

Provider & Stakeholder Work Group Minutes

March 24, 2011 – 10:00 a.m.

ANNOUNCEMENTS

- New Health Director-Jill Cook
- AB3632/Chapter 26.5
 - Now called educationally related mental health services. MOU is signed for current FY. Education holds the mandate, asking the County to continue as the provider.
- MHSA Plan Update
 - The Plan Update includes IT plans, and will be posted tomorrow (3/25/11) for 30 day comment period, ending 25th of April.

BUDGET UPDATES

- State Budget
 - Realignment still Pending. AB 100 passed.
- County
 - The County (Patrick) - was approaching a layoff free budget, however things have changed dramatically this week. There will be structural changes.
 - Marjorie (Probation) – could be as bad as just having a juvenile hall. Could lose millions of money especially juvenile funds. May have to shift monies.
 - Jill (Health) – Medi-Cal has reduced services and reimbursement rates to providers. Therefore, Partnership Health will have to limit the number of visits, and co-payments will be implemented.
 - Julie (First 5) – Could be left with ½ year operating budget. State could take a one time sweep of \$2.5 million. Looking at how to reduce internal operations.
- ADMH
 - The Legislature passed and the Governor signed into law AB 100, a swipe of MHSA dollars. \$861 million state wide to fund 3 State General Fund categories: AB3632, EPSDT, and the Managed Care allocation. Yolo County's allocation is still undetermined.
 - This week, it is looking very bad. What does plan B look like? We don't know yet.
 - Provider Stakeholders would like to be a part of the ADMH plans on budget.
 - The State Department of Mental Health, as we know it, will be going away July 1, 2011.

MEDICARE & MEDI-CAL

- DMH Information Notice 11-04
 - DMH sent out Information Notice 11-04 which states that the county must be a Medicare provider or must apply on an annual basis until it is. Further, any provider of Medi-Cal services must also follow suit.
 - The county is required to bill Medicare before billing Medi-Cal for those with both plans.
 - DMH has worked with CMS to identify treatment codes that are exceptions to this rule. ADMH is currently using these codes appropriately.
 - LCSWs can provide and submit Medicare services but MFTs cannot.
 - Part of the application requires a physical exam; ADMH does not do physical exams, so this is something that needs to be looked into.

CONTRACTS

- Possible New Request for Proposals
 - AB3632, EPSDT, Managed care services will still need to be provided. In the past ADMH has contracted out portions of each service. ADMH is considering an RFP to contract out some EPSDT services currently provided by ADMH. Will be talking with the BOS in April.

- Potential Categories if an RFP is done were outlined

Report Matrix Discussion

- After many years of ADMH not balancing our budget, several consultants were hired over a period of time, to review the department's operations and provide recommendations. Kim placed these recommendations into a matrix to both summarize and list the implementation status.
 - ADMH will present this at the April 12th BOS meeting.
 - Kim would like all to review and offer any feedback regarding the recommendations and accuracy of the implementations, etc.