FAIRFAX-FALLS CHURCH COMMUNITY SERVICES BOARD
Ken Garnes, Chair
Merrifield Center
8221 Willow Oaks Corporate Drive
Level 3 - Room 409A
Fairfax, Virginia 22031
Wednesday, May 27, 2015
5:00 p.m.

1. **Meeting Called to Order**  
   Ken Garnes  5:00 p.m.

2. **Matters of the Public**  
   Ken Garnes

3. **Recognition**  
   Ken Garnes

4. **Amendments to the Meeting Agenda**  
   Ken Garnes

5. **Approval of CSB April 22, 2015 Board Meeting Minutes**  
   Ken Garnes

6. **Matters of the Board**

7. **Directors Report**  
   Tisha Deeghan

8. **Committee Reports**  
   Susan Beeman
   A. Behavioral Health Oversight Committee  
      • *May 2015 Draft Meeting Notes*
   B. Fiscal Oversight Committee  
      • *April 2015 Meeting Notes*
   C. Government and Community Relations Committee  
      Rob Sweezy
   D. Intellectual and Developmental Disability Committee  
      • *March 2015 Meeting Notes*
      • *May 2015 Draft Meeting Notes*
   E. Other Reports

9. **Action Items**  
   Ken Garnes
   A. Appointment of CSB Ad Hoc Fee Committee
   B. RxRelief Virginia Grant Application to Expand CSB Medication Access Program
   Ginny Cooper

10. **Information Item**  
    Jerome Newsome
    A. FY 2016 State Performance Contract Renewal

11. **Adjournment**
The Board met in regular session at the Fairfax County Government Center, 12000 Government Center Parkway, Fairfax, VA.

The following CSB members were present: Ken Garnes, Chair; Gary Ambrose, Susan Beeman, Kate Hanley, Molly Long, Paul Luisada, Juan Pablo Segura, Lori Stillman, Diane Tuininga, Jeff Wisoff, Jane Woods and Spencer Woods

The following CSB members were absent: Pam Barrett, Suzette Kern and Dallas “Rob” Sweezy

The following CSB staff was present: Tisha Deeghan, Daryl Washington, Len Wales, Jeannie Cummins Eisenhour, Jean Hartman, Evan Jones, Dave Mangano, Victor Mealy, Lisa Potter and Lyn Tomlinson

1. Meeting Called to Order
   Ken Garnes called the meeting to order at 7:30 p.m.

2. Matters of the Public
   There were none requested.

3. Recognition
   As Juan Pablo Segura is stepping down as the CSB Dranesville representative at the end of April, he was recognized for his outstanding service and many contributions to the community during his tenure on the Board.

4. Approval of the Minutes
   Gary Ambrose offered a motion for approval of the March 25, 2015 Board meeting minutes of the Fairfax-Falls Church Community Services Board which was seconded and passed.

5. Matters of the Board
   • Molly Long noted with the creation of an Ad Hoc Police Practices Review Commission by the Fairfax County Board of Supervisors (BOS), Supervisor John Cook offered an amendment that the Crisis Intervention Team (CIT) training be considered during this process. In addition, Supervisor Cook was instrumental in the appointment of a representative of the National Alliance on Mental Illness (NAMI) to the Commission.
   • In the same vein, Kate Hanley indicated as a representative of the Human Services Council has been appointed to serve on the Police Practices Review Commission, she would recommend that CSB Board member Gary Ambrose also be appointed to the Commission. Without objection, the Board endorsed this recommendation along with the outreach to achieve this goal.

April 22, 2015
• Ken Garnes shared the following:
  • Appreciation was extended to Lori Stillman for testifying at the county FY 2016 budget hearings.
  • A reminder was provided of the May CSB Board meeting which will be held at the Merrifield Center as well as implementing a 5:00 p.m. meeting start time. Noting the challenges of addressing all Board member schedules while being mindful of the long hours required by staff to attend evening meetings, it was indicated the Board will try this earlier start time, and if needed, can revisit.
• Susan Beeman announced beginning in May, the start time of the monthly Behavioral Health Oversight Committee meetings will move to 5:00 p.m. and the May meeting will also be held at the Merrifield Center.

6. Directors Report

Tisha Deeghan reported on the following:
• Within the last couple of days, two items of concern have surfaced —
  • Department of Behavioral Health and Developmental Services (DBHDS) Commissioner Debra Ferguson indicated the Federal Government has suggested states not expanding Medicaid will encounter non-renewal of the 1115 Medicaid Waivers, the ramifications of which would impact Virginia’s Governors Access Plan (GAP).
  • The Virginia Association of Community Services Boards (VACSB) has alerted that within the draft FY 2016 State Performance Contract a mandate has been included for emergency services staff to be licensed, in addition to meeting the unique skills required in this area. This language was added even though a similar measure introduced in the 2015 General Assembly session was not accepted after being thoroughly vetted and determined it would be an untenable demand for the CSBs statewide. In response, the VACSB is proposing alternative language to eliminate a licensure requirement while supporting criteria to ensure skilled staff fill the positions. Should alternative language not be accepted and the licensure mandate be retained, the VACSB is recommending all CSBs refuse to sign the Performance Contract renewal. During discussion, a request was made to provide the state statutory authority to implement such a requirement.
• It was noted the request to apply for the CIT Assessment grant due May 5th is being presented to the CSB Board this evening for approval, and in turn, will be presented to the BOS on April 28th in which representatives of the agencies collaborating in this effort will be in attendance.

Assistant Deputy Directors Jean Hartman and Lyn Tomlinson shared a summary of changes that have been occurring within CSB service areas to more efficiently and productively serve the community. It was noted these changes have been possible in large part due to the implementation of the CSB Priority Access Guidelines and the support of staff, peers as well as stakeholders. The changes include:
• Same day walk-in screenings are now available at the Merrifield Center, 9:00 a.m.-5:00 p.m. weekdays, in lieu of conducting phone screenings. In addition, once it is determined
the priority access guidelines are met, financial reviews as well as full assessments are offered. Should the threshold not be met, assistance is provided in identifying other community options.

- To fill a long identified service gap, staff is being deployed from less utilized service areas to provide Substance Use Case Management for outpatient detox, with a particular focus on those individuals repetitively entering Detox, but refrain from follow up treatment.
- Medical Detox treatment capacity is being expanded by adding nursing positions through attrition. While the number of Social Detox beds currently meets demand, there is an ongoing waitlist for medical detox treatment.
- With the closing of Crossroads Youth and through collaboration with the Comprehensive Services Act (CSA), case management for 90 additional youth and their families can be provided. Also, treatment capacity at Crossroads Adult will be expanded with deployment of some staff.
- The Jail Diversion team will increase by one position allowing for expansion of services and possible earlier intercepts.
- Redeployment of part-time positions into Support Coordination Services will expand Targeted Case Management for Medicaid recipients who do not have waivers.
- With an aging ID population with growing medical needs, resources, including enhancing nursing positions, are being efficiently converted to support directly-operated residential homes.
- With some gender-specific day treatment programs being underutilized, consolidation has been undertaken while retaining the gender-specific portion. Staffing resources have also been split to address the need for Adult Partial Hospitalization Services that waxes and wanes between the North and South county sites.
- In light of the close proximity of the Heritage and Merrifield sites, Behavioral Health Services are being combined allowing for the availability of more bilingual staff and support of high-priority programs.
- As part of an efficient business process, a centralized scheduling system is being implemented at all major CSB sites in which the clinical staff is no longer responsible, but instead, business support staff coordinates scheduling of all appointments.

Following the report, it was noted this information should be provided to the BOS, possibly within the yearend report, as well as ensure the community is informed of the recent activities.

Len Wales highlighted some outcomes with the adoption of the FY 2016 county budget on April 21st.

- CSB funding was restored in two areas:
  1) within the Adult Detention Center, partial restoration for one position in Jail-based services which will be adjusted to accommodate the level of funding provided.
  2) three positions in Detox Diversion Outreach.
- A market rate adjustment increase for staff salaries from 0.84% to 1.10% was adopted. It was indicated this same rate will be used for consideration of vendors requesting a rate adjustment.
- Within the FY 2016-FY 2017 Budget Guidance document, the BOS was put on notice of a movement at the state level to hold localities responsible for the educational needs of
youth receiving residential services through the use of CSA pooled funding. If implemented, this added expenditure as well as allocation of staff resources could be significant.

- Also within the Budget Guidelines is notice of possibly using one-time carryover funding to assist Service Source in obtaining facilities for a disability resource center.
- While noting the Capital Improvement Program (CIP) was adopted by the BOS, it was indicated an amendment put forth by Braddock District Planning Commissioner Ellen Hurley to move a feasibility study for an Intermediate Care Facility (ICF) from FY 2024 to near term funding was not included. This amendment initiative was in recognition of the March 2016 closure of the Northern Virginia Training Center and immediate need for housing. Noting a rough estimate of the study is about $175,000, the CSB intends to request funding as part of the FY 2015 carryover.

7. Committee Reports

A. Behavioral Health Oversight Committee
Susan Beeman highlighted the March draft minutes included in the agenda materials and also reiterated that the May committee meeting will be held at Merrifield beginning at 5:00 p.m.

B. Fiscal Oversight Committee
In Suzette Kern’s absence, Mr. Garnes provided a report of the activities at the April committee meeting which included:
  - Ken Garnes is the new chair of the committee.
  - The staff vacancy outlook has improved and regular Human Resources updates continue to be provided which are helpful in understanding developments.
  - A yearend surplus is currently projected at about $2 million.

C. Government and Community Relations Committee
It was noted the April committee meeting was cancelled.

D. Intellectual and Developmental Disability (IDD) Committee
  - Lori Stillman noted the testimony presented at the FY 2016 budget hearings focused on the importance of Day Support and Employment Services as well as extended appreciation to the BOS for their support of the special education graduates.
  - The DBHDS Transformation Teams have issued recommendations in four areas: 1) Adult Behavioral Health, 2) Adult Developmental Services, 3) Children and Adolescent Behavioral Health Services, and 4) Services to Individuals who are Justice-Involved. Public comments are being solicited through May 31st and town hall meetings scheduled across the state during May to receive direct feedback. A town hall meeting is scheduled locally in Woodbridge on May 12th and additional information on this meeting as well as the proposed recommendations can be found on the DBHDS website.
  - CSB staff continues to conduct a series of focus groups on shaping a common vision on Employment and Day Support Services. Summaries of the focus group discussions as well as an online survey can be accessed on the CSB website.
A notice of proposed rulemaking has been issued in the April 15th Federal Register on implementing job training reforms through the Workforce Innovation and Opportunity Act. Comments are due by June 15, 2015.

The next IDD Committee meeting is May 14th.

9. Action Items

A. Grant Application for Crisis Intervention Team Assessment Funding
   Daryl Washington provided an overview of the request for approval to apply for the CIT assessment grant due May 5th. In response to support of staff positions if no further funding is provided after three years, it was noted there would be an effort to petition for general fund support to continue this vital program. Following some further discussion, a motion was offered by Gary Ambrose to approve the grant application which was seconded and passed.

B. CSB Officer Nominating Committee
   Following an overview of the CSB officer nominating process, Ken Garnes offered a motion for Susan Beeman, Suzette Kern and Lori Stillman to serve on the CSB Officer Nominating Committee for FY 2016 which was seconded and passed.

10. Information Item

A. Capital Improvement Program Update
   As the CIP discussion took place earlier in the meeting, Jeannie Cummins Eisenhour provided two additional related issues. Recognizing the initiative of Braddock District Planning Commissioner Ellen Hurley in trying to advance an ICF feasibility study to the near term, the Board may wish to extend appreciation. In the area of crisis care, the feasibility study for a new facility no longer remains in the CIP as it was proposed for one year and not accepted. With this in mind, the Board may wish to consider adding this request to the long term portion of the CIP.

There being no further business to come before the Board, a motion to adjourn was offered, seconded and carried. The meeting was adjourned at 8:45 p.m.

Actions Taken--
   - The March 2015 meeting minutes were approved.
   - Submission of the CIT grant application was approved.
   - The FY 2016 CSB Office Nominating Committee was established.

April 22, 2015
**Behavioral Health Oversight Committee Meeting Minutes**

**Date:** May 13, 2015  
**Location:** Merrifield Center  
**Attendees:** Susan Beeman, Chair, Gary Ambrose, Terry Atkinson, Gartlan Center Advisory Board, Peter Clark, No. Va. Mental Health Foundation, Tisha Deeghan, Wendy Gradison, PRS, Inc., Trudy Harsh, The Brain Foundation, Jean Hartman, Evan Jones, Suzette Kern, Dave Mangano, Bill Taylor, Concerned Fairfax, Lyn Tomlinson, Diane Tuininga, Daryl Washington, Jeffery Wisoff and Captain Spencer Woods. Also present were other private sector staffs as well as members of the public.

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<th>Topic</th>
<th>Action</th>
<th>Responsible Party</th>
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<tr>
<td>Meeting Call to Order</td>
<td>Meeting was called to order at 5:00 p.m.</td>
<td>Susan Beeman, Chair</td>
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<td>Approval of April 8, 2015 Minutes</td>
<td>Suzette Kern moved that the April 8, 2015 Behavioral Health Oversight Committee minutes be approved as presented. The motion was seconded by Gary Ambrose and unanimously carried.</td>
<td>Behavioral Health Oversight Committee</td>
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| Associate Member Presentations and Concerns| *Peter Clark, No. Va. Mental Health Foundation* would like to let Tisha Deeghan know she did a remarkable job on her speech to the board.  

Diane Tuininga, would like to share that Channel 4 aired a great segment on The Brain Foundation and Trudy Harsh did an amazing job.  

*Wendy Gradison, PRS, Inc.* made the following announcements: PRS and CrisisLink received the highest level of accreditation from the American Association of Suicidology. |          |          |
| Presentation: Non Emergency Medical Transportation through LogistiCare | Judy Jarrett, Senior Healthcare Manager, LogistiCare Solutions LLC, gave a presentation and shared information regarding non-emergency medical transportation from LogistiCare. The presentation highlighted the following:  

Our goal is to make sure our clients get where they need to go. The clients range from state government agencies, managed care organizations and hospitals to transit authorities and school boards. Our customers include Medicaid and Medicare populations, commercial and senior members, special-needs students.  

All requests for services should be made five days in advance if at all possible by calling 1-800-386-8331 or fax 1-866-907-1491. The caller will need to provide date, time, purpose and place of appointment. Transportation is provided for Medicaid covered services only. Any special request needs to be noted when scheduling the appointment such as wheelchair or walker, assist to door, blind, death so appropriate transportation can be arranged. Clients will be given a pick up time with a 15-minute before and after window and allow 45 minutes for a return pick up from time of call.  

The driver is required to obtain signatures on their trip log from member, caregiver or facility at pick up and drop off. LogistiCare may contact the facility to confirm member received services so payment can be authorized. | Judy Jarrett, Senior Healthcare Manager, LogistiCare Solutions |          |
## Clinical Discussion: Discharge Planning, Program for Assertive Community Treatment (PACT), Intensive Case Management and Jail Diversion

Davene Nelson gave an overview of the Forensic Transition and Intensive Community Treatment programs.

**Jail Diversion** provides intensive case management services to individuals with serious mental illness and/or co-occurring substance use disorder who have multiple incarcerations or are likely to be incarcerated resulting from ongoing untreated psychiatric symptoms.

*Program Criteria:*
- Individuals with serious mental illness and/or co-occurring substance use disorder who interface with the criminal justice system.
- Individuals need outreach support services to successfully engage with other available services as indicated (detox, residential or outpatient services, crisis intervention).
- Misdemeanor or non-violent felony criminal history.

**Mandatory Outpatient Treatment** Coordination and Monitoring services are provided for individuals that are court-ordered to receive outpatient treatment as an alternative intervention to inpatient hospitalization.

*Program Criteria:*
- Adult individuals designated under Temporary Detention Order (TDO) who are evaluated and determined to be appropriate for Mandatory Outpatient Treatment as an alternative to inpatient psychiatric treatment.
  - Individual is willing to participate in outpatient treatment,
  - Outpatient services are available and accessible to address needs,
  - Independent evaluator must recommend Outpatient treatment at time of TDO hearing.

**Outpatient Restoration Coordination and Monitoring** services are provided to individuals who are court ordered for outpatient restoration by the court. Outpatient Restoration is triaged with the court and Adult Detention Center as needed. Restoration services are provided by supportive targeted case management team.

*Program Criteria:*
- Adult individuals that have been evaluated under court order to determine competency to assist in their legal defense and to understand criminal charges levied and determined to be incompetent.
- Individual is able to participate safely in outpatient restoration process.
- Participation in outpatient treatment is not required.

**Not Guilty by Reason of Insanity (NGRI)** Coordination and Monitoring services are provided to individuals adjudicated NGRI as part of a legal plea bargaining process. Discharge planner coordinates conditional release development and implementation for individuals who are determined to be ready for community transition by the inpatient treatment team and the forensic review panel.
### Program Criteria:
- Adult individuals adjudicated NGRI by the court and committed to the custody of the Commissioner.
- Individuals are hospitalized in a State hospital for evaluation and treatment to determine readiness for community based treatment.
- Individuals who have successfully completed the NGRI privileging process and determine by legal code and approval of State Forensic Review panel to be ready for conditional release to the community.
- Individual approved by court for conditional release.

**Mandated Psychiatric State Hospital Discharge Planning Service** is provided by a team of five discharge planners. Discharge planners provide collaboration, coordination and limited case management services necessary to support continuity of care, referral and linking to community based services and timely discharge from state facilities.

**Program Criteria:**
Adult individual hospitalized in a State Psychiatric Hospital
- Northern Virginia Mental Health Institute
- Central State Hospital
- Western State Hospital
- Piedmont Geriatric Hospital
- Eastern State Hospital

### Crisis Intervention Team (CIT) Update
Community Services Board Emergency Service staff will work closely with Fairfax County officers to help with Crisis Intervention Teams (CIT) development. The training will bring together local stakeholders, law enforcement officers and mental health treatment providers.

CIT programs will enhance community collaboration and provide training to improve criminal justice and mental health system response to individuals with mental health issues. The model was originally developed by the Memphis, Tennessee.

The officers will attend a 40-hour training to help them effectively communicate with and understand the particular needs of individuals with mental illness.

### Budget Update
The Board restored four staff positions in the CSB that had been proposed for elimination in the advertised budget, including one position within Jail-Based Behavioral Health Services and three positions in the Diversion to Detoxification Outreach Program.

The CSB will sustain a net loss of 25 staff positions most of which are currently vacant.
### Prescription Drug/Heroin Task Force Efforts and Update

In the past three years Community Services Board has seen a 22% increase in the number of individuals needing services for heroin and other opiates. The number of deaths from overdose has doubled. We are seeing an epidemic of addiction to heroin and other opiates.

We are proposing a plan to target public awareness on safe disposal of medications. It will give residents a safe, convenient, and responsible means of disposing of prescription drugs, while also educating the general public about the potential for abuse of medications.

There will be a training rally this weekend “Project Revive” and a train the trainer held on Saturday, June 26, 2015 in Chantilly.

Louella Meachem, Director of Nursing Services, will be going to INOVA Fairfax and Fair Oaks to speak with Emergency Room doctors about the Community Services Board and the services we provide.

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### Adjournment

There being no further business to come before the Committee, the meeting was adjourned at 7:25 p.m.

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<th>Susan Beeman, Chair</th>
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CSB Fiscal Committee Meeting Notes

Date: April 17, 2015
Attending: Suzette Kern, Gary Ambrose, Kate Hanley, Lori Stillman, Jeff Wisoff
Staff: Tisha Deeghan, Len Wales, Daryl Washington, Ron McDevitt, Lisa Potter, Lisa Witt, Tana Suter

Summary of Information Shared/Decisions:

Financial Status

- Position Status:
  - As of 4/13, CSB had 126 vacant General Merit Positions.
- Pay Period Metrics:
  - Based on FY2015 year-to-date savings, staff estimates some flexibility and capacity to fill additional general merit positions. However, the Pay Period Metric report does not include the upcoming $400,000 impact of the new psychiatrist compensation plan nor the FY2016 position reductions. The agency will have to reassess additional capacity to hire for the remainder of FY2015. From PP6 to PP7, 7 positions became vacant, while 7 positions were filled, a net of 0.

Fiscal Update

- Modified Fund Statement for period ending March, 2015 was reviewed. Staff indicate no material changes from the previous month, with the following noted exceptions:
  - $500,000- anticipated “Meaningful Use” payment, for meeting electronic health records standards.
  - $327,207- funds applied for and received from state Part C Infant and Toddler Connection (ITC) surplus.
- Approximately $1.4 million likely to be requested as unencumbered carryover to support ITC, Employment and Day, the Crisis Recovery Team and the Merrifield Peer Resource Center.
- There was some discussion on budget, Lines of Business (LOB) exercise, carryover and Crisis Intervention Team (CIT) Assessment Site grant application.

Fiscal Committee Chairperson Nominations

- Suzette Kern opened discussion for nominations for next Chair of the Fiscal Committee.
- Kate Hanley offered a motion to elect Ken Garnes as Fiscal Committee Chair. The motion was seconded by Lori Stillman and unanimously carried.
- Ken Garnes will take over as Fiscal Committee Chair beginning in May.

Human Resources Issues

- Len Wales and Tana Suter provided a new chart format with details about Employee Actions and Workforce Planning items by service area.
  - Briefly described the Workforce Planning (WFP) process and highlighted approved items.
- Tana Suter provided an update and status of Human Resources issues. Some highlights include:
  - March 2015 and Year to Date Employee Actions and Terminations, with data on hires, promotions, transfers, resignations/terminations/demotions, DROP/Retirement enrollment.
**CSB Fiscal Committee Meeting Notes**

- “Recommended CSB Board Actions” and status for each were reviewed:
  - SME role in NeoGov - complete.
  - Inclusion of internal county candidates who meet minimum qualifications on the NeoGov referred list, as well as mismatch of referred candidate qualifications on application and supplemental question responses will be mitigated by SME reviews.
  - Clarification of salary level expectations in NeoGov ad copy - complete.
- Committee members commented that the format and information were very useful, and recommended that fiscal impact be added WFP section.

**FY 2016 Budget Update**
- Len Wales provided an update on the FY 2016 Budget, highlighting the adjustments and anticipated partial restoration of funding for jail-based service positions and possible restoration for funding of the detox diversion program.
- LOBs: it is anticipated that the guidance for the Lines of Business exercise will be received in early May.
- Staff provided an update on the Capital Improvement Program (CIP); the majority of the priorities the Board put forward were included, with the exception of the proposed Crisis Care feasibility study. All current feasibility studies received continued funding, including Cornerstones, A New Beginning, and Crossroads, which are on the bond referendum calendar to be funded in FY 2020. The Intermediate Care Facilities (ICF) item is on the bond calendar for 2024. There was some discussion on bonds and impact on the process.

**CSB Work Plans**
The CSB Work Plans are on target. Some highlights include:
- **Business Process**: delay in the implementation schedule of system access pilot due to the need to hire administrative staff. Plans include Merrifield and Chantilly.
- **Youth and Child Services**: on target; expansion of case management services.
- **Informatics**: will be selecting vendor for business process mapping; Credible has been on site to assist with clinical and financial optimization.

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**Issues to Communicate to CSB Board:**
- Approval of new Fiscal Committee Chair, Ken Garnes
- CIP will be an information item on the April 22 Board agenda

**Agenda Items for Next Meeting on May 15:**
- TBD
The Intellectual and Developmental Disability Committee of the Board met in regular session at the Fairfax County Government Center, 12000 Government Center Parkway, Room 120c, Fairfax, Virginia.

The following Committee members were present: Chair Lori Stillman, Suzette Kern, and Molly Long

The following Committee members were absent: the Hon. Jane Woods and Rob Sweezy

The following CSB staff were present: Tisha Deeghan, Jean Hartman, Evan Jones, Victor Mealy, Barbara Wadley-Young.

1. Meeting Called to Order

The meeting was called to order at 7:34 p.m.

2. Welcome and Introduction

The chair welcomed the public and introductions of Committee members, staff, and public were made.

3. Approval of the Minutes

Upon reaching a quorum, the minutes from the January 8, 2015 meeting were received and there being no further corrections or additions were moved, seconded, and approved.

4. Matters of the Public

Rikki Epstein, Executive Director of the Arc of NOVA, expressed her gratitude to the CSB and staff for their support of the County’s proclamation designating March as Intellectual and Developmental Disabilities Inclusion Month. Ms. Epstein noted the beautiful reception, good attendance, and many positive comments by various members of the Board of Supervisors.

Dennis Brown, representing ServiceSource, announced the Open House and Resource Fair being hosted at the Disability Resource Center in Oakton on March 27 from 1 to 4 PM. Mr. Brown noted that refreshments will be catered by the Blossom Daily Café and more than forty community partners will host exhibitions.

5. Matters of the Committee

Ms. Stillman returned thanks to the Arc and the public for supporting the March 3rd proclamation. She also announced that Governor McAuliffe has recognized April 2015 as Autism Awareness Month in the Commonwealth of Virginia. Nationally, April has been declared Autism Awareness month since 1984. Ideas on ways to help celebrate and educate can be found on the website of the Autism Society.
At the last meeting it was announced that the federal government had passed the Achieving a Better Life Experience, or ABLE, Act to help families meet the future needs of their children with disabilities. Ms. Stillman noted that the Virginia General Assembly subsequently passed a Virginia version which established a tax-free savings account for the purposes of long term care. Modeled after the successful 529 program, the Virginia program will also be administered through the 529 office.

Registration is now open for the Accessibility Summit 2015. The Summit will be held in Vienna, April 17 and 18 and the featured speaker is Tim Shriver, Chairman of Special Olympics.

There will be a Special Needs Safety & Community Inclusion seminar on Thursday, March 19 from 7pm–9pm at the Jewish Community Center of Northern Virginia (The J) – 8900 Little River Turnpike, Fairfax VA 22031. This workshop will showcase various safety and crisis prevention programs and explore tips for parents and caregivers of individuals with special needs. Some programs and topics that will be covered are: Crisis Intervention Team, REACH Crisis Program, CR2 Program, Project Life Saver, Missing Child Packet, Identification Cards, and much more!

6. Agency and Service Updates

General Updates:
County Advertised Budget: Public Hearings are scheduled for April 7, 8, and 9. Final adoption by the Board of Supervisors will be at the end of April. The Advertised Budget includes:
- A maximum tax rate of $1.09
- Contract rate increase of $3.9 million to fund CSB Grants
- 29 CSB staff reductions to include 2 positions in ID residential services and a reduction in staffing with Infant Toddler Connection
- New High School Graduates are funded for next year and the multi-year budget placeholders indicate that grads will be covered through 2017

State Budget: Voting against a phased in approach to Waiver redesign, the General Assembly eliminated the Day Support Waiver redesign language from the Governor’s proposed budget bill, the “Building Independence” Waiver slots, and the accompanying rental assistance funding which is likely to result in delaying the implementation of the redesign initiative. The GA then instructed the Department to submit a report to the Governor and the House Appropriations and Senate Finance Committees on the complete plan by November 1, 2015.

The State Budget also includes increases in reimbursement rates paid to providers for I/DD Waiver services as follows: in-home residential services (5.5%), day services (2%), therapeutic consultation services (10%), congregate residential services (2%), and skilled nursing services (15.7%), effective July 1, 2015. The rates were based on the Burns study.

The GA also approved the following waiver slots: 325 ID Waivers for individuals on the ID Waiver Waiting List; 40 DD Waivers for individuals on the DD Waiver Waiting List; and 85 ID Waivers for individuals exiting the Training Centers.

IDD Committee Minutes 3.12.2015
Final Rule: Public comments on DBHDS’s revised Transition Plan to the Final Rule were opened February 5 and closed March 8. Revised comments were submitted by Ms. Stillman on behalf of the committee. There did not appear to be significant changes to the revised plan from the previous public comment period. The CSB hosted a Regional training on implications and planning for the implementation of the Final Rule. The training was provided by Jennifer Fidura.

Assisted & Community Residential

Final Rule Self-Assessment: All providers were asked to do self-assessments of their support plans for licensure. Investigators will be going to providers to see if the assessments are correct. Trainings were provided to providers and CSB staff. The way plans are documented will be changing.

Rental Choice Va: There have been 15 referrals to the program. Three (3) individuals have a lease currently and 7 individuals are in the process of leasing. Virginia was not a recipient of the HUD Award.

Employment Services

Community Dialogue and Focus Groups: The CSB will initiate a community dialogue on the future of Employment and Day services this spring. To launch the dialogue the CSB will hold a series of focus groups (at least 10 groups with approximately 8 people each) to look at what works and what could be changed to increase equity of access. Many factors including Employment First, sheltered employment, Waiver reform, an aging population, limited local dollars, etc. heighten the importance of exploring the community’s shared values and collective vision for the future.

The groups will be configured to ensure a wide representation of stakeholders including individuals and families, advocates, the schools, employment and day providers, support coordinators, etc. We will also stand up a website to post feedback from the groups and give the broader public an opportunity to share their thoughts. Executive Director Tisha Deeghan will be preparing an interim report this summer and a full report by the end of the year.

Self-Directed Service update: The Self-Directed program has already exceeded the initial goal of 40 participants. Currently up to 52 are enrolled and 62 total individuals have been served to date. Individuals and families report that they like the services. The Committee will look into including this update in the mid-year report to the BOS. Molly Long requested more information on program goals, objectives, etc.

Support Coordination

Hires and Building a Bench: Support Coordination continues to explore strategies to fill vacant support coordinator positions and build a bench of coordinators for future vacancies. The Support Coordination management team has met with Department of Human Resources personnel to initiate a Subject Matter Expert review process of all eligible applicants. We are also establishing a few positions to provide non-waiver case management and thereby be better positioned for promotions to waiver case management.
Training Center Updates: Currently there are 69 individuals residing at NVTC of whom 45 are from Fairfax-Falls Church. Another 17 individuals live at CVTC.

Waiver Waitlist Update: There are currently 727 individuals from Fairfax-Falls Church with a waiver, 858 on the Urgent Waitlist and 375 individuals on the Non-urgent Waitlist.

Workload: The new Individual Support Plan/Person-Centered Plan begins in April. We are ready to implement and aware that it is longer and will require more time to complete. The SIS is reportedly taking much longer to complete than in the past.

7. Other Announcements
   a. Merrifield Grand Opening will be held Friday, March 27 from 11AM – 12 Noon.
   b. The Service Source Resource Fair Open House will be held immediately afterward at White Granite from 1-4PM.

8. Meeting Adjourned

There being no further business to come before the Committee, the meeting was adjourned at 9:00 p.m.

Next Meeting: May 14, 2015 (the second Thursday of the month)
The Intellectual and Developmental Disability Committee of the Board met in regular session at the Fairfax County Government Center, 12000 Government Center Parkway, Room 120c, Fairfax, Virginia.

The following Committee members were present: Chair Lori Stillman, the Hon. Jane Wood, and Molly Long

The following Committee members were absent: Rob Sweezy and Suzette Kern

The following CSB staff were present: Tisha Deeghan, Jean Hartman, Evan Jones, Victor Mealy, Barbara Wadley-Young and Daryl Washington

1. Meeting Called to Order
   The meeting was called to order at 7:36 p.m.

2. Welcome and Introduction
   The chair welcomed the public and introductions of Committee members, staff, and public were made.

3. Approval of the Minutes
   Upon reaching a quorum, the minutes from the March 12, 2015 meeting were received and there being no further corrections or additions were moved, seconded, and approved.

4. Matters of the Public
   There were no matters of the public brought forth to the committee.

5. Matters of the Committee
   Ms. Long met with Commissioner Ellen J. "Nell" Hurley who serves on the Planning Commission for the Braddock District to discuss the closing of the Northern Virginia Training Center, the Commissioner’s prior meeting with CSB staff, and her support of planning for new ICFs.

   Ms. Stillman attended the VACSB and found it very informative, learning of many new state initiatives.

   Ms. Stillman received an email from Special Olympics Virginia A regarding the Champions Together Program. They are one of 200 finalists in the State Farm Neighborhood Assistance competition. Votes can be cast by reposting the Champions Together email on Facebook. Top winners will receive a $25,000 charitable grant to support the program.

   Freddie Mac is seeking college grads (or those in college) with autism spectrum disorders to fill four paid internship opportunities. The internships are full time paid positions that will last 16 weeks.

   Advocates can join the ARC of VA on May 20, 2015 at 2:30 PM at the Cannon House Office Building in Washington, D.C. to show support for legislation benefitting those with disabilities.
This year marks the 25th anniversary of the ADA.

6. **Agency and Service Updates**

**Director Updates:**

*Waiver Updates Email List* – If you would like to be added to the email list to receive waiver redesign updates send your email address and your stakeholder status (e.g., self-advocate, family member, etc.) to waiverupdates@dbhds.virginia.gov.

*Waiver Waitlist* – Statewide: Urgent Waitlist 4,877 + Non-Urgent Waitlist 3,109 = Total 7,986

Fairfax-Falls Church: Urgent Waitlist 886 + Non-Urgent Waitlist 386 = Total 1272

**Newspaper Feature** - April 2-8 *Connection Newspapers* feature article about the upcoming closure of Northern Virginia Training Center.


**JLARC Investigation** - The Joint Legislative Audit and Review Commission (JLARC) is launching a two-year investigation into Virginia’s Medicaid program. They will be focusing on cost drivers and containment strategies as well as complaints about Medicaid funded transportation (Logisticare). The process of interviewing for contractor positions is currently underway. The legislature is looking at removing UAI for children and putting a 30 day limit on completion of the UAI for adults. Medicaid is moving more people towards managed care. Logisticare will do a third extension. A new RFP for transportation will be initiated within the year. It was mentioned that people need to realize that making complaints can be used to build a better system; therefore complaints are encouraged when warranted.

**DBHDS Transformation** - Last fall, Commissioner Debra Ferguson formed four Transformation Teams: adult behavioral health services, adult developmental services, child and adolescent behavioral health services, and services to individuals who are involved in the justice system. The Transformation Teams finalized and submitted the first round of draft recommendations which are now open for public comment on the website until May 31st. The adult developmental services focused on three questions:

1. What core and mandated services should be provided, and how can we best assure quality and accountability in delivery? (Consider use of natural supports and performance measurement)
2. How can the system maximize access to services and supports for people with developmental disabilities, and eliminate the waiting list?
3. Should case management be required for everyone?

**Assisted & Community Residential Services**

*Rental Choice VA Update:* There have been 17 referrals to the program resulting in 3 sites with 4 leases. 2 applications are in process. 3 individuals in a private provider ICF would like to live together and are pursuing this option.

*Housing & Supportive Service Consortium (HSSC):* Sponsored by DBHDS, DMAS, DHCD & VHDA to increase access to supportive housing for individuals with ID. Regional groups are forming to try to resolve housing issues in the NoVA & Hampton Roads areas.
**Miller House Update:** The City of Fairfax has received responses to its 1st issuance (of 2) of a PPEA (Public Private Education Act) solicitation for facility construction and service delivery to low-moderate income individuals with disability on 7,514 sq. ft. of property on N. Washington Street. They intend to lease the property, tax free, for $1/year with no direct funding given. A 2nd PPEA is due for distribution soon.

**Other Service Area Updates:**

- DMAS issued a Notice on June 4, 2015 increasing Medicaid Waiver rates for targeted residential services effective July 1, 2015.
- Service Providers are adapting to changes regarding ISPs, SIS assessments and other final rule compliance items.
- The ID Residential Services contract covering multiple vendor services to some 350+ individuals expires June 30, 2016. The new contract is under development for issuance in upcoming months.
- CSB directly operated programs are focused on integrating Nursing Care, Eldercare and Mental Health services to meet changing needs of its aging population. Grace Starbird, former director of the County Area on Aging, is providing consultation services for development of an eldercare strategic integration plan that includes identification of and networking with eldercare community service providers. The Service Director will also work with Lisa Potter to consider the extent to which co-occurring tools for SA & MH service integration might be adaptable to support ID & MH service integration.
- CSB directly operated programs has lost 4 individuals in the past 6 months as 2 have passed away and two others are now receiving nursing or intensive medical care services. The impact of the loss of other individuals and staff who have had relationships with these individuals for decades now is significant. The team is pursuing support from Emergency Services to provide management training to better manage this pattern of reality, as well as to provide event-focused support to individuals.

**Employment Services**

*Focus groups* have been held with IDD employment and day services stakeholders during the last 4 weeks. The purpose of the groups has been to gain input regarding the related CSB service system with the goal of system improvements with particular emphasis on equity of service access and system sustainability. So far 10 focus groups have been held with 61 persons participating. Participants represent a diverse group including Families, Persons Served, Providers, Support Coordinators, School Representatives, and various other stakeholders. A dedicated web site summarizes focus group input and has available a survey for persons who may want to provide input, but have not been able to attend a focus group. To date, 31 persons have completed the survey. The related web site is located here: [http://www.fairfaxcounty.gov/csb/idfuture/](http://www.fairfaxcounty.gov/csb/idfuture/). The survey will be available for stakeholder input until 6/30/2015.

**Self-Directed Services** (SDS) has served 55 persons this fiscal year with a savings over traditional service costs of between $200,000 and $300,000 this year. Organizational changes have been made to allow the SDS to serve up to 75 persons in a fiscal year. Generally those served are very happy with the service. This coming Tuesday 5/26 (evening) the first scheduled Self-Directed Services support group will be held for all those using the service. This will provide a chance for SDS
participants to interact with each other. This group has been requested and there is considerable anticipation for the first meeting.

Logisticare presented at this month’s meeting of the Behavioral Health Oversight Committee meeting. One highlight of the presentation was Logisticare’s program to purchase a month of unlimited travel on the Washington DC area METRO system for any individual willing to use public transportation instead of a dispatched ride with a contracted transportation provider. This option could be renewed each month provided the METRO pass cost was less than the cost of a month of individual trips with a contract provider. Logisticare will also provide bus tickets on non-METRO public transportation if the same above conditions are met.

Support Coordination

- There are 41 individuals remaining at NVTC. Two will be moving soon, but their discharges have been delayed due to the vendor waiting for occupancy permits. There are 16 individuals living at CVTC.
- The new PCP-ISP went into use with the April 1st plans. The managers and supervisors were trained by the CRCs and then our staff held training sessions for the support coordinators. We had two staff take the lead in working with Informatics to build the new ISP document in Credible. The document is taking longer to complete because it is new and very comprehensive.
- Supplemental Intensity Scale (SIS) continues to be a workforce demand that takes a lot of time. Meetings can range from 3-5 hours.
- DBHDS recently queried the CSB to update the list of individuals in need of a public guardian.
- DBHDS recently asked HPR II for statistics on individuals who will need mobile equipment repair services and dental services. This project is part of the planning for transition of services that are currently administered through the RCSC, which will close when NVTC closes in 3/2016. Some continuing services will be provided through the Developmental Disabilities Health Support Network.

7. Other Announcements
   a. Employment and Day online survey will continue through the end of June.
   b. Next meeting: The Committee will explore moving its stated meetings from Thursday to the first Wednesday of the month with a 5:30 PM start time and changing the location to the Merrifield Center.

8. Meeting Adjourned

There being no further business to come before the Committee, the meeting was adjourned at 8:48 p.m.

Next Meeting: TBA
Appointment of Ad Hoc Fee Policy Committee

Issue
The CSB Executive Committee is proposing the establishment of an Ad Hoc Fee Policy Committee and the selection of its members for the 2015/2016 fee related review work.

Recommended Motion
I move that the CSB Board establish an Ad Hoc Fee Policy Committee comprised of three members as recommended.

Background
As outlined in the CSB Bylaws, Ad Hoc Committees may be established by the full Board as needed. Those Committees may be established to address any issue for which the full Board determines that the subject matter or issue cannot be adequately addressed by the Standing Committees. The members of each Ad Hoc Committee shall elect one of their members as Chair for a one-year term.

CSB Board Policy 2120, Reimbursement for Services, requires the annual review of fees and the provision of guidance on the system that provides subsidies and various payment methods based on the ability to pay and addresses delinquent accounts based on County policy. In addition to conducting a review of the Board Policy 2120, the Ad Hoc Fee Policy Committee reviews staff proposals on the Ability to Pay Scale, the Fee and Subsidy Related Regulation 2120.1, and the Fee Schedule, and makes recommendations. The Ad Hoc Fee Policy Committee then brings forward to the full Board a recommendation to post changes for public comment.

The CSB Board members being recommended to serve on this year’s committee are Jeff Wisoff, Jane Woods and Ken Garnes.

Timing
Request approval at the May 27th CSB Board meeting in order to meet the review deadlines and deliverables identified in the preliminary work plan.

Board Member/Staff
Ken Garnes, Chair
Ginny Cooper, Director, Enterprise Services
James P. Stratoudakis, PhD, Director, CSB Office of Quality, Compliance and Risk Management

Attachment
FFCCSB Fee Related Review Work – 2015/2016
## FFCCSB FEE RELATED REVIEW WORK – 2015/2016

<table>
<thead>
<tr>
<th>TOPIC</th>
<th>TASKS/DELIVERABLES</th>
<th>STAFF WORK GROUP</th>
<th>BOARD COMMITTEE</th>
</tr>
</thead>
</table>
| Charter | - Jim Stratoudakis to convene Board; Ginny Cooper to convene Staff.  
- Appoint/designate members  
- Schedule June-July-Aug meetings with review topics and decisions points  
- Furnish current related materials for context purposes | Designate staff by 5/11/15 | Establish Committee & appoint members 5/27/15 |
| Board Policy on Reimbursement 2120 | - Review and discuss Board Reimbursement Policy 2120 a) if & when rejecting health care coverage affects CSB charges; b) service charges for individuals with closed panel health plans and no out-of-network payments to providers; and c) service charges for individuals with high deductible ACA Marketplace health plans. | NA | Review by (late June 2015) |
| Ability to Pay (ATP) Scale | - Update based on federal poverty guidelines (sync with federal update typically 1st of the new calendar year)  
- Other considerations (e.g., County, GAP, ACA) | Recommendations by (late June 2015) | Review by (Aug 2015) |
| Fee & Subsidy Related Regulation 2120.1 | - Propose changes to Regulation for congruity with Ad Hoc Committee recommendations to Board Policy 2120 and staff-initiated proposals | Complete by (mid-July) | Review by (Aug 2015) |
| Service Cost Review | - Review and discuss service costs by CPT/H codes  
| Fee Schedule | - Review proposed Fee Schedule  
| Approvals and Effective Date | - CSB Board Item to hold Public Hearing on Fee Related documents 9/__/15  
- Placeholder for BOS Information Item on BOS agenda for their 11/__/15 meeting)  
- CSB Board Public Hearing 10/__/15  
- CSB Board Item 10/__/15 to approve Fee Schedule and ATP Scale and forward to the Board of Supervisors for their review  
- BOS Information Item on Fee Schedule and ATP Scale 11/__/15  
- Make effective 60 days from 11/__/15 approval, or 2/1/16. | In accordance with Board(s) due dates | Present Board Item on 9/__/15 to hold Public Hearing on Fee Related Documents on |
RxRelief Virginia Grant Application to Expand CSB Medication Access Program

Issue
Authorization for the Fairfax-Falls Church Community Services Board (CSB) to apply for and accept grant funding, if received, from the Virginia Health Care Foundation (VHCF) to expand access to its Medication Assistance service. If awarded, RxRelief Virginia grant funding of $50,000 a year renewable annually will support additional access points to free or low-cost prescription medications for an estimated 350 eligible individuals. The expansion will assist CSB clients with access free medications in three new ways: 1) by coordinating with their primary care physicians; 2) by managing delivery at CSB residential treatment programs; and 3) by facilitating applications prior to discharge from state hospitals and the Adult Detention Center.

Recommended Motion
I move that the Board authorize staff to apply for and accept funding, if received, from VHCF for Medication Assistance funds.

Background
VHCF released a Request for Proposals (RFP) on April 7, 2015 to establish or expand local Medication Assistance Programs via VHCF’s RxRelief Virginia initiative. For the first time in seven years, the General Assembly allocated new funds for this initiative, and, once awarded, the grants can be renewed annually as long as state funding remains available and the grantees are successful in meeting performance metrics. The CSB participated in the mandatory pre-proposal workshop on April 29, 2015. Notice of awards will be issued on August 31, 2015 and grantees must be ready to implement by October 1, 2015.

RxRelief Virginia funds the salary and fringe benefits of Medication Assistance programs (MAPs) which utilize full or part-time caseworkers to obtain brand name medications at no or low cost from the Patient Assistance Programs (PAPs) available through brand name pharmaceutical companies. All MAPs must use The Pharmacy Connection (TPC), a special web-based software program created by VHCF to track applications and refills and to run quantitative reports; the CSB has been an active user of TPC for the past two years. The grant requires a caseload of a full-time Medication Assistance Caseworker to be a minimum of 350 people.

The grant broadens the CSB’s medication access and cost-savings initiatives, among which include assisting 750 individuals with free psychiatric medications through PAPs and assisting over 400 individuals enroll annually in Medicare Part D Prescription Drug Plans. Annually the CSB spends $300,000 in order to avoid spending $6 million medications for individuals who qualify for the aforementioned drug benefits.
The expansion will serve 350 individuals in three new ways:

1) Coordinating with the private primary care physicians of CSB clients with incomes less than or equal to 300% of Federal Poverty guidelines (e.g., $35,010 for household of one) to apply and order refills for free or low cost primary care medications in addition to the anti-psychotic drugs ordered by CSB doctors.

2) Applying for, refilling and managing delivery of free or low cost medications at the appointed times for CSB doctors making rounds at CSB residential treatment programs.

3) Through the CSB discharge planning team, facilitating PAP applications prior to discharge from state hospitals and the Adult Detention Center and thereby shortening the length of time that the CSB subsidizes the cost of medications otherwise available through PAPs.

Timing
Board action is required as the proposal submission date is June 19, 2015.

Enclosed Document
Attachment: Summary of Grant Application

Staff
Tisha Deeghan, Executive Director
Leonard P. Wales, Acting Director of Administrative Services
Daryl A. Washington, Deputy Director of Clinical Operation
Colton Hand, MD, Medical Director
Laura Yager, Director, Partnership and Resource Development
Ginny Cooper, Director, Enterprise Services
RxRelief: MEDICATION ASSISTANCE PROGRAM
SUMMARY OF GRANT PROPOSAL

Please note: the actual grant application is not yet complete; therefore, this summary provides an outline of what will be included in the application.

Grant Title:  RxRelief: Medication Assistance Program

Funding Agency:  Virginia Health Care Foundation

Funding Amount:  $50,000 per year, based on successful performance

Proposed Use of Funds:  The grant purpose is to expand local Medication Assistance Programs utilizing a full-time Medication Assistance Caseworker to obtain needed medications at no or low cost for eligible individuals from brand name pharmaceutical companies. The goal is to make medications affordable to those who might otherwise choose not to fill a doctor’s prescription because of the cost. The grant will fund the following:

1. Salary and fringe benefits of a Medication Assistance Caseworker. The CSB intends to procure the services under the Medication Access Assistance Program contract with Northern Virginia Family Service.

Target Population:  People who receive CSB services and are eligible for free or low cost brand name medications through the Patient Assistance Programs (PAPs) of various pharmaceutical companies.

2. Success at reducing cost of CSB subsidized medications by increasing the number of PAPs.
3. Enhance integration efforts between private physicians and CSB to improve care and outcomes.

Grant Period:  From date of award which will occur prior to October 1, 2015 for 12 months, with annual renewals based on successful performance.
FY 2016 Community Services Performance Contract Renewal and Revision

Issue
The FY 2016 State Performance Contract Renewal and Revision was released on May 13th, 2015. Contract documents for FY2016 are due to the Virginia Department of Behavioral Health and Developmental Services (DBHDS) on June 26, 2015 and will require CSB Board approval.

Background
The State Performance Contract delineates the responsibilities between DBHDS and the community services boards and behavioral health authority for the purpose of providing local public mental health, developmental and substance abuse services. It specifies the conditions to be met for a CSB to receive State-controlled funds, identifies the groups of consumers to be serviced with State-controlled funds and includes requirements to ensure accountability to the State. It includes all services provided or contracted by the CSB.

In 2012, DBHDS amended the contract term from one year to two years. A biennial contract term eliminates the need for a local 30-day public comment period for FY 2016. Additionally, the Fairfax County Board of Supervisors approved the two year contract in FY2015, so Board approval is not required for this renewal.

Attached to this Information Item is the Performance Contract Cover Memo from DBHDS, which includes a summary of the substantive revisions to the FY 2016 contract. Several changes include revised language to clarify terms and/or the intent of specific items, additions to address Department of Justice (DOJ) Settlement terms and mental health law reform mandates and administrative changes based on streamlined data transfer processes. Additional changes include reinstatement of requirements to report funding amounts by type (state, local, federal, Medicaid, other fees, other funds) and to project numbers of individuals who will be served. A complete list of revisions is included in the attached cover memo from DBHDS.

Of note, the revision references Emergency Services staff requirements in the following terms: “The CSB agrees to work with the Department to establish a process to enhance the qualifications, training, and oversight of CSB emergency evaluators and increase the quality, accountability, and standardization of emergency evaluations. The Department and the CSB agree that the applicable results of this effort shall be incorporated in the performance contract as an amendment at the appropriate time.”
Administrative Requirements
Performance Contract Cover Letter (Attachment)

Timing
The FY 2016 Community Services Performance Contract Renewal and Revision is due to DBHDS by June 26, 2015.

Enclosed Documents
Attachment: Performance Contract Cover Memo

Staff
Jerome Newsome, CSB Informatics Director
Lisa Potter, CSB Strategy and Performance Management Director
TO: Community Services Board or Local Government Department Executive Directors and the Behavioral Health Authority Chief Executive Officer

FROM: Paul R. Gilding
Community Contracting Director

SUBJECT: FY 2016 Community Services Performance Contract Renewal and Revision

DATE: May 8, 2015

The FY 2016 Community Services Performance Contract Renewal and Revision Partnership Agreement are available for your information and use on the CSB Community Contracting web page at http://www.dbhds.virginia.gov/professionals-and-service-providers/csb-community-contracting. The FY 2016 CSB Administrative Requirements, a separate document incorporated into the contract by reference, is also available there. The Department is distributing Letters of Notification and the Community Automated Reporting System (CARS) software electronically now. The letters contain initial allocations of state and federal funds to community services boards, the behavioral health authority, and the two local government departments with policy-advisory CSBs, all of which are referred to as CSBs in the contract documents and this memo.

The contract documents incorporate changes in the FY 2015 and FY 2016 Community Services Performance Contract Revision No. 1 that were negotiated last month with the Performance Contract Committee established by the Department and the Virginia Association of Community Services Boards. Substantive changes from Revision No. 1 are described below.

Performance Contract Changes

1. Section 3 on page 1 is revised to clarify that the contract is not only the second-year renewal authorized by § 37.2-508 of the Code of Virginia but also a revision of the FY 2015 and FY 2016 Performance Contract Revision No. 1.

2. Section 4.c.6.), added on page 4, makes it clear that individuals must be offered a choice of case managers. This language is moved from section I.C.2 in Appendix E of the CSB Administrative Requirements where it applied only to mental health and substance abuse case management services. This responds partially to the CMS Final Rule. It also is consistent with Department licensing regulations (12VAC25-105-1255 Case Manager Choice) that state “The provider shall implement a written policy describing how individuals are assigned case managers and how they can request a change of their assigned case manager.”
3. Section 4.c.9.) on page 5 is revised to conform to Senate Bill 1265 that clarified the meaning of real time for the psychiatric bed registry.

4. Sections 4.e.23.) and 24.), added on page 9, address DOJ Settlement Agreement Independent Reviewer concerns and clarify CSB responsibilities in the cited Settlement Agreement sections.

5. Section 4.f on page 9 is revised substantially to reflect the results of the CSB Emergency Services Telephone Survey conducted by the Department in March.

6. Section 4.h on pages 10 and 11 is a significant revision of current section 6.b.4.) about emergency services staff. This section applies only to staff conducting emergency evaluations, which are face-to-face clinical evaluations performed by designated CSB staff of persons in crisis who may be in emergency custody or who may need involuntary temporary detention or other emergency treatment.

7. Sections 4.i 1.) and 2.) on page 11 move sections I.C.1) and 4.) in Appendix E of the CSB Administrative Requirements, which applied to MH and SA case management services, into the performance contract and extends them to developmental case management services.

8. Sections 4.i.3.) through 7.), added on page 11, address DOJ Settlement Agreement Independent Reviewer concerns and clarify CSB developmental case management services responsibilities.

9. Sections 6.b.4.) e.) through g.) on pages 13 and 14 are revised to reflect changes in terminology and several significant changes in behavioral health prevention and wellness services that have been reviewed with the VACSB Prevention Services Council.

10. Section 6.c.2.) g.), added on page 17, reinstates a requirement eliminated in FY 2002 to report amounts of funds by type (state, local, federal, Medicaid, other fees, and other funds) used for each core service in the end-of-the-fiscal year CARS report.

11. Sections 6.j and 7.k, added on pages 19 and 23, establish a mechanism for the Department to communicate significant issues or concerns about a CSB’s operations or performance to the executive director and board members for their consideration and formal response.

12. Section 7.b.7.) on page 20 is revised to conform to Senate Bill 1265 that clarified the meaning of real time for the psychiatric bed registry.

13. Section 7.e. on page 22 is revised to delete redundant language about waivers of local matching fund requirements that are addressed in section 7.g on page 23.

14. Section 7.g. on page 23 is revised to clarify that the Department may grant automatic waivers of local matching fund requirements only to a regional fiscal agent CSB for the state funds it distributes to other CSBs participating in a regional program.

15. Current section 10 on performance incentives is deleted since the initiatives were not developed.

16. Forms 11, 21, 31, and 01 on pages 39 through 42 are revised to reinstate a requirement for projecting numbers of individuals who would receive services during the contract term.

17. Section I.A in Exhibit B on page 43 is revised to apply only to discharges from private psychiatric beds, and section I.B in Exhibit B of the current contract is deleted.

18. Sections I.B and C in Exhibit B on pages 43 and 44 are revised to conform with revisions of the related data elements in CCS 3, and the quarterly reporting requirement is deleted because this data will come from CCS 3.
FY 2016 Performance Contract Renewal and Revision
May 8, 2015
Page 3

19. Section IV in Exhibit B on page 45 is revised to lower the utilization rate for residential crisis stabilization programs from 80 to 75 percent

20. The Exhibit B Quarterly Report on page 46 is revised to delete sections I.B, C, and D.

21. Exhibit G in the current contract is deleted because information about CSB board appointments and integrated behavioral and primary health care is collected in Table 2 of CARS.

22. Section I.C.1 in Exhibit J on page 61 is revised to require the organization chart to include the local governing bodies that established the CSB.

23. Section I.C.8 in Exhibit J on page 61 is revised to reduce the frequency of board meetings from 10 to six per year.

24. Section I.F.1 in Exhibit J on pages 62 and 63 is revised to require an operating CSB or BHA board of directors to conduct a broad and thorough public recruitment process when the executive director position becomes vacant.

25. Section II.A. in Exhibit J on pages 63 and 64 is revised to add PATH to the list of federal grants and to add specific identifying information for the PATH, MHBG, and SABG federal grants in response to a requirement from SAMHSA.

CSB Administrative Requirements Changes

26. Section 12 in Appendix B on page 29 is revised to conform with 45 CFR § 96.125 and reflect current practice.

Contract Process

Once the Department distributes the CARS software and Letters of Notification, CSBs will submit all of the contract’s Exhibit A electronically using CARS software. CARS software contains Table 2: FY 2016 CSB Management Salary Costs, which enables CSBs and the Department to respond to requirements in § 37.2-504 of the Code of Virginia. This table also collects FTE information by program area and for emergency and ancillary services, including numbers of peer providers. Peer providers are staff who self-identify as individuals receiving services and have been hired specifically as peer providers. Staff not hired as peer providers, even if they have a mental health or substance use disorder or intellectual disability, should not be reported as peer providers.

To be accepted for processing by the Department, a performance contract must satisfy the requirements and criteria in Exhibits E and I of the contract.

1. Exhibit A and Table 2 must be submitted to Information Services and Technology in the Department using CARS software and must be complete and accurate.

2. Since the contract is being distributed electronically, the parts of the contract that are submitted on paper should be printed, signed where necessary, and mailed to the Office of Community Contracting when Exhibit A is submitted. See Exhibit E in the contract. These parts are:
   - signature page of the contract body (page 28)
   - signature page of Exhibit B,
   - Exhibit D (if applicable),
   - Exhibit F (two pages), and
   - Exhibit G.

The Department must receive all parts of the contract submitted on paper before a contract submission will be considered complete.
3. Exhibit A must conform to allocations of state and federal funds in the Letter of Notification, unless amounts have been revised by or changes negotiated with the Department and confirmed by the Department in writing. Total funds in each program area (pages AF-1 through AF-8) must equal total costs shown on Forms 11, 21, 31, and 01 or differences must be explained on the Financial Comments form.

4. Contracts must contain actual appropriated amounts of local matching funds. If a CSB cannot include the minimum 10 percent local matching funds in its contract, it must submit a written request for a waiver of the local matching funds requirement, pursuant to § 37.2-509 of the Code of Virginia and State Board Policy 4010, to the Office of Community Contracting with its contract. More information about the waiver request process is attached to this memo.

The FY 2016 contract renewal and revision and other materials described above are due in the Department’s Office of Community Contracting by June 26, 2015, except for Exhibit A that is submitted to Information Services and Technology by the same date. Section 37.2-508 or 37.2-608 of the Code of Virginia authorizes the Department to provide up to six semi-monthly payments of state and federal funds to allow sufficient time to complete local government approval and Department negotiation and approval of the contract. Exhibit E automatically provides the first two semi-monthly July payments, whether or not a contract has been submitted. The process conditions the next four semi-monthly payments (two in August and two in September) on the Department’s receipt of a complete performance contract.

Once a contract is received in the Department, the Community Contracting Administrator will review it and notify the CSB within five working days that it is or is not accepted for review by the Department. Unacceptable contracts will need to be revised before the Department will process them. If CSBs have any questions about this memo or the contract documents, please e-mail or call Joel Rothenberg, the Community Contracting Administrator, at joel.rothenberg@dbhds.virginia.gov or (804) 786-6089 or me at paul.gilding@dbhds.virginia.gov or (804) 786-4982. Thank you.

Enclosures (4)
Minimum Ten Percent Local Matching Funds Waiver Request Attachment

A CSB should maintain its local matching funds at least at the same level as that shown in its FY 2015 performance contract. The 2015 Appropriation Act prohibits using state funds to supplant local governmental funding for existing services. If a CSB is not able to include at least the minimum 10 percent local matching funds required by § 37.2-509 of the Code of Virginia and State Board Policy 4010 in its performance contract or its end of the fiscal year performance contract report, it must submit a written request for a waiver of that requirement, pursuant to that Code section and policy, to the Office of Community Contracting with the contract or report.

In accordance with section 7.g of the Community Services Performance Contract, if only a CSB’s receipt of state funds as the fiscal agent for a regional program, including regional DAP, acute inpatient (LIPOS), or state facility reinvestment project funds, causes it to be out of compliance with the 10 percent local matching funds requirement in § 37.2-509, the Department will grant an automatic waiver of that requirement related to the funds for a regional program allocated to the other participating CSBs. The amount of state funds the CSB uses for its own participation in the regional program is not eligible for this automatic waiver. The CSB must submit a written request for the waiver, identifying the specific amounts and types of those funds that cause it to be out of compliance with the local matching funds requirement, but without the documentation required below in items 3, 4, and 5, and the Department will approve an automatic waiver in a letter to the CSB.

1. State Board Policy 4010 defines acceptable local matching funds as local government appropriations, philanthropic cash contributions from organizations and people, in-kind contributions of space, equipment, or professional services for which the CSB would otherwise have to pay, and, in certain circumstances, interest revenue. All other funds, including fees, federal grants, other funds, and uncompensated volunteer services, are not acceptable.

2. Section 37.2-509 of the Code of Virginia states that allocations of state funds to any CSB for operating expenses, including salaries and other costs, shall not exceed 90 percent of the total amount of state and local matching funds provided for these expenses. This section effectively defines the 10 percent minimum amount of local matching funds as 10 percent of the total amount of state and local matching funds.

3. The written waiver request must include an explanation of each local government’s inability to provide sufficient local matching funds at this time. This written explanation could include, among other circumstances, the following factors:
   a. an unusually high unemployment rate compared with the statewide or regional average unemployment rate,
   b. a decreasing tax base or declining tax revenues,
   c. the existence of local government budget deficits, or
   d. major unanticipated local government capital or operating expenditures (e.g., for flood damage).

4. Additionally, the waiver request must include information and documentation about the CSB’s efforts to obtain sufficient local matching funds. Examples of such efforts could include newspaper articles, letters from CSB members to local governing bodies outlining statutory matching funds requirements, and CSB resolutions.

5. Finally, the waiver request must include a copy of the CSB’s budget request that was submitted to each local government and a copy or description of the local government’s response to it.