



Community Services Board

FAIRFAX-FALLS CHURCH COMMUNITY SERVICES BOARD

Bettina Lawton, Chair

Merrifield Center,

8221 Willow Oaks Corporate Drive, Fairfax, VA 22031

Level 1 - Room 3-314, West

Wednesday, October 23, 2019, 5:00 p.m.

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| 1. Meeting Called to Order | Bettina Lawton | 5:00 p.m. |
| 2. Recognition | Bettina Lawton | |
| 3. Matters of the Public | Bettina Lawton | |
| 4. Amendments to the Meeting Agenda | Bettina Lawton | |
| 5. Approval of the September 25, 2019 CSB Board Meeting Draft Minutes | Bettina Lawton | |
| 6. Staff Presentations | | |
| A. Behavioral Health Outpatient & Case Management Services | Eileen Bryceland | |
| 7. Director's Report | Daryl Washington | |
| 8. Matters of the Board | | |
| 9. Committee Reports | | |
| A. Behavioral Health Oversight Committee | Diane Tuininga | |
| B. Compliance Committee | Bettina Lawton | |
| C. Developmental Disabilities Committee | Sheila Jonas / Nancy Scott | |
| D. Fiscal Oversight Committee | Jennifer Adeli | |
| E. Other Reports | | |
| i. CSB Board Retreat Report | Bettina Lawton | |
| ii. CSB Legislative Folders and Talking Points | Ken Garnes | |
| 10. Information Item | | |
| A. Review of CSB Board Policies #2300, #2600 | Sheila Jonas | |
| B. Assoc. Member Nomination: Behavioral Health Oversight Cmte | Diane Tuininga | |
| 11. Action Item | | |
| A. Approval of CSB Board Policies #2120 and #2500, and #4201 | Sheila Jonas | |
| B. Approval to Post Fee Policy Schedule for Public Comment | Sebastian Tezna | |
| C. DBHDS SOR Grant Approval | Michael T. Lane | |

Closed Session: Consultation with legal counsel employed or retained by a public body regarding specific legal matters requiring the provision of legal advice by such counsel, as permitted by Virginia Code Section 2.2-3711(A)(8).

12. Adjournment

Fairfax-Falls Church Community Services Board

September 25, 2019

The Board met in regular session at the Merrifield Center, 8221 Willow Oaks Corporate Drive, Fairfax, VA.

The following CSB members were present: Bettina Lawton Chair; Daria Akers; Basilio ‘Sonny’ Cachuela, Jr.; Ken Garnes; Rachna Sizemore Heizer; Sheila Coplan Jonas; Suzette Kern; Garrett McGuire; Edward Rose; Nancy Scott; and Diane Tuininga

The following CSB Board members were absent: Jennifer Adeli and Evelyn Spain

The following CSB staff was present: Daryl Washington; Eileen Bryceland; Bill Hanna; Michael T. Lane; Linda Mount; Joe Rajnic; David Simmons; Cynthia Tianti; Sebastian Tezna; and Lyn Tomlinson;

Guests:

1. Meeting Called to Order
Bettina Lawton called the meeting to order at 5:05 p.m.
2. Matters of the Public
None were presented.
3. Amendments to the Meeting Agenda
The meeting agenda was provided for review. Acknowledging no revision recommendations were forthcoming, the agenda was accepted as revised.
4. Approval of the Minutes
Draft minutes of the August 28, 2019 meeting of the Fairfax-Falls Church Community Services Board were presented for review. As no suggestions for revision were offered, Suzette Kern made a motion for approval, which was seconded and passed.
5. Staff Presentation
David Simmons, Service Director of Supportive Community Residential Services (SCRS), provided an overview of the SCRS program clarifying that this is a residential treatment and housing program with both directly operated (CSB) and contracted (vendor partner) services as noted on each slide. Highlights of the presentation included:
 - Noting that the information was provided starting with the most to the least acute services provided, each slide was reviewed with some additional details provided, including:
 - The average length of stay at the Intensive-Transitional Therapeutic Group Home is 18-24 months. Residents may be placed as a step-down from the state hospital system.
 - Supervised Residential Programs are contracted through Gateway Homes in CSB priority housing including single and town homes. Priority housing

requires the use of CSB owned properties, when vacant and available, over seeking other housing in the community.

- Supportive Residential Services are provided in an apartment setting and include both in home and/or in the community services, including Mental Health Skill Building Services (MHSB) as needed (billed in service hours). MHSB was clarified to be services that teach daily living skills, e.g. grocery shopping, medication compliance, house cleaning, budgeting, etc.
- The Housing First Sustain model, through grant funding, provides stable housing with an offer of wrap-around supports; the acceptance of services is *not* required to qualify for housing. Targeting the homeless population, this includes those discharging from state hospitals, from the community, a step-down from supervised housing, and, with dedicated funding from the county, Jail Diversion (Diversion First).

6. Director's Report

Executive staff provided several agency updates, some highlights of which are listed below:

Daryl Washington offered a brief overview of some recent agency communications and actions to include:

- Recognizing the ongoing struggle over the lack of bed space at the state hospitals, Department of Behavioral Health and Developmental Services (DBHDS) announced plans to reopen portions of Catawba Hospital with 28 beds becoming available in FY2020 and an additional 28 beds opening in FY2021.
- The Northern Virginia Mental Health Institute (NVMHI) has a scheduled power outage of several hours on Saturday, September 28th for some construction. Plans are underway to accommodate individuals who would typically be housed at, or referred to, NVMHI during the outage.
- With additional funding awarded by DBHDS to strengthen the CSB Crisis Stabilization Unit, we are now able to accept individuals with a TDO (Temporary Detention Order). Efforts to secure co-licensure to accept individuals in psychiatric crisis and/or detoxing are ongoing.
- Offering a reminder of the ongoing operational issues with Credible, the CSB Electronic Health Record (EHR), Mr. Washington provided an update to current efforts at correction and future planning. These include:
 - Acknowledgement that the CSB is still working from the Chicago, Illinois platform as the Loudoun platform remains inoperable.
 - Finalization of an updated Service Level Agreement (SLA) is anticipated soon. Regular meetings with the Department of Information Technology (DIT) have been scheduled to assist with development of the updates to the Agreement.
 - Reporting a web-service function in Credible that provides for the secure transfer of records, efforts are underway to export all CSB records in 'flat' record format to secure electronic storage. This preemptive measure is to

provide access to CSB records should Credible experience future inoperability crises.

Members requested to have this matter added to the Compliance Committee agenda for October, as a high-risk concern.

- Attention was directed to the *Assessment of Health Informatics and Revenue cycle Management Functions and Business Units* report from Health Management Associates (HMA). Results included consideration of activating additional Credible functions, development of a Project Management staff position, and including performance-based language in ongoing discussions with Credible.
- Acknowledging room for improvement in the onboarding process, Professional Development and Human Resources staff are working together to design a more efficient process that will include improvements to staff training and credentialing.
- Managed Care Organization (MCO) procedures and requirements for authorizations, pre- and re-authorizations, and billing is an ongoing challenge across the state. Recommendations included accountability requirements and uniformity of forms and business processes across all the MCOs. Noting that the primary contract is between DMAS (Department of Medical Assisted Services) and the MCOs, DMAS must lead the discussions for refinement of the contract to address accountability by the MCOs.
- SPQM (Service Process Quality Management) is a report writing platform that is being considered as an alternative to the Credible reporting tool.
- Linda Mount provided overviews of the Annual/4th Quarter CSB Status Report and the first half of the CSB Performance Measures for FY2019 Quarter 4 related to the Community Services Performance Contract (CSPC). The second half of the CSPC data will be provided in at the October CSB Board meeting. A reminder was offered that some of the data provided is marked as modified, noting that the CSB modified measure is considered to be a better representation of the data.
- Members were provided a copy of the FY2021 Budget in Concept noting that many of the requests remained the same from FY2020. Differences include funding for Healthcare Business Operations Requirements, funding for Pay Adjustments for Psychiatrists noting that they were implemented some years ago as a recruitment and retention tool, and for Benefits. Mr. Washington clarified that a conceptual budget is provided to the Board each year as a means of providing information for review and feedback. The approval request is for submission of the conceptual budget to the county for inclusion in the annual budget later in the Fiscal Year.
- An overview was provided of the handout titled *Agency Decision Packages have been made public on the Department of Planning and Budget (DPB) website*. This handout offers a first look at draft proposals for the Virginia biennium budget including Medicaid and DBHDS. The proposals include funding for increased waivers, increased behavioral healthcare rates, STEP-VA funding, and a 'system transformation' process to align DMAS (Medicaid) and DBHDS rules while also

restructuring/adding authorized services for a better community service continuum. More information will be provided as it becomes available.

- Bettina Lawton and Mr. Washington distributed an announcement to Save the Date for a scheduled Open House in December 2019 at Merrifield. Invitees will include the Board of Supervisors, all candidates on the ballot for the Fairfax County elections in November, representatives for the cities of Fairfax and Falls Church, local representatives in the General Assembly, and members of the public. Diane Tuininga (Fairfax City) and Edward Rose (City of Falls Church) will provide feedback on contacts at the respective cities.
- Bettina Lawton reported reaching out to BOS Chair Sharon Bulova in consideration of moving the proposed joint meeting of the BOS and the CSB Board from October 22 to a more convenient date for both Boards.

7. Matters of the Board.

Daria Akers announced the recent groundbreaking for a new 60-bed, \$224M Children's Psychiatric Hospital in Tidewater, VA. Three floors have been reserved for future inpatient care.

Diane Tuininga offered a reminder of the 2019 Wellness and Recovery Conference on Friday, October 18, 2019, directing attention to a flyer provided in the meeting materials.

Garrett McGuire shared a recent news story that former Health and Human Resources Secretary Bill Hazel, now Senior Advisor for Strategic Initiatives and Policy with the Institute for Biohealth Innovation (IBI) at George Mason University, announced receipt of a \$2.5M federal grant that will provide resources to local community services board to determine best practices for the prevention and treatment of opioid addiction.

8. Committee Reports

A. *Behavioral Health Oversight Committee (BHOC)*

Diane Tuininga provided highlights of the September meeting, including:

- The challenge question added to the meeting agenda for October is about recruitment and retention of staff.
- Cynthia Sturdevant with Neighborhood Health provided an overview of the broad array of services provided, emphasizing the many locations at which these services may be accessed.
- The report, provided earlier, of some psychiatric beds opening at Catawba State Hospital, was also provided at this meeting.
- DMAS and DBHDS are working together to improve communication and uniform messaging.

The next BHOC meeting is Wednesday, October 9, at 5:00 p.m. at the Merrifield Center, Level 3-Room 314, West.

B. *Compliance Committee*

Bettina Lawton provided highlights of recent activities to include:

- Offering a reminder that fabricated data was provided in the distributed draft ComplyTrack reports, members were given an opportunity to review and

comment on proposed data tracking options. Some revision recommendations were offered.

- Review of CSB Board policies for both Corporate Compliance Program (#2300) and Risk Management (#2600) is ongoing.

The next meeting is Wednesday, October 18 at 4:00 p.m. at the Merrifield Center, Level 3-Room 314, West.

C. *Developmental Disabilities (DD) Committee*

Sheila Jonas and Nancy Scott, noting there was no September meeting, confirmed the date of the October meeting.

The next meeting is Wednesday, October 2 at 5:30 p.m. at the Merrifield Center, Level 1-Room 308A/B, West.

D. *Fiscal Oversight Committee*

Suzette Kern, noting the absence of Jennifer Adeli at this meeting, provided an overview of the September meeting on her behalf. The following was highlighted:

- There were no significant changes to the Modified Fund Statement.
- Revenue slightly exceeded the revenue target but still fell short of the Medicaid Expansion adjusted target.
- A summary of the Carryover requests that will be submitted to the Board of Supervisors (BOS) was provided, noting that \$4.5M was requested, with the Department of Management and Budget (DMB) recommending \$3.85M be submitted.
- A review of the FY 2021 Budget in Concept was also provided.
- An overview of the *Assessment of Health Informatics and Revenue Cycle Management Functions and Business Units* report by Health Management Associates (HMA) was distributed.
- An increase from 87 to 98 in Vacant General Merit positions was reported, attributed to newly established positions.

The next meeting is Friday, October 18, at 9:30 a.m. at the Pennino Building, Room 836A.

E. *Other Reports*

Ken Garnes, directing attention to the hard copies included in the meeting materials, offered a reminder of the recently emailed draft legislative talking points that were sent in anticipation of review and discussion at the CSB Board Retreat. Members were encouraged to review and submit comments by Friday to allow all recommendations to be applied to the draft copy that will be provided at the CSB Board retreat. Other documents that are in consideration for inclusion in the legislative folders include heat maps and affordable housing information. Members requested that the talking points as presented be used a background document for Board member use, with development of a one-page executive summary to be included in the legislative folders that are provided for distribution to legislators at the scheduled visits. Initial recommendations included ensuring an earlier release to allow more time for CSB Board member review, specific funding amounts are to be

included for each topic, uniformity in the data provided across all the reports that are published at about this same time.

9. Information Item

A. *CSB Board Policy Review*

Sheila Jonas directed members to review provided copies of the CSB Board policies scheduled for review, including numbers 2500, 4201, and 2120, offering a reminder to submit recommendations to the CSB Clerk to the Board, Erin Bloom. The policies will be submitted for approval at the October 23, 2019 CSB Board meeting.

B. *Review of FY2020 Fee Policy Related Documents*

Nancy Scott provided an overview of the process for reviewing and updating the Fee Schedule and related documents. Attention was directed to the fee documents provided in the meeting materials and members were encouraged to review the attached in preparation for a request to post the revised documents for public comment at the October 23, 2019 CSB Board meeting.

C. *DBHDS SOR (State Opioid Response) Grant Renewal*

Michael T. Lane provided an overview of the renewal of the grant that will provide for two peer support specialist positions working with justice-involved individuals in the drug courts and at the adult detention center. Approval to apply for the renewal will be submitted to the CSB Board at the October 23, 2019 CS B Board meeting.

10. Action Item

A. *Appointment of CSB Board Developmental Disabilities Committee Associate Members*

Sheila Jonas offering a reminder that the current roster of nominated Associate member was presented to the full board at the August CSB Board meeting, following which Ms. Jonas offered a motion requesting approval of the four listed agencies to be appointed as Developmental Disabilities Associate Members, which was seconded and approved.

B. *CSB Board Policy Revisions*

Ms. Jonas moved that two of the three proposed CSB Policies, #1200 – Definition of Policy, Regulation, and Procedure and #1201 – Adoption, Revision, and Revocation of CSB Board Policy be approved as presented and the third CSB Board Policy #1203 – Policy Manual be revoked as presented. The motion was seconded and passed.

C. *Approval to submit the FY 2020 Budget in Concept*

Suzette Kern made a motion for the Budget in Concept, as discussed earlier in the meeting, be approved for submission as presented which was seconded and approved.

Bettina Lawton inquired whether there was anything that needed to be discussed in closed session. No one raised any issues or need for a closed session.

There being no further business to come before the Executive Committee, the meeting was adjourned at 7:05 p.m.

Actions Taken - -

- ◆ The August 28, 2019 CSB Board Meeting minutes were approved as presented.
- ◆ Approval of four CSB Board Developmental Disabilities Committee Associate Members.
- ◆ Three CSB Board policies were approved as presented.
- ◆ The FY2021 CSB Budget in Concept was approved for submission.

Date Approved

Staff to the Board

DRAFT

Fairfax-Falls Church Community Services Board
Compliance Committee Meeting Minutes
September 18, 2019

The Compliance Committee of the Fairfax-Falls Church Community Services Board met in regular session at the Merrifield Center, 8221 Willow Oaks Corporate Drive, Fairfax, VA.

The following Committee members were present: Bettina Lawton, Board Chair; Jennifer Adeli; Ken Garnes; Sheila Coplan Jonas; Suzette Kern; and Diane Tuininga

The following Committee members were absent: Nancy Scott

The following staff were present: Daryl Washington, Bill Hanna, Luann Healy, Cindy Tianti, and Lyn Tomlinson

1. Meeting Called to Order

The meeting was called to order at 4:01 p.m.

2. Review of Meeting Minutes

Meeting minutes of the August 21, 2019 Compliance Committee were provided for review and revision. As no recommendations were forthcoming, Diane Tuininga made a motion to approve the minutes as presented, which was seconded and unanimously approved.

3. Follow up items from the prior Compliance Committee Meeting

Risk Management Policy

Daryl Washington distributed a draft Risk Management Procedure designed to address mitigation and management of risk across the CSB. It was further reported that a modified version of this procedure will be used as a guidance document in a contract monitoring process with agency partners that will include quarterly reviews. Offering a reminder of the dissolution of the Department of Administration of Human Services (DAHS), Mr. Washington offered a further reminder that DAHS contract staff was absorbed into the County Department of Procurement and Material Management (DPMM). Due to this transfer, a meeting has been scheduled with DPMM to define roles and responsibilities with contract staff to ensure appropriate supervision and monitoring of contracts, requests for proposal (RFP), etc. Members engaged in robust discussion regarding the goal of the procedure including expectations for reporting to the CSB Board. Mr. Washington will provide a revised draft at the October 2019 Compliance Committee meeting.

Mr. Washington provided an overview of the Contract Partner Performance Report, also provided in the meeting materials, that is designed to guide and support the quarterly monitoring process with agency partners as noted above.

4. Updates

ComplyTrack Reports

Mr. Hanna reviewed each of the three sample reports, reminding members that the data provided was fictitious and inviting feedback on design and data categories. A further reminder was offered that confidentiality must be observed in the design of the reports as well as during committee discussion once the reports are finalized and factual data is provided.

- Audit Report – the report tracks audits conducted by the compliance team.

- Revision requests included 1) clarification of the Audit Results descriptions, 2) clarification of the Audit Scope descriptions, and 3) revision to include the triggering event/cause for the audit.
- Corrective Action Plan (CAP) Report – tracks both internally (issued by the compliance team) and externally, e.g. DMAS (Department of Medical Assisted Services), DBHDS (Department of Behavioral Health and Developmental Services), etc. issued CAPs.
 - Revision requests included 1) use of control number (assigned by ComplyTrack) to track audits through each report, 2) removal of program license number column, and 3) removal of compliant (status) column.
- Education Report – in addition to ongoing education, a CAP may result in training/re-education tracked in this report.
 - Revision requests included 1) use of control number (assigned by ComplyTrack) to track audits through each report where appropriate.

Luann Healy reported the August 2019 CSB serious (level III) incidents.

5. CSB Board Policy Review Update

Referring to the prior risk management discussion, review of CSB Board policies #2300 and #2600 was tabled until the October Compliance Committee meeting.

6. Next Steps/Other Issues

None were raised.

Bettina Lawton inquired whether there any matters that required discussion in closed session. As no one raised any matters or need for a closed session and there being no further business to come before the Committee, the meeting was adjourned at 5:03 p.m.

Actions Taken –

- Minutes of the August 21, 2019 Compliance Committee meeting were reviewed and approved.
- Bill Hanna and Luann Healy will apply recommended revisions to the sample ComplyTrack reports for submission at the October Compliance Committee meeting.

October 16, 2019
Date Approved


Clerk to the Board

Fairfax-Falls Church Community Services Board
Developmental Disabilities Committee

October 2, 2019

The Developmental Disabilities Committee of the Fairfax-Falls Church Community Services Board met in regular session at the Merrifield Center, 8221 Willow Oaks Corporate Drive, Fairfax, VA.

Committee Members in Attendance: Sheila Coplan Jonas, Co-Chair and Daria Akers, Board Member

Committee Members absent: Rachna Sizemore Heizer, Board Member and Nancy Scott, Co-Chair

Associate Members in Attendance: *The Arc of No. VA*, Rikki Epstein; *Chimes, VA (CVA)*, Kevin Drumheller; *Community Living Alternatives (CLA)*, Susan Keenan; *Community Systems, Inc. (CSI)*, Jina Kang; *CRi*, Julie Allen; *Fairfax County Public Schools (FCPS)*, Sharon Denisar; *Hartwood Foundation, Inc. (HFI)*, Sean McGinnis and Natasha Lantz; *ECHO*, Zanelle Nichols; *Employment Advocates Group (EAG)*, Theo Rucker-Abilla; *Lutheran Family Services (LFS)*, Andrew Miller; *Pathway Homes, Inc. (PHI)*, Anita Robinson; *R.A. Quarshie Healthcare*, Adelaide Etse; and *ServiceSource*, Dennis Brown;

Staff in Attendance: Barbara Wadley-Young, Evan Jones, Kevin Lafin, Michael T. Lane, Victor Mealy, Joseph Rajnic, and Lyn Tomlinson

1. Meeting Called to Order

Sheila Jonas convened the meeting at 5:03 p.m.

2. Welcome and Introductions

Committee and Associate Members as well as staff and members of the public were welcomed, following which, they introduced themselves including staff position or agency affiliation.

3. Approval of the Agenda

As no quorum was present no revision to the agenda was considered.

4. Approval of the Committee Meeting Minutes

As no quorum was present, approval of draft minutes of the August 7, 2019 Developmental Disabilities Committee meeting was tabled until the December meeting.

5. Matters of the Public

None were presented.

6. Matters of the Committee

Associate Members and attendees reported dissatisfaction with the General Assembly decision to, once again, not include service rate increases in the Commonwealth's FY2021 proposed budget. Offering a reminder that the current rates are based on 2013 data, it was emphasized that a re-base of rates based on current data is critically needed, it was noted that budget negotiations will occur during the public hearings and General Assembly session in January 2020.

Rikki Epstein reported on some upcoming National Employment Awareness Month events with the Arc of Northern Virginia including an Employment Symposium and a family and provider event "Arctoberfest", encouraging attendance at both. Flyers will be forwarded to the Clerk with a request for further distribution.

7. Staff and Agency Updates

Lyn Tomlinson, noting that several staff would provide updates, offered some highlights including:

- Efforts to address the hospital bed crisis include making available 28 beds at the Catawba State Hospital in FY 2020 with an additional 28 beds scheduled to open for FY 2021.
- The CSB Budget in Concept includes a request for approximately \$1M for added support staff in anticipation of potential additional waiver slots and to adhere to the Department of Justice (DOJ) Settlement Agreement.
- Copies of the Partner Performance Feedback form were distributed to attendees with a request for feedback, both at the meeting and following the meeting, noting that comments may be sent to Clerk to the Board, Erin Bloom. Reporting that the form was developed following comments received at the June 2019 joint BHOC and DD Committee meeting, feedback was strongly encouraged. Attendees engaged in robust discussion, some highlights of which are:
 - Staff clarified that the form is intended to facilitate collaborative discussion at quarterly partner meetings.
 - Clarification was requested for each element/data point to include some flexibility of purpose to address the varied services provided by CSB partners.
 - Refinement of the language to highlight the collaborative intent and discussion guidance including refining the structure to limit the report card 'feel' of the form.

Evan Jones reported on recent activities in Employment & Day Services offering a reminder that the Board of Supervisors issued a proclamation in May 2019 that October 2019 is National Disability Employment Awareness Month highlighting that this year's theme is Right Talent, Right Now. This addresses the contribution of individuals with disabilities to the current economic success nationwide. Additional highlights include:

- There was a Partner Expo at the Government Center on September 18, 2019. Approximately 30 providers were present at the event that was attended by slightly more than 125 people. Invitees included the local CSBs and school transition staff.

- Attention was directed to a video that highlighted Self-Directed Services noting that CSB staff Denise Sequeira hosted the video.

Victor Mealy provided an update to Support Coordination Services. The Department of Behavioral Health and Developmental Services (DBHDS) has completed assignment of 150 waivers assigned to this CSB. Additionally, 13 individuals were transferred in from other CSBs. Assignment of Support Coordinators to the 163 new waiver recipients is underway. Furthermore, it was reported that the Waiver Selection Assignment Committee (WSAC) needs volunteers, noting that more information is available on the CSB website, keyword search WSAC.

Mr. Mealy offered a reminder that this was his last Developmental Disabilities Committee as he will retire in November, noting that Sierra Simmons will be assuming his position following lengthy job-share preparation.

Joe Rajnic, with Assisted Community Residential Services (ACRS) provided an overview of the Directly Operated and Contracted services. Additional highlights included:

- Working with the Fairfax County Public Library (FCPL) on inclusion, three individuals are volunteering with FCPL, noting that a total of 10 individuals are expected to be volunteering on a regular basis.
- Further inclusionary efforts included collaboration with Human Resources resulting in the placement of an individual on an interview panel for a Direct Support Professional/DDSI (Developmental Disability Specialist I). The individual offered three interview questions to include 1) what activities do you like to do in the community? 2) do you cook? and 3) do you come to work on time?
- Noting nine applications were submitted, Best Buddies International has invited four Fairfax-based individuals with an offer to participate in the program.

Barbara Wadley-Young provided an update to recent activities of the Welcoming Inclusion Network (WIN), including the following:

- At the WIN meeting on September 23rd, the co-leaders of WIN, Fairfax County Supervisor John Cook (Braddock District), Sponsoring Chair and Lori Stillman, Operational Chair, and several other steering committee members were presented with plaques for their contributions to WIN. Additionally, a status update to the four WIN recommendations presented earlier this year was offered.
- Partners with the Health Department and Neighborhood & Community Services made a presentation to the Support Coordination team, highlighting services and eligibility criteria on services for seniors, that included visits to senior centers and adult day centers. More information will be provided as it becomes available.
- Referring to the Self-Directed Services (SDS) video viewed earlier, Ms. Wadley-Young emphasized a goal of increasing SDS, noting that the opportunity will initially be offered to individuals in day programs and shelter services.
- Reporting that Lucy Caldwell has left the CSB, to work with Fairfax County Public Schools, there is a plan to continue developing videos that highlight the varied opportunities including retirement.

- Referring to the volunteer opportunities mentioned previously, it was clarified that this effort initiated with WIN, noting that efforts to create volunteer opportunities are ongoing.

8. Associate Member Presentations

Sheila Jonas introduced the assigned speakers:

- *Employment Advocates Group.*; Theo Rucker-Abilla distributed a handout and directed attention to the PowerPoint presentation, confirming that they provide vocational services including skill building. Although support is typically provided 20-40 hours/week, it can be as low as 10 hours/week if needed. It was highlighted that they also offer transportation services to and from work, emphasizing that as some very rural areas are served, this is a very valuable component of successful employment.
- *Hartwood*; Sean McGinnis and Natasha Lantz jointly provided an overview of the services provided highlighting that the agency initially provided and continues to provide respite services, clarifying that they also administer some county respite subsidy funding that provides private respite care in the community. Additionally, Hartwood supports individuals with physical and medical support needs, including modification to the group home facilities as needed and trained staff. There is a focus on locating resources that support an individual’s primary interests to provide community engagement activities. It was confirmed that Hartwood is contracted to provide services to some CSB individuals, noting that accommodations are adopted to allow the individuals to age in place.

9. Discussion of DD Committee meeting vision

Sheila Jonas provided an update to the recent CSB Board Member Retreat, reporting the goal of developing a CSB Board Mission Statement. Related to that process was a discussion of the motivation that prompted each member chose to volunteer with the CSB Board. Daria Akers spoke of her personal story and motivation for volunteering.

Offering a reminder that the next meeting was scheduled for December 4th, Ms. Jonas shared that the meeting would be a joint meeting with the Behavioral Health Oversight Committee, similar to the June 2019 joint meeting.

There being no further business to come before the Committee, the meeting was adjourned at 6:29 p.m.

Actions Taken –

- The August 2, 2019 DD Committee meeting minutes were tabled for review at the next meeting as there was no quorum.

Date Approved

Clerk to the Board

CSB Fiscal Committee Meeting Minutes

Date: September 20, 2019

Attending: Chair, Jennifer Adeli; Ken Garnes; Suzette Kern; and Bettina Lawton,

Absent: Basilio 'Sonny' Cachuela, Jr., Edward Rose

Staff: Daryl Washington, Bill Hanna; Lyn Tomlinson; Jessica Burris, and Judy Stocks

1. Summary of Information Shared/Decisions:

Jennifer Adeli called the meeting to order at 9:40 a.m.

2. Review of meeting minutes

Noting no quorum, review of the August 16, 2019 meeting minutes was tabled until the October 18, 2019 meeting.

3. Financial Status

Jessica Burris provided the financial report, to include:

- A. *Pay Period Metrics Report*, the comparison of actuals to target for pay period #17 revealed a slight overage that is primarily attributed to increases in pay for recruitment and retention of psychiatrists, confirming that a request has been added to the budget in concept for an increase in funding. Additionally, there are scheduled meetings with DMB (Department of Management and Budget) to strategize and identify efficiencies.
- B. *Modified Fund Statement*, reporting no significant change from last month, Ms. Burris highlighted the correction to switch the Medicaid Option and Medicaid Waiver budgets, noted at last month's meeting, has been completed. Changes to the report format include the addition of a YTD (Year to Date) budget column confirming that a projections column will be added as well, once more data is available.
- C. *Revenue Analysis*, noting that revenue slightly exceeds the target budget, it was recognized that it still falls short of the adjusted target of Medicaid Expansion. A reminder was offered that the methodology employed by the state to project this revenue is considered flawed resulting in a substantial difference between the state and the CSB projected revenue recapture rate related to Medicaid Expansion.
- D. *Non-Billable Summary*, highlighting the improvements made in non-billable services, revenue correction, correction efforts include:
 - Licensed Mental Health (LMHP)-Type billing, anticipated to be implemented by the end of October 2019.
 - A reminder was offered of the anticipated (approximately) 60-day lag in the billing to payment cycle.
 - It was reported that the CSB recently signed a contract with MCO (Managed Care Organization) provider Kaiser, which is anticipated to significantly impact the billable services on this report.
 - Back-billing efforts continue, noting an expectation of approximately four months before a stable base revenue is realized.

4. Administrative Operations Report

Bill Hanna distributed a handout and provided an overview of the FY2019 Carryover requests that will be presented to the Board of Supervisors (BOS) for approval at the September 24, 2019 meeting. Noting a difference in the initial request of \$4.5M and the amount of \$3.85 recommended by DMB, staff and committee members engaged in robust discussion.

CSB Fiscal Committee Meeting Minutes

Recognizing that the projected and recurring Medicaid Expansion shortfall will negatively impact carryover funds, a reminder was offered that current budget realignment efforts will be applied to the base (budget) and are anticipated to lessen the overall impact.

5. Budget in Concept

Daryl Washington reported on recent and pending activities of the CSB, including:

- A. A draft version of the FY2021 Budget in Concept was distributed, noting that the requests were primarily unchanged from last year. Differences include funding requests for Healthcare Business Operations Requirements (previously referred to as Utilization Management) and for pay adjustments for psychiatrists, as noted earlier in the meeting.
- B. An overview of the Assessment of Health Informatics and Revenue Cycle Management Functions and Business Units report by Health Management Associates (HMA) was provided. Noting the many activities identified in this review, multiple business inefficiencies were identified. Some solutions are:
 - Establishment of a permanent full-time Project Management lead position that will monitor and oversee agency wide projects.
 - Implementation of more efficient use of Credible activities including electronic benefits verification, billing reconciliation, and activation of auto-reminders for appointments. Acknowledging that Credible continues to experience operational challenges, efforts to alleviate further negative impact to CSB operations include collaboration with DIT (Department of Information Technology) to identify a means of CSB data security including updating a service level agreement and ongoing discussion with Credible to remain current with Credible repair activities. Additionally, there are ongoing discussions to strengthen the CSB Disaster Recovery Plan.
 - Clarification of roles and responsibilities in the individual business operations teams.
 - Decreased use of temporary staff through establishment of additional permanent positions.

Members requested regular updates to implementation of HMA recommendations.

6. Human Resources (HR) Update

Bill Hanna and Lyn Tomlinson, provided an update to the human resources data provided in the meeting materials, highlighting:

- A. A correction to the materials, noting only two vacancies in Emergency Services/MCU.
- B. 22 vacancies in Support Coordination, noting efforts to reduce the vacancies include a scheduled Realistic Job Preview, and collaboration with local universities.
- C. Three recent resignations in ADC/Jail Diversion. Recognizing a higher than typical number of staff turnovers in this service area, several investigative and corrective methods will be employed, including a review to identify causes, and a Realistic Job Preview scheduled to be conducted *in* the jail.

Attention was drawn to the Jail Based Organizational Chart, highlighting the following:

- A. The reclassified and currently vacant Behavioral Health Manager position will provide oversight to the CSB staff working in the courts.
- B. A noted increase to the psychiatric staff working in the jail.

The number of vacant General Merit Positions had increased from 87 to 98, an increase of 11 positions primary attributed to newly established positions.

7. Clinical Operations Report

CSB Fiscal Committee Meeting Minutes

Lyn Tomlinson provided updates to Diversion First and Time to Treatment, noting the Diversion First staff position update was also noted in the Human Resources update just provided. Further highlights included:

A. Diversion First Update

- There are no vacant bed-finder positions at the Merrifield Crisis Response Center (MCRC).
- The Community Response Team (CRT) continues to be fully operational responding to individuals considered to be frequent users of emergency services. Noting many different data systems are used across Fairfax County, efforts are ongoing to identify a method for data sharing among the varied emergency services.
- Rob Heinz was announced as the new CIT (Crisis Intervention Team) Coordinator and law enforcement lead at the MCRC.

B. Time to Treatment Update

- *Adult Time to Treatment*, reports indicate an overall decrease in wait times.
 - An increase in individuals in monitoring status (the time from assessment to first appointment), from 54 last month to 94 this month, was attributed to staff vacancies. The Reston/NW Center and Chantilly locations report no individuals in monitoring status. A reminder was offered that while in monitoring status engagement staff telephones the listed individuals no less than once each week.
 - Merrifield has several vacancies including a senior clinician that was deployed to the Community Readiness Support Program (CRSP), a psychosocial rehabilitation day program.
- *Youth Time to Treatment*, reports continued to reflect a decrease to wait times.
 - It was recently learned that FCPS (Fairfax County Public Schools) provides a student assistance counselor on staff in each school, noting this may result in an increase in referrals that may also result in an increase in wait times.

8. **Open Discussion**

An information item related to renewal of a grant has been added to the September 2019 CSB Board meeting agenda.

The October CSB Board Fiscal Oversight Committee meeting conflicts with the October 2019 Wellness and Recovery Conference. Members and staff present were polled for intent to attend the full Conference. Recognizing that there is no attendance conflict, it was decided not to reschedule the October Fiscal Oversight Committee meeting.

Noting no further discussion was forthcoming, the meeting was adjourned at 10:52 a.m.

Action Items/Responsible Party Required Prior to Next Meeting:

Issues to Communicate to CSB Board:

Agenda Items for Next Meeting:

CSB Fiscal Committee Meeting Minutes

Next Scheduled Fiscal Oversight Committee meeting

Friday, October 18, 2019, 9:30 am.

Pennino Building, 12011 Government Center Pkwy, Fairfax, VA

Suite 836A

Date Approved

Staff to the Board

DRAFT

Community Services Board

Board Planning Retreat

Saturday, September 28, 2019

9:00 a.m. – 4:00 p.m.

Merrifield Center, Board Room

Participants:

Suzette Kern, Nancy Scott, Bettina Lawton, Ed Rose, Sheila Coplan Jonas, Captain Basilio Cachuela, Jr., Ken Garnes, Diane Tuininga, Daria Akers, Evelyn Spain, Garrett McGuire,

Facilitator:

Kimberly Gladis

Matters Discussed:

1. Freedom of Information Act Training – Cindy Tianti
2. Board Responsibilities Review – Bettina Lawton
3. Legislative Talking Points – Ken Garnes
4. Development of CSB Board Team Charter – Kim Gladis

CSB Board Team Charter

DRAFT

9/28/19

TEAM MISSION

We are a team of dedicated community leaders with different skills and backgrounds, appointed by our respective governmental bodies to fulfill specific statutory responsibilities. We provide governance around and advocate for the provision of services and other benefits to members of our community with substance use disorder, behavioral health conditions and developmental disabilities.

TEAM SHARED VALUES

- Transparency
- Respect for diverse backgrounds
- Caring & compassion for the Community
- Trust
- Participation & commitment
- Collaboration
- Efficiency

TEAM WORKING AGREEMENTS

- Be prepared - read the pre-meeting materials
- Actively participate / Be engaged
- Follow through on commitments
- Provide timely responses, including no comments on the materials
- Be clear in communications (i.e., where actions are required; including email subject lines "Action", "Information" with due date)

2020 TEAM PRIORITIES

- Facilitate the establishment of a proactive Risk Management Process with Senior CSB Leadership to keep Board informed of high-risk areas (October Compliance Committee Mtg – B. Lawton)
 - High-risk areas identified
 - Process in place to keep Board informed on plan to address now and to prevent in future
 - Talking points for Board to address issues raised by the high-risk areas

- Engage in active community outreach about CSB services
 - Explore option of organizational name change that better represents what we do (L. Tomlinson to provide information on process)
 - Ask Supervisors to include the link to the monthly CSB newsletters in their constituent communications
 - Educate Supervisors and Legislators on desire to get the word out for CSB services and ask for support

- Be more intentional around documenting policies and processes to maintain institutional knowledge within the Board
 - Anytime the team agrees to do something differently in Board or Committee operations, document changes for future Board members
 - Create a centralized location where these documents will be housed for new members

- Continue to build trust with CSB Senior Leadership

CSB Board Review of Outdated CSB Board Policies

Issue:

Review and update of CSB Board Policies

Background:

As part of the regular CSB Board policy review process, two CSB Board policies are being submitted to the CSB Board for review and recommendation. The policies, with recommended revisions applied, will be submitted to the Board for final discussion at the November 2019 CSB Board meeting. The policies within this review include:

- 2300 – Corporate Compliance Program
- 2600 – Risk Management

Timing:

These policies, due to the subject matter, have been reviewed and discussed at previous CSB Board Compliance Committee meetings and are presented with edits recommended by the Committee. Following further review and comment by the CSB Board, the policies will be submitted to the CSB Board for final action at the November 29, 2019 CSB Board meeting.

Board Member

Sheila Jonas, Secretary to CSB Board

Related Documents: current versions of both policies may also be accessed via the [CSB Board Policies webpage](#)

- A. 2300 – Corporate Compliance Program
- B. 2600 – Risk Management

Policy Number: 2300
Policy Title: ~~Corporate~~ Compliance Program
Date Adopted: TBD

Purpose

To define the CSB's compliance program and the role of the Board's Compliance Committee.
~~provide guidance for the establishment of the Community Services Board's Corporate Compliance Program.~~

Policy

~~It is the policy of the Community Services Board that:~~

1. The CSB is committed to conducting its operations consistent with the best interests of its clients, employees, contractors, vendors, community partners, and others.
2. ~~The delivery of~~ CSB directly operated and contracted program services will ~~it~~ adhere to strict conformance with the highest standards of accountability for administration, clinical, business, ~~marketing,~~ information technology, and financial management.
 1. -
3. The ~~CSB Board is fully committed to the need to prevent, detect, and correct fraud, fiscal mismanagement and misappropriation of funds and therefore, to the development of a formal corporate~~ compliance program will ~~to~~ ensure ongoing self-assessment, monitoring and conformance with all corporate, legal and regulatory requirements. The program will emphasize:
 - a. ~~The Board is committed to the establishment, implementation and maintenance of a corporate compliance program that emphasizes (a)~~ prevention of wrong doing – whether intentional or unintentional,
 - b. ~~(b)~~ immediate reporting and investigation of questionable activities and practices without consequences to the reporting party and †
 - c. † timely correction of any situation which puts the Board, CSB staff, funding sources or consumers at risk.
4. The Board's Compliance Committee provides oversight and direction to the CSB Compliance Program assisting the CSB Board in meeting its statutory responsibilities as outlined in the Code of Virginia, Section 37.2-504. The Committee works closely with the CSB Executive Director, Compliance Officer and legal counsel.

5. The Board authorizes the Executive Director of the Community Services Board to designate a ~~Corporate~~ Compliance Officer, monitor the CSB's ~~Corporate~~ Compliance program and ensure that the Board's Compliance Committee is sufficiently informed in order carry out responsibilities outlined in the Compliance Committee Charter.
~~provide periodic reports to the Board on matters pertaining to the program.~~

Approved

CSB Board Secretary

Date

Policy Adopted: February 25, 2004
Readopted: December 16, 2009
Policy Readopted: November 20, 2013

Policy Number: 2300
Policy Title: Compliance Program
Date Adopted: TBD

Purpose

To define the CSB’s compliance program and the role of the Board’s Compliance Committee.

Policy

1. The CSB is committed to conducting its operations consistent with the best interests of its clients, employees, contractors, vendors, community partners, and others.
2. CSB directly operated and contracted program services will adhere to strict conformance with the highest standards of accountability for administration, clinical, business, information technology, and financial management.
3. The CSB compliance program will ensure ongoing self-assessment, monitoring and conformance with all corporate, legal and regulatory requirements. The program will emphasize:
 - a. prevention of wrong-doing – whether intentional or unintentional,
 - b. immediate reporting and investigation of questionable activities and practices without consequences to the reporting party, and
 - c. timely correction of any situation which puts the Board, CSB staff, funding sources or consumers at risk.
4. The Board’s Compliance Committee provides oversight and direction to the CSB Compliance Program assisting the CSB Board in meeting its statutory responsibilities as outlined in Va. Code § 37.2-504. The CSB Board Compliance Committee works closely with the CSB Executive Director, Compliance Officer and legal counsel.
5. The Board authorizes the Executive Director of the Community Services Board to designate a Compliance Officer, monitor the CSB’s Compliance program and ensure that the Board’s Compliance Committee is sufficiently informed in order carry out responsibilities outlined in the Compliance Committee Charter.

Approved _____
CSB Board Secretary

Date

References

- Code of Virginia: 37.2-504 Community Services Boards; local government department; powers and duties

Policy Adopted: February 25, 2004
Readopted: December 16, 2009
Policy Readopted: November 20, 2013
Policy Revised: TBD

DRAFT

Title: CSB Risk Management Process-Procedure or Program

Date Adopted: ????

Purpose: To establish guidance on how the CSB will mitigate and manage risk across the organization and define the role of the CSB Board-

Definitions: Risk Management is the identification of and evaluation of risks as well as the identification of, selection and implementation of control measures that might alter risks.

Responsibility:

1. ~~Fairfax County has an established Risk Management Program which sets expectations for an absolute and demonstrated commitment by all levels of staff to the Risk Management Program. CSB leadership, including supervisors, will~~

2. ~~CSB Leadership and Supervisors: Fairfax County expects an absolute and demonstrated commitment by all levels of management to the Risk Management Program. All levels of leadership are responsible for promptly resolving risk producing exposures within reason and ensuring compliance by employees with applicable policies and procedures.~~

1. _____

3. ~~Employees: All employees shall adhere to safety regulations and practices and report to management any potential hazards or deficiencies in the design or maintenance of equipment, facilities, or personal protective gear which may constitute a safety or health hazard. Willful or flagrant violations of established or accepted safety practices are unacceptable and will subject the employee to appropriate disciplinary action consistent with personnel regulations. Such violations may also adversely affect compensability of an employee's compensation claim consistent with provisions of Virginia law. Each CSB Supervisor will ensure every staff person has an awareness of the three major risk management divisions of Claims Management, Insurance Management, and Loss Prevention & Safety Management, and where to access claim forms.~~

2. ~~Additionally, the CSB has its own established its own risk management process/program under the supervision of the Deputy Director of Administrative Operations which expands on the County's Risk Management Program.~~

4.3. ~~The CSB Board established a CSB Board Compliance Committee to provide oversight and direction to the CSB's compliance program.~~

Procedures:

1. ~~Every six months~~ the CSB's Internal Compliance Committee, which is comprised of the CSB Executive leadership team, county attorney, and CSB Compliance Director, will at the beginning of each fiscal year annually identify the agency's review high risk related issues areas which covering at least the following areas:

- a. Personnel
- b. Facilities and equipment
- c. Emergency Preparedness

d. Contracting

~~e.—Level I, II, and III serious incidents as well as root cause analysis.~~

~~f.e.~~ Healthcare compliance

~~g.f.~~ Finances

The CSB Executive Director will advise the CSB Board Compliance Committee and the CSB Board of the specific items of high-risk identified and the plans to mitigate the risk and the possible consequences to the CSB.

2. At least quarterly, ~~Every six months~~ the CSB's Internal Compliance Committee will:

~~a.—Review the status of previously or newly identified high risk related areas to ensure that necessary actions are being taken to mitigate risk. Content experts in each of the above areas will attend as needed based upon the identified risk issue.~~

~~b.a.~~ The CSB's leadership team will take action to mitigate risk based on any trends or gaps identified in any of the above categories during the prior ~~six~~three-month risk review period, and

b. Monitor any actions previous undertaken to ensure that they have been effective in mitigating the identified risk(s).

The CSB Executive Director will advise the CSB Board Compliance Committee and the CSB Board of the effectiveness of the actions taken and, what, if any, action is needed to further mitigate the risk.

~~3.—The CSB Executive Director will promptly notify the Chair of the CSB Board of any unanticipated risk situation that may substantially affect a CSB program, its clients or the CSB's reputation in the community. The Executive Director will notify the CSB Board as soon as reasonably possible.~~

4.3.

Policy Number: 2600
Policy Title: Risk Management
Date Adopted: TBD

Purpose:

To establish guidance on how the CSB will mitigate and manage risk across the organization and define the role of the CSB Board

Definition:

Risk Management is the identification of and evaluation of risks as well as the identification of, selection and implementation of control measures that might alter risks.

Responsibility:

1. Fairfax County has an established Risk Management Program which sets expectations for an absolute and demonstrated commitment by all levels of staff to the Risk Management Program. CSB leadership, including supervisors, will promptly resolve risk producing exposures within reason and ensure compliance by employees with applicable policies and procedures.
2. The CSB established its own risk management program under the supervision of the Deputy Director of Administrative Operations which expands on the County's Risk Management Program.
3. The CSB Board established a CSB Board Compliance Committee to provide oversight and direction to the CSB's compliance program.

Process:

1. The CSB's Internal Compliance Committee, which is comprised of the CSB Executive leadership team, county attorney, and CSB Compliance Director, will at the beginning of each fiscal year identify the agency's high-risk areas covering at least the following areas:
 - a. Personnel
 - b. Facilities and equipment
 - c. Emergency Preparedness
 - d. Contracting
 - e. Healthcare compliance
 - f. Finances

The CSB Executive Director will advise the CSB Board Compliance Committee and the CSB Board of the specific items of high-risk identified and the plans to mitigate the risk and the possible consequences to the CSB.

2. At least quarterly, the CSB's Internal Compliance Committee will:
 - a. Review the status of previously or newly identified high risk related areas to ensure that necessary actions are being taken to mitigate risk based on any trends or gaps identified in any of the above categories during the prior three-month period, and

- b. Monitor any actions previous undertaken to ensure that they have been effective in mitigating the identified risk(s).

The CSB Executive Director will advise the CSB Board Compliance Committee and the CSB Board of the effectiveness of the actions taken and, what, if any, action is needed to further mitigate the risk.

3. The CSB Executive Director will promptly notify the Chair of the CSB Board of any unanticipated risk situation that may substantially affect a CSB program, its clients or the CSB's reputation in the community. The Executive Director will notify the CSB Board as soon as reasonably possible.

Approved _____
CSB Board Secretary Date

References

- Code of Virginia: 37.2-504-A.1 Community Services Boards; local government department; powers and duties
- Code of Virginia: 37.2-508-Performance Contract for mental health, mental retardation and substance abuse services. Section on Board responsibilities 6.b.2-Quality Improvement and Risk Management
- Code of Virginia: 8.01-581.16 (civil immunity for members of certain boards or committees) and 8.01-581.17 (privileged communications of certain committees and entities).

Policy Adopted: June 24, 2009
Replaces Policy 2200 Dated September 19, 2001

Policy Readopted: November 20, 2013

Revision Adopted: TBD

CSB Behavioral Health Oversight Committee Associate Member Nomination

Background

In observation of the procedure outlined in the CSB Bylaws for the appointment of Associate Committee Members of the Behavioral Health Oversight Committee, the following agency is being nominated.

A motion will be presented for final approval at the November 2019 CSB Board meeting.

1. Neighborhood Health

CSB Board Member:

Diane Tuininga, Behavioral Health Oversight Committee Member

Approval of Proposed CSB Board Policy Revisions

Issue:

Approval to adopt or revoke as recommended the CSB Board Policies listed below following the most recent CSB Board review.

Recommended Motion:

I move that the Board approve adoption or revocation of the CSB Board Policies listed below as presented.

Background:

As part of the regular review process of CSB Board policies, several policies were submitted to CSB Board members in September for review and possible revision. Policies forwarded for CSB Board approval to adopt as presented/revised is listed directly below.

- 2120 – Reimbursement for Services

Additionally, the following CSB Board policies listed directly below are submitted for revocation as it was determined during review that these policies are no longer needed.

- 2500 – Human Research Review and Approval
- 1201 – Adoption, Revision, and Revocation of CSB Board Policy

A final opportunity for comment will be provided prior to requesting Board action.

Timing:

Immediate

Board Member

Sheila Jonas, Secretary to CSB Board

Enclosed Documents: (Attachments A – C)

- A. 2120 – Reimbursement for Services
- B. 2500 – Human Research Review and Approval
- C. 1201 – Adoption, Revision, and Revocation of CSB Board Policy

Policy Number: 2120
Policy Title: Reimbursement for Services
Adopted: TBD

Purpose

To ensure that a system is in place to provide subsidies for individuals who are unable to pay the full fee and are only applied to services not covered by the individual's insurance plan. Subsidies are also available for individuals who do not have insurance and are unable to pay the full fee. Subsidies are based on the CSB's Ability to Pay Scale guidelines and the individual's provision of documentation of income and family size.

To provide guidance for the establishment of a reimbursement system that maximizes the collection of fees from individuals receiving services from the CSB.

To ensure that fees are established in accordance with state and local statutes and regulations.

Policy

It is the policy of the CSB Board that:

1. Fee(s) will be established for each service and these fees shall be reviewed annually. Fees shall be reasonably related to the established unit cost of providing the services.
2. The individual or other legally responsible parties shall be liable for the established fee and, if they have insurance, related insurance plan required deductibles and co-payments to the extent provided by law.
3. Payment of fees for services rendered shall be sought from the following funding sources: individual self-pay, third party payers/insurance companies, and other legally responsible parties, and the use of extended payment plans.
4. An individual or other legally responsible party who is unable to pay the full fee at the time service is rendered may be granted a subsidy using local and state revenue under the following guidelines:
 - a. Regulations shall be established to ascertain ability to pay and to determine subsidies.
 - b. An annual review of the ability to pay of the individual and of other legally responsible parties will be conducted.
 - c. Extended payment plans shall be negotiated before any subsidy using local and state revenue is considered.
5. Pursuant to County policy, delinquent accounts may be placed with the Fairfax County Department of Tax Administration (DTA) for collection. DTA employs private collection agents to collect all debt that is 90 days' delinquent. Collection actions may include wage

Deleted: and deferred repayment contracts

Deleted: 180

liens, bank liens, property seizures and flagging of credit records. Upon referral, a \$30 administrative fee, 10% penalty for late payment, and simple interest of 10% per will be added to the amount due. A \$50 fee will be assessed on any payment returned by the bank unpaid due to non-sufficient funds or account closed.

6. Services shall not be refused to any individual solely on the basis of ability to pay.
7. Every individual served by the CSB shall be subject to this fee policy whether service is obtained from a directly operated program or a contractual agency.
8. Such individual and other responsible parties shall have the right to an appeal of fee-related determinations in accordance with procedures established by the CSB.

Approved: _____
CSB Board Secretary Date

References:

Code of Virginia, §37.2-504.A7
Code of Virginia, §37.2-508
Code of Virginia, §37.2-511.
Code of Virginia, §37.2-814
[Code of Virginia, §58.1-3919.1](#)
Fairfax County Code § 1-1-17 and § 1-1-18

Policy Adopted: March 1984 Revision Adopted: TBD
Revision Adopted: January 1995
Policy Readopted: June 1996
Revision Adopted: May 28, 1997
Revision Adopted: April 26, 2000
Revision Adopted: May 23, 2001
Revision Adopted: June 17, 2002
Policy Readopted: July 23, 2003
Policy Readopted: June 23, 2004
Revision Adopted: June 22, 2005
Revision Adopted: December 21, 2005
Revision Adopted: June 25, 2008
Revision Adopted: July 28, 2010
Revision Adopted: October 23, 2013
Revision Adopted: December 1, 2014
Revision Adopted: October 28, 2015
Revision Adopted: December 6, 2017
Policy Readopted: December 4, 2018

Policy Number: 2120
Policy Title: Reimbursement for Services
Adopted: TBD

Purpose

To ensure that a system is in place to provide subsidies for individuals who are unable to pay the full fee and are only applied to services not covered by the individual's insurance plan. Subsidies are also available for individuals who do not have insurance and are unable to pay the full fee. Subsidies are based on the CSB's Ability to Pay Scale guidelines and the individual's provision of documentation of income and family size.

To provide guidance for the establishment of a reimbursement system that maximizes the collection of fees from individuals receiving services from the CSB.

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2. The individual or other legally responsible parties shall be liable for the established fee and, if they have insurance, related insurance plan required deductibles and co-payments to the extent provided by law.
3. Payment of fees for services rendered shall be sought from the following funding sources: individual self-pay, third party payers/insurance companies, and other legally responsible parties, and the use of extended payment plans.
4. An individual or other legally responsible party who is unable to pay the full fee at the time service is rendered may be granted a subsidy using local and state revenue under the following guidelines:
 - a. Regulations shall be established to ascertain ability to pay and to determine subsidies.
 - b. An annual review of the ability to pay of the individual and of other legally responsible parties will be conducted.
 - c. Extended payment plans shall be negotiated before any subsidy using local and state revenue is considered.
5. Pursuant to County policy, delinquent accounts may be placed with the Fairfax County Department of Tax Administration (DTA) for collection. DTA employs private collection agents to collect all debt that is 90 days' delinquent. Collection actions may include wage

liens, bank liens, property seizures and flagging of credit records. Upon referral, a \$30 administrative fee, 10% penalty for late payment, and simple interest of 10% per will be added to the amount due. A \$50 fee will be assessed on any payment returned by the bank unpaid due to non-sufficient funds or account closed.

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8. Such individual and other responsible parties shall have the right to an appeal of fee-related determinations in accordance with procedures established by the CSB.

Approved: _____
CSB Board Secretary

_____ TBD
Date

References:

Code of Virginia, §37.2-504.A7
Code of Virginia, §37.2-508
Code of Virginia, §37.2-511.
Code of Virginia, §37.2-814
Code of Virginia, §58.1-3919.1
Fairfax County Code § 1-1-17 and § 1-1-18

Policy Adopted: March 1984
Revision Adopted: January 1995
Policy Readopted: June 1996
Revision Adopted: May 28, 1997
Revision Adopted: April 26, 2000
Revision Adopted: May 23, 2001
Revision Adopted: June 17, 2002
Policy Readopted: July 23, 2003
Policy Readopted: June 23, 2004
Revision Adopted: June 22, 2005
Revision Adopted: December 21, 2005
Revision Adopted: June 25, 2008
Revision Adopted: July 28, 2010
Revision Adopted: October 23, 2013
Revision Adopted: December 1, 2014
Revision Adopted: October 28, 2015
Revision Adopted: December 6, 2017
Policy Readopted: December 4, 2018

Revision Adopted: TBD

Policy Number: 2500
Policy Title: Human Research
Review and Approval
Date Revoked: TBD

Commented [BE1]: Proposed for revocation following discussion at CSB Board meeting.

Purpose

The purpose of the Human Research Review and Approval Policy is to assure the Fairfax-Falls Church Community Services Board (CSB) complies with Commonwealth of Virginia’s Department of Behavioral Health and Developmental Services (DBHDS) Human Rights Regulations, and appropriate professional, local, state, and federal standards regarding human research projects.

State law requires CSBs to support research that will enhance the ability to serve individuals receiving CSB services, but also requires the CSB to protect such individuals’ human rights. This requires the development of methods to balance potentially conflicting responsibilities among research and service delivery based on sound therapeutic practice.

This guidance does not apply to the gathering of statistical aggregate data, or the keeping and analysis of service records.

Policy

It is the policy of the CSB [B Lawton] Board to promote, sponsor and conduct ethical scientific studies that aid in the understanding of [B Lawton] and ability to serve individuals receiving CSB services.

Prior to engaging in any research project, CSB staff shall follow CSB regulations and procedures to assure all research is reviewed according to standards set forth in the DBHDS Human Rights Regulations, and other pertinent standards. This includes the establishment of a research review committee, an expedited review process, and full committee review process.

Revoked _____
Secretary Date

References

Commonwealth of Virginia Sources

- Code of Virginia: 37.2-306, Research into causes of mental illness, mental retardation, substance abuse and related subjects.
- Code of Virginia: Chapter 5.1 - Human Research 32.1-162.16 (Definitions), 17 (Exemptions), 18 (Informed consent), 19 (Human research review committees).
- Commonwealth of Virginia, Department of Mental Health, Mental Retardation and Substance Abuse Services, 12 VAC 35-115-130, Rules and Regulations to Assure the Rights of Individuals Receiving Services from Providers Licensed, Funded or Operate by the Department of Mental Health, Mental Retardation and Substance Abuse Services-Research.

FEDERAL SOURCES

- Health Insurance Portability and Accountability Act of 1996 (HIPAA)
- US PUBLIC LAW 104-191 (HIPAA). Title II Subtitle F
- 45 CFR Part 164, Subpart E, §164.512 (i)
- OCR Guidance on HIPAA & Research:
<http://www.hhs.gov/ocr/hipaa/guidelines/research.pdf>
- Department of Health & Human Services, National Institutes of Health, Office for Protection from Research Risks; Title 45 (Public Welfare), CFR Part 46 (Protection Of Human Subjects), Department of Health and Human Services, National Institute of Health, Revised November 13, 2001, Effective December 13, 2001.

Policy Adopted: June 24, 2009
Replaces Policy 2200 Dated September 19, 2001

Policy Readopted: November 20, 2013

Policy Revoked:

Policy Number: 2500
Policy Title: Human Research
Review and Approval
Date Revoked: TBD

Purpose

The purpose of the Human Research Review and Approval Policy is to assure the Fairfax-Falls Church Community Services Board (CSB) complies with Commonwealth of Virginia’s Department of Behavioral Health and Developmental Services (DBHDS) Human Rights Regulations, and appropriate professional, local, state, and federal standards regarding human research projects.

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Revoked

Secretary

TBD

Date

References

Commonwealth of Virginia Sources

- Code of Virginia: 37.2-306, Research into causes of mental illness, mental retardation, substance abuse and related subjects.
- Code of Virginia: Chapter 5.1 - Human Research 32.1-162.16 (Definitions), 17 (Exemptions), 18 (Informed consent), 19 (Human research review committees).
- Commonwealth of Virginia, Department of Mental Health, Mental Retardation and Substance Abuse Services, 12 VAC 35-115-130, Rules and Regulations to Assure the Rights of Individuals Receiving Services from Providers Licensed, Funded or Operate by the Department of Mental Health, Mental Retardation and Substance Abuse Services-Research.

FEDERAL SOURCES

- Health Insurance Portability and Accountability Act of 1996 (HIPAA)
- US PUBLIC LAW 104-191 (HIPAA). Title II Subtitle F
- 45 CFR Part 164, Subpart E, §164.512 (i)
- OCR Guidance on HIPAA & Research:
<http://www.hhs.gov/ocr/hipaa/guidelines/research.pdf>
- Department of Health & Human Services, National Institutes of Health, Office for Protection from Research Risks; Title 45 (Public Welfare), CFR Part 46 (Protection Of Human Subjects), Department of Health and Human Services, National Institute of Health, Revised November 13, 2001, Effective December 13, 2001.

Policy Adopted: June 24, 2009
Replaces Policy 2200 Dated September 19, 2001

Policy Readopted: November 20, 2013

Policy Revoked: September 25, 2019

Policy Number: 4201
Policy Title: PROCUREMENT
Date Revoked: TBD

Commented [BE1]: As discussed, County's Procurement Resolution sets forth the process for CSB Procurement. Revocation recommended

Purpose

To establish the basis for the CSB to enter into contracts.

Policy

The CSB will comply with the Fairfax County Purchasing Resolution and procurement procedures.

Commented [BE2]: This is currently written only to establish the basis for entering into contracts. Recommend a more in-depth discussion at Exec Committee to see if this policy should be expanded to reflect the CSB Board's responsibilities relate to contracts

Revoked	_____	TBD
	Secretary	Date

Commented [BE3R2]: The statute Va. Code § 37.2-504 states "In accordance with its approved performance contract, enter into contracts with other providers for the delivery of services or operation of facilities." This is not helpful at all in fleshing out the CSB Board's "responsibilities related to contracts." And, most contracts, with, of course, the exception of the Performance Contract, are entered into under the name of Fairfax County, not the CSB Board. This is not to say that you don't have a responsibility under the statute, I'm just pointing out that fact. It would likely be Fairfax County who would have to enforce the contract, such as bring suit, and the Purchasing Agent, DPMM Director, can first, impose sanctions under the Purchasing Resolution.

Policy Adopted: March 29, 2000
Revision Adopted: June 25, 2003
Revision Adopted: February 25, 2009
Policy Revoked: TBD

Policy Number: 4201
Policy Title: PROCUREMENT
Date Revoked: TBD

Purpose

To establish the basis for the Fairfax-Falls Church Community Services Board (CSB) to enter into contracts.

Policy

The CSB will comply with the Fairfax County Purchasing Resolution and all related Fairfax County procurement procedures.

Revoked	_____	_____
	CSB Board Secretary	TBD
		Date

Policy Adopted: March 29, 2000
Revision Adopted: June 25, 2003
Revision Adopted: February 25, 2009
Policy Revoked: TBD

Public Review and Comment of Proposed Changes to FY 2020 CSB Fee Schedule

Issue:

Public review and comment of proposed changes to the CSB Fee Schedule.

Recommended Motion:

I move the Board approve for public review and comment the CSB Fee Schedule.

Background:

Following the CSB Board Ad Hoc Fee Policy Committee meeting on August 30, 2019, the committee members voted to approve proposed revisions and forward the fee related documents to the CSB Board for approval to post for public review and comment. The CSB Board was provided the recommended changes for review at the September 2019 CSB Board meeting. As no revision recommendations have been received, the draft FY2020 Fee Schedule is being presented for approval to post for public comment.

The recommended changes include:

- Updated outpatient, residential, medical, and ARTS services to maximize Medicare, Medicaid, and Commercial insurance reimbursement. A general increase was not requested in this review cycle.

After the public comment period and subsequent to approval by the CSB Board on November 20, 2019, the Fee Schedule will be submitted to the Board of Supervisors for review in January 2020. Following Board of Supervisors review, staff will inform clients, conduct staff training, and make adjustments in the Electronic Health Record, with an effective date not sooner than February 1, 2020 for both the Fee Schedule and the Ability to Pay Scale. Changes to the Board Policy will be effective in October 2019. Revisions to the Fee Regulation will become effective in November 2019.

Timing:

Immediate

Fiscal Impact:

The fee related documents provide the CSB with uniform mechanisms to maximize revenues from clients, Medicaid and other health insurance plans. The FY 2019 current budget plan for the CSB includes \$16.1 million in estimated fee revenues.

Board Members and Staff:

Nancy Scott, CSB Board Member

Garrett McGuire, CSB Board Member

Staff: Sebastian Tezna, Business Operations Director, Jessica Burriss, Lilian Carriera, Whitney Johnson, Bob MacMurdo, Mike Suppa, and Jim Gillespie.

Enclosed Document:

FY2020 Proposed Fee Schedule

PROPOSED FY20 FEE SCHEDULE ANALYSIS
DRAFT

Service	Billing Procedure Code	Revenue Code (Facility Billing Only)	Subject to Ability to Pay Scale	Effective February 1, 2019	Effective February 1, 2020
Adult Day Treatment - MH	H0035-HB		Yes	\$34.78 per unit	\$34.78 per unit
A New Beginning Residential Treatment	H0010 - HB	Revenue Code(s) 1002, and DRG(s) 894-897	Yes	\$393.50 per day	\$393.50 per day
Case Management - MH	H0023		Yes	\$326.50 per month	\$326.50 per month
Case Management - DD	T1017		Yes	\$326.50 per month	\$326.50 per month
Case Management - SA	H0006		Yes	\$243.00 per month	\$243.00 per month
Cornerstones Adult Residential Treatment	H0010 - HB	Revenue Code(s) 1002, and DRG(s) 894-897	Yes		\$393.50 per day
Residential Treatment - Intermediate Rehabilitation/Reentry Services	H2034		Yes		\$175.00 per day
Contracted Residential Treatment - Intermediate Rehabilitation/Reentry			Yes	\$163 per day	\$163 per day
Crisis Intervention - Addl 30 Min	90840		Yes	\$71.28 each	\$71.28 each
Crisis Intervention	H0036 or 90839		Yes	\$37.30 per 15 minutes	\$37.30 per 15 minutes
Crisis Stabilization - Adult Residential	H2019	Revenue Code(s) 1001, and DRG(s) 876, 880-887	Yes	\$89 per hour	\$89 per hour / \$583 per diem (Facility only)
Crossroads Adult Residential Treatment	H0010 - HB	Revenue Code(s) 1002, and DRG(s) 894-897	Yes	\$393.50 per day	\$393.50 per day
Detoxification, Medical, Residential-setting	H2036 - HB	Revenue Code(s) 1002, and DRG(s) 894-897	Yes	\$750 per day	\$750 per day
Detoxification, Social, Residential-setting	H2036 - HB	Revenue Code(s) 1002, and DRG(s) 894-897	Yes	\$750 per day	\$750 per day
Drop-In Support Services, ID	-		Yes	Rate set by vendor(s) but no less than \$2 per hour and for those with incomes above 150% of FPL, apply 20% liability (based on ATP Scale) of the CSB contracted negotiated rate. If below 150% of FPL, charge \$2 per hour.	Rate set by vendor(s) but no less than \$2 per hour and for those with incomes above 150% of FPL, apply 20% liability (based on ATP Scale) of the CSB contracted negotiated rate. If below 150% of FPL, charge \$2 per hour.
Family Therapy w/out client (50 minutes)	90846		Yes	\$115.19 per event	\$115.19 per event
Family Therapy w/ client (50 minutes)	90847		Yes	\$119.82 per event	\$119.82 per event
Group Therapy/Counseling (per group, per person)	90853		Yes	\$28.74 per event	\$28.74 per event
Head Start - Services to	-		No	\$25 per 15 minutes	\$25 per 15 minutes
Independent Evaluations	-		No	\$75 each	\$75 each
Individual Therapy/Counseling (16 to 37 minutes)	90832		Yes	\$71.28 per event	\$71.28 per event
Individual Therapy/Counseling (38 to 52 minutes)	90834		Yes	\$95.33 per event	\$95.33 per event
Individual Therapy/Counseling (53 minutes or greater)	90837		Yes	\$143.01 per event	\$143.01 per event
Initial Evaluation/Assessment	90791		Yes	\$150 per event	\$150 per event
Injection Procedure	96372		Yes	\$30.20 per event	\$30.20 per event
Intensive Community Treatment	H0039		Yes	\$153 per hour	\$153 per hour
Intensive Outpatient - SA	H0015	Revenue Code 905 or 906	Yes	\$250.00 per day	\$250.00 per day
Interactive Complexity*	90785		Yes	\$15.90 add on to other clinic services when there is a factor that complicates the psychiatric service or increases the work intensity of the psychotherapy service	\$15.90 add on to other clinic services when there is a factor that complicates the psychiatric service or increases the work intensity of the psychotherapy service
Lab Tests	-		No	Actual Cost	Actual Cost
Late Cancellation or No Show	-		Yes	\$25.00	\$25.00
Legal Testimony	-		Yes	\$25 per 15 minutes	\$25 per 15 minutes
Mental Health Skill-building Service	H0046		Yes	\$91 per unit	\$91 per unit
Multi-Family Group Therapy	90849		Yes	\$41.78 per event	\$41.78 per event
Neurological Testing			Yes	\$1168 per event	\$1168 per event
New Generations Residential Treatment	H0010		Yes	\$393.50 per day	\$393.50 per day
Nursing Assessment - New Patient	99201		Yes		\$29 per event
Nursing Subsequent Care - Established Patient	99211		Yes	\$29 per event	\$29 per event
Peer Support Services - Individual/SA	T1012		Yes	\$6.50 per 15 minutes	\$6.50 per 15 minutes
Peer Support Services - Group/SA	S9445		Yes	\$2.70 per 15 minutes	\$2.70 per 15 minutes
Peer Support Services - Individual/MH	H0024		Yes	\$6.50 per 15 minutes	\$6.50 per 15 minutes
Peer Support Services - Group/MH	H0025		Yes	\$2.70 per 15 minutes	\$2.70 per 15 minutes
Physical Exam (Physician)	99385-99387		Yes	\$167 per event	\$167 per event
Psychiatric Evaluation, Medical Services	90792		Yes	\$219 per event	\$219 per event
Psychiatric Evaluation & Management Low Complexity - New Patient	99203		Yes	\$124.43 per event	\$124.43 per event

PROPOSED FY20 FEE SCHEDULE ANALYSIS

DRAFT

Service	Billing Procedure Code	Revenue Code (Facility Billing Only)	Subject to Ability to Pay Scale	Effective February 1, 2019	Effective February 1, 2020
Psychiatric Evaluation & Management Moderate Complexity - New Patient	99204		Yes	\$188.16 per event	\$188.16 per event
Psychiatric Evaluation & Management Low Complexity - Established Patient	99213		Yes	\$83.92 per event	\$83.92 per event
Psychiatric Evaluation & Management Moderate Complexity - Established Patient	99214		Yes	\$123.44 per event	\$123.44 per event
Psychological Testing	-		No	\$150 per event	\$150 per event
Psychological Testing Battery	96101		Yes	\$851 per event	\$851 per event
Psychosocial Rehabilitation (1 unit = 2.0-3.99 hrs; 2 units = 4-6.99 hrs; 3 units = 7+ hrs)	H2017		Yes	\$24.23 per unit	\$24.23 per unit
Psychological Assessment, Adult Therapeutic Day Treatment	H0032 - U7		Yes	\$36.53 Per event	\$36.53 Per event
Psychological Assessment, Psychosocial Rehab	H0032 - U6		Yes	\$24.23 per event	\$24.23 per event
Psychological Assessment, Intensive Community Treatment	H0032 - U9		Yes	\$153.00 per event	\$153.00 per event
Psychological Assessment, Mental Health Skill Building	H0032 - U8		Yes	\$91.00 per event	\$91.00 per event
Release of Information: Individual	-		No	18c per pg up to 50 pgs; 25c per pg for > = 51 pgs	18c per pg up to 50 pgs; 25c per pg for > = 51 pgs
Release of Information: Research	-		No	\$10.00	\$10.00
Release of Information: Third Party	-		No	\$10 admin fee 37c per pg up to 50 pgs; 18c per pg for > = 51 pgs	\$10 admin fee 37c per pg up to 50 pgs; 18c per pg for > = 51 pgs
Release of Information: Worker's Compensation	-		No	\$15.00	\$15.00
Residential Fee ID Community Living Services	-		No	75% of gross income	75% of gross income
Residential Fee MH/SA Community Living Services	-		No	30% of gross income	30% of gross income
Returned Check (due to insufficient funds or closed account)	-		No	\$50.00	\$50.00
Skilled Nursing Waiver LPN Services	T1003		No	\$7.99 per 15 min	\$7.99 per 15 min
Skilled Nursing Waiver RN Services	T1002		No	\$9.22 per 15 min	\$9.22 per 15 min
Telehealth Facility Fee	GT Modifier		No	\$20.00	\$20.00
Transportation	-		No	\$100 per month	\$100 per month
Turning Point Program	-		Yes	\$285.71 per month	\$285.71 per month
Urine Collection & Drug Screening- Retests Only	-		Yes	\$25.00	\$25.00
Wraparound Fairfax	-		No	\$1270 per month	\$1270 per month
DDW Case Management	T2023		No	\$242.73 per month	\$242.73 per month
DDW Group Home Residential 5 person Tier 1	H2022-U2		No	\$221.80 per day	\$221.80 per day
DDW Group Home Residential 5 person Tier 2	H2022-U2		No	\$249.07 per day	\$249.07 per day
DDW Group Home Residential 5 person Tier 3	H2022-U2		No	\$276.33 per day	\$276.33 per day
DDW Group Home Residential 5 person Tier 4	H2022-U2		No	\$325.40 per day	\$325.40 per day
DDW Group Home Residential 6 person Tier 1	H2022-U3		No	\$214.99 per day	\$214.99 per day
DDW Group Home Residential 6 person Tier 2	H2022-U3		No	\$238.84 per day	\$238.84 per day
DDW Group Home Residential 6 person Tier 3	H2022-U3		No	\$266.10 per day	\$266.10 per day
DDW Group Home Residential 6 person Tier 4	H2022-U3		No	\$316.88 per day	\$316.88 per day
Partial Hospitalization Psychiatric Patient	S0201	Revenue Code 912	Yes		\$500 per diem
Partial Hospitalization Substance Abuse Patient	S0201	Revenue Code 913	Yes		\$500 per diem
PERS Medication Monitoring	S5185		No	\$58.41	\$58.41
PERS Monitoring	S5161		No	\$35.05	\$35.05
PERS Installation	S5160		No	\$58.41	\$58.41
PERS Installation & Medication Monitoring	S5160-U1		No	\$87.62	\$87.62
DDW Skilled Nursing, Registered Nurse	S9123		No	\$11.28 per 15 min	\$11.28 per 15 min
DDW Skilled Nursing, Licensed Practicle Nurse	S9124		No	\$9.78 per 15 min	\$9.78 per 15 min
DDW Transition Services	T2038		No	Unit varies/\$5000 yearly limit	Unit varies/\$5000 yearly limit
DDW Assistive Technology, Maintenance Costs Only	T1999-U5		No	Unit varies/\$5000 yearly limit	Unit varies/\$5000 yearly limit
DDW Environmental Mods	S5165		No	Unit varies/\$5000 yearly limit	Unit varies/\$5000 yearly limit

Department of Behavioral Health and Developmental Services (DBHDS) State Opioid Response (SOR) Recovery Grant Renewal Application

Issue:

Request for approval of the CSB Board for second-year renewal of the DBHDS State Opioid Response (SOR) Grant.

Recommended Motion:

I move that the Board approve submitting and, if awarded, accepting new funds in the amount of \$150,000 for second-year funding and carry-over funding of \$72,302.60 from first-to-second year for DBHDS SOR-Recovery.

Background:

Provide information of the pending award for SOR-Recovery funding from DBHDS.

Timing:

Following CSB Board approval, this item is scheduled to be submitted to the Board of Supervisors at the meeting on October 29, 2019.

Fiscal Impact:

If awarded, a total of \$226,302.60 in new and carry-over funding will provide for two peer support specialist positions, one of which will be a supervisor to provide peer support services to justice-involved individuals. There is no Local Cash Match required to accept this award. This funding will be available until September 30, 2020, with no renewal beyond that time. The County will not be responsible to continue this project beyond this time period.

Creation of Positions:

If awarded, this grant will create two (2) new positions.

Staff:

Michael T. Lane, Director Individual & Family Affairs