

**Behavioral Health Division
2018 Preliminary Budget Request
June 7, 2017**

BHD 2018 Budget

General Assumptions

- Adult inpatient bed capacity of 60 beds with a 90% occupancy factor
- CAIS average census of 12
- CCS program to increase to 1,100 by year end
- Employee vacancy factor = 6%
- COLA of 1%
- Performance Based increase of 1%
- Tax Levy decrease of \$3.0M
- BHD held harmless for legacy fringe increase
- County overhead is equal to 2017 budget amounts

2018 Tax Levy Target

Description	Dollars <i>(in millions)</i>
2017 Budget Tax Levy	57.4
Add: Fringe Change (County)*	9.3
Less: Tax Levy Reduction Target	(3.0)
2018 Tax Levy Budget	63.7

**Increase in legacy fringe of \$7.6M plus system headcount reconciliation impact of \$1.7M*

BHD 2018 Budget

Structural Deficit		Closing the Budget GAP	
Revenue		Expense Reduction	
WIMCR - Disallowance of legacy expense	\$ 1,000,000	Day Treatment & IOP Redesign	\$ (664,000)
Inpatient Revenue - Medicaid Rate Reduction	\$ 830,000	CBRF Funding Reduction	(800,000)
Total Revenue Structural Deficit	\$ 1,830,000	CRS Program Phase Out	(383,000)
		EMR Optimization	(400,000)
Expense		Reduction in Force	(1,600,000)
COLA - 1%	\$ 340,000	Northside Hub	(500,000)
Performance Based - 1%	\$ 340,000		(4,347,000)
Total Expense Structural Deficit	\$ 680,000	Revenue Enhancement	
		TCM Improved Medicaid Billing	\$ (195,000)
Tax Levy Decrease	\$ 3,000,000	Enhanced Crisis Billing	(611,000)
		PCS Billing Optimization	(280,000)
			(1,086,000)
Total Structural Deficit	\$ 5,510,000	Total	\$ (5,433,000)

2018 Budget Legacy Expense

	2014	2015	2016	2017 B	2018 Budget	17/18 Variance	
Actual FTE's	614	556	521	539	505		
Legacy Health	\$ 8,517,451	\$ 7,627,708	\$ 6,577,645	\$ 7,129,388	\$ 9,380,873	\$ 2,251,485	31.58%
Per FTE	\$ 13,872	\$ 13,719	\$ 12,625	\$ 13,227	\$ 18,576	\$ 5,349	40.44%
Legacy Pension	\$ 6,350,363	\$ 8,509,818	\$ 8,989,859	\$ 9,522,619	\$ 11,777,380	\$ 2,254,761	23.68%
Per FTE	\$ 10,343	\$ 15,305	\$ 17,255	\$ 17,667	\$ 23,322	\$ 5,654	32.00%
Total Legacy	\$ 14,867,814	\$ 16,137,526	\$ 15,567,504	\$ 16,652,007	\$ 21,158,253	\$ 4,506,246	27.06%
Per FTE	\$ 24,215	\$ 29,024	\$ 29,880	\$ 30,894	\$ 41,898	\$ 11,003	35.62%
Total Legacy \$ Year over Year		\$ 1,269,712	\$ (570,022)	\$ 1,084,503	\$ 4,506,246		

2017 Budget Assumptions Carryover

- Two additional CART Teams
- Resource Center Expansion to 24/7
- Continued Partnership with DHHS Housing Division
- Increased AODA Capacity
- Increased TCM Capacity
- Continued Investments in EMR Optimization
- CCS Expansion

BHD 2018 Budget

Programmatic Assumptions (operating budget)

- CCS Adult Enrollment Increase to 1,100
- CCS Children Enrollment Increase to 100
- TCM Unit Increase of 5%
- Intensive Outpatient Placement program implementation
- Community Placement Reduction of \$800K
- AODA Residential Investment

Programmatic Assumptions (Operating budget)

- Transit Subsidy
- State Institution Budget Expansion
- MH Board Analyst – Part Time

Programmatic Assumptions (Funded by Reserve)

- Peer Run Respite
- West Allis CART

Not Included in the 2018 Budget

- Inpatient Partnership
- Northside Hub
- Countywide Cross-charges

BHD 2018 Budget

Revenue Assumptions

- Tax Levy Reduction of \$3M
- Inpatient Revenue reduction
 - \$0.4M Adult & \$0.4M CAIS related to Medicaid rate reduction
 - \$0.9M in Adult & \$0.8 in CAIS related to updated write-off percentage experience
- WIMCR Funding Reduction of \$1M
- Crisis Revenue Increase of \$600K
- PCS Revenue

FTE Assumptions

<u>Inpatient Clinical:</u>		<u>FTE's</u>
RN	(9.5)	
CNA	(29.5)	
HUC	2.0	
<u>Sub-Total</u>		<u>(37.00)</u>
Clinical Administration		(1.25)
Community Services		(2.25)
Wraparound		1.00
Information Technology		4.00
<u>Overhead:</u>		
Finance		(4.00)
MH Board Analyst		0.50
Facilities		0.60
Project Manager		1.00
Communications		1.00
Contracts		2.00
<u>Sub-Total</u>		<u>1.10</u>
<u>Total</u>		<u>(34.40)</u>

Risks & Opportunities not included in the 2018 Budget Assumptions

Risks	Opportunities
<ul style="list-style-type: none">• American Health Care Act• Federal Budget• Badger Care Eligibility Changes• Medicaid Disproportionate Share Payments (DSH)• State/County Budget	<ul style="list-style-type: none">• AODA – CCS Funding• T19 HMO Provider Contracts• ACA/AHCA Subsidies

BHD Reserve Analysis

Reserve Balances

- General Reserve = \$19.8
- Capital Reserve = \$3.5
- WRAP Reserve = \$6.8

Reserve Guidance

- Working Day Capital Reserve
- Risk Based Reserve
- 45 day working capital reserve is equal to around \$25.5M or 12% of 2017B revenue
- Risk based approach – City of Colorado Springs = 25% (Budgetary & Emergency)

Budget Timeline

Date	Deliverable
Friday, May 26 th	Preliminary Budget Distributed
Wednesday, June 7 th	Finance Committee Meeting
Friday, June 16 th	Formal 2018 Budget Narrative Distribution
Friday, June 23 rd	MCMHB Budget Amendments Due
Thursday, June 29 th	Finance Committee
Thursday, July 6 th	Board Meeting

BHD Budget – Board Amendment Process

- Amendment Template on MH Board Website
 - Board Sponsor
 - Description
 - Financial Impact (Lisa Wozny)
- Amendment Period – June 8th – June 23rd
 - Board and/or Finance Committee could vote to accept amendments after this timeframe
- Amendments discussed and voted on at Mental Health Finance Committee on June 29th