselves including name, affiliation, and background.

2. Review of meeting minutes

The February 25, 2020 meeting minutes were offered for review. Ms. Adeli, noting that of the members present, none were serving on the Committee in February, made a motion for approval. Dan Sherrange made a motion to approve the minutes as presented, which was seconded and approved.

3. Administrative Operations Report

Michael Neff directed attention to the Report provided in the meeting materials, providing an overview of the topics, highlights of which included:

- Mr. Neff clarified that more than 500 *new* clients were enrolled in Medicaid in September, further noting that since FY2018 with the expansion of VA Medicaid, there has been a consistent growth of approximately 10% in new Medicaid enrollments. Additionally, Mr. Neff confirmed that other billing sources include private insurance and some self-pay clients.
- Management of requirements for a new EHR (Electronic Health Record) include review and demonstration by technical and subject matter experts to obtain a comprehensive cost proposal. There is a goal to procure the system by the end of the calendar year. It was noted that reserve funding will be used.
- A significant number of new reports and requirements are being initiated monthly by DMAS (Department of Medical Assistance Services) and DBHDS (Department of Behavioral Health and Developmental Services) to include an expansion of services provided via telehealth in response to COVID.
- Mr. Neff confirmed that he is filling the vacant Human Resources Director position during the recruitment and hiring process.
- CSB intends to grow the MAX team by 2 to 3 additional staff over the next year.
- There is current legislation pending that proposes approval of service delivery through Telehealth removing the requirement of an originating site, considered a

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- barrier to treatment. It was further noted that the use of DocuSign has broadened considerably including with CSB Human Resources and with VA Medicaid.
- Members and staff engaged in robust discussion.

4. Clinical Operations Report

In the absence of Lyn Tomlinson, Barbara Wadley-Young provided an update to clinical services, some highlights of which include:

- Approximately 50% of services are delivered via telework, telehealth, or a hybrid of the two. Mr. Neff clarified that the Emergency Order issued by Governor Northam included modifiers that broadened the definition of tele-services to include via phone or video conference that loosened restrictions on tele-health service delivery.
- It was clarified that time to treatment is actively tracked with reports provided to the Fiscal Committee as this information has been of particular interest to this committee. Additionally, Virginia CSBs are mandated by DBHDS to provide treatment within 10 business days of assessment.
- *Adult* wait times from August to September remain largely the same, noting the increase in assessments due to the hiring of several administrative staff.
- Noting the increase in wait times at Merrifield, it was clarified that this is due to significant (28%) clinical staff vacancies including staff on family medical leave and resignations. Efforts to reduce wait times include flexibility in service delivery hours, improved data management, and increased efforts to reduce the length of time in monitoring while waiting to start services.
- *Youth* wait times remain largely stable from August to September. It was clarified that the youth team is smaller and serves a smaller population, made even smaller with the impact of COVID and a reduction in referrals.
- Staff and members engaged in robust discussion including a request for additional information on CSB efforts to address staff vacancies and the impact to the vacancy break-even point. Acknowledging that the learning curve for new members is steep and lengthy, members were encouraged to reach out to Executive staff for further information as needed.

5. Financial Status

Jessica Burris provided an overview of the financial reports noting ongoing refinement to the current reports. Members were encouraged to request clarification or ask for further information as the reports are reviewed. Highlights included:

A. *Pay Period Metrics Report*

- It was clarified that this report provides current staffing numbers and expenses, confirming that it is closely monitored. Ms. Burris provided an overview of how merit position vacancies are a factor in the budget (Vacancy Breakeven Point). A brief overview of a recent budget realignment that transferred some operational savings to staff expenses (compensation and fringe) was also provided.
- Members requested that pay period dates be added to the Pay Period Metrics report to align the vacancy information with the HR Update, Fund 400, CSB Vacant General Merit Positions chart

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B. *Modified Fund Statement*

- An overview of this statement was provided highlighting that the FY 2021 Projections reflect new budgetary reporting requirements in response to COVID.
- Noting the approximately \$100K increase in revenue (Actuals to Budget), it was noted that this is primarily attributable to an increase in residential fees, improved institutional billing and insurance billing correction, and substantial back-billing efforts.
- CSB staff and Committee members engaged in energetic discussion.

C. *Variable Revenue Report*

- Ms. Burris clarified that this report was developed to provide status reports related to the anticipated revenue shortfall in FY2020 of approximately \$4.4M related to Medicaid Expansion. Ms. Burris clarified that approximately \$1.1M was added back in FY2019 due to errors in the formula for Medicaid funding.
- Acknowledging the budget increase to accommodate the expected Medicaid shortfall in FY2020, it was noted that additional efforts to address the shortfall included anticipated revenue from ARTS (Addiction Recovery and Treatment Services) and other revenue maximization efforts.

6. Human Resources (HR) Update

Michael Neff provided the overview of the Human Resources update, noting that staffing is closely monitored by Executive leadership to identify and prioritize positions identified as well as those that are both hard to fill and retain. Barbara Wadley-Young further offered that new staff require an average of six months before full responsibilities can be assumed. Referring to the HR update chart included in the meeting materials, Mr. Neff noted minor changes to the vacancies from the last reporting period. Additional highlights included:

- A. The three categories of positions were clarified as 1) Fund 400 positions are Merit (with benefits), 2) Fund 500 are grant-funded Merit positions, and 3) are non-Merit with no benefits.
- B. Noting an average of 12 staff leave each month, this is primarily attributed to compensation and workload.
- C. The CSB Coordinator (Compliance & Risk Management) position is planned for assignment to assist with implementation of the new Electronic Health Record.
- D. A reminder was offered that the vacancies in Behavioral Health and Youth & Family Outpatient services impact the Time to Treatment reports.

7. Open Discussion

Dan Sherrange reported recent communication with Daryl Washington regarding CSB Board assistance with new initiatives including expanding capacity with crisis stabilization, implementation of a new PACT (Program of Assertive Community Treatment) team and increasing capacity of Substance Use Disorder (SUD) services.

Following presentation of the meeting packet, members were encouraged to review the materials and reach out to staff with any recommendations for revision or refinement of data

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presented. Members requested that staff review current reports with a goal of presenting meaningful data to the committee as well as offer guidance for advocacy on matters of CSB interest.

Action Items/Responsible Party Required Prior to Next Meeting:

Staff to provide additional information on CSB efforts to address staff vacancies and the impact to operations.

Pay period dates will be added to the Pay Period Metrics Report for the November meeting to align the vacancy information with the Vacant General Merit Positions chart.

Issues to Communicate to CSB Board:

Agenda Items for Next Meeting:

Next Scheduled Fiscal Oversight Committee meeting

Thursday, November 18, 2020, 4:00 p.m.*

Herrity Building, 12055 Government Center Pkwy, Fairfax, VA

Room 122

** Second Thursday to accommodate the holidays.*

November 18, 2020

Date Approved



Clerk to the Board