

FY 13 Community Mental Health GRF Allocation Approach

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Overview

- Brief History
- Purpose
 - Shared planning & service delivery
- Overview of a new paradigm
 - Collaboration/regional leadership
 - Potentially better clinical outcomes at a lower cost



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Brief History

- In FY 12, DMH consolidated a number of GRF line items used (wholly or in part) for community non-Medicaid funding
- In FY 12 this “505” allocation to boards came as close as possible to FY 11 non-Medicaid community funding levels
 - Four boards received cash from other sources



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Brief History, 2

- DMH engaged the boards regarding FY 13 allocation strategy and there was no consensus on a formula approach.
- Themes:
 - Do no harm
 - Address inequities
 - Do more research on a logical methodology

Resource Stress is Everywhere

- Collectively acknowledged, but evidenced differently depending on board
- Relative to 4-6 years ago, everyone has less for services
- Everyone needs some of the limited state resources

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by Mark Parisi



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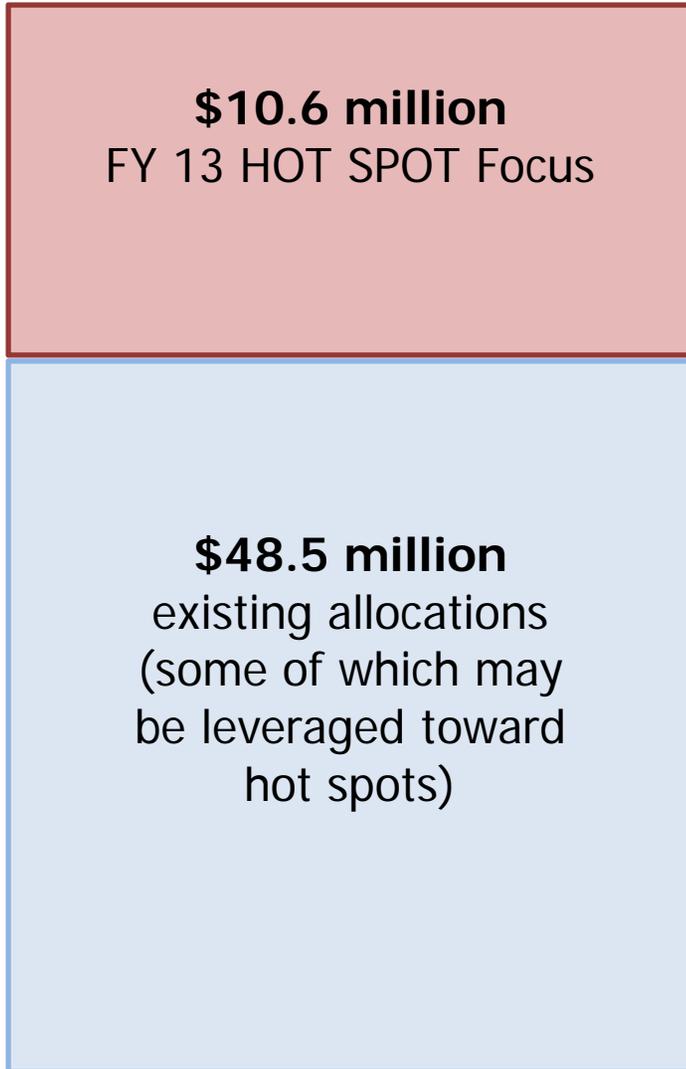
**If I had asked people what
they wanted, they would have
said faster horses.**

- Henry Ford

Introduction of New Funding Concept

- Multi-community planning effort for a portion of the FY 13 allocation (\$10.6 m)
- Prioritize investments
- Address “Hot spots” concerns
 - Specialized services for difficult to-serve-populations
 - Services for those with the greatest unmet needs
 - Services that divert people from more restrictive and typically higher-cost setting
 - Incentives to engage clients who are difficult to engage in behavioral health services

FY 13, ALI 505 = \$59.1 million

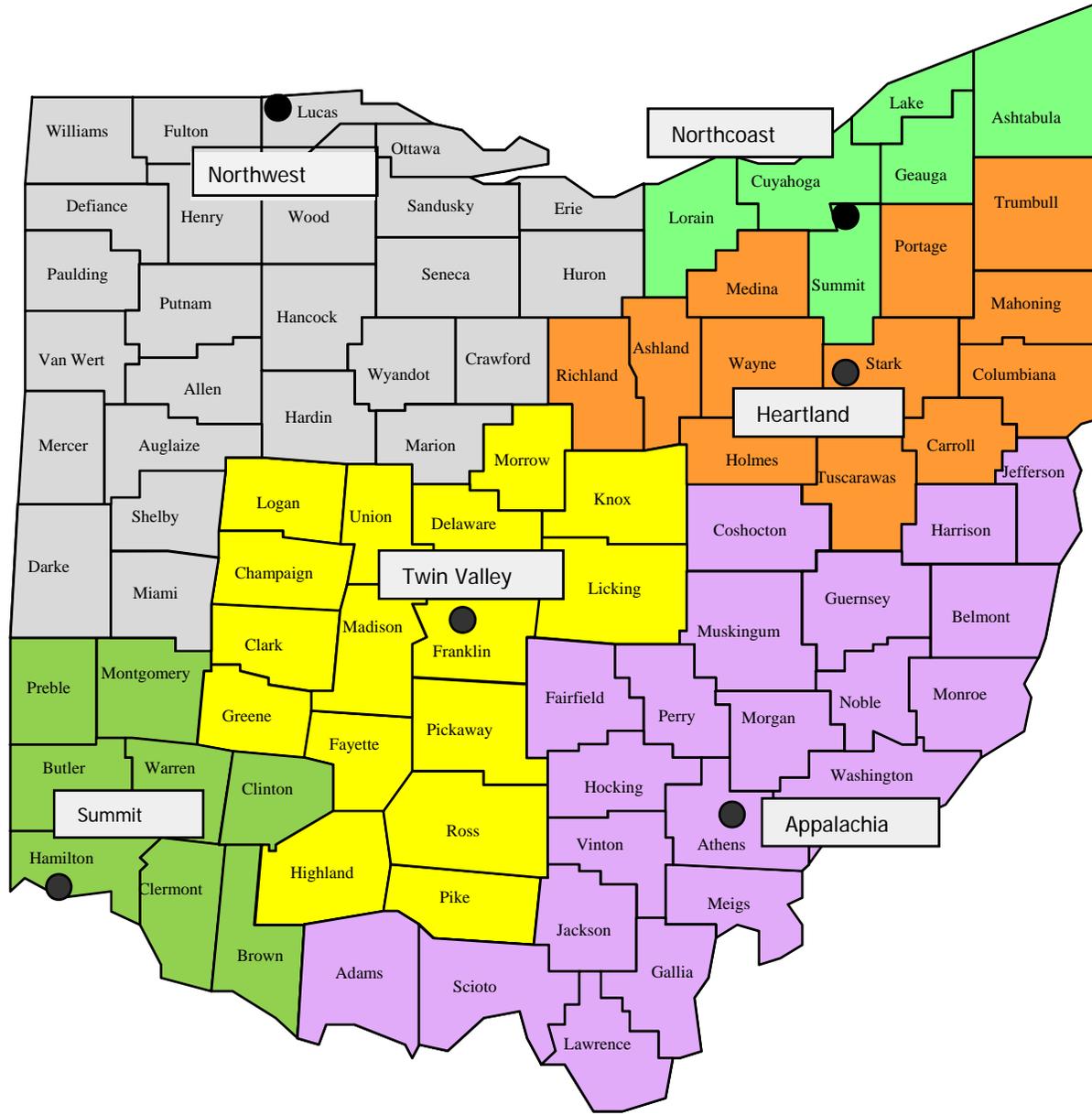


- FY 12 allocation amounts to boards remain intact, but use may be leveraged toward hot spot initiatives
- Four additional boards added to the subsidy via hot spots
- Inter-board partnerships emphasized (shared services)
- Measurable outcomes

- No board loses, but not all boards necessarily gain to the same degree
- Augment the hot spot with any additional sources

Planning Partners

- ADAMH boards (leads; \$\$ flows there)
- Advocates
- Providers
- Others working with & on behalf of individuals with mental illness
 - possibly courts, re-entry coalitions, FCFCs, etc



Catchment Areas

- Increase community capacity
- Relieve pressure from “hot spot” needs
- Each ADAMH board area may partner in one/more investments on its menu
 - May vary by area of the state
 - Depending on specific needs
 - Developed by local stakeholders
 - On-going as long as progress demonstrated

**“ [Regarding the capital budget]...
For the University System of
Ohio, I’d like to see Gordon
Gee advocate for a new roof
at Bowling Green.”
- Governor Kasich**

True Partnership

- Inherent element of trust
- Level of maturity; expectation of collaboration
- Larger boards have the capacity & opportunity to provide leadership
- We are all in this together



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Available Resources FY 13

- Currently \$10.6 million
- Allocated regionally per capita basis
 - Based on most recent available census data
- Collaborative region based amount available

Regional Collaborative	Current FY13 Resources
Appalachian	\$894,352
Central Ohio/Twin Valley	\$2,128,502
SW Ohio/Summit	\$2,062,636
Northwest	\$1,590,754
NE Ohio/Northcoast	\$2,341,331
East Central/Heartland	\$1,582,425



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A New Paradigm



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Paradigm Concept

- Home rule – board can opt to not participate in this initiative; however, that board will not be able to “take” its relative share of the per capita amount and walk away from the shared planning approach
- If a local need does not exist currently, a board could buy into the initiative later
- Funding would continue as long as progress is demonstrated/maintained



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Local Planning is Key

- Initiatives identified by a collaborative may be new projects and/or build upon existing programs in circumstances where a demonstrated, continued need exists
- Specific number of strategies is left to each collaborative to determine, with the expectation that individuals residing in all board areas have access to a reasonable degree of improvement as a result of participation

Goal of Local Boards

- Engage their providers and local advocates and collaborate with partnering board areas in order to leverage collective resources
- Recommend meaningful, near-term actionable investments for Ohioans who need services

Implementation/Next Steps

- Local engagement/discussions to develop strategies addressing “hot spots”
- Regional collaboratives to develop the “menu” of proposals for each region in which an investment would be most impactful

Timeline

- Webinars Scheduled – DMH provides overview of general concept, answers questions posed by field and receives a limited amount of follow-up questions during session
- **January 19, 9am**
 - Pre-register at <https://www2.gotomeeting.com/register/791729106>
- **January 20, 3:30pm**
 - Pre-register at <https://www2.gotomeeting.com/register/139069738>
- **February 17**
 - General concept documents submitted to DMH by regional collaboratives
- **April 30**
 - Detailed work plans submitted to DMH by regional collaboratives
- **July 1**
 - Appropriation is available for use

NOTES:

- This is NOT about governance
- This IS about our collective ability to make inroads to leverage our combined creativity and resources
- Primary focus should be service-directed, but flexible to explore other concepts



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What is DMH Seeking to Achieve?

- Investments that will MATTER to people who need services
- Sensitivity to parity concerns (various)
- Measurable results
- Congruence with Administration aims
- Approach that intuitively makes sense



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DMH Seeking to Achieve, 2

- Support Consumers in the Least Restrictive Environment
- Economy of Scale
- Collective Impact Approach
- Promote Private and Public Partnerships



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After 4 Years, We Can Judge:

- Effective, meaningful partnerships
- Compelling case for additional resources that result in measurable outcomes
- Innovation
- Have we moved things forward?



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Opportunity

- “We are all faced with a series of great opportunities brilliantly disguised as impossible situations.” – Charles R. Swindoll
- “A wise man will make more opportunities than he finds.” - Francois Bacon



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Information to Know

- Send questions and/or comments to collaborative@mh.ohio.gov
- Ohio Association of County Behavioral Health Authorities County Board Directory <http://oacbha.org/about-oacbha/county-board-directory/>