

## REGIONAL MANAGEMENT GROUP MEETING

**Date:** October 26, 2018

**Time:** 9:00 a.m.

**Attendees:** Margaret Graham (LDN CSB), Daryl Washington (FFC-CSB), Lisa Madron (PW CSB), Deborah Warren (ARL CSB), Amy Smiley (NVMHI), LaVoyce Reid (ARL CSB), Jean Post (NVRPO), Randy Buckland (NVRPO), Tyler Carey (NVRPO), Wendy Rose (NVRPO), Betsy Strawderman (PWC CS), Alice Straker (RAFT), Jamie Elzie (DBHDS), Tara Belfast-Hurd (DBHDS), Judith Korf,

**Guests:** Tim Atken, Gwen Kennedy, Nancy Vincent, Ellen Volo, Louise Armitage, Anne Lewis, Melanie Crowder, Sue Rowland, Pat Carroll, Alice Straker (RAFT), Eileen Bryceland (FFX CSB), Judith Yoder (FFX CSB), Jeanne Booth (ARL CSB), Carol Thacker (PWC CSB), Eleanor Barber (FFX CSB), Rhonda Williams (ALX CSB), Anne Herman (ARL CSB Board), Sarah Taylor (Alex)

**Recorder:** Xiuping Cheung (NVRPO)

Call to Order: Margaret Graham (LDN -CSB) called the meeting to order at 9:05 a.m. The group was welcomed and introductions were made.

Handouts: Agenda, RMG Meeting Notes (September 2018), Budget Priorities, RAFT Performance Plan, RAFT MOA, Regional UM review for RAFT MOA Service Utilization by population size and CSB, Regional Budget report, FY19 Regional State Hospital bed use Report, Adult/Older Adult Bed Days per 100k, Regional Utilization Management Report

TOPIC	DISCUSSION	REC/ACTIONS	RESPON-SIBLE PARTY	F/U DATE
Introduction	<ul style="list-style-type: none"> <li>Introductions were made; M. Graham welcomed Legislative Representatives for Region 2</li> </ul>			
Budget Priorities	<p>2019 DBHDS Region 2 Budget Priorities handout was shared with the Legislative Representatives and discussed as follows:</p> <ol style="list-style-type: none"> <li>Step Virginia: Request for funding in the 2019 General Assembly session for FY2020 to implement remaining components of Step VA based on the size of the population served. The state has rolled out the first 2 components, which are: Same Day Access and Primary Care screening. Each CSB, regardless of the size of the population served, was provided with \$270,000 for the implementation of these first two components. DLA Regional training was offered by DBHDS in Fishersville which was not easily accessible for those in DBHDS R2. T. Belfast-Hurd shared that other CSBs also expressed concern regarding training time frame and location of training and that DBHDS has extended the DLA 20 implementation from January to March 2019 as a result. E. Volo requested actual dollar figures needed for full funding for the implementation of Step VA based on population size. The group agreed to provide this.</li> <li>Restore General Funding: Request to restore general funds to CSBs for FY19 and FY20 and to carefully evaluate Medicaid revenue</li> </ol>			

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	<p>increases across the system to determine a GF reduction approach. Region 2 is expected to have one of the highest GF reductions across the state as a result of PHI ranking. Medicaid billing will not cover this loss. CSBs were given 3 options to implementing the GF reduction. L. Armitage will provide the choice of the individual CSBs to the Legislative Liaisons. Consumer choice is a barrier not addressed in the state's plan, despite CSB efforts to encourage clients to complete the application.</p> <p>3. Jail Services: Request to invest in community-based resources to divert from ADC and provide community-based support services needed at ADC release, to promote successful community reintegration. Funding jail based services through the CSBs results in less funding and services provided in the community, and if we had more community-based programs, we would keep people stable in the community, and many could be diverted from the ADC.</p> <p>4. Opioid Epidemic: Request for comprehensive funding to address the Opioid Epidemic. Northern Virginia has low Medicaid penetration rate; and as a result, ARTs has not had a significant impact. Increased DBHDS funding in the form of Block Grant funding or increased DBHDS allocation would be more helpful than DMAS/Medicaid funding to address the Opioid Epidemic. Currently the budget for peer services funded through the CSB and DBHDS is established by DBHDS: FFX receives \$62K for peer services; PW receives \$60K for Prevention and \$50K for one-time treatment; LDN received \$50K for one-time funding. This funding distribution does not factor in the size of the population served and the inconsistency in funding makes it difficult to hire sufficient staff to provide quality services. Recent STR indicated that Virginia will receive \$15 million State Opioid Recovery Grant; T. Belfast-Hurd will email the information to the group. In order to receive SOR grant, each CSB must apply – submit proposal with data to back up the request.</p> <p>5. Request that children aging out of foster care and RTC programs be included in the facility discharge slot allocation grouping of the Community Living waiver slots. When CSBs secure EMS slots, they are required to return them/pay them back to the state.</p> <p>6. D. Washington requested that the Hospital Bed Crisis be added to the current Budget Priorities list. Region 2 needs additional funding to increase community capacity to move       ts who are ready to discharge out of the state hospital and re        them to the</p>			

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	community. DBHDS has provided such funding to other areas in the state but little has been provided to Region 2. A. Smiley shared that in FY18, NVMHI had 106 cases with ID/DD, which is 8% of all admissions and in FY19 1 <sup>st</sup> quarter – October they had 44 admissions with ID/DD, nearly half of the full year in a single quarter. E. Volo shared that a new program is being developed called the Virginia Mental Access program. The goal for this program is to help train Pediatricians on mental health medications for children. This program will be supported by Fed grant dollars provided to the Health Department.			
<b>RAFT</b>	<p>Performance Plan handout was shared with the group.</p> <ul style="list-style-type: none"> <li>• Program purpose is to support and help facilitate the discharge of older adults from state hospitals; diversion efforts to prevent state hospital admissions and increased community partners' willingness and ability to serve our population.</li> <li>• Psychiatrist hours are provided by Arl CSB as an in-kind contribution.</li> <li>• RAFT Performance Plan, Regional MOA and Regional RAFT data was shared with the group.</li> <li>• Concerns regarding the MOA were expressed related to the lack of alignment between the RAFT current census and the population size by CSB and the value of a Regional Older Adult Service Stakeholder Group.</li> <li>• The Regional Office was asked to work with RAFT to collect vacancy rates and general turn over annually. This data will be used to project realistic timeframes for corrective alignment of services with population size.</li> <li>• The RMG agreed to discuss this further after the additional data has been collected and reviewed.</li> </ul>			
<b>Brandon House Funding Request</b>	<ul style="list-style-type: none"> <li>• Brandon House is seeking an increase in funding for a CPI adjustment. Currently, there is a \$34K budget shortfall due to modified business practices related to management fees. DBHDS has not historically been consistent in providing COLAs each year across all programs. It was agreed that J. Post would provide a DBHDS Funding Request for Crisis Stab both to cover the shortfall and for a COLA across all regionally funded CSUs. L. Madron will have a revised Brandon House Addendum sent to Fellowship without a COLA as funds are not currently available.</li> </ul>			

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Regional Office Budget	<ul style="list-style-type: none"> <li>T. Carey presented highlights of the current Regional budget.</li> </ul>			
UM Report	<ul style="list-style-type: none"> <li>Monthly state hospital bed use report was shared with the group</li> <li>The Regional UM Report was distributed and highlights reviewed.</li> </ul>			
Round Robin	<ul style="list-style-type: none"> <li>ARL: Commissioner visit went well; Nov. 8<sup>th</sup> is the Arlington CSB meeting on Autism and they will address R2 efforts as well as Arl efforts; D. Warren and J. Post will participate in a panel discussion at the Children's legislative roundtable in PW.</li> <li>FFX: Exploring options to relocate Crisis Care into the 16 bed boys' probation home on Shirley Gate Rd.</li> <li>DAP MOA is currently with FX county attorney for review.</li> <li>NVMHI: State hospital had triannual survey; previously the mock survey had 87 citations but in the actual survey in August, there were only 25 citations. 99% of citations were related to facility environment and 1 related to QA, which has been corrected.</li> <li>Implementation of the new Medical Clearance Guidance document is November 7<sup>th</sup>.</li> </ul>			

**Adjournment:** The meeting was adjourned at 12:30 p.m. The next meeting will be on November 30, 2018, at 9:00 a.m. in Government Center, 12000 Government Center Parkway, Rooms 4/5, Fairfax, VA 22035

  
Recorder

11/30/18  
Date

  
Chair

11/30/2018  
Date