

COUNTY OF MILWAUKEE, WISCONSIN

2

Balance Sheet
Behavioral Health Division Fund
As of December 31, 2016
(In Thousands)

	2016
<u>Assets</u>	
Current Assets:	
Cash	\$ 35,880
Patient Receivables	30,664
Allowance for Uncollectible Accounts	(21,900)
Accounts Receivable - Other	39
Due from Other Governments	3,704
Prepaid Items	90
Total Current Assets	48,477
Noncurrent Assets:	
Capital Assets:	
Land Improvements	1,703
Construction in Progress	327
Buildings and Improvements	39,281
Machinery, Vehicles and Equipment	3,136
Total Capital Assets	44,447
Less: Accumulated Depreciation	(36,658)
Total Capital Assets (Net)	7,789
Total Assets	56,266
 <u>Deferred Outflows of Resources</u>	
Deferred Loss on Refunding of Debt	24
Total Assets and Deferred Outflows of Resources	\$ 56,290
 <u>Liabilities</u>	
Current Liabilities:	
Accounts Payable	\$ 11,481
Accrued Payroll	1,743
Due to Other Governments	6
Bonds and Notes Payable - General Obligation	705
Compensated Absences Payable	2,625
Other Current Liabilities	1,359
Total Current Liabilities	17,919
Long-Term Liabilities:	
Bonds and Notes Payable - General Obligation	3,161
Compensated Absences Payable	1,589
Total Long-Term Liabilities	4,750
Total Liabilities	22,669
 <u>Net Position</u>	
Net Investments in Capital Assets	3,946
Restricted for:	
Commitments	1,775
Operational Reserve	19,569
Capital Reserve	3,540
Title XIX Capitation	6,860
Compensated Absences	2,145
Unrestricted (Deficit)	(4,214)
Total Net Position	33,621
Total Liabilities and Net Position	\$ 56,290

COUNTY OF MILWAUKEE, WISCONSIN

Schedule of Revenues, Expenses and Changes in Net Position
Behavioral Health Division Fund
For the Year Ended December 31, 2016
(In Thousands)

	<u>2016</u>
Operating Revenues:	
Charges for Services	\$ 88,532
Other Revenues	<u>1,552</u>
Total Operating Revenues	<u>90,084</u>
Operating Expenses:	
Personnel Services	56,814
Client Service Costs	43,922
Contractual Services	11,182
Intra-County Services	9,340
Commodities	3,488
Depreciation and Amortization	1,383
Maintenance	11
Provider Network Services	<u>55,405</u>
Total Operating Expenses	<u>(181,545)</u>
Operating Income (Loss)	(91,461)
Nonoperating Revenues (Expenses):	
Intergovernmental Revenues	<u>40,581</u>
Income (Loss) Before Transfers	(50,880)
Transfers In	59,112
Transfers Out	<u>(826)</u>
Changes in Net Position	7,406
Net Position – Beginning	<u>26,215</u>
Net Position – Ending	<u>\$ 33,621</u>

BEHAVIORAL HEALTH DIVISION

DASHBOARD REPORT

3rd Quarter 2017

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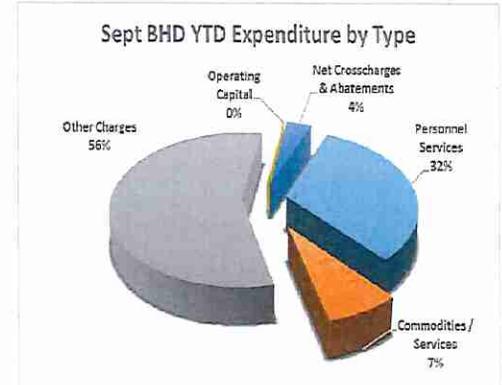
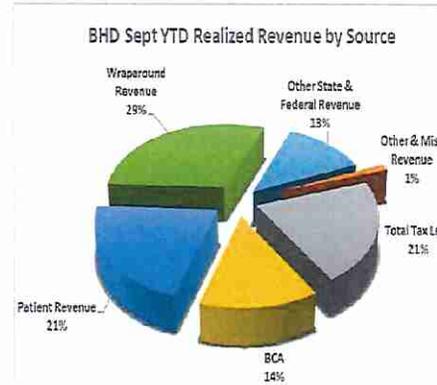
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BHD COMBINED DASHBOARD

3rd Quarter 2017

	2017 September YTD			
	Sept YTD	Projection	Budget	Variance
Revenue	103,152,387	136,061,877	149,935,413	(13,873,536)
Expense				
Personnel	42,408,225	59,150,089	65,702,327	6,552,238
Svcs/Commodities	10,185,428	16,824,190	18,144,507	1,320,317
Other Chgs/Vendor	73,607,163	114,730,177	123,241,274	8,511,097
Capital	72,508	353,912	281,456	(72,456)
Cross Charges	43,384,962	54,699,188	48,525,887	(6,173,301)
Abatements	(38,681,935)	(50,525,544)	(47,100,086)	3,425,458
Total Expense	130,976,352	195,232,012	208,795,365	13,563,353
Tax Levy	27,823,965	59,170,135	58,859,952	(310,183)
Wraparound		685,230	388,411	(296,819)
BHD Excluding Wraparound		58,484,905	58,471,541	(13,364)
Percentage Spent	63%			
Percentage Yr Elapsed	75%			

2017 SEPTEMBER YTD Revenues & Expenses by Percentage



Note: "Other Charges" in Expenditures include all Provider Payments - Fee For Service, Purchase of Service and other contracted services.

3rd Quarter Financial Highlights

- Inpatient Census below budget
- Adult Inpatient Payer Mix unfavorable
- State Institutions
- Staffing turnover
- Slower CCS growth
- Lower Wraparound enrollment
- State Plan Amendment Revenue 2014

2017 Budget Initiatives

Initiative	Status	Description
Northside Hub	➡	On hold
CCS Expansion	➡	Slower growth than anticipated
Increase Wrap enrollment	➡	Less from Lincoln Hills than expected
Ending Chronic Homelessness	↑	Increased from \$750,000 to \$1 million
IOP (Intensive Outpatient)	➡	Delayed until 2018
EMR Redesign or Improve	➡	Continuing improvements
CRC 3rd shift expansion	↑	Staffed at Northside, admit at both
Add three CART teams	➡	Team with DA operational, West Allis in 2018.

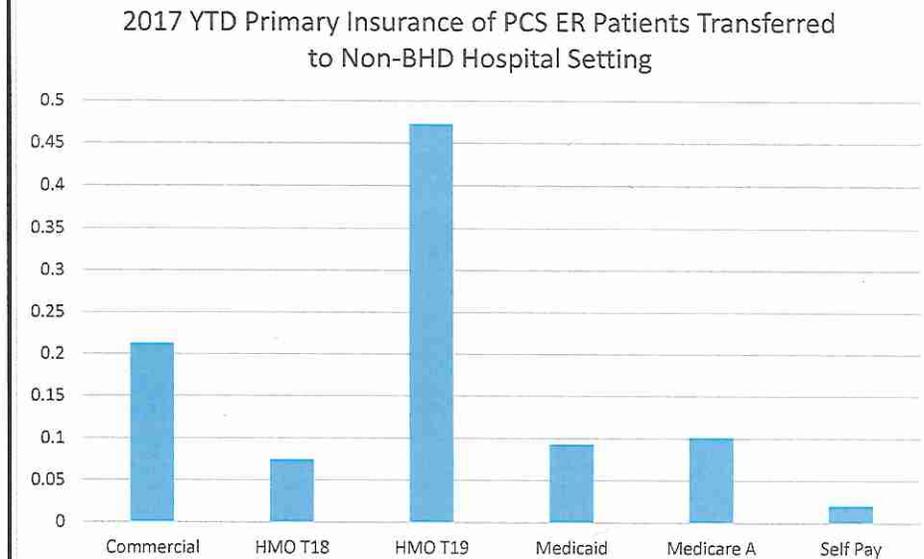
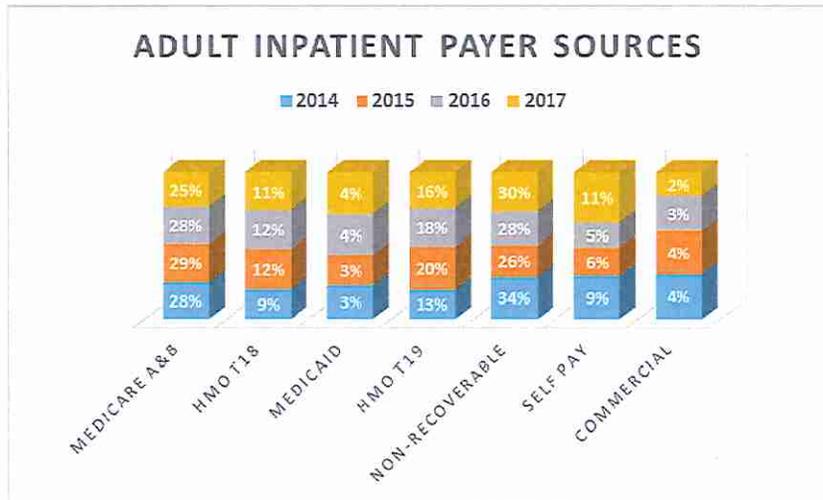
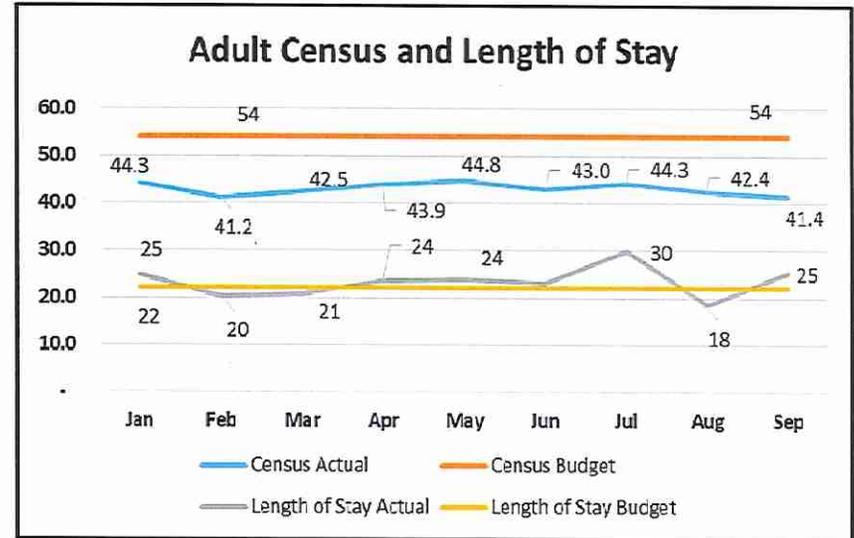
Complete ↑ Not Done ↓ Progressing ➡

ACUTE ADULT INPATIENT DASHBOARD

3rd Quarter 2017

	2017 September YTD			
	Sept YTD	Projection	Budget	Variance
Revenue	8,545,135	10,504,418	14,587,005	(4,082,587)
Expense				
Personnel	11,054,427	15,497,904	16,569,560	1,071,656
Svcs/Commodities	2,526,538	3,700,030	2,395,674	(1,304,356)
Other Chgs/Vendor	1,604,489	2,544,401	1,500,000	(1,044,401)
Capital	-	-	17,500	17,500
Cross Charges	6,858,932	8,773,259	9,556,659	783,400
Abatements	-	-	-	-
Total Expense	22,044,386	30,515,594	30,039,393	(476,201)
Tax Levy	13,499,251	20,011,176	15,452,388	(4,558,788)

Percentage Spent 73%
 Percentage Yr Elapsed 75%

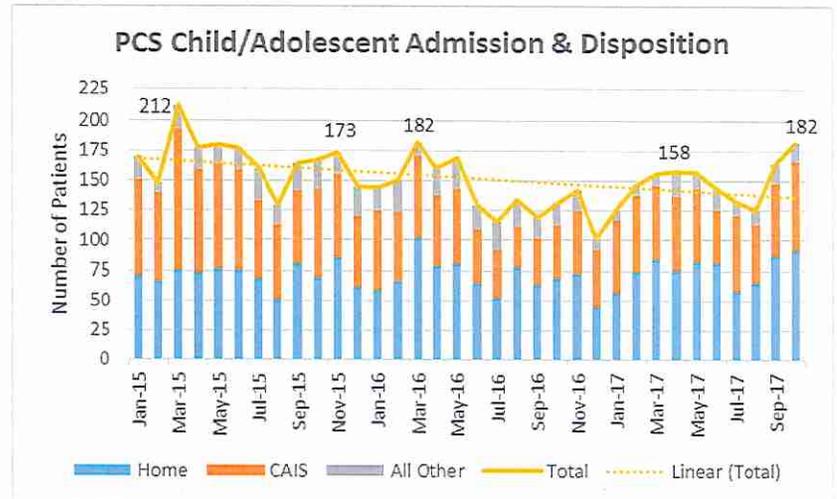
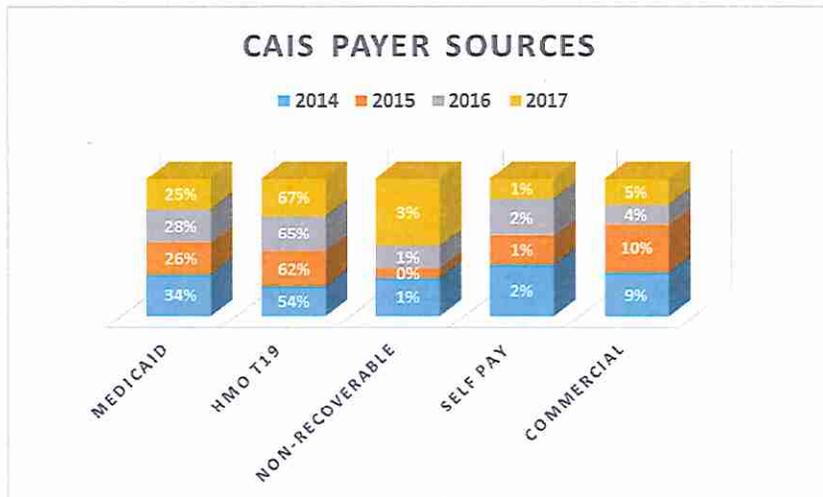
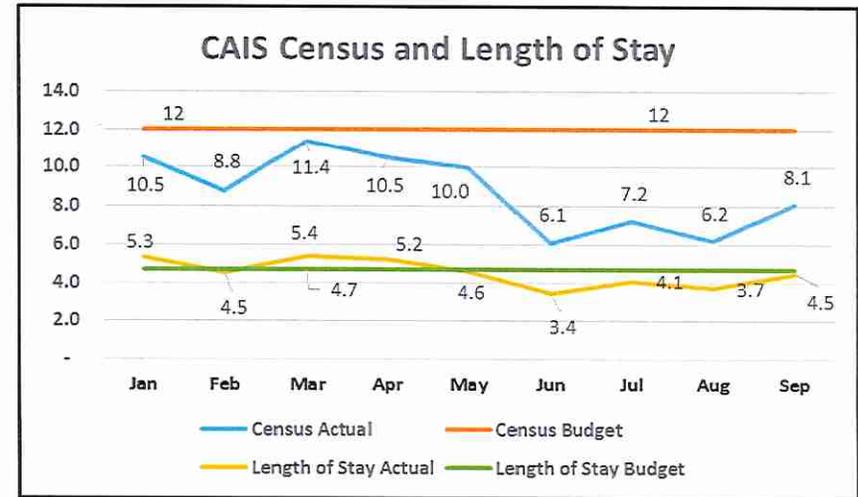


CAIS (Child & Adolescent Inpatient) DASHBOARD

3rd Quarter 2017

	2017 September YTD			
	Sept YTD	Projection	Budget	Variance
Revenue	3,310,292	3,897,123	5,869,200	(1,972,077)
Expense				
Personnel	2,608,691	3,624,219	4,004,748	380,529
Svcs/Commodities	178,980	251,013	291,914	40,901
Other Chgs/Vendor	84	111		(111)
Capital	-	-	-	-
Cross Charges	1,909,210	2,648,035	2,655,558	7,523
Abatements	-	-	-	-
Total Expense	4,696,965	6,523,378	6,952,220	428,842
Tax Levy	1,386,673	2,626,255	1,083,020	(1,543,235)

Percentage Spent 68%
 Percentage Yr Elapsed 75%

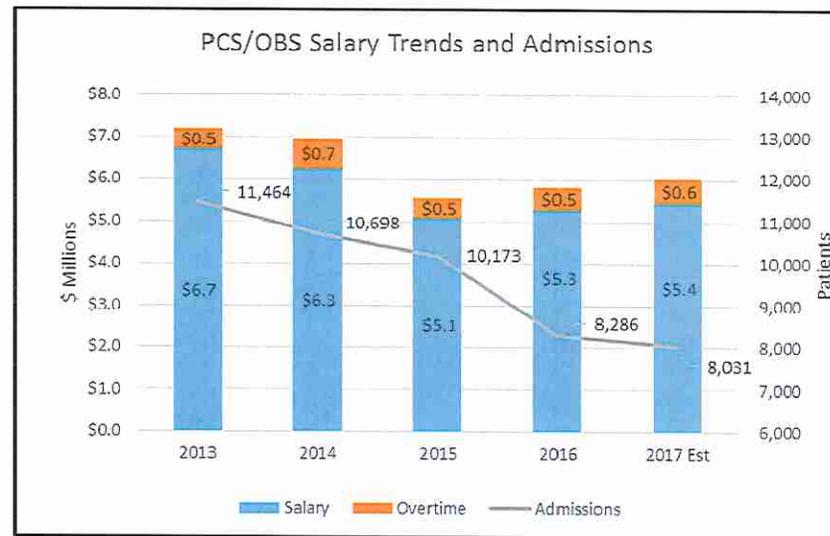
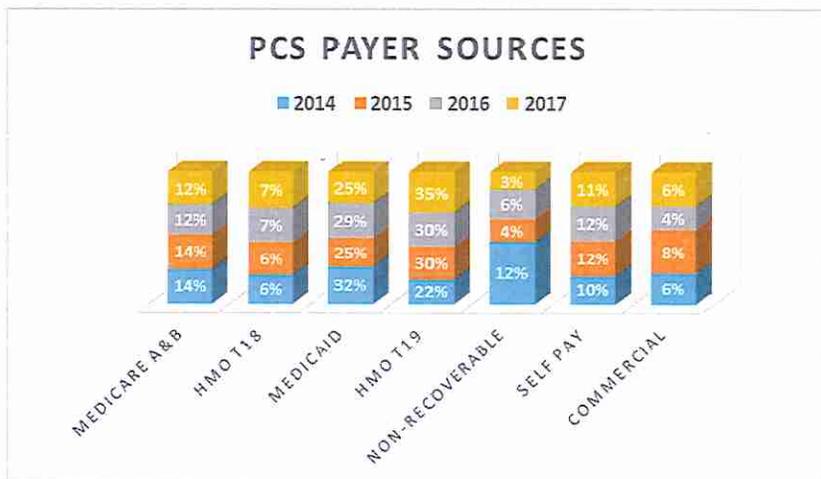
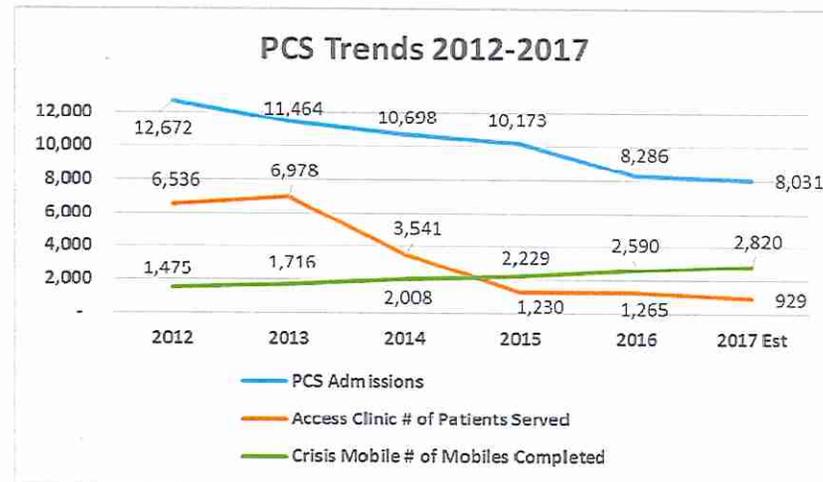


PCS - ER and Observation DASHBOARD

3rd Quarter 2017

	Sept YTD	2017 September YTD		
		Projection	Budget	Variance
Revenue	7,679,178	10,509,659	11,468,783	(959,124)
Expense				
Personnel	7,561,853	10,704,963	11,121,042	416,079
Svcs/Commodities	522,846	662,378	1,447,424	785,046
Other Chgs/Vendor	308	410	-	(410)
Capital	-	15,000	2,000	(13,000)
Cross Charges	4,155,864	6,625,208	5,448,553	(1,176,655)
Abatements	-	-	-	-
Total Expense	12,240,871	18,007,959	18,019,019	11,060
Tax Levy	4,561,693	7,498,300	6,550,236	(948,064)

Percentage Spent 68%
 Percentage Yr Elapsed 75%

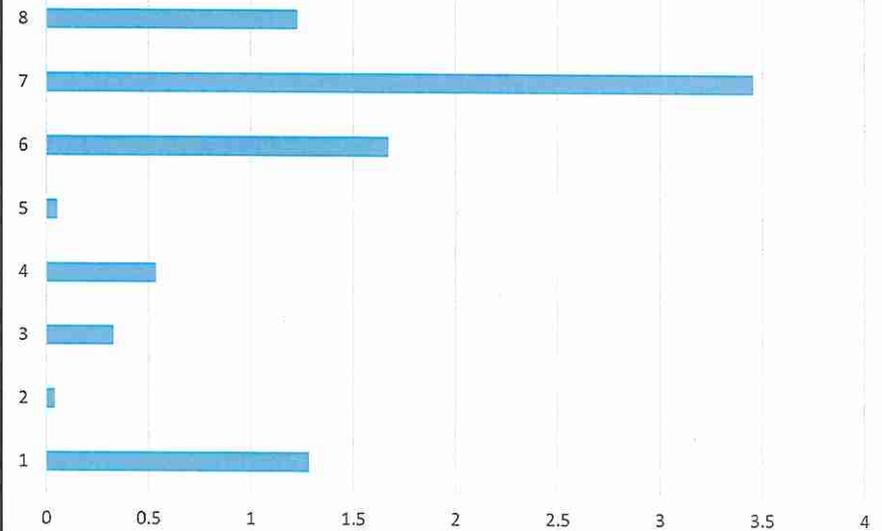


AODA DASHBOARD 3rd Quarter 2017

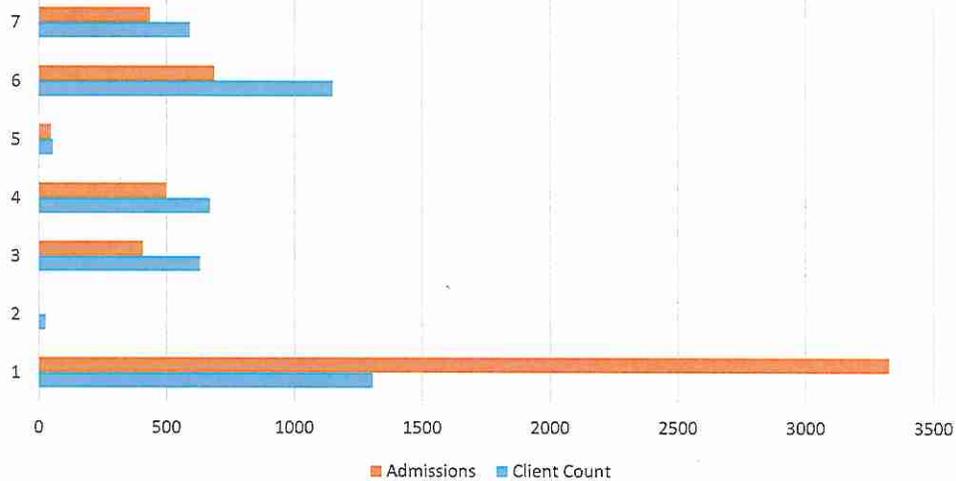
	Sept YTD	2017 September YTD		
		Projection	Budget	Variance
Revenue	8,966,403	11,230,915	11,240,593	(9,678)
Expense				
Personnel	274,579	371,540	813,248	441,708
Svcs/Commodities	78,810	105,080	205,644	100,564
Other Chgs/Vendor	9,241,286	14,139,908	12,285,203	(1,854,705)
Capital	-	-	-	-
Cross Charges	2,437,929	876,283	1,675,485	799,202
Abatements	-	-	-	-
Total Expense	12,032,605	15,492,812	14,979,580	(513,232)
Tax Levy	3,066,202	4,261,896	3,738,987	(522,909)

Percentage Spent 80%
Percentage Yr Elapsed 75%

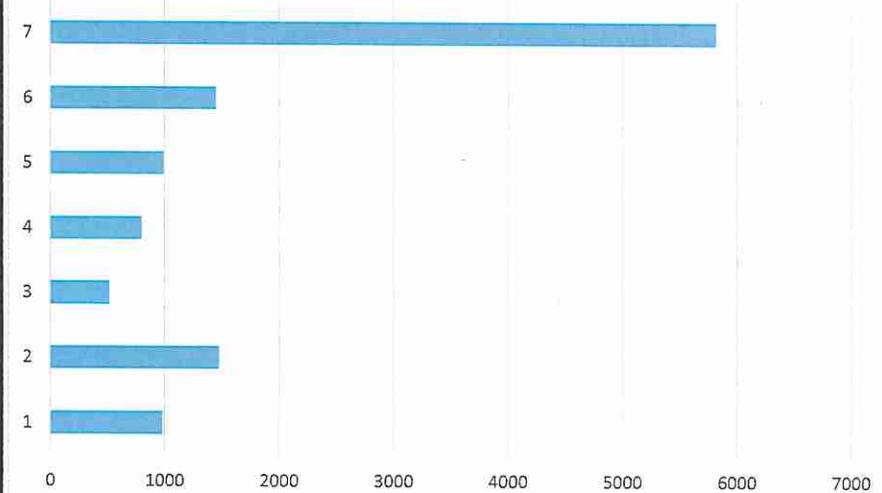
AODA Spending by Program (\$millions)



Jan-Sept 2017 AODA Utilization



Spending per Client

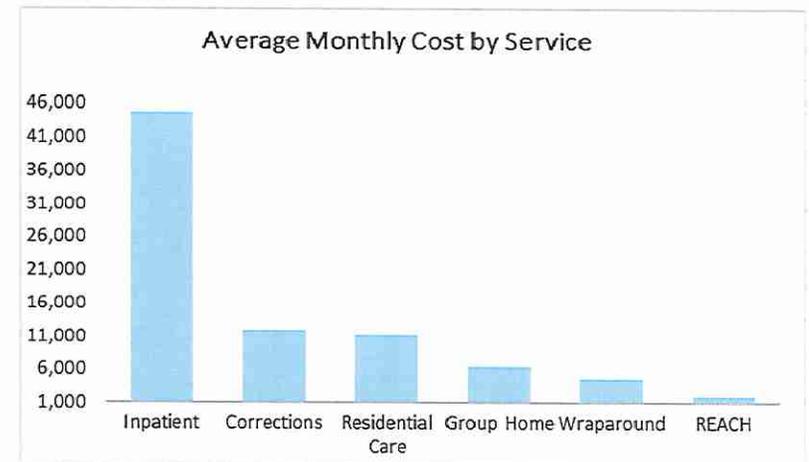
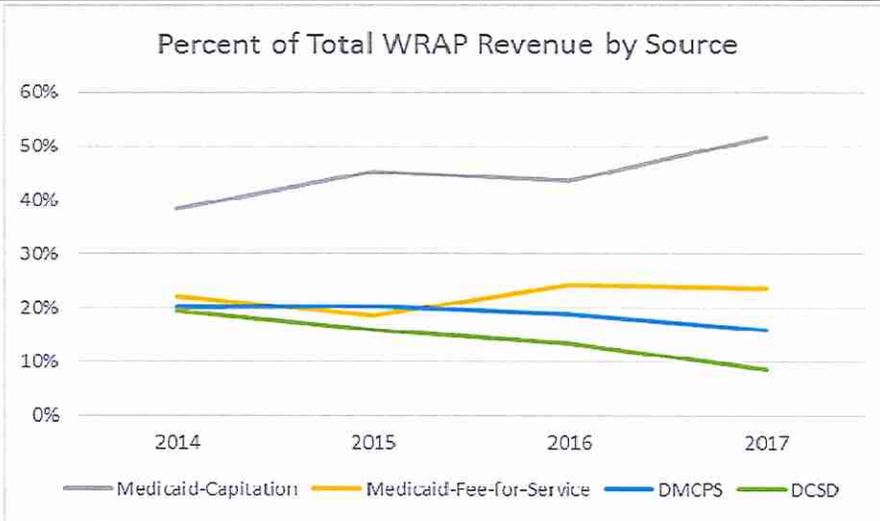
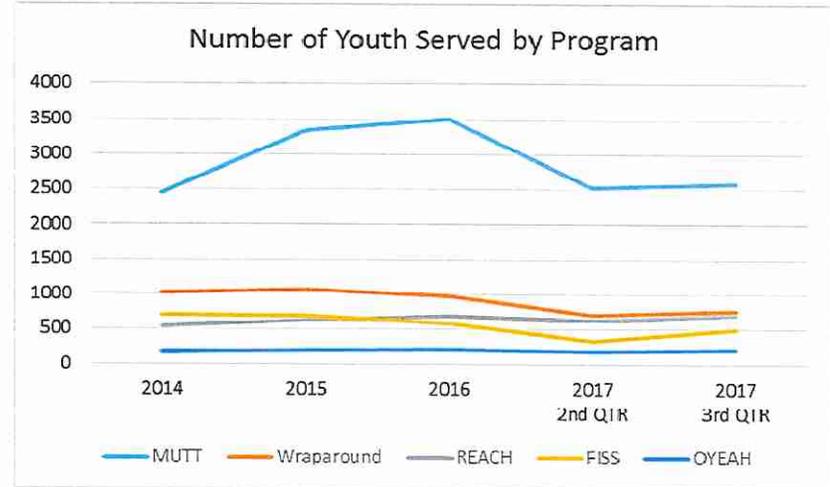


WRAPAROUND DASHBOARD

3rd Quarter 2017

	2017 September YTD			
	Sept YTD	Projection	Budget	Variance
Revenue	40,483,890	55,135,056	57,324,032	(2,188,976)
Expense				
Personnel	2,726,348	3,810,251	4,533,751	723,500
Svcs/Commodities	35,464	47,286	218,976	171,690
Other Chgs/Vendor	31,974,000	50,256,693	56,354,526	6,097,833
Capital	-	-	-	-
Cross Charges	4,965,357	7,566,978	6,124,014	(1,442,964)
Abatements	(3,727,281)	(5,860,921)	(9,518,824)	(3,657,903)
Total Expense	35,973,889	55,820,287	57,712,443	1,892,156
Tax Levy	(4,510,001)	685,230	388,411	(296,819)

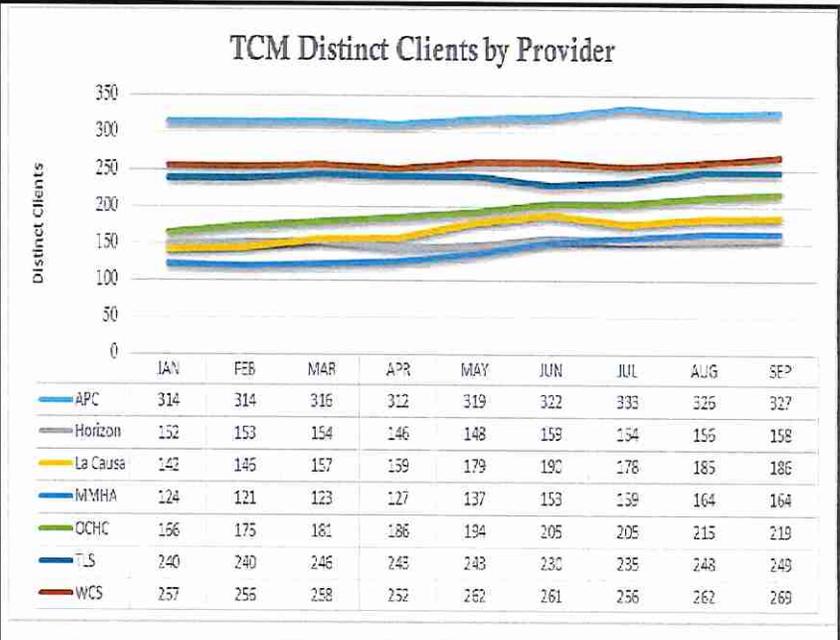
Percentage Spent 62%
 Percentage Yr Elapsed 75%



*** Inpatient services are clients in CAIS
 *** Wraparound and REACH services are outpatient services

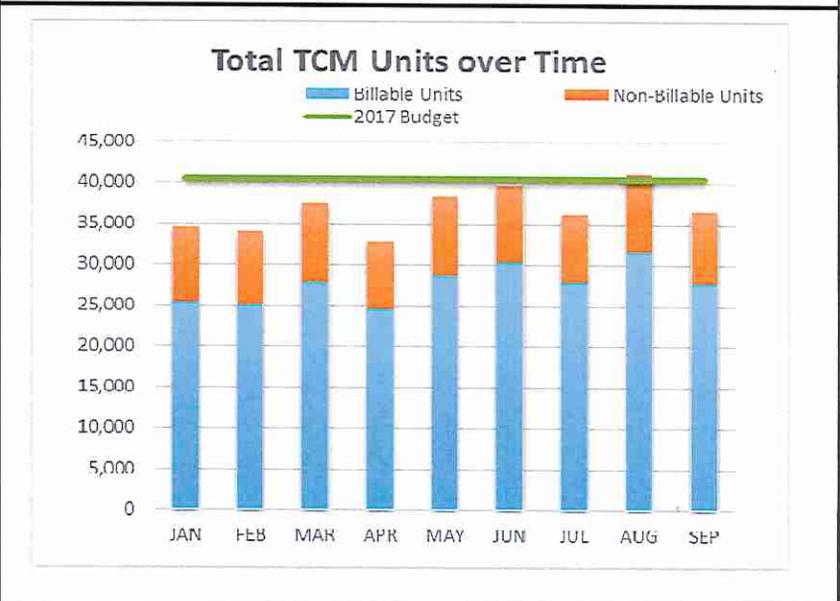
TCM (Targeted Case Management) DASHBOARD
3rd Quarter 2017

	2017 September YTD			
	Sept YTD	Projection	Budget	Variance
Revenue	2,403,745	3,299,563	1,983,749	1,315,814
Expense				
Personnel	127,836	180,594	50,182	(130,412)
Svcs/Commodities	1,158	1,544	-	(1,544)
Other Chgs/Vendor	4,540,725	6,013,781	5,902,163	(111,618)
Capital	-	-	-	-
Cross Charges	1,174,453	1,014,736	886,962	(127,774)
Abatements	-	-	-	-
Total Expense	5,844,172	7,210,654	6,839,307	(371,347)
Tax Levy	3,440,427	3,911,091	4,855,558	944,467
Average Enrollment	1,501	1,513	1,553	



Units by Provider - September 2017

	17-Sep			YTD		
	Billable	Non-billable	% Non-billable	Billable	Non-billable	% Non-billable
APC	5,683	2,013	26%	62,211	19,733	24%
Bell Therapy	-	-	0%	-	-	0%
Horizon	2,970	988	25%	25,025	7,276	23%
La Causa	2,711	620	19%	22,119	7,303	25%
MMHA	2,715	1,132	29%	22,693	7,602	25%
OCHC	3,402	1,034	23%	27,592	9,534	26%
TLS	5,457	873	14%	46,321	6,242	12%
WCS	4,783	2,136	31%	43,040	23,902	36%
TOTAL	27,721	8,796	24%	249,001	81,592	25%



*** Non-billable is paid to Provider but not billable to Medicaid

CCS (Comprehensive Community Services) DASHBOARD

3rd Quarter 2017

	2017 September YTD			
	Sept YTD	Projection	Budget	Variance
Revenue	7,063,120	9,417,493	11,628,000	(2,210,507)
Expense				
Personnel	286,653	411,180	101,105	(310,075)
Svcs/Commodities	6,500	8,667	-	(8,667)
Other Chgs/Vendor	6,863,893	10,112,375	12,240,000	2,127,625
Capital	-	-	-	-
Cross Charges	1,764,254	1,520,916	1,843,478	322,562
Abatements	-	-	-	-
Total Expense	8,921,300	12,053,138	14,184,583	2,131,445
Tax Levy	1,858,180	2,635,644	2,556,583	(79,061)

Average Enrollment	603	618	560
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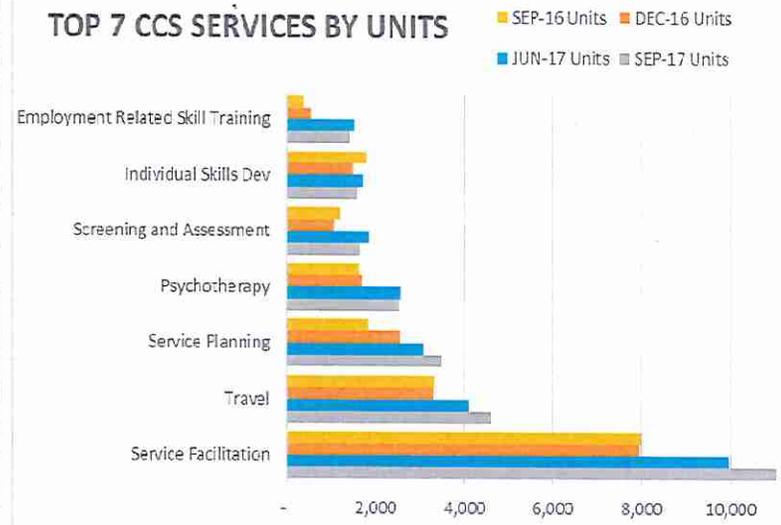
Distinct Clients Served 2017



Number of Billable to Nonbillable Units - Top 10 Providers

	Sep-17			JAN to SEP 2017		
	Billable	Non-Billable	% Non-Billable	Billable	Non-Billable	% Non-Billable
APC	4,548	50	1.1%	47,724	356	0.7%
Whole Health	5,799	20	0.3%	34,567	524	1.5%
La Causa	4,988	94	1.8%	33,056	858	2.5%
Guest House	4,113	20	0.5%	27,190	245	0.9%
Dell Therapy	2,533	10	0.4%	19,530	405	2.0%
St Charles	871	-	0.0%	19,130	73	0.4%
JusticePoint	1,437	46	3.1%	17,760	504	2.8%
Goodwill	826	-	0.0%	12,825	-	0.0%
Ascent	1,438	-	0.0%	10,675	-	0.0%
OCHC	1,511	23	1.5%	10,376	331	3.1%

TOP 7 CCS SERVICES BY UNITS

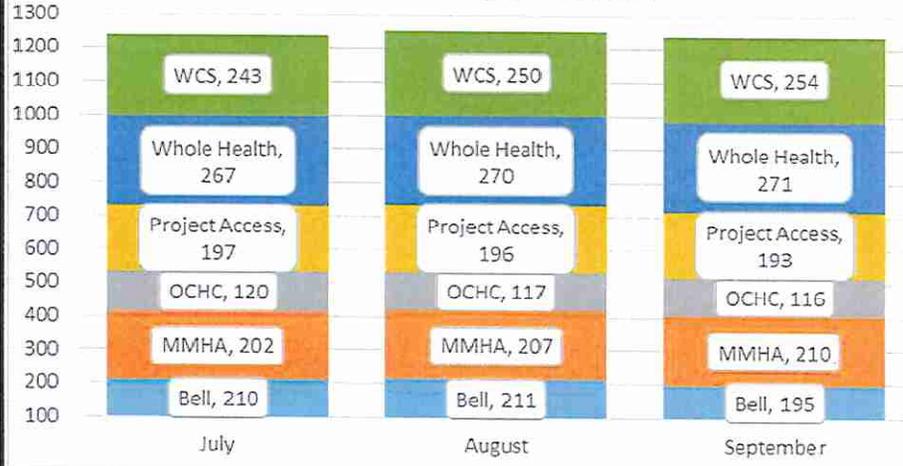


CSP (Community Support Program) DASHBOARD
3rd Quarter 2017

	Sept YTD	2017 September YTD		
		Projection	Budget	Variance
Revenue	5,366,270	8,573,356	9,102,966	(529,610)
Expense				
Personnel	134,139	190,091	52,357	(137,734)
Svcs/Commodities	-	-	-	-
Other Chgs/Vendor	7,689,564	13,320,575	14,891,434	1,570,859
Capital	-	-	-	-
Cross Charges	1,978,617	1,705,711	2,319,976	614,265
Abatements	-	-	-	-
Total Expense	9,802,320	15,216,377	17,263,767	2,047,390
Tax Levy	4,436,050	6,643,022	8,160,801	1,517,779

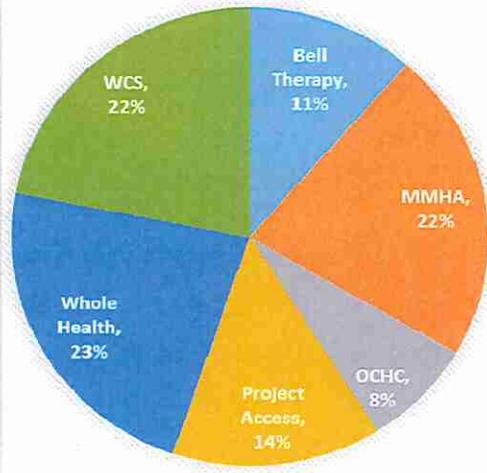
Average Enrollment 1,240 1,271 1,267

Distinct Clients per Provider



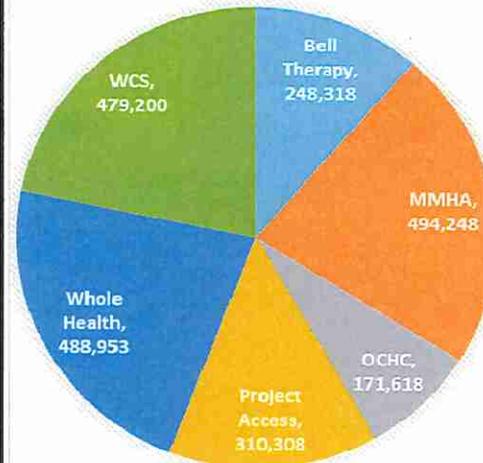
* 2016 Ave Total Clients was 1,245.

Units of Service per Provider
- September 2017



Agency	September	YTD Total
Bell Therapy	7,937	86,006
MMHA	15,226	164,588
OCHC	5,326	45,933
Project Access	9,838	112,769
Whole Health	15,884	134,593
WCS	15,242	157,763
Grand Total	69,453	701,652

Cost of Service per Provider
- September 2017



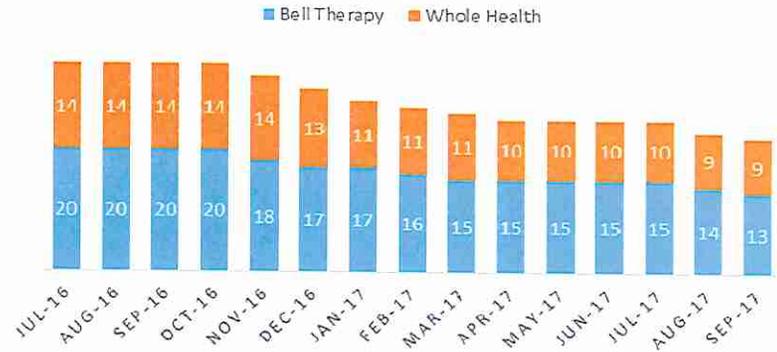
Agency	September	YTD Total
Bell Therapy	248,318	2,625,215
MMHA	494,248	5,207,273
OCHC	171,618	1,469,908
Project Access	310,308	3,415,755
Whole Health	488,953	4,090,458
WCS	479,200	4,593,298
Grand Total	2,192,643	21,401,905

CRS (Community Recovery Services) DASHBOARD
3rd Quarter 2017

	Sept YTD	2017 September YTD		
		Projection	Budget	Variance
Revenue	388,894	518,525	819,261	(300,736)
Expense				
Personnel	83,588	111,451	101,946	(9,505)
Svcs/Commodities	-	-	507	507
Other Chgs/Vendor	714,937	1,060,379	1,545,775	485,396
Capital	-	-	-	-
Cross Charges	215,397	189,965	278,783	88,818
Abatements	-	-	-	-
Total Expense	1,013,923	1,361,796	1,927,011	565,215
Tax Levy	625,029	843,270	1,107,750	264,480

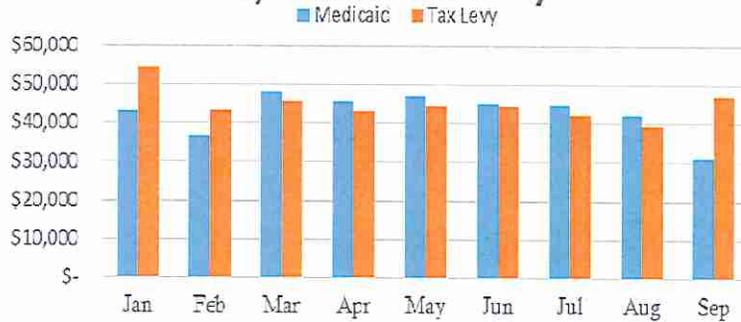
Average Enrollment 25 25 35

DISTINCT CLIENTS OVER TIME



CRS is being replaced with CCS.

Cost by Medicaid vs Tax Levy



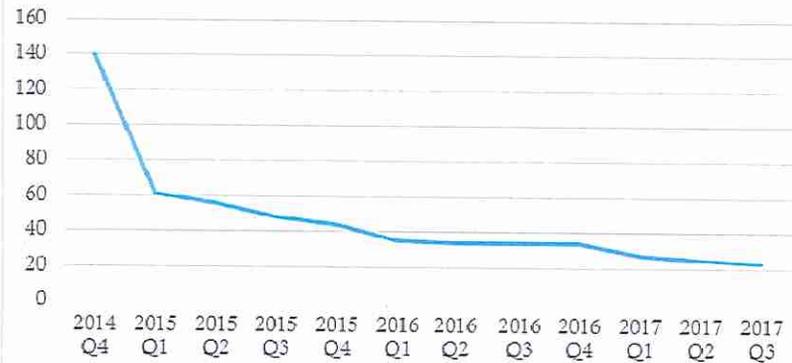
Medicaid pays 50% of approved costs.

Medicaid reimbursement averages 50.3% to Aug-17; averaged 47.3% in 2016.

Medicaid payments for September are still in process.

* These costs include the reimbursements to community agencies only.

Individuals Served over life of Program



**BEHAVIORAL HEALTH DIVISION
2018 BUDGET RISKS & OPPORTUNITIES**

2018 Budget Financial Risks

Item	Description
Adult Inpatient Census	The 2018 budget has an adult inpatient census of 54 compared to an average of 43 in 2017. The decrease is due to imposed caps resulting from a shortage in clinical staffing. The impact is a revenue deficit of (\$2.2M).
Adult Inpatient Payor Mix	As a result of needing to cap census, patients who are able to be transferred are often transferred to other area hospitals to free up bed capacity at BHD. T19 HMO and commercially insured clients are often easier to transfer. This is resulting in an increasing number of self pay clients and increased write offs (\$1.6M)
Children and Adolescent Inpatient Census	The 2018 budget has a census of 10 compared to an average census of 8.7 in 2017. The impact is a revenue deficit of \$.6M.
Wisconsin Interim Medicaid Cost Report (WIMCR)	Due to changes in state calculation, BHD received \$1.2M less than planned in 2016. The impact to the next payment will not be known until the end of 2017, which will help to inform our projection for 2018.

2018 Budget Financial Opportunities

Item	Description
Medicaid Inpatient Rates	The inpatient Medicaid rates increased from \$1,486.69 to \$1,530.43 an increase of 3%. In comparison, 2016 saw an increase of 4% and 2017 saw a decrease of (7%) over previous year rates. The estimated impact is a \$.2M revenue increase
State Plan Amendment	In 2017 BHD received net payment of \$1.5M for 2013/2014 versus a budget of \$0.5M. 2018 Budget of \$.3M is low, so anticipating a surplus if 2015 and/or 2016 payments are received in 2018.
Medicaid Outpatient Rates	State announced that they will be increasing Medicaid rates to be competitive with Medicare. Exact impact is unknown.
IMD Exclusion Waiver for AODA Residential Services	2018 Budget includes \$2.6M tax levy and Community Aids funds for AODA Residential Services. Some of these costs could be shifted to Medicaid if the waiver is granted in FY 2018.

**Behavioral Health Division
2019 Budget
Board/Committee Dates & Deliverables**

Date	Mental Health Board	Finance Committee	Other Deliverables
March 22 nd	Public Comments – Budget		
March 29 th		2019 Budget Assumptions	
April 26 th	<ul style="list-style-type: none"> ➤ CFO/Finance Chair to present preliminary budget assumptions ➤ MH board members discuss budget assumptions 		
June 7 th		<ul style="list-style-type: none"> ➤ Public Comments - Budget ➤ BHD CFO presents preliminary 2019 budget 	
June 15 th			Budget request narrative posted for public review
June 21 st			MH Board members submit budget recommendations to finance chair
June 28 th		<ul style="list-style-type: none"> ➤ DHHS Director presents requested 2019 budget ➤ Public Comments - Budget ➤ Committee votes on recommendations and budget 	
July 12 th	<ul style="list-style-type: none"> ➤ DHHS Director presents final budget request ➤ Finance committee chair presents recommendations to board ➤ Board votes on 2019 budget 		
July 15 th			Formal Budget Submission



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Assistant Corporation Counsel

To: Milwaukee County Mental Health Board - Finance Committee

Cc: Milwaukee County Mental Health Board
County Executive Chris Abele
Comptroller Scott Manske
Interested Parties and Stakeholders

From: Colleen Foley, Deputy Corporation Counsel

Re: Act 203 – BHD Legacy Costs

Date: November 27, 2017

Background: The Milwaukee County Mental Health Board (MHB) requested a legal opinion at its October 26, 2017 meeting on whether Act 203 addresses legacy costs, particularly regarding funding of community and institutional services, and any corresponding impact on the allocated tax levy. The issue arose in part from the Milwaukee County Budget Director's 2018 budget presentation to the MHB Finance Committee in March of 2017. The presentation included actuarial projections for retiree healthcare and pension benefits through 2021, noting that such projections are best if within 10 years or less. The presentation forecast a fiscal crisis for Milwaukee County by 2024 due to the absorption of [virtually] the entire operating tax levy by retiree benefit obligations.¹ Ultimately, the presentation renewed concerns regarding the MHB's ability to fulfill its statutory mandate to fund community and institutional mental health functions, services, and programs when faced with escalating retiree obligations.

Analysis:

Creation of the MHB: Act 203 took effect on April 10, 2014. It created the MHB (seated in July 2014) and instilled it with primary authority over mental health functions, programs, and services for Milwaukee County. Wis. Stat. § 51.41. Its jurisdiction includes the Behavioral Health Division (BHD) unit 6300, consisting of management and support services, adult crisis services, and inpatient services for adults and children, and the Behavioral Health Community Services Branch

¹See related power point, specifically, slides 16 and 17:

<http://county.milwaukee.gov/ImageLibrary/Public/BHD/Mental-Health-Board/MHBFinanceMarch31MeetingPacket1.pdf>

unit 8700, consisting of adult day treatment, alcohol and other drug abuse (AODA), family intervention support, and crisis services.

MHB Duties: Pertinent to this issue, the MHB's duties include to:

- Budget and allocate for mental health programs and services and achieve cost savings within the statutory formula (Wis. Stat. § 51.41(1s))
- Commit to community-based services (Wis. Stat. § 51.41(1s))
- Provide necessary emergency services for the community's mentally ill, alcoholic, and drug dependent citizens (Wis. Stat. § 51.42(1)(b))
- Establish an annual cash reserve contribution of 2% of original cost or appraised value of existing building structures and equipment (Wis. Stat. § 46.18(13))
- Determine the manner of mental health disbursements, consistent with but not controlled by sound accounting and auditing procedure and with applicable federal statutes and regulations, state statutes, and rules and requirements of the county auditor and county department of administration (Wis. Stat. § 46.21(6))

MHB Annual Budget Submission: Act 203 established a tax levy floor and ceiling of \$53 million and \$65 million respectively for mental health services. The MHB must submit an annual proposed budget to the County Executive within that tax levy range, in addition to community aids funding, and patient revenues and other sources (e.g., gifts, grants, bequests). Wis. Stat. § 51.41(4)(b). Act 203 authorizes the County Executive to modify the MHB's approved tax levy but only within the stated dollar parameters. *Id.* The County Board then incorporates the County Executive's tax levy amount into the overall proposed mental health budget. *Id.*

There are 2 exceptions to the stated tax levy range. First, if the MHB transfers to itself jurisdiction of a function, service, or program, then the tax levy will increase by an amount equal to that derived from revenue from the transferred function, service, or program. *See* Wis. Stat. 51.41(4)(b)5. Additionally, should a majority of the MHB and County Board approve and the County Executive agree, the tax levy may be either reduced or increased beyond the stated amounts. *See* Wis. Stat. 51.41(4)(b)6.

Reserve Fund/Budget Deficits: Act 203 afforded the MHB the ability to hold surplus funds in trust to offset future deficits. In particular, the County Treasurer holds in a reserve account funds budgeted, but not expended or encumbered by fiscal year end. Once the reserve exceeds \$10 million, the MHB may tap it for budget shortfalls and/or mental health services, functions, or programs. Wis. Stat. § 51.41(4)(d).² That could include legacy benefit costs, or any other debt that exceeds adopted budget amounts.

BHD as a County Entity: Act 203 made BHD unique as to County governance structure, but it did not alter BHD's status as a county entity. BHD remains part of Milwaukee County and is therefore subject to fiscal oversight by the Comptroller as the County's (elected) chief financial officer and administrator, responsible for *all* county debt. Wis. Stat. § 59.255(2)(a). And Chapter 59's

² According to the Legislative Audit Bureau's December 2016 report, a total of \$13.2 million has been transferred to the mental health reserve fund, including \$6.9 million in 2014 and \$6.3 million in 2015. *See* <https://legis.wisconsin.gov/lab/media/2570/16-14full.pdf>.

provisions regarding the Comptroller's duties do not except BHD from his statutory obligations. Accordingly, the Comptroller is responsible for Milwaukee County's fiscal health in its entirety, inclusive of BHD. The same fiscal expenditures and cross-charge controls implemented for other county departments apply to BHD as well, including:

- salaries
- services
- commodities
- risk management
- IMSD
- active fringe
- legacy fringe

Legacy Costs: Act 203 factored existing legacy costs into the mental health tax levy amount by reference to the 2014 adopted BHD budget with a tax levy amount of \$57,474,122. That number takes into account legacy expenditures and served as the median point in establishing Act 203's tax levy range.

And though it is usually difficult to discern legislative intent without a written record, this assertion is based upon review of Act 203's underlying legislation, 2013 Assembly Bill 718 (AB 718), as well as reported exchanges between the Act's chief sponsor, State Representative Joe Sanfelippo, Milwaukee County Comptroller Scott Manske, and Government Affairs Liaison Eric Peterson that Act 203 incorporate legacy costs into the tax levy basis and range. (Both Comptroller Manske and Liaison Peterson are available to attend the MHB's December 14, 2017 meeting to answer any questions on this issue.)

AB 718 required a minimum expenditure budget for mental health. But it put no limit on the tax levy amount required to fund those services, thus potentially impeding the levy for other County functions or resulting in a higher property tax. Specifically, AB 718 called for a "total budget amount for each fiscal year to be the sum of a base budget amount equal to \$177,425,000 and any amount of unexpended moneys held by the Milwaukee County treasurer in a mental health reserve fund . . ." See <https://docs.legis.wisconsin.gov/2013/related/proposals/ab718>. That base budget amount came from the BHD 2014 adopted budget expenditure amount of \$179,793,648. (Subtracting that expenditure amount from the \$122,319,526 in stated revenue for that year results in the 2014 MHB budget tax levy of \$57,474,122. For that budget year, personnel services were at \$71,051,105, which included \$31.8 million in fringe costs -- \$16 million for active employees and \$15.8 million for legacy employees. See attached 2014 BHD/Behavioral Health Community Services budget.)

But this version of the bill was *not* adopted. Ultimately, an alternative recommendation emerged. This alternate bill changed the minimum funding from an expenditure commitment to a property tax levy commitment. It resulted in Act 203 as we know it, with a set tax levy range of \$53-\$65 million and the corresponding ability to fund deficits from the reserve fund after it hits the \$10 million mark.

Staffing Impact on Legacy Costs: As BHD's footprint has shrunk, so too has its staff - with associated repercussions for legacy cost calculation. For instance, in 1993, BHD employed 1,305.6

employees. By 2004, that number had shrunk to 906.8. Now, in 2016, it stands at 571.3. And while BHD's workforce shrinks, its legacy costs contemporaneously expand. Accordingly, and for the first time, the 2018 budget based BHD's portion of legacy fringe costs on its *historical* number of employees versus the previous calculation based upon active employees. (Comptroller Manske will attend the December 14, 2017 MHB meeting to address any fiscal questions on this point as well.)

Conclusion: Legacy costs are not referenced in Act 203's statutory language. But they were nonetheless incorporated into the Act's established tax levy range for mental health services at the Act's inception. So, the MHB has a statutory mandate to provide certain critical services but it must simultaneously fund legacy costs from the same pot. BHD also had a larger workforce in its heyday, and therefore bears larger legacy costs. As legacy costs continue to rise, the MHB and the rest of Milwaukee County government face fiscal challenges in meeting retiree obligations while continuing to provide primary services.

Suffice it to say that this is a complex issue without easy answers. One possible short term solution is to amend Act 203 on use of the tax levy and/or grant the MHB bonding authority. Long term, policy makers countywide must determine how to fund legacy costs without sacrificing key services. For now, there is no answer to that question, but a tipping point is on the horizon per the budget office presentation.

2014 Budget	Behaviorial Health Division	Behaviorial Health Community Services	Combined Total
State Grants	\$ 8,793,978	\$ 47,151,647	\$ 55,945,625
Federal Revenue	-	587,500	587,500
Court Fees	-	665,246	665,246
Rental Revenue	332,000	-	332,000
Health/ Patient Revenue	20,344,418	41,793,616	62,138,034
Contibution	-	837,203	837,203
Other Revenue	1,738,918	75,000	1,813,918
	<u>\$ 31,209,314</u>	<u>\$ 91,110,212</u>	<u>\$ 122,319,526</u>
Personnel Services	\$ 57,290,938	\$ 13,760,167	\$ 71,051,105
Services	15,003,603	824,863	15,828,466
Commodities	3,138,701	1,694,904	4,833,605
Capital Projects	597,839	45,000	642,839
Other Costs	2,678,837	89,207,477	91,886,314
Cross Charges	31,260,154	5,701,877	36,962,031
Abatements	(31,540,122)	(9,870,590)	(41,410,712)
	<u>\$ 78,429,950</u>	<u>\$ 101,363,698</u>	<u>\$ 179,793,648</u>
Tax Levy	<u>\$ 47,220,636</u>	<u>\$ 10,253,486</u>	<u>\$ 57,474,122</u>

**COUNTY OF MILWAUKEE
Behavioral Health Division Administration
Inter-Office Communication**

DATE: November 20, 2017

TO: Duncan Shrouf, Chairperson – Milwaukee County Mental Health Board

FROM: Jeanne Dorff, Interim Director, Department of Health and Human Services
Approved by Mike Lappen, Administrator, Behavioral Health Division

SUBJECT: Report from the Interim Director, Department of Health and Human Services, Requesting Authorization to Execute 2017 and 2018 Professional Services Contracts for Program Evaluation, Consulting, Information Technology, Training, Grant Management, and Communications Management Services

Issue

Wisconsin Statute 51.41(10) requires approval for any contract related to mental health (substance use disorder) with a value of at least \$100,000. No contract or contract adjustment shall take effect until approved by the Milwaukee County Mental Health Board. Per the statute, the Director of the Department of Health and Human Services is requesting authorization for BHD/CARS/Wraparound/Inpatient Hospital to execute mental health and substance use contracts for 2017-2018.

Background

Approval of the recommended contract allocations will allow BHD/CARS/Wraparound/Inpatient Hospital to provide a broad range of rehabilitation and support services to adults with mental health and/or substance use disorders and children with serious emotional disturbances.

Professional Services Contracts

University of Wisconsin-Milwaukee (UWM) - \$129,998

UWM has been designated as the entity that will provide program evaluation services to the Milwaukee County Behavioral Health Division (MCBHD) Community Access to Recovery Services (CARS) as part of the Federal SAMHSA Grant for Adult Treatment Drug Court. The existing agreement is being extended to until September 30, 2019. The funds are being requested for 2018 (\$64,999) and 2019 (\$64,999).

Cambio Solutions, LLC (Cambio) - \$25,000

Cambio provides Consulting Services to Milwaukee County Behavioral Health Division (MCBHD) in support of MCBHD's effort to change the location and manner in which the behavioral health acute care services are provided for adults, children, and adolescents. The

existing agreement is being extended until April 30, 2018. The total contract amount would be \$124,900. The funds are being requested for 2018.

Robert Half Technology (Robert Half) - \$397,060

Robert Half is assisting the Wraparound Milwaukee with the Synthesis Desktop Application Conversion project. Wraparound Milwaukee is working to convert their current web model to ASP.NET. ASP.NET is a unified web development model that includes the services necessary for you to build enterprise-class Web applications with a minimum of coding. Robert Half also provides support and training for the existing Synthesis application. The funds are being requested for 2018.

Vistelar, LLC (Vistelar) - \$150,000

Vistelar is a global consulting and training institute focused on training staff to safely address interpersonal discord, verbal abuse, bullying, crisis communications, assault and physical violence. This training which MCBHD is offering to staff is the “gold standard” in the industry, and will result in reduced complaints, liability and injuries, while improving performance, morale and overall safety for clients, patients, and customers. Training which has been provided thus far has met with an overwhelmingly positive response from all levels of staff. Additional dollars are needed for “trainer the trainer” monies so BHD can provide their own staff competencies in future years rather than relying on Vistelar. It is also needed to provide training for physicians as well as to offer make up classes for individuals who have either not attended classes when scheduled as well as for additional staff hired since initial monies were requested. The Total contract amount would be \$571,160. These funds are being requested for 2018.

Evaluation Research Services - \$173,400

Evaluation Research Services provides grant management coordination, inclusive of grant writing services to the Milwaukee County Behavioral Health Division. Using a Lifecycle management approach to grant management, processes and infrastructure is developed and implemented to manage grant proposals from beginning, or ‘pre-award’, stage of a project implementation, or ‘post-award’, through the termination, or closeout, of an award. These funds are being requested for 2018.

Kane Communications - \$648,000

Kane provides communication strategies that align with the Milwaukee County Behavioral Health Division and Milwaukee County Mental Health Board. Services of this two-year contract will include the following goals: (1) managing communications with all stakeholders throughout a potential hospital transition to another provider of acute inpatient services, (2) expansion of community awareness of the Behavioral Health Division's services and related strategic initiatives, and (3) continued communications to drive employee recruitment and retention activities in support of pending transitions and current personnel needs. This contract will include onsite support in order to manage daily communication needs. The existing agreement is being amended to extend until December 31, 2019. The total contract amount would be \$1,265,000.00. The funds are being requested for years 2018 and 2019 but please note that the funds for 2018 were not included in the 2018 budget. Refer to attached scope of work.

Fiscal Summary

The amount of spending requested in this report is summarized below.

Vendor Name	New/Amendment /Existing Contract	2018 Amount	2019 Amount
University of Milwaukee Wisconsin	Existing	\$64,999	\$64,999
Cambio Solutions, LLC	Amendment	\$25,000	
Robert Half Technology	New	\$397,060	
Vistelar, LLC	Amendment	\$150,000	
Evaluation Research Services	New	\$173,400	
Kane Communications	Amendment	\$324,000	\$324,000
Total		\$1,134,459	\$388,999



Jeanne Dorff, Interim Director
Department of Health and Human Services



KANE COMMUNICATIONS GROUP

inspire results

BEHAVIORAL HEALTH DIVISION
2018-19 Communications Support Statement of Work
Presented November 2017

Michael Lappen, MS, LPC
Milwaukee County Behavioral Health Division
9455 W Watertown Plank Road
Milwaukee, WI 53226

November 10, 2017

Dear Mike,

What an honor it is to partner with the Milwaukee County Behavioral Health Division (BHD) to help educate our community about BHD's work.

At Kane Communications Group, we know that intelligent communication strategies that align with organizational goals can achieve significant results. Our team has partnered with BHD to deeply understand your position in the community and develop real and informed communications programs that have achieved important outcomes. These include measurable improvements in employee trust and communications; the expansion of dozens of partnerships with community organizations; ongoing and positive media coverage; and a measured increase in qualified candidate leads, applications and hires through our award-winning RN recruitment campaign.

As BHD's care model changes, it is more important than ever to clarify the division's role as a vital connector to high-quality services that people can count on and a leading voice on key behavioral health issues. The proposal below builds on our experience working with you and the team and BHD and provides additional support at a significantly reduced rate to expand the amount of dedicated communications resources you have at BHD.

We are pleased to present this statement of work to you to achieve the following goals in 2018 and 2019:

- Manage communications throughout the hospital transition process
- Continue & expand on community awareness of BHD, its services & causes related to its purpose
- Continue to use communications to drive leads to recruiters and develop programs that positively impact employee retention

These efforts will enable you to continue to clearly message your work as a behavioral health care leader in Milwaukee County and a meaningful place for caregivers to work.

Enclosed please find a proposal for the work. We look forward to supporting BHD with the very important endeavors.

Kind Regards,

Kimberly Kane
President & CEO
Kane Communications Group



WORK PROPOSAL

Situation Analysis

The Milwaukee County Behavioral Health Division (BHD) provides the people of Milwaukee County with a comprehensive array of high-quality behavioral health services - no matter their severity of need or ability to pay.

Today, BHD is transforming from a provider of acute, hospital-based psychiatric services and long-term care to a community-based model that ensures all residents have access to high-quality care, including crisis, acute and community-based treatment services. As part of this process, BHD and its governing body, the Milwaukee County Mental Health Board are working to identify a provider to build a new acute psychiatric hospital in Milwaukee County. This partnership would enable BHD to expand its support for community-based programs, especially in underserved areas of the county, while ensuring the acute and crisis needs of county residents are met.

This is a major operational process and leadership recognize that clear and consistent communication to employees, patients and their families, the community, providers and partners play an important role in helping people understand what the transition means to them and what it means to behavioral health care in Milwaukee County.

Opportunity

Mike Lappen has identified the following goals for Kane Communications Group:

1. **HOSPITAL TRANSITION COMMUNICATIONS:** Implement and manage communications outlined in the transition communications plan Kane developed in the Fall 2017, including employee communications and external communications through the full transition and BHD hospital closure.
2. **COMMUNITY AND AWARENESS BUILDING:** Communicate with employees, stakeholders and the media as BHD's model changes. Emphasize BHD's community services and partnerships (i.e. Northside, Sixteenth Street Community Health Centers, CART, Peer Run Respite) to increase the number of Milwaukee County residents who reach out for help before crisis; use this transition to strengthen partnerships and position BHD as a community leader and voice on key issues including AODA, trauma-informed care, behavioral health for children and families, prevention; educate providers and referral sources about how to refer individuals to BHD services and programs.
3. **RECRUITMENT AND RETENTION:** Extend and expand on the existing recruitment marketing campaign to continue to drive leads to BHD's recruiters for open positions, and discover new ways to retain the great staff already working at BHD. Build awareness of mental health career options at area colleges and schools of nursing, activate recruitment ambassadors to build relationships with key influencers and the media, and develop and promote referral and retention programs for employees. The full transition to the new acute care facility could take up to two years. During this time, BHD will continue providing acute and crisis care to Milwaukee County residents with mental illness and will need to recruit and retain talented mental health nurses and caregivers.

Services Timeline

All work outlined in this agreement will begin in January 2018 upon the execution of a signed contract.



Specific deliverable timeline will be developed in the respective project plans. This engagement will end December 31, 2019, or when hours are completed, whichever comes first.

	Q1-18	Q2-18	Q3-18	Q4-18	Q1-19	Q2-19	Q3-19	Q4-19
Onsite support	Dedicated support for community service, hospital, leadership, employee communications (including email & newsletter management); subject matter expert communications							
Transition communications	Transition communications plan implementation and updates							
			Update plan per board decisions					
			Collaborate with UHS comms					
						Comms planning for BHD hospital closure	Closure events	
Community and Awareness Building	Plan creation			Evaluate & plan for 2019				Evaluate
	Implement plan elements							
	Light and Unite Red	Mental Health Month	Recovery Month		Light & Unite Red	Mental Health Month	Recovery Month	
			Develop, roll out provider and partner education program about BHD					Evaluate
Recruitment and Retention	'17 campaign ends	Media campaigns in market (exact timing based on plans)						
	Planning & buying for 2018			Planning & buying for 2019				
	Referral / Retention Research & Planning							
			Referral / Retention Program implementation & management					



Scope of Services & Deliverables

The following services and deliverables will be included in the scope of work:

Services:

- Reduced-rate onsite support from Kane team member (at up to 24/hours per week)
- Strategic planning and research
- Public relations, media relations and community relations
- Paid media strategy, buying, research, planning, placement and reporting
- Social media management, strategy and content creation
- Video planning, producing, directing, management, editing, scouting - not including outside resources
- Creative concepting, creative direction, art direction, graphic design, production management, photography
- Copywriting, editing and proofreading
- Internal communications management, including enews management & deployment
- Client meetings
- Account and project management
- Committee management

Deliverables:

- Monthly activity reports for BHD leadership
- Reports on individual campaign results
- Deliverables as outlined in the transition communications plan (written in 2017)
 - Key messages
 - Talking points for BHD leaders
 - Communications schedule
 - Creative and written communications pieces (emails, letters to be mailed, press release(s))
- Two community awareness plans (2018 & 2019)
 - Annual content plans
 - Media page
 - Limited original and stock photography
 - Written and creative materials for campaigns
 - Light & Unite Red
 - Mental Health Month
 - Recovery Month
- Two recruitment and retention media plans (2018 & 2019)
 - Written and creative materials as outlined in plans - advertisements, videos, radio ads, flyers, billboards, etc.
 - Quarterly lead reports (in conjunction with recruiter)

Assumptions

- Mike Lappen will be the primary point of contact at BHD.
- Jennifer Bergersen will be a secondary, day-to-day contact who can facilitate approvals of materials, meetings and assist with getting the Kane team access to BHD team members.
- Justin Metzger will continue to manage BHD's digital board, webpages, Do the Right Thing



- committee and participate in communications planning including on the editorial committee
- Specific tactics may change based on what is outlined in the plan recommendations.
- Mike Lappen will provide key personnel for the implementation of the deliverables, where required for successful fulfillment of desired outcomes.
- Mike Lappen will make personnel who may be part of the project team available for help.
- Mike Lappen will perform timely turnaround for issue resolution, review, acceptance, etc.

Out of Scope

The following items have been identified as out of scope and will not be completed as part of this agreement. Additional estimates and statements of work can be provided as requested:

- Video services requiring outside resources for editing, shooting, audio, music, animation, etc.
- Front- and back-end programming related to website and digital projects
- Printing
- Paid media costs or sponsorship fees
- Stock videography
- Merchandise costs
- Travel and meals
- Paid market research
- Event space rental
- Survey or research participation stipends

Any deliverables not specifically listed in Scope of Services are excluded from the scope of this project.

BILLING SCHEDULE

The fees for services provided by Kane Communications Group will be \$27,000 per month, unless otherwise agreed to by Client and Kane due to an amended work schedule. This rate is in effect through December 31, 2019. If the engagement extends beyond that time, Client and Kane will reevaluate the priorities of the activities and re-scope the work. Any additional time required by Kane beyond that which is outlined in this statement of work will be billed at a \$170 per hour rate. Any element that will cause the total cost of the project to exceed the quoted amount reflected in the contract must first be approved (in written form) by Kane and Mike Lappen. Client shall reimburse out-of-pocket expenses consistent with Client's internal protocol. All invoices are due according to terms of the Professional Services Agreement.

Change Management

Should circumstances arise that change this proposal, Kane will contact BHD to discuss the situation and document any agreed-upon changes in the form of a Change Order. All Change Orders must be reviewed and approved by both parties in writing prior to proceeding with any changes.



COUNTY OF MILWAUKEE
Behavioral Health Division Administration
Inter-Office Communication

DATE: November 20, 2017

TO: Duncan Shrouf, Chairperson – Milwaukee County Mental Health Board

FROM: Jeanne Dorff, Interim Director, Department of Health and Human Services
Approved by Mike Lappen, Administrator, Behavioral Health Division

SUBJECT: Report from the Interim Director, Department of Health and Human Services, Requesting Authorization to Execute 2017 and 2018 Purchase-of-Service Contracts with a Value in Excess of \$100,000 for the Behavioral Health Division for the Provision of Adult and Child Mental Health Services and Substance Use Disorder Services

Issue

Wisconsin Statute 51.41(10) requires approval for any contract related to mental health (substance use disorder) with a value of at least \$100,000. No contract or contract adjustment shall take effect until approved by the Milwaukee County Mental Health Board. Per the statute, the Director of the Department of Health and Human Services is requesting authorization for BHD/CARS/Wraparound/Inpatient Hospital to execute mental health and substance use contracts for 2017-2018.

Background

Approval of the recommended contract allocations will allow BHD/CARS/Wraparound/Inpatient Hospital to provide a broad range of rehabilitation and support services to adults with mental health and/or substance use disorders and children with serious emotional disturbances.

Purchase-of-Service Contracts

Phoenix Care Systems, Inc. (Bell Therapy) - \$627,167

Bell Therapies contract amount was reduced in 2016 for their Community Support Program (CSP) due to quality issues. The upcoming 2018 Bell Therapy CSP contract is again being reduced as Bell Therapies has not been able to correct the quality issues. Milwaukee County Behavioral Health Division (MCBHD) is reducing the Bell Therapy CSP slots by 100 and these slots will be redistributed to **Project Access, Inc.**, CSP contract. Project Access, Inc. will increase their CSP capacity from 200 to 300. **Fiscal Impact:** The Bell Therapy CSP contract for 2018 will be reduced to \$627,167 from the current 2017 contract for \$1,102,294 (variance - \$475,127) and Project Access, Inc.'s, CSP contract will increase to \$1,368,209 for 2018 from \$912,139 for 2017 (variance \$456,070). MCBHD believes that the quality issues with Bell Therapy will be resolved by serving fewer consumers.

La Causa, Inc. (La Causa) – (-\$95,286)

La Causa notified Milwaukee County Behavioral Health Division (MCBHD) that they will not be providing Peer Specialist for Team Connect in 2018. The La Causa CLASP contract will be reduced by \$95,286 as the funds La Causa received for the Peer Specialist for Team Connect will be added to the Consumer Affairs agreement for 2018.

Impact, Inc. (Impact) - \$315,000

Impact 2-1-1 contract is being increased for Impact to be the first line of answering the Milwaukee County Crisis Line calls. Impact 2-1-1 is the largest information resource in the community and will be able to address 40-45% of the calls coming into the Crisis Line. Any callers needing emergency behavioral health services will be immediately transferred to the Crisis Mobile team clinicians to assist as needed. The funds are being requested for 2018.

Proposed 2018 Contract Allocations: \$18,981,157

Overview

Overall contract allocations for 2018 in BHD's Child and Adolescent Community Services Branch will vary only slightly from 2017. BHD will again contract with a number of community agencies for care coordination and other services that support the operation of the Wraparound Milwaukee Program, REACH (Reaching, Engaging and Assisting Children and Families), FISS (Family Intervention and Support Services), OYEAH (Young Emerging Adult Heroes), and MUTT (Mobile Urgent Treatment Team). As a special, 1915a Managed Care program under Medicaid, all remaining services are purchased on a fee-for-service basis through agencies participating in the Wraparound Milwaukee Provider Network. Individual Purchase of Service contract allocations being recommended are listed in this report.

Care Coordination Services

Care Coordination is a key service in Wraparound as they are the staff who facilitate the child and family team, help the family develop and then document the individual treatment plans (Plans of Care), coordinate the provision of mental health and other services to the youth and family, and provide reports to and present at Children's Court. For 2016 and 2017, Wraparound contracted with six care coordination agencies: AJA Counseling Center, Alternatives in Psychological Consultation, La Causa, Inc., SaintA, St. Charles Youth and Family Services, and Willowglen Community Care. An RFP was issued for 2018 care coordination services and based on scoring, history of agency performance, and program needs, we will continue to contract with these six agencies.

For the voluntary REACH program, a separate RFP was issued. Based on scoring, history of agency performance, program needs and continuity of care for children and families, the following six agencies were chosen: AJA Counseling Center, Alternatives in Psychological Consultation, La Causa, Inc., SaintA, St. Charles Youth and Family Services, and Willowglen Community Care. In reviewing enrollment trends, we have chosen a seventh agency to begin enrolling families when needed. That agency will be Wisconsin Community Services.

OYEAH provides care (transition) coordination services to youth and young adults, age 17-23, who have serious emotional and mental health needs and are usually transitioning out of foster

care or other out-of-home care. An RFP was issued for this service as well, the five agencies selected to provide these services are: La Causa, Inc., Lad Lake, Pathfinders, St. Charles Youth and Family Services, and Wisconsin Community Services.

The total number of youth and families projected to be served in 2018 is 1,700 families with an average projected daily enrollment of 1,150 families across regular, court-ordered Wraparound, REACH and OYEAH.

Overall, the nine agencies providing care coordination services, including screening and assessment services, are:

Care Coordination Agency	Service Type	2018 Proposed Contract
AJA Counseling Center	Wrap Care Coordination	\$ 950,958
	REACH	\$ 744,414
	Screening/Assessment	<u>\$ 75,000</u>
		\$1,770,372
Alternatives in Psychological Consultation	Wrap Care Coordination	\$1,433,045
	REACH	\$ 967,446
	Screening/Assessment	<u>\$ 100,000</u>
		\$2,500,491
LaCausa, Inc.	Wrap Care Coordination	\$2,264,209
	REACH	\$1,860,316
	OYEAH	\$ 506,899
	Screening/Assessment	<u>\$ 375,000</u>
	\$5,006,424	
Lad Lake	OYEAH	<u>\$ 283,720</u>
		\$ 283,720
Pathfinders	OYEAH	<u>\$ 141,860</u>
		\$ 141,860
SaintA	Wrap Care Coordination	\$ 981,119
	REACH	\$ 861,660
	Screening/Assessment	<u>\$ 75,000</u>
		\$1,917,779
St. Charles Youth and Family Services	Wrap Care Coordination	\$ 852,336
	REACH	\$ 827,861
	OYEAH	\$ 508,197
	Screening/Assessment	<u>\$ 300,000</u>
	\$2,488,394	
Willowglen Community Care	Wrap Care Coordination	\$1,412,413

	REACH	\$ 358,103
	Screening/Assessment	\$ 150,000
		<u>\$1,920,516</u>
Wisconsin Community Services	OYEAH	\$ 378,140
		<u>\$ 378,140</u>
Care Coordination Total:		\$16,407,696

Support Services for Wraparound Milwaukee

For 2018, BHD recommends continuing an agreement with the Kids Forward (formerly Wisconsin Council on Children and Families) to arrange for; program evaluation, staff training, management consultation, and other support necessary to maintain the Medicaid Capitation contract with DHS. This will assure continued approval by the Center for Medicare/Medicaid Service (CMS) for Wraparound Milwaukee's 1915a status.

Information Technology and technical assistance has been provided through Robert Half Technologies since 2016. In 2018, we propose the separation of Kids Forward and Robert Half Technologies to delineate services provided by each agency and to ensure appropriate insurance requirements are met.

SEA Group provides educational advocacy to help enrolled youth obtain an Individual Education Plan (IEP), achieve appropriate school placements, and reduce unnecessary residential and day treatment services. In February 2017, SEA Group was contracted separately from Families United of Milwaukee, Inc. to provide educational advocacy services. We propose to continue an agreement with SEA Group. This agency consists of a Program Director and five Educational Liaisons, one of whom solely dedicates time to children involved with the Division of Milwaukee Child Protective Services.

Fiscal intermediary services through the Milwaukee Center for Independence (MCFI) allow the purchase of services from relatives and other natural supports for youth. Families can identify relatives or close friends who are available to provide supportive services such as transportation or respite but who would be unable to do so without financial assistance. The family 'hires' the provider, and MCFI serves as the fiscal intermediary with the provider.

At the time of this report, Family Advocacy services (historically provided for by Families United of Milwaukee, Inc.) remains open for RFP submissions, however we recommend extending the 2017 contract for 2 months until an agency is selected.

Support Services for Wraparound	Service Type	2018 Proposed Contract
Families United of Milwaukee, Inc.	Family Advocacy	\$ 37,500
Kids Forward	Program Evaluation, Training,	\$250,000

	Consultation	
SEA Group	Education Advocacy	\$300,000
Milwaukee Center for Independence	Fiscal Intermediary	\$ 25,000
Support Services for Wraparound Total:		\$612,500

Mobile Urgent Treatment Services

The Mobile Urgent Treatment Team provides crisis intervention services on a 24 hour basis to families enrolled in the Wraparound Milwaukee Program. In addition, this team provides services to any family in Milwaukee County with a child who is having a mental health crisis. Team members go to where the crisis is occurring, assess the situation, and work with the youth and family to determine the safest, least restrictive options to address the crisis, as well as provide support and referrals for continued services as needed. The Mobile Urgent Treatment Team (MUTT) will serve an estimated 2,300 families in 2018.

The Division of Milwaukee Child Protective Services will again fully fund a dedicated MUTT team to work specifically with youth in foster care and their foster parents. This team has been effective at reducing the incidence of failed foster placements through the provision of 24/7 crisis intervention services to foster families who are experiencing a mental health or behavioral crisis with a child in their care.

To support BHD's professional team of county psychologists and psychiatric social workers assigned to the MUTT program, St. Charles Youth and Family Services will provide up to ten, crisis support workers for MUTT to ensure adequate shift and seven days per week coverage.

In 2015, the City of Milwaukee Health Department contracted with BHD-Wraparound Milwaukee to fund two staff positions for a Trauma Team to work directly with Police Officers in District 7. The Police Officers identify youth who are exposed to traumatic events during the course of a police response. With the consent of the family, the Officers may refer a youth to the Mobile Trauma Team, who call the family to arrange a follow up visit and provide support/services as needed. The Mobile Trauma Team staff then communicate with the referring Officers to close the loop and let the Officers know that contact has been made. In 2016, we expanded our partnership to District 5 and we are currently, (as of 11/2017) in the process of signing a Memorandum of Understanding with the City of Milwaukee Fire Department to expand our partnership and further our work with the children and families of Milwaukee.

Started under the Federal Healthy Transitions Grant, Wraparound Milwaukee will continue contracting with St. Charles Youth and Family Services for operation of the youth/young adult resource center (Owen's Place) and for the provision of the resource center manager and several young adult peer specialists. Peer Specialists are now Medicaid reimbursable under our contract with the Wisconsin Department of Health and those service costs will be incorporated in our capitation rate.

Journey House

In 2018, Wraparound Milwaukee recommends continuing a contract with Journey House for eleven apartments to be used by young adults in the OYEAH program. Wraparound Milwaukee will assist young adults in this transition by subsidizing their rental payments to no more than 30% of their monthly income for the entire length of the 18-month lease. While living in this housing, young adults will receive support to help ensure a successful transition to adulthood. Services include peer support, mental health services, daily living support and other individualized services as needed. Through OYEAH and our partnership with Journey House young adults are taught skills needed to successfully live on their own with the goal of each resident saving at least 25% of their income. After the completion of the 18-month lease, OYEAH transitional coordinators work with young adults to transition them to a long-term housing option.

Agency Providing Support Services	Service Type	2018 Proposed Contract
St. Charles Youth and Family Service	Mobile Crisis and other Clinical Services	\$1,235,873
	Resource Center/Peer Specialists	\$ 250,000
Journey House	OYEAH Housing support	<u>\$ 58,212</u>
MUTT and Housing Support Services Total:		\$1,544,085

Family Intervention and Support Services (FISS)

The BHD-Wraparound Program will continue to oversee the operations of Family Intervention Support and Services Program (FISS) for the Division of Milwaukee Child Protective Services and Milwaukee County Children's Court.

The assessment services component of FISS is targeted to conduct about 600 assessments in 2018 as well as serve over 150 families in the case management component. FISS targets adolescents who are experiencing parent-child conflicts manifesting in school truancy, chronic running away from home, and other issues of uncontrollability. FISS is a voluntary, early intervention alternative for parents who can receive a range of mental health and support services as an alternative to filing a formal CHIPS (Child in Need of Protection and Services) petition. FISS is fully funded by the Division of Milwaukee Child Protective Services.

St. Charles Youth and Family Services, provides assessment and case management.

Agency Providing FISS Program Services Contract	Service Type	2018 Proposed Contract
St. Charles Youth and Family	FISS Assessment and	\$ 416,876

Services

Case Management

FISS Support Services Total:**\$ 416,876****Summary**

The following are the total contract recommendations for BHD's Child and Adolescent Community Services Branch for 2018 as compared to 2017.

Agency Providing Proposed Services	Adjusted 2017 Contract	2018 Contracts
AJA Counseling Center	\$ 2,040,700	\$ 1,770,372
Alternatives in Psychological Consultation	\$ 1,910,400	\$ 2,500,491
Families United of Milwaukee, Inc.	\$ 225,000	\$ 37,500
Journey House	\$ 43,752	\$ 58,212
Kids Forward (formerly Wisconsin Council On Children and Families)	\$ 649,623	\$ 250,000
La Causa, Inc.	\$ 3,638,512	\$ 5,006,424
Lad Lake	\$ 0	\$ 283,720
Milwaukee Center for Independence	\$ 25,000	\$ 25,000
Pathfinders	\$ 0	\$ 141,860
SaintA	\$ 2,004,500	\$ 1,917,779
SEA Group	\$ 300,000	\$ 300,000
St. Charles Youth and Family Services	\$ 4,110,899	\$ 4,391,143
Wisconsin Community Services	\$ 0	\$ 378,140
Willowglen Community Care	\$ 1,318,000	\$ 1,920,516
Total 2018 Proposed POS Contracts:	\$16,266,386	\$18,981,157

Fiscal Summary

The amount of spending requested in this report is summarized below.

Vendor Name	New/Amendment/Renewal/Extension/Existing Contract	2018 Amount
Impact, Inc.	Renewal	\$315,000
Phoenix Care Systems, Inc.	Renewal	\$627,167
Project Access, Inc.	Renewal	\$1,368,209
Wraparound Milwaukee	Renewal	\$18,981,157
Total		\$21,291,533



Jeanne Dorff, Interim Director
Department of Health and Human Services

COUNTY OF MILWAUKEE
Behavioral Health Division Administration
Inter-Office Communication

DATE: November 20, 2017

TO: Duncan Shrouf, Chairperson – Milwaukee County Mental Health Board

FROM: Jeanne Dorff, Interim Director, Department of Health and Human Services
Approved by Mike Lappen, Administrator, Behavioral Health Division

SUBJECT: Report from the Interim Director, Department of Health and Human Services, Requesting Authorization to Execute 2018 Fee-for-Service Agreements with a Value in Excess of \$100,000 for the Behavioral Health Division for the Provision of Adult and Child Mental Health Services and Substance Use Disorder Services

Issue

Wisconsin Statute 51.41(10) requires approval for any contract related to mental health (substance use disorder) with a value of at least \$100,000. No contract or contract adjustment shall take effect until approved by the Milwaukee County Mental Health Board. Per the statute, the Director of the Department of Health and Human Services is requesting authorization for BHD/CARS/Wraparound/Inpatient Hospital to execute mental health and substance use contracts for 2018.

Background

Approval of the recommended contract allocations will allow BHD/CARS/Wraparound/Inpatient Hospital to provide a broad range of rehabilitation and support services to adults with mental health and/or substance use disorders and children with serious emotional disturbances.

Fee-for-Service Agreements

St. Charles Youth & Family Services (St. Charles) – N/A

The current Fee for Service Agreement with St. Charles for Comprehensive Community Services (CCS), Care Coordination and Recovery Support Coordination (RSC) has been terminated due to ongoing quality issues. St. Charles has received formal notification of the decision.

Empathetic Counseling Services, Inc. (Empathetic) – \$768,395

Empathetic provides supportive, recovery oriented services for AODA and Mental Health.

Allendale Association, Inc. (Allendale) – \$390,000

This agency provides Behavioral Health and/or Social Services for the Wraparound Milwaukee Program serving children/youth and their families.

Vendor Name	New/Amendment/Renewal/Extension/ Existing Contract	2018 Amount
Allendale Association, Inc.	Renewal	\$390,000
Empathetic Counseling Services, Inc.	Renewal	\$768,395
Total		\$1,158,395



Jeanne Dorff, Interim Director
Department of Health and Human Services

**Milwaukee County Mental Health Board
Finance Committee**

2018 Meeting Schedule

February 22, 2018, at 7:00 a.m. (Contracts Approval)

March 29, 2018, at 1:30 p.m. (Contracts Approval/Quarterly Meeting)

June 7, 2018, at 4:30 p.m. (Budget/Public Comment)

June 21, 2018, at 7:00 a.m. (Contracts Approval)

June 28, 2018, at 1:30 p.m. (Budget Presentation/Public Comment/Budget
Approval)

August 23, 2018, at 7:00 a.m. (Contracts Approval)

September 13, 2018, at 1:30 p.m. (Quarterly Meeting)

October 25, 2018, at 7:00 a.m. (Contracts Approval)

December 6, 2018, at 1:30 p.m. (Contracts Approval/Quarterly Meeting)