

MINUTES

Community Mental Health Center Services Financial Workgroup

May 12, 2020
8:30 am- 10:30 am
Teleconference/Skype for Business

In Attendance

Michelle Carpenter, Linda Reidt Kilber, Terry Dosch, Tiffany Wolfgang, Stacy Bruels, Steven Gordon, Michelle Spies, Laurie Mikkonen, Laura Schaeffer, Sarah Burt, Phyllis Meiners, Doug Dix, Lindsey McCarthy

Not Present:

Welcome and Introductions

- Tiffany Wolfgang welcomed the group.

Review and Finalize April 15, 2020 Minutes

- The April 15, 2020 minutes were reviewed. Terry Dosch made a motion to approve. Linda Reidt Kilber seconded the motion. Minutes were approved.

Review CARE, IMPACT, CYF, and Outpatient

- Tiffany Wolfgang discussed duplication was a misleading term as the workgroup was attempting to capture the increase expectations in service delivery as Evidence-Based Practices (EBPs) were implemented. The costs and modeled rate are beginning to capture those costs in the model. The workgroup confirmed that the modeled rate of 75.26 would have CPI-U inflation applied through whatever year funding would be requested. There was a commitment that if the CARE service delivery changes significantly that the Division would work with agencies on impact to rates. With that, the workgroup approved the CARE model.
- Tiffany Wolfgang discussed meeting with all IMPACT providers, and that there was a general consensus that the IMPACT modeled rate was coming in lower than the current rate paid. There was discussion that if the modeled rate is implemented that the Department would recommend past historic precedence be followed and

providers would be held harmless. There was concern raised over the smaller and potential newer IMPACT providers being able to sustain IMPACT. DSS discussed that we are having ongoing conversations with Capital Area to ensure viability. It has been standard practice for new programs to ensure coverage of costs until stable. With that assurance, the workgroup approved the IMPACT model.

- Laurie Mikkonen provided an overview of the CYF individual model. Providers' costs were more consistent from the cost report. The workgroup agreed and approved the CYF individual model with one standard deviation of providers excluded.
- Laurie Mikkonen also provided an overview of the CYF group model. The modeled rate is approximately twice as high as the current rate. Feedback was sought if this was in alignment with providers' experiences. There was concern that not all providers were listed as well as the variance in the documented costs on the cost report. DSS will follow up to verify all providers are included that provide CYF group as well as follow up to confirm costs. Additional discussion around the challenges of providing group services in rural and frontier areas.
- The outpatient individual and group models were also reviewed. The individual modeled rate is in close alignment with current rates; however, it was noted there were significant differences in documented costs. There was general consensus that the model was accurate; however, DSS will follow up with providers to confirm costs and clarify if the difference is in relation to credentials of staff. The group model included one standard deviation which excluded Capital Area as well as a second model that excluded Capital Area first, and then one standard deviation. This was the result of Capital Area's costs being significantly outside of the standard. There was also general consensus that the workgroup would likely move forward with the model; however, DSS will follow up with providers to ensure all are included that provide group services as well as to confirm documented costs.

Next Steps

- DSS will confirm all providers are included and follow up with identified providers as part of the CYF group, Outpatient Individual, and Outpatient Group models.
- The next workgroup meeting will be held May 27th with the goal of finalizing these last three models.

Public Comment

- Laurie Mikkonen asked for any public comment. Being none, the meeting was adjourned.