

CSB Fiscal Oversight Committee

Meeting Agenda

July 19, 2019

Agenda Item	Facilitator
Meeting Called to Order	Jennifer Adeli
Review and Approval of June 21 st Meeting Minutes	Jennifer Adeli
Financial Status <ul style="list-style-type: none">• Pay Period Metrics• Modified Fund Statement• End of Year Budget Status Balances – Issues/Concerns• Revenue Billing Report	Jessica Burris
FY 2019 End of Year Report Update	Jennifer Adeli
Administrative Operations Report Out <ul style="list-style-type: none">• FY 2019 Carryover Requests (Due in July)	Daryl Washington
HR Update <ul style="list-style-type: none">• Position Status	Donna Chittum
Deputy Director, Clinical Operations Report Out <ul style="list-style-type: none">• WIN (Welcoming Inclusion Network) Group Update • <i>Barbara Wadley-Young</i>• Jail Based Services Organizational Chart• Diversion First• Time to Treatment	Lyn Tomlinson
Adjourn	

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CSB Fiscal Committee Meeting Minutes

Date: June 21, 2019

Attending: Chair, Basilio 'Sonny' Cachuela, Jr.; Jennifer Adeli; Ken Garnes; Suzette Kern; Bettina Lawton; and Edward Rose

Absent: Gary Ambrose

Staff: Daryl Washington; Bill Hanna; Lyn Tomlinson; and Jessica Burris

Summary of Information Shared/Decisions:

Captain Basilio 'Sonny' Cachuela Jr. called the meeting to order at 9:02 a.m.

Review of meeting minutes

The May 17, 2019 meeting minutes were presented for review. As no revisions were offered, Edward Rose made a motion to approve the minutes as presented, which was seconded and approved.

Welcome Deputy Director of Administrative Operations

Bill Hanna, recently hired as Deputy Director of Administrative Operations, was introduced and welcomed to the Committee.

Financial Status

Jessica Burris provided the Financial Status update, directing attention to the fiscal materials included in the meeting packet:

- *Pay Period Metrics:* Noting no significant changes, it was highlighted that the Compensation and Fringe benefits expenses remain at approximately \$4.4M for Pay Period 11.
- *Modified Fund Statement:* Projections remain chiefly constant, resulting in an approximately \$8.5M unreserved fund balance, noting some minor reductions in Operating costs, partially attributed to previously encumbered funds that will not be spent by the end of FY2019.
- *End of Year Budget Status Balances:* The variance from budget includes a shortfall of approximately \$1.6M in Revenue and an increase to Compensation of approximately \$.5M. To address this imbalance, it was reported that the CSB is working with DMB (Department of Management and Budget) to potentially reallocate funds from Operating to Personnel in recognition of increased staffing needs including expanded hiring, dual encumbrances, and retiree payouts.
- *Revenue Billing Report:* Referring to a handout provided at the meeting, Ms. Burris highlighted the number of completed Key Achievements related to revenue maximization, providing an overview of ongoing efforts. Highlighting that the report reflected a reduction in non-billable services of approximately \$50K, this was partially attributed to the implementation of billing for OBOT (Office Based Opioids Treatment), as well as reducing non-billable services due to credentialing issues. Ms. Burris further reported that continued efforts are focused on implementing billing for ARTS (Addiction and Recovery Treatment Services) and IOP (Intensive Outpatient) and correcting LMHP (Licensed Mental Health Professional)-type billing. It was further confirmed that there are regularly scheduled meetings with Fiscal, Compliance, Training, and Informatics staff to address concerns and develop solutions with a goal of resolving the current concerns by the end of the first quarter in FY 2020.
- *Revenue Management Metrics:* Noting the reduced receivables balance, Ms. Burris reported approximately \$1.2M of claims, identified as too old to be collected, had been written off since the last reporting period. Directing attention to the charts reflecting Self Pay revenue vs. Medicaid related billing revenue, it was clarified that the charts illustrate the increase in Medicaid billing

CSB Fiscal Committee Meeting Minutes

related to increased Medicaid Expansion enrollment, confirming that enrollment efforts are ongoing.

Administrative Operations Report

Daryl Washington provided a brief overview of the CIP (Capital Improvement Plan) requests report that will be provided at the full Board meeting, noting the following requests will be included:

- Building improvements, including at Merrifield for Law Enforcement and Walk-in Assessment on the lower level and for the Youth Walk-in Assessment Unit.
- A proposed pilot program in support of WIN recommendations for strengthening Employment & Day Services. An overview of the WIN recommendations, including the efforts to strengthen Group Supported Employment, will be provided at the June CSB Board meeting.
- CSB Training Academy is being re-considered following analysis of immediate need.

FY2019 Year End Report

Captain Cachuela offered a reminder that preparations for developing the Year End Report begin in July, noting a copy of the FY2018 Year End Report was included in the meeting materials. Additionally, a timeline for development and submission of the report to the CSB Board was provided, noting that the Fiscal Oversight Committee Chair, the CSB Board Chair, and the CSB Director of Communications, Lucy Caldwell work together to identify topics and develop the cover letter. A reminder was offered that some data included in the report is not available until September, the receipt of which dictates when the report can be finalized and submitted to the BOS.

Offering a reminder of the BOS elections in November 2019, Captain Cachuela recommended that copies of the report be further submitted to the new BOS members who are elected.

Human Resources (HR) Update

As Donna Chittum was unable to attend this meeting, Lyn Tomlinson, provided an overview of the HR update report noting there were 98 vacancies as of June 8, 2019. Of the five vacancies in Emergency Services/MCU (Mobile Crisis Unit), two offers have been made and a bed-finder has been hired, leaving two vacancies in this area. The area of ADC (Adult Detention Center)/Jail Diversion has seen some recent turnover affecting three positions, noting there are interviews planned for the week of July 9, 2019. Additionally, attention was directed to the Jail Based and Jail Diversion Organization charts provided in the meeting materials. Ms. Tomlinson confirmed there is a high level of planning to fill positions that are becoming vacant, when known, with early placement of job ads; dual encumbrances, noting the length of dual encumbered positions has shortened; and increasing efficiency in hiring practices.

Clinical Operations Report

Lyn Tomlinson provided updates to Diversion First and Time to Treatment, some of which include:

- Diversion First
 - The Community Response Team (CRT), that addresses individuals in the community who frequently call emergency services, 911, etc. has increased service hours to 5 days/week. It was further reported that there is a reported decrease in calls.
 - Following a lengthy negotiation, Inova returned the signed medical clearance contract with some edits. There are ongoing negotiations regarding infrastructure, etc. The Board will be informed once the contract is fully executed.
- Time to Treatment
 - *Adult Time to Treatment* charts illustrate decreased wait times. Efforts to improve efficiencies include ongoing outreach and 'rolling over' non-responsive individuals to the end of the scheduling list. Individuals in need of IOP (Intensive Outpatient) services continue to experience longer than average wait times. Noting that the Gartlan Center

CSB Fiscal Committee Meeting Minutes

continues to struggle with decreasing IOP wait times, efforts are ongoing with Gartlan staff to identify and eliminate barriers. A reminder was offered that some STEP-VA funding was provided to establish two new Outpatient staff who will be placed in Adult services to assist with this identified need. The note regarding closure of the Springfield site will be removed from the notes.

- *Youth Time to Treatment* charts continue to illustrate improvement in wait times, noting the increments of improvement will be small as the summer months are typically less busy for youth services.

Daryl Washington reported that there are some differences between the CSB, and the State wait times reporting methodology and data points. To accommodate these differences, Data and Analytics staff is working to revise the methodology for the current report to more closely align with the State report. It is anticipated that a preliminary report may be available for review at the August Fiscal Oversight Committee meeting.

Open Discussion

Captain Cachuela offered a reminder that this was his last meeting as Chair, welcoming Jennifer Adeli to this position starting in July. Ms. Adeli confirmed that beginning in July, Fiscal Oversight Committee meetings will be modified to begin at 9:30 a.m.

Noting no further discussion was forthcoming, the meeting was adjourned at 10:01 a.m.

Action Items/Responsible Party Required Prior to Next Meeting:

Issues to Communicate to CSB Board:

Agenda Items for Next Meeting:

Fiscal Oversight Committee meeting

Friday, July 19, 2019, 9:30 am. Pennino Building, 12011 Government Center Parkway, Suite 836A, Fairfax, VA

Date Approved

Staff to the Board

FY 2019 Pay Period Metrics PP 1-13

Category/GL	FY 2019 RBP Millions \$	PP Target July-Dec PP 14-26	PP Target Jan-June PP 1-13	Check	FY 2019 Actuals	Difference
Merit Salary (500000, 500050, 500080)	\$70.37	\$2,706,594	\$2,706,594	\$70,371,431	\$69,074,458	1,296,973
Non-Merit Salary (500090)	\$5.95	\$228,864	\$228,864	\$5,950,457	\$7,208,637	(1,258,180)
Shift (500100)	\$0.22	\$8,323	\$8,323	\$216,400	\$207,975	8,425
OT (500110)	\$1.12	\$43,252	\$43,252	\$1,124,557	\$1,643,688	(519,131)
Stipends (500140)	\$0.31	\$11,833	\$11,833	\$307,650	\$316,247	(8,597)
Leave Pay-Out (500150)	\$0.60	\$23,077	\$23,077	\$600,000	\$601,742	(1,742)
Fringe (501000)	\$35.00	\$1,313,143	\$1,378,800	\$34,995,248	\$33,560,111	1,435,137
TOTAL	\$113.57	\$4,335,085	\$4,400,742	\$113,565,743	\$112,612,858	952,885

Summary

* As of PP11, CSB had 105 vacant general merit positions, 5 above the VBP of 100.

Actual Data	PP 26 (Repeat)	PP 1 Actual	PP 2 Actual	PP 3 Actual	PP 4 Actual	PP 5 Actual	PP 6 Actual	PP 7 Actual	PP 8 Actual	PP 9 Actual	PP 10 Actual	PP 11 Actual	PP 12 Actual	PP 13 Actual	PP 14 Accrual	YTD
Merit Salary (500000, 500050, 500080)	\$2,629,373	\$2,695,582	\$2,625,242	\$2,668,695	\$2,666,329	\$2,688,711	\$2,686,823	\$2,698,140	\$2,792,263	\$2,719,654	\$2,766,332	\$2,727,506	\$2,594,347	\$2,733,058	\$1,360,313	\$69,074,458
Non-Merit Salary (500090)	\$287,745	\$205,220	\$276,699	\$272,547	\$285,278	\$264,649	\$303,003	\$290,036	\$277,975	\$293,858	\$303,049	\$293,208	\$278,662	\$294,319	\$151,525	\$7,208,637
Shift (500100)	\$7,979	\$7,138	\$8,189	\$7,869	\$8,142	\$7,876	\$8,264	\$8,256	\$8,088	\$7,790	\$8,195	\$8,079	\$7,583	\$7,770	\$4,096	\$207,975
OT (500110)	\$51,110	\$129,582	\$51,790	\$82,265	\$54,308	\$121,942	\$55,472	\$57,335	\$61,529	\$61,507	\$59,425	\$71,849	\$87,985	\$61,949	\$29,713	\$1,643,688
Stipends (500140)	\$14,323	\$14,446	\$16,338	\$12,438	\$12,320	\$12,720	\$12,378	\$12,579	\$12,695	\$14,807	\$14,373	\$14,258	\$12,150	\$11,875	\$7,187	\$316,247
Leave Pay-Out (500150)	\$4,601	\$57,378	\$46,999	\$14,971	\$21,239	\$38,059	\$13,891	\$4,568	\$40,624	\$9,114	\$1,158	\$1,139	\$647	\$23,926	\$579	\$601,742
Fringe (501000)	\$1,335,909	\$1,317,009	\$1,272,249	\$1,295,573	\$1,300,338	\$1,323,967	\$1,301,015	\$1,305,467	\$1,347,040	\$1,313,802	\$1,336,012	\$1,311,407	\$1,363,231	\$1,311,764	\$654,746	\$33,560,111
TOTAL	\$4,331,039	\$4,426,355	\$4,297,506	\$4,354,358	\$4,347,953	\$4,457,923	\$4,380,846	\$4,376,380	\$4,540,213	\$4,420,532	\$4,488,545	\$4,427,446	\$4,344,605	\$4,444,662	\$2,208,158	\$112,612,858

FY 2019 Pay Period Metrics PP 14-26

Category/GL	FY 2019 ABP Millions \$	PP Target July-Dec PP 14-26	PP Target Jan-June PP 1-13	Check
Merit Salary (500000, 500050, 500090)	\$70.37	\$2,706,594	\$2,706,594	\$70,371,431
Non-Merit Salary (500090)	\$5.95	\$228,864	\$228,864	\$5,950,457
Shift (500100)	\$0.22	\$8,323	\$8,323	\$216,400
OT (500110)	\$1.12	\$43,252	\$43,252	\$1,124,557
Stipends (500140)	\$0.31	\$11,833	\$11,833	\$307,650
Leave Pay-Out (500150)	\$0.60	\$23,077	\$23,077	\$600,000
Fringe (501000)	\$35.00	\$1,313,143	\$1,378,800	\$34,995,248
TOTAL	\$113.57	\$4,335,085	\$4,400,742	\$113,565,743

Summary

* As of PP26, CSB had 141 vacant general merit positions, 41 above the VBP of 100.

Actual Data	FY 2018 Accrual Reversal	PP 14 Actual	PP 15 Actual	PP 16 Actual	PP 17 Actual	PP 18 Actual	PP 19 Actual	PP 20 Actual	PP 21 Actual	PP 22 Actual	PP 23 Actual	PP 24 Actual	PP 25 Actual	PP 26 Actual	YTD
Merit Salary (500000, 500050, 500090)	(\$1,281,881)	\$2,536,913	\$2,562,050	\$2,688,001	\$2,630,989	\$2,618,127	\$2,617,999	\$2,593,861	\$2,604,902	\$2,592,784	\$2,607,988	\$2,653,001	\$2,631,107	\$2,629,373	\$32,685,215
Non-Merit Salary (500090)	(\$135,237)	\$271,860	\$266,171	\$270,174	\$274,801	\$270,946	\$264,663	\$278,516	\$274,272	\$281,437	\$284,271	\$241,153	\$290,450	\$287,745	\$3,421,223
Shift (500100)	(\$4,142)	\$8,334	\$8,098	\$8,937	\$7,965	\$7,917	\$7,944	\$8,159	\$7,867	\$8,513	\$8,077	\$7,249	\$7,742	\$7,979	\$100,639
OT (500110)	(\$31,210)	\$65,493	\$35,199	\$37,194	\$34,860	\$36,457	\$53,035	\$30,545	\$66,201	\$38,500	\$40,735	\$146,007	\$52,912	\$51,110	\$657,038
Stipends (500140)	(\$4,200)	\$9,273	\$10,573	\$8,880	\$8,912	\$10,669	\$9,345	\$8,776	\$13,041	\$10,904	\$11,019	\$11,922	\$12,400	\$14,323	\$135,836
Leave Pay-Out (500150)	(\$25,330)	\$23,356	\$3,243	\$13,499	\$32,517	\$50,304	\$56,334	\$101,752	\$30,393	\$3,449	\$3,583	\$19,348	\$10,402	\$4,601	\$327,449
Fringe (501000)	(\$596,811)	\$1,238,786	\$1,229,633	\$1,326,682	\$1,257,455	\$1,249,714	\$1,257,604	\$1,246,336	\$1,251,214	\$1,236,363	\$1,242,692	\$1,287,893	\$1,253,370	\$1,335,909	\$15,816,841
TOTAL	(\$2,078,810)	\$4,154,015	\$4,114,966	\$4,353,367	\$4,247,499	\$4,244,133	\$4,266,925	\$4,267,945	\$4,247,891	\$4,171,950	\$4,198,366	\$4,366,574	\$4,258,382	\$4,331,039	\$53,144,241

Fairfax-Falls Church Community Services Board
Fund 40040
FY 2019 June Fund Statement

	FY 2019 Revised Budget	FY 2019 Actuals	Variance from Budget	FY 2020 Approved Budget
Beginning Balance	28,731,168	28,731,168		25,661,360
F Fairfax City	1,798,517	1,798,516	(1)	1,957,610
F Falls Church City	815,189	815,190	1	887,299
F State DBHDS	11,886,443	10,445,154	(1,441,289)	11,886,443
F Federal Pass Thru SAPT Block Grant	4,053,659	4,197,558	143,899	4,053,659
V Direct Federal Food Stamps	154,982	145,635	(9,347)	154,982
V Program/Client Fees	4,011,751	3,912,168	(99,583)	4,011,751
V CSA	858,673	924,466	65,793	858,673
V Medicaid Option	8,537,500	4,783,111	(3,754,389)	8,537,500
V Medicaid Waiver	2,371,024	6,697,485	4,326,461	2,651,345
V Miscellaneous	14,100	197,913	183,813	14,100
Non-County Revenue	34,501,838	33,917,196	(584,642)	35,013,362
General Fund Transfer	135,334,383	135,334,383		146,575,985
Total Revenue	198,567,389	197,982,747	-584,642	207,250,707
Compensation	78,570,495	79,052,747	(482,252)	82,973,087
Fringe Benefits	34,995,248	33,560,111	1,435,137	37,075,699
Operating	66,958,015	56,661,667	10,296,348	71,052,301
Recovered Cost (WPF0)	-1,738,980	-1,992,972	253,992	(1,738,980)
Capital	417,027	39,834	377,193	291,855
Transfer Out-	5,000,000	5,000,000	-	-
Capital Project HS000038				
Total Expenditures	184,201,805	172,321,387	11,880,418	189,653,962
Ending Balance	14,365,584	25,661,360	11,295,776	17,596,745
ITC Reserve	0	0	0	0
1 DD MW Redesign Reserve	2,500,000	2,500,000	2,500,000	2,500,000
2 Medicaid Replacement Reserve	2,800,000	2,800,000	2,800,000	2,800,000
3 Opioid Epidemic MAT Reserve	300,000	300,000	300,000	300,000
4 Diversion First Reserve	1,244,245	1,244,245	1,244,245	1,244,245
5 Encumbered Reserve	6,381,985	8,082,172	8,082,172	
Unreserved Balance	1,139,354	10,734,943	-3,630,641	10,752,500

Key

- F Fixed Annual Allocations
- V Variable Revenue based on number of services provided and total billing collections

Reserve

- 1 The DD Medicaid Waiver Redesign Reserve ensures the County has sufficient funding to provide services to individuals with developmental disabilities in the event of greater than anticipated costs due to the Medicaid Waiver Redesign effective July 1, 2016.
- 2 The Medicaid Replacement Reserve, for the implementation of Medicaid Expansion to a potential 600 consumers and will provide support with the transition of funding from the State support to Medicaid fees.
- 3 The Opioid Use Epidemic Reserve provides flexibility, consistent with the Board of Supervisors' FY 2018-FY 2019 Budget Guidance, as the County continues to work with national, state, and regional partners on strategies to combat the opioid epidemic.
- 4 The Diversion First Reserve represents one-time savings that were realized in FY 2017 as a result of longer than anticipated recruitment times to fill new positions and savings in operating expenses. This funding will be reallocated as part of a future budget process based on priorities identified by the Board of Supervisors.
- 5 Encumbered Reserve Request \$8.1m included with the FY 2019 Carryover Review

FY 2019 Fiscal Notes

Revenue

-\$0.6m FY 2019 Actual

The FY 2019 Actual includes a partial year state revenue reduction for Medicaid replacement fees; the FY 2018 back billing of held services and FY 2019 annualized COLA

Compensation & Fringe

\$0.95m FY 2019 Actual

The FY 2019 Actual takes into consideration payroll actuals; yearend accruals; the above average leave payouts; position changes, including ITC and DAHS realignment; the current position vacancy rate and current CSB employment initiatives.

Operating

\$10.9m FY 2019 Actual

The FY 2019 Actual takes into consideration operating actuals; yearend accruals; onetime annual expenditures; increased contract expenditures for new awards, expanded services, and contract rate increases; and operating expenditure changes due to the ITC and DAHS realignment; active and delayed renovations; onetime purchases and increased recovered cost from grants; *specifically, the High Intensity Drug Trafficking Area (HIDTA) and Regional grants for administrative support.*

Revised Fund Balance \$25,661,360 or a reduction of 10.6%

FY 2020 Adopted Budget – Board Hearing, May 7, 2019

An overview of the FY2020 Adopted Budget action items:

- The Board of Supervisors approved the following employee pay increases: 2.1% Market Rate Adjustment; 2% (average) Performance Increase and Longevity increases.
- \$2.5m for June 2019 special education graduates and other individuals eligible for DD employment and day services.
- \$2.1m to continue addressing the opioid epidemic.
- \$1.2m for 6.0 full time merit positions to expand Diversion First efforts, this includes 2.0 Crisis Intervention Specialists and 4.0 Jail Diversion positions.
- \$0.9m in contract rate adjustments
- \$0.6m for 5.0 full time merit positions to provide support coordination services for new individuals receiving a DD waiver.

FY 2019 Third Quarter Review – Board Hearing, April 30, 2019

Revenue

-\$1.65m Revenue Adjustments

Net revenue adjustments for DBHDS State revenue reduction, due to anticipated Medicaid replacement funds; annualized FY 2018 State COLA; grant setup; and fees adjustments considering back billing, anticipated increased Medicaid and other minor adjustments, such as, CSA, food stamps and client fees.

Operating

~~\$0.6m~~ Non-Recurring funding adjustment, moving funds to CSB Capital Projects to address Crossroads facilities repairs. [Adopted Third Quarter Note: the request for an adjustment to Operating was held until Carryover to allow for additional review of the facilities needs for Crossroads.](#)

FY 2018 Adopted Carryover Actions - Board Hearing, Sept 24, 2018

\$7.5m unappropriated reserves -

\$2.5m DD Medicaid Waiver Redesign

\$2.8m Medicaid Replacement Fee to address the transition of revenue from the State to Medicaid.

\$0.3m Opioid Epidemic / Medication Assistive Treatment for evaluation and performance measure analysis, as indicated in the Opioid Task Force Plan.

\$1.9m Diversion First as indicated in the Diversion First Plan.

\$6.5m appropriated funds for special projects -

\$1.5m Opioid Use Epidemic, request to reserve funds for continue contracted services for medical detoxification and residential treatment.

DMB will present this item as part of the Third Quarter Review. This will allow time to determine the full need and give the department spending flexibility without being tied to a fixed amount.

\$5m Building Improvement requests for the Springfield move; Merrifield; and the Boys Probation House renovations intended for use by the Woodburn Crisis Care Program.

Approved - \$5m was “transferred out” to the Capital Project Fund 30010, in Project HS000038 CSB Facilities Improvements. This secures the funds in a designated project for specific use for CSB capital improvements.

\$6.4m Encumbered Carryover -

Funds giving flexibility in FY 2019 for unidentified or unanticipated service requirements

FY 2019 Adopted Budget

CSB Central Administration

Category	FY 2017 Actual	FY 2018 Adopted	FY 2018 Revised	FY 2019 Advertised	FY 2019 Adopted
FUNDING					
Expenditures:					
Personnel Services	\$23,585,142	\$24,314,023	\$25,294,023	\$27,465,341	\$27,465,341
Operating Expenses	10,442,434	9,807,589	14,174,802	11,009,464	11,009,464
Subtotal	\$34,027,576	\$34,121,612	\$39,468,825	\$38,474,805	\$38,474,805
Less:					
Recovered Costs	(\$184,595)	(\$164,062)	(\$164,062)	(\$134,062)	(\$134,062)
Total Expenditures	\$33,842,981	\$33,957,550	\$39,304,763	\$38,340,743	\$38,340,743
AUTHORIZED POSITIONS/FULL-TIME EQUIVALENT (FTE)					
Regular	165 / 164.5	165 / 164.5	177 / 176.5	193 / 192.5	216 / 215.5

\$3.6m employee compensation for 2.25% market rate adjustment and performance-based and longevity increases. Includes \$0.5m for projected fringe benefit rate increases, effective January 1, 2019.

\$3.4m for Health and Human Services realignment, as part of the FY 2016 Lines of Business, Phase 2 process moving 39/39.0 FTE position and associated operating from Department of Administration for Human Services to CSB. (\$3.1m personnel, \$0.3 operating)

\$1.2m Opioid Use Epidemic as outlined in the Opioid Task Force Plan. (\$1.1 personnel, \$0.1m operating)

\$1.1m Diversion First funding as outlined in the multi-year plan for diversion activities and includes 8/8.0 FTE positions and associated operating expenses. (\$1.1 personnel, \$0.2m operating)



\$1.1m contract rate adjustments

\$1m Support Coordination for 14/14.0 positions for continued support of the DOJ settlement and Virginia's Medicaid expansion.



-\$8.3m Infant and Toddler Connection realignment, as part of the FY 2016 Lines of Business, Phase 2. Merging the services with the Dept of Family Services, Office for Children for improved service delivery and resources for families. Position count is reduced by 41/41.0 FTEs. (-\$4.9m personnel, -\$3.5m operating)








Fairfax-Falls Church Community Services Board
Office of Finance
Project Status Report

Revenue Maximization (Non-Billable) Project	Period reporting as at date:	7/15/2019
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Overall Status	
Status	Trend
	

OVERALL STATUS SUMMARY
Meeting kick-off occurred on Thursday, April 4. Finance, Bus Ops, UM, Informatics, Compliance, Credentialing and Clinical were represented. Project plan was reviewed and pending items were discussed with the agreement to provide status update at the next status meeting scheduled for Tuesday, April 9.

KEY MILESTONES/DELIVERABLES	Due Date	Status	SUMMARY STATUS - corrective actions to be taken / planned, or decisions to be escalated
1 Credentialing/Training Confirmation Process	6/25/2019		Michelle, May, Camille and Jessica met with Joan Rodgers in May to talk about a process for ensuring staff are appropriately documenting their credentials and proof of such. Draft process was created and submitted to leadership for review. Follow-up meeting with key parties pending to review revised process.
2 LMHP-Type Billing	6/25/2019		Psychiatric services being provided by LMHP-type professionals are not reimbursable. These services are billable under appropriately credentialed staff. Supervision must be documented in order to bill, and billing must occur under the supervisor's NPI. Currently, Credible does not allow for this and what is needed is an automatic/system solution to move forward. Informatics has committed to a system solution to address - ETA end of FY20 Q1. Additionally, we have consulted with legal counsel and have the green-light to begin back-billing for services to receive reduced billing rates for services provided by LMHP-types.

KEY ACHIEVEMENTS / HIGHLIGHTS SINCE LAST PERIOD	Status	KEY UPCOMING DELIVERABLES	R (Responsible)
1 Injection Procedures - Compliance confirmed RN/LPN can provide service; regulations were provided		1 Other than "non-billable" adjustment codes analysis	Jessica Burris
2 Services Not Authorized Report provided to leadership		2 Update on overall process for tracking staff credentials/trainings	Lyn Tomlinson
3 Medicaid Expansion Analysis		3 Buy & Bill Conversation Update	Jessica Burris
4 Communication from leadership to staff re: closing credentialing/billing group		4 CM forms used for Non-CM documentation - solution identified?	Camille Jensen
5 Documented and communicated process (in collaboration with Training) for staff to upload external training through Employee U.		5	
6 Confirm effective date of MH CM billing group change to QMHCM only. Non-billable lines ended on May 10; managing exceptions through "Red X" report.		6	
7 Staff Credentialing Updates - period/ongoing as they are identified.		6	

Fairfax-Falls Church CSB Revenue Management Metrics
JUNE 2019

Payer	Current AR	MTD Total Charge	MTD Claims Submitted	MTD Payment	YTD Total Charge	YTD Claims Submitted	YTD Payment	Days in AR	AR > 120	Adjusted Collection Rate	Payer Denial Rate	Avg Reimbursement
Medicaid Managed Care	2,769,259	774,820	455,060	601,449	7,842,903	7,160,032	6,129,524	108	43%	78%	0.1%	\$192
Medicaid	575,211	386,046	374,744	559,218	6,802,017	6,740,947	6,762,017	26	8%	99%	0%	\$321
Medicare	444,215	113,185	812	58,020	868,651	619,178	924,902	156	53%	106%	0%	\$81
Insurance-Participating Provider	302,821	30,852	20,933	12,169	438,233	372,019	89,980	211	63%	21%	0.1%	\$121
Insurance-Out of Network	237,743	32,404	13,622	4,522	406,735	350,970	80,093	179	54%	20%	0%	\$111
CSA	232,754	92,590	-	1,280	1,081,790	-	863,346	66	27%	80%	0%	\$0
Governor Access Plan	138,812	219	-	-	425,893	359,686	-	100	98%	0%	0%	\$0
Self Pay	118,476	1,638,082	-	-	20,905,181	-	-	20	34%	0%	0%	\$0
Other	173,573	9,606	12,478	87,337	140,295	114,205	1,355,070	379	76%	96%	0%	\$101
Total	4,992,863	3,077,805	877,648	1,323,996	38,911,698	15,717,035	16,204,932	39	43%	90%	0.1%	\$221
May-19	4,946,178	3,373,490	1,462,503	1,572,931	35,499,820	14,623,078	14,880,936	43	40%	91%	0.1%	\$204
Industry Standard								30-40	12-25%	95-99%	5-10%	

Assumptions:

FM_02_Budget_vs_Actuals_Pivot_05.01.19.xlsx

Credible Aging report as of 7/11/19

Credible Service and Advanced Ledger report as of 7/12/2019

Current AR, Total Charge, Claims Submitted balances are based on the date when clinicians submit and supervisors approve the service in Credible

Current six payer names under Medicaid Managed Care are highlighted in yellow and prior MCO names have asterisks after the name

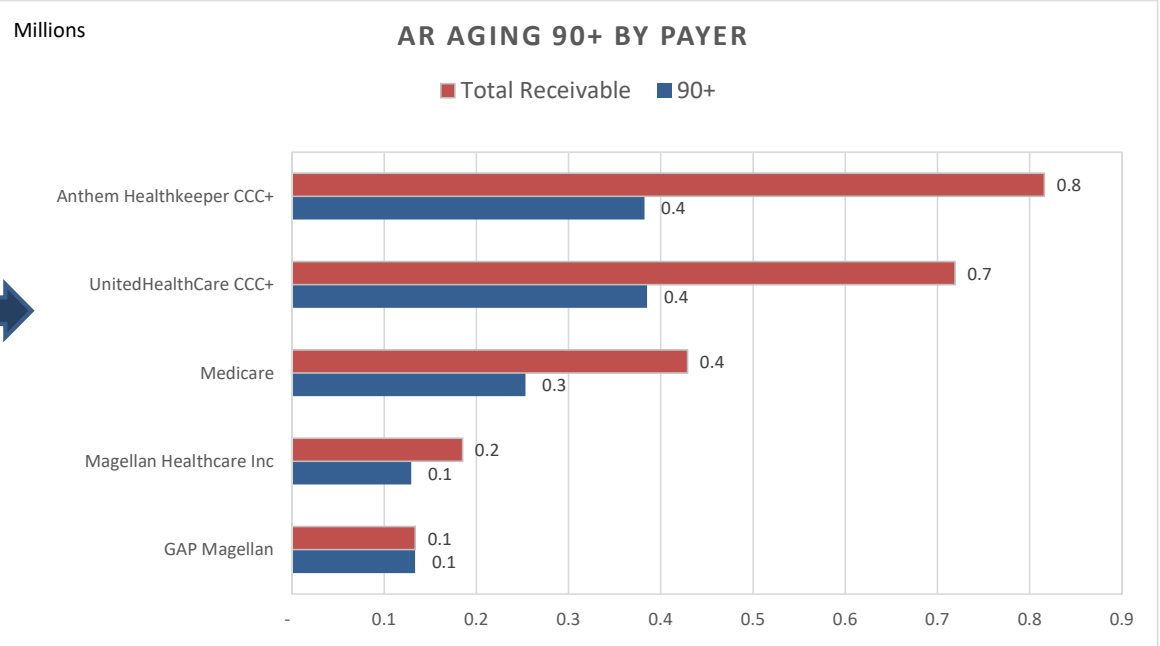
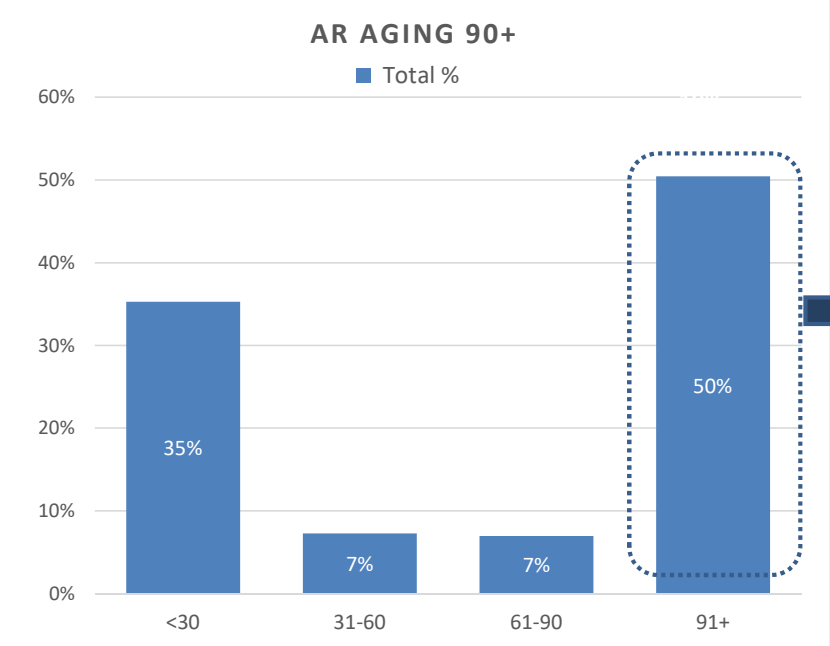
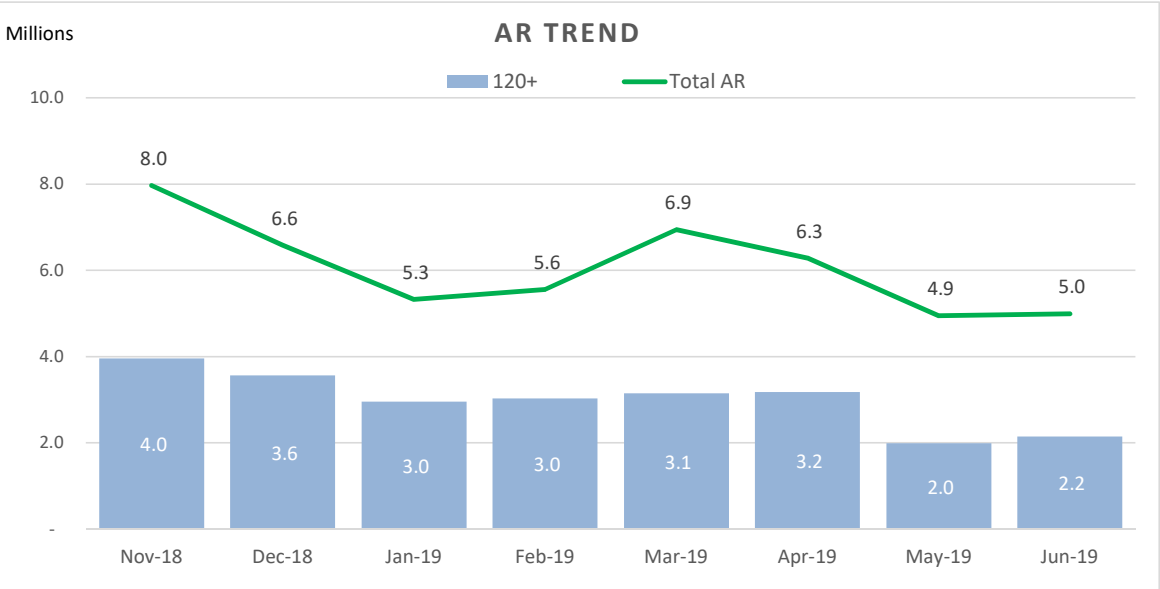
Other includes Blank, Tricare, Nationwide Collections, FAMIS, X and MCCP, Medicare Medicaid Dual Eligible and blanks under Payment report

Days in AR calculation for self pay based on YTD total charge - YTD adjustment

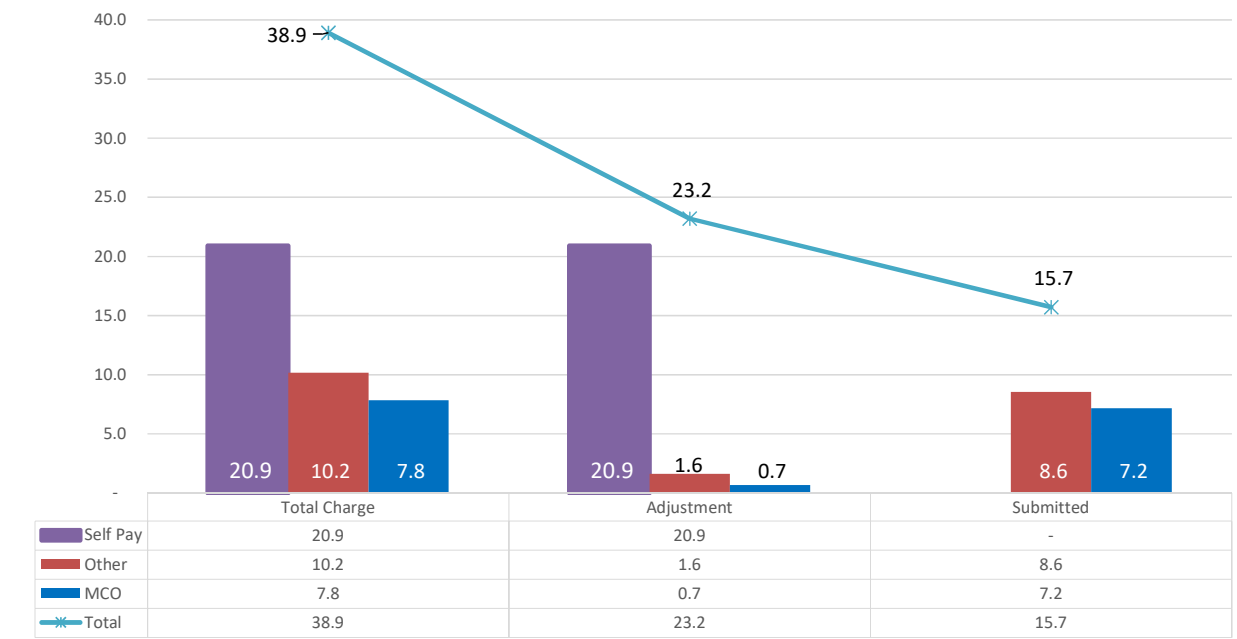
Medicaid Waiver: GL 444020, 444015 with CPT codes H2022, S5161 T1017, T2023, T2024 and 99199

Fairfax-Falls Church CSB
Revenue Management Metrics
Month Ending Jun 2019

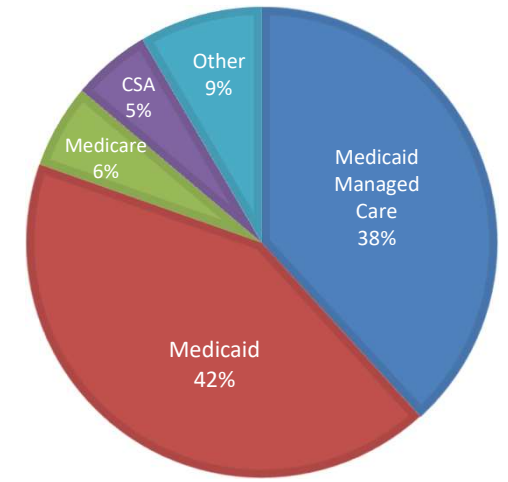
Payer	Jun MTD	MTD Prior Mo	MTD B/(W)
Total AR	\$4,992,863	\$4,946,178	-1%
AR Days	39	43	8%
120+	43%	40%	-3%
Charges	\$3,077,805	\$3,373,490	-9%
Payments	\$1,323,996	\$1,572,931	-16%
Adjusted Collection Rate	90%	91%	-1%
Payer Denial Rate	0.1%	0.1%	0%
Avg Reimbursement Rate	\$221	\$204	8%



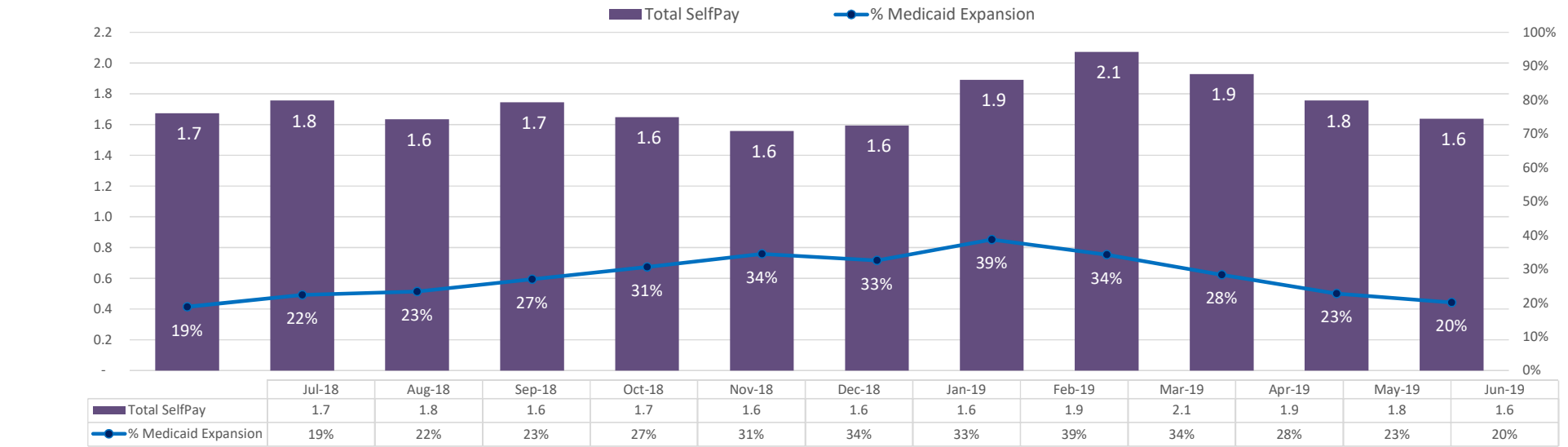
TOTAL CHARGE, ADJUSTMENT & SUBMITTED YTD JUN 2019



PAYMENT BY PAYER YTD JUN 2019



SELF PAY vs. MEDICAID EXPANSION APPROVED INDIVIDUALS YTD JUN 2019



Submission Error	Jun 19 Adj Amt (\$)
NON-BILLABLE	130,140
NO CREDENTIAL FOR BILLING (LMHP-type)	47,795
SVC NOT AUTHORIZED	22,217
CLINICIAN WO REQ	1,280
Total:	201,432
Annualized:	2,417,181

Serv	Service Program	Amt (\$)	Non-Billable Reason	Note
SA Intensive OP Grp		45,403		
	IOPFXMN SU	23,256	Program-ARTS	Decision by leadership to make nonbill
	IOP	11,683	Program-ARTS	Decision by leadership to make nonbill
	IOP RWC SU	10,464	Program-ARTS	Decision by leadership to make nonbill
MH Skill-Build Resi		23,296		
	RIC	23,296	Service not credentialed to bill	
Case Management Resi		15,672		
	RIC	15,346	CM program not credentialed to bill	
	CORNERSTN	327	CM program not credentialed to bill	
MH Skill-Building		8,554		
	SHP	8,554	Service not credentialed to bill	
PhysExamResi NP18-39		8,016		
	SUBOXONE	4,008	Program-ARTS	Decision by leadership to make nonbill
	DETOX MED	2,004	Program-ARTS	Decision by leadership to make nonbill
	DETOX SOC	2,004	Program-ARTS	Decision by leadership to make nonbill

* Source: Credible Service & Adjustment Report Jun 2019

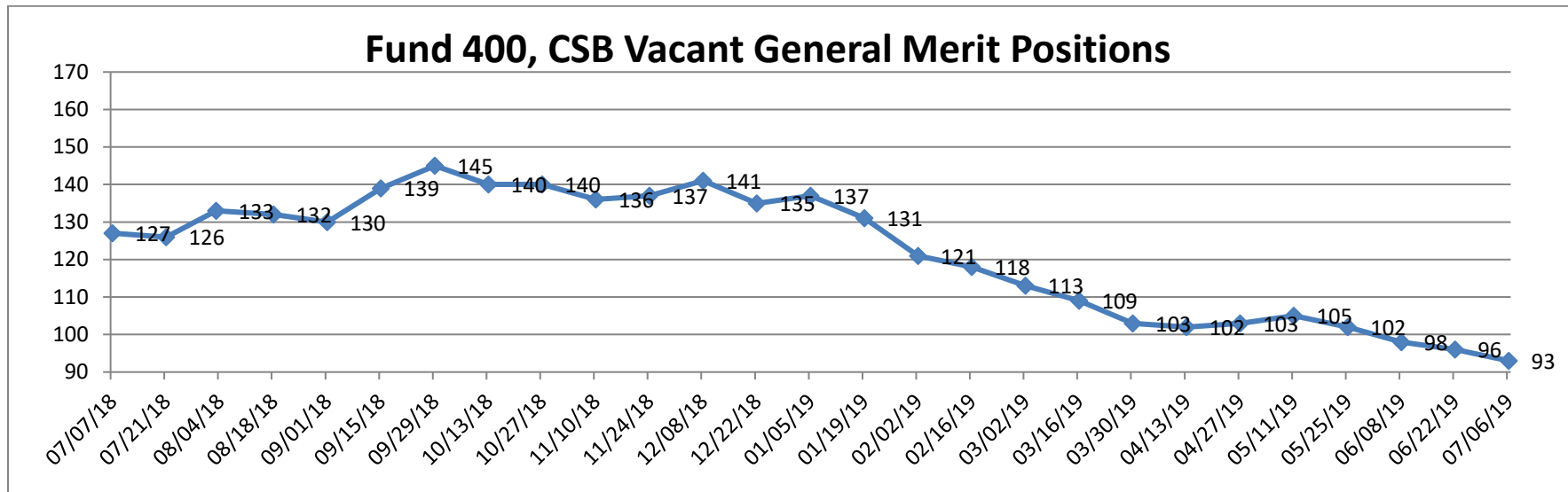
* Adjustment Amounts reflect current month of services and excludes prior month adjustments

FY 2019 Carryover: In Concept

Requesting \$4.55M in carryover

- \$3.6M for building improvements, renovations and repairs
 - \$2.0M for renovations to Pennino third floor
 - The CSB needs to relocate staff from the 7th floor to the 3rd floor in support of the County Executive's strategy to reduce our footprint in leased properties and to accommodate additional DFS staff hired as a result of Medicaid expansion. Costs include disassembling current cubicle walls, reconfiguring space and associated wiring, and purchasing and reassembly of reconfigured cubicle space
 - \$1.6M for renovations to Merrifield
 - The volume of individuals utilizing the ground floor of Merrifield has steadily increased as a result of same-day access (STEP-VA) and Diversion First. These two services (Access and Emergency Services) see some of the highest acuity clients. These renovations will provide more space to accommodate the current demand for services and increase client/staff safety.
- \$0.7M for staffing needs related to revenue maximization
 - HMA is in the process of reviewing the business operations of the CSB as it relates to revenue maximization. This funding will allow the CSB to implement recommendations in FY 2020 with sufficient time to build a business case and return on investment (ROI) for the FY 2021 budget.
- \$0.25M for start-up and implementation of WIN recommendations
 - Funding will be used to support pilot grants to develop 6-8-person group supported employment opportunities. This is an opportunity to test the business case and demonstrate a ROI that spending upfront to develop larger group supported employment opportunities results in greater economies of scale and lower ongoing supported employment costs.
 - Funding will also be used to increase capacity self-directed service (SDS) capacity. SDS cost less person than day support or sheltered employment. This funding will be used in the start-up phase of contracting with more SDS case managers. The funding will be used in the training phase and as case managers develop a caseload. Eventually, the reduced costs from day support and sheltered employment will more the cover the ongoing costs of additional case managers.

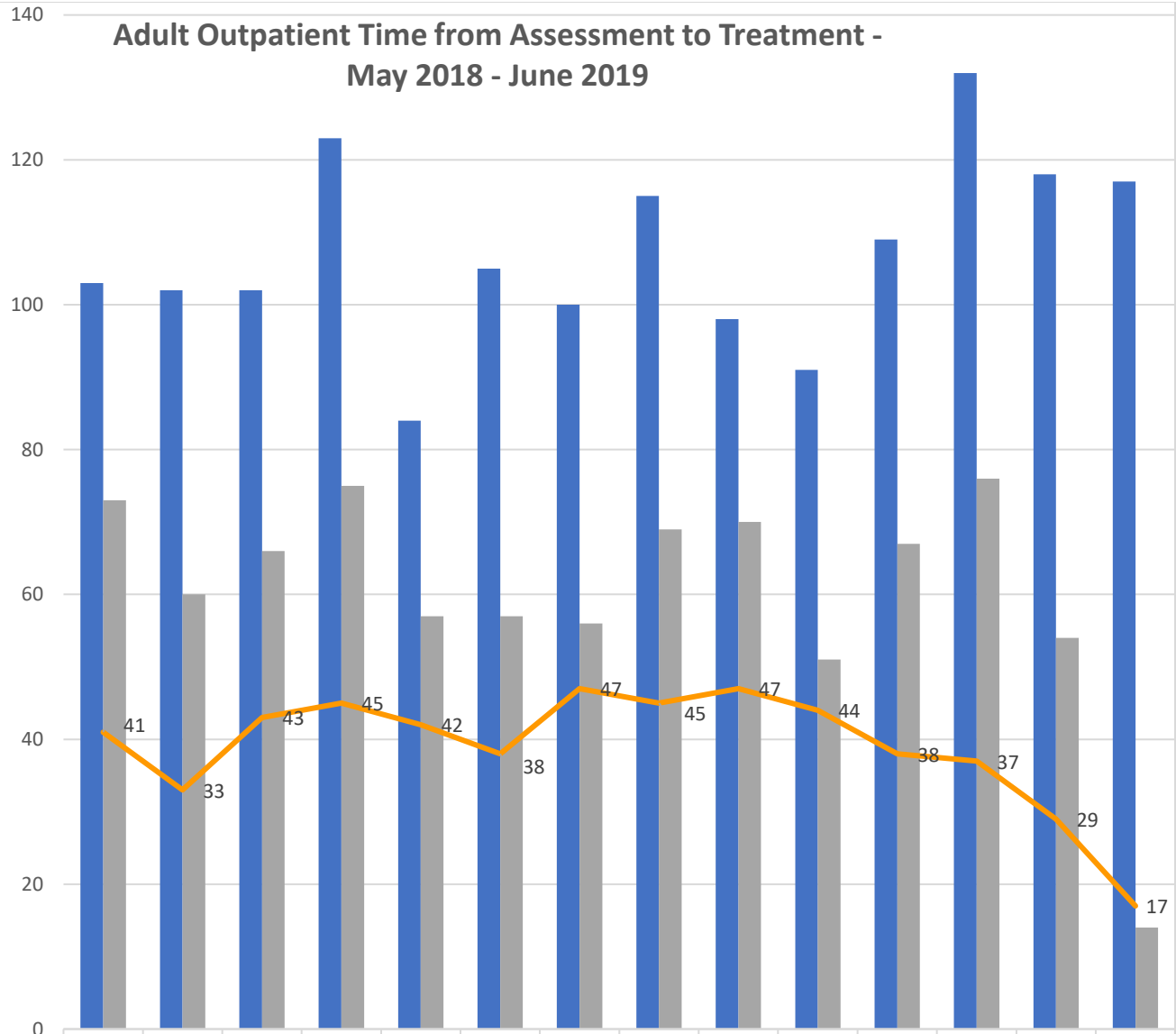
Fiscal Oversight Committee - CSB HR Update
July 19, 2019



Vacancies in critical areas (includes all merit positions (regular and grant))

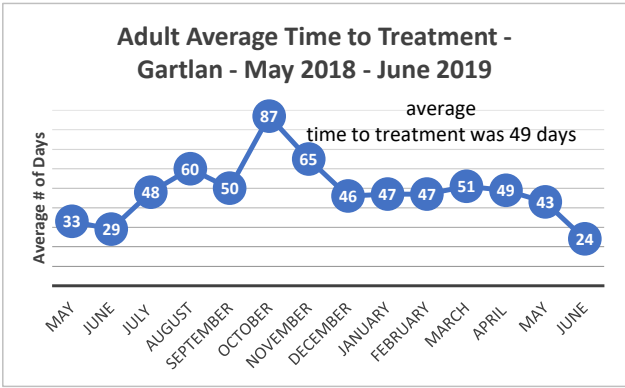
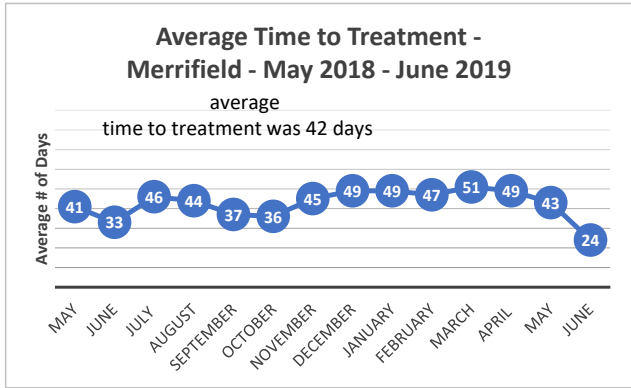
Service area / program	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June		Jul	
Emergency Svcs/MCU	5	5	7	8	7	7	7	7	5	4	5	5	4 CIS 1 BHS I	5	4 CIS 1 BHS I
Behavioral Health OP Svcs	8	5	4	5	5	7	6	5	6	2	2	3	1 BHS II 1 BHS Sup. 1 BH Sr. Clin	4	2 BHS II 1 BHS Sup. 1 BH Sr. Clin
Youth & Family – OP Svcs	8	8	9	9	9	8	8	8	9	9	9	8	7 Sr. Clin 1 BHS II	6	6 Sr. Clin
Support Coordination	21	19	14	15	14	19	20	21	10	11	13	14	5 DDS I 8 DDS II 1 DDS III	13	3 DDS I 9 DDS II 1 DDS III
ADC/ Jail Diversion	5	12	9	12	10	11	11	7	7	3	4	4	4 BHSII	3	3 BHSII
Compliance & Risk Management	9	9	10	10	10	10	10	5	5	4	5	5	Compl. Coord. 4 MA II	5	Compl. Coord. 4 MA II

Adult Outpatient Time from Assessment to Treatment - May 2018 - June 2019



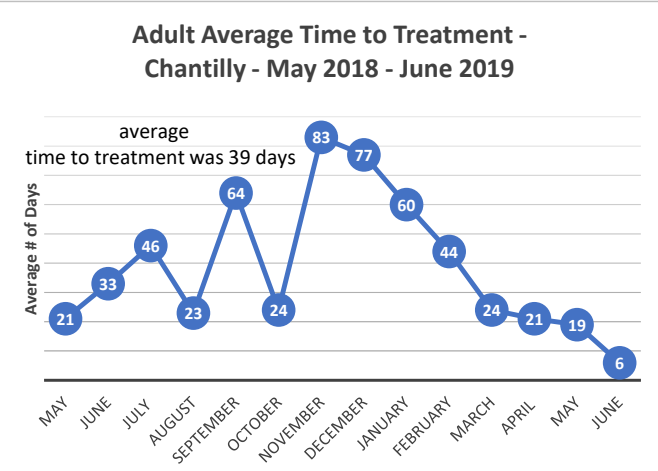
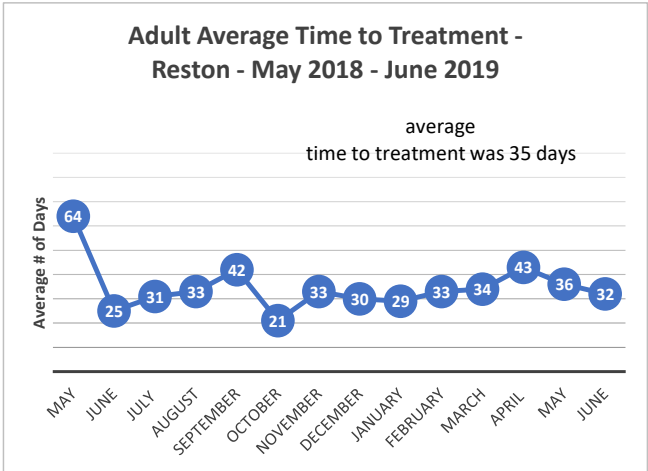
■ # of Adults Assessed for Outpatient Services	103	102	102	123	84	105	100	115	98	91	109	132	118	117
■ # of Adults Who Attended First Treatment Appointment	73	60	66	75	57	57	56	69	70	51	67	76	54	14
— Average # of days from Assessment to Treatment	41	33	43	45	42	38	47	45	47	44	38	37	29	17

Adult Outpatient Time to Treatment - May 2018 - June 2019 by Site



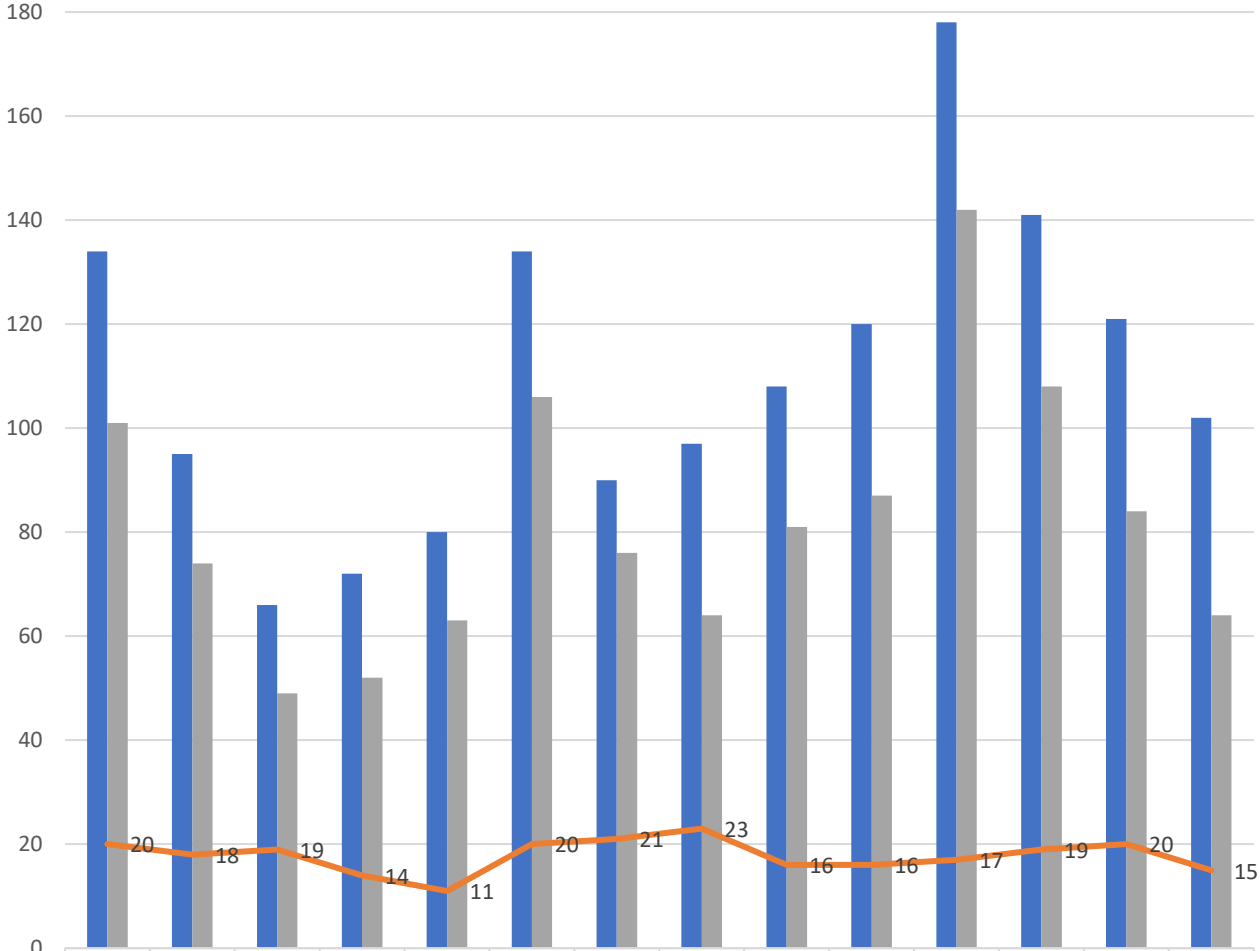
Notes

- * Typically, higher staff vacancies are correlated with increased time to treatment
- * There is a time lag in the reporting dates to allow for the initial appointment to be completed and entered into Credible.
- * The average calculations are based on a 90 day window to begin treatment services.
- * Time to treatment measured in calendar days.
- * Engagement and Outreach activities are provided to individuals while waiting for treatment to begin.
- * In Nov. 2018, a streamlined assessment form was implemented for all new adult assessments.



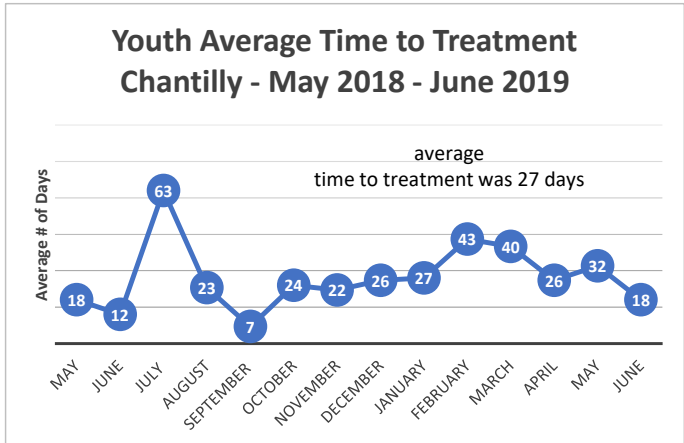
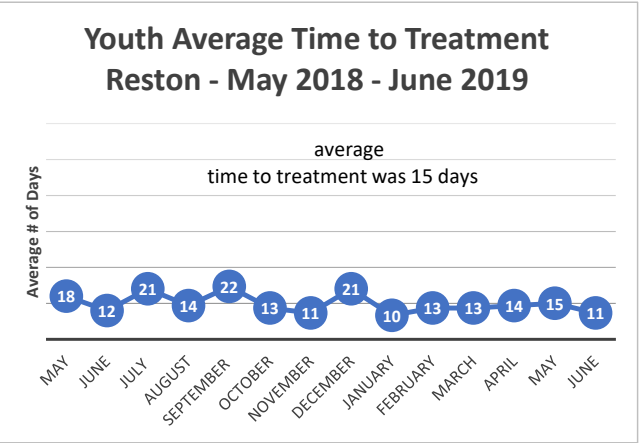
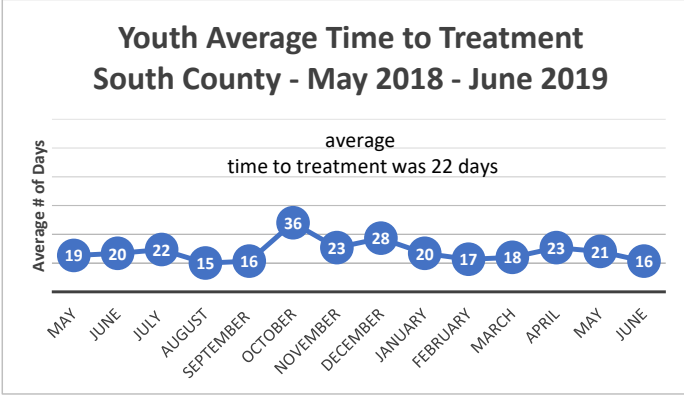
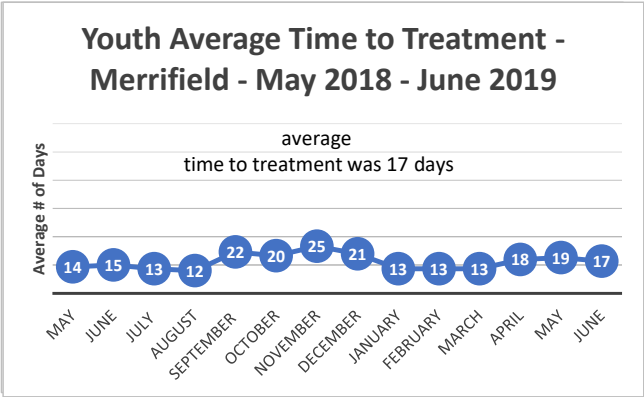
Data Source: Credible Report 1878 - Adult Time to Treatment - May 1, 2019 - July 15, 2019

Youth Outpatient Time from Assessment to Treatment May 2018 - June 2019



■ # of Youth Assessed for Outpatient Services	134	95	66	72	80	134	90	97	108	120	178	141	121	102
■ # of Youth Who Attended First Treatment Appointment	101	74	49	52	63	106	76	64	81	87	142	108	84	64
— Average # of Days from Assessment to Treatment	20	18	19	14	11	20	21	23	16	16	17	19	20	15

Youth Outpatient Time to Treatment - May 2018 - June 2019 by Site



- Notes**
- * Typically, higher staff vacancies are correlated with increased time to treatment.
 - * There is a time lag in the reporting dates to allow for the initial appointment to be completed and entered into Credible.
 - * The average calculations are based on a 90 day window to begin treatment services.
 - * Business process changes to decrease time to treatment were put in place in May 2018.
 - * Time to treatment measured in calendar days.
 - * Youth data includes Centralized and Site-based assessments combined. Average is calculated based on Treatment Site.
 - * In Nov. 2018, a streamlined assessment form was implemented for all new youth assessments.

Data Source: Credible Report 1780 - Youth Time to Treatment May 1, 2018 - July 15, 2019