

MINUTES

Community Mental Health Center Services Financial Workgroup

May 27, 2020
8:30 am- 10:00 am
Teleconference/Zoom

In Attendance

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

Not Present: Phyllis Meiners, Doug Dix

Welcome and Introductions

- Laurie Mikkonen welcomed the group.

Review and Finalize May 12, 2020 Minutes

- The May 12, 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

- Laurie Mikkonen reviewed the models that have been reviewed and approved including CARE, IMPACT, and CYF Individual. Laurie noted the duplication percentage was removed from the final spreadsheets but that does not impact the recommended rate.
- CYF Group rate- Laurie reviewed the group model summary spreadsheet. The model excludes Lewis and Clark Behavioral Health Services (LCBHS) as they are outside of one standard deviation. In 2018, Lewis and Clark's cost was significantly higher than their prior year as well as other Centers. Finance staff reached out to LCBHS and the response was staff turnover and reduced referrals resulted in the elevated cost per unit. The additional follow-up was with Capital Area Counseling Services (CACS) as their rate was significantly lower. CACS verified their rate was low and the cost report information was accurate. The remaining outstanding question was why Dakota Counseling Institute (DCI) and East Central Behavioral Health (ECBH), now

doing business as Brookings Behavioral Health and Wellness were not reflected in the cost report information. DCI reported 23 units and ECBH reported 7 units so because the volume was so small, they did not report anything on the cost report. Similarly, Terry Dosh asked why Southern Plains Behavioral Health Services (SPBHS) and Three Rivers Mental Health Center (TRMHC) are not included and Lindsey with SPBHS reported they did not provide group services during the reporting period. Neither did TRMHC. Michelle Carpenter from DCI verified they don't have referrals to CYF group service. Laurie Mikkonen asked for input on the model. Terry Dosh asked if CACS falls within one standard deviation. Laurie Mikkonen explained that with the Lewis and Clark spread, it would support CACS to be included. Linda commented that she supports the modeled rate as outlined at \$19.49. Lindsey also concurred. Terry Dosh added that relying upon this model, minus one standard deviation is consistent with what we have done, and he supports. Group consensus was the modeled group rate was approved.

- Outpatient Individual- Laurie Mikkonen explained the standard model we have been using excludes four providers with the cost per unit at \$31.70. Finance walked through follow-up questions on why Southeastern Behavioral Healthcare (SEBH) rate was so much higher. SEBH response was in 2017 group and individual were not broken out separately. Another follow-up question was to look through the personal costs for each of the agencies. Steven explained that most centers use counselors, therapists, childcare supervisor, clinical supervisor to provide outpatient individual services. Outliers would be using a nurse or psychiatrist (CCS and Lewis and Clark) for outpatient individual services. This information is not necessarily pushing the costs higher. Lindsey reported that they currently are not using nursing staff for outpatient individual. Linda offered that possibly if the psychiatrist was doing a case consultation the hours could have been billed under outpatient. Laurie asked for input on approving the model. All members agreed the modeled rate that excludes the providers that are one standard deviation from the modeled rate is agreeable. Terry also commented he agreed, and the model was fair.
- Outpatient Group- In this area, CACS is an extreme outlier; Laurie walked through a second model that excludes both CACS and SEBH which lowered the modeled rate even more compared to the first model which only excludes CACS. Laurie walked through the support tab in which 7 CMHCs are represented. Lewis and Clark only had 11 units, so there was no cost report information. CACS reported their per unit cost was elevated based on 8 units. Because the units are so low the information is not included. Several CMHCs did not provide the service, so no information is provided on the cost report. Linda asked about CCS's units and if they changed. Steven reported yes, they did change as they had some clarifying questions on where to report certain units. No other cost per units changed as a result of the follow-up. Laurie asked for thoughts about the model rate being lower than the current rate. Linda shared her concern was looking at the model her gut reaction is CACS is too high, but CCS is too low, so it causes concerns. Linda shared that historically the group rate was set at 50% of the individual rate. Linda proposed

staying with the one standard deviation model for consistency sake. Overall, members agreed this is not a high-volume area. Terry supported going with the presented model and to look toward future cost reports to validate. The workgroup discussed holding harmless within the model. Tiffany and Laurie expressed concerns with holding harmless in this area given the low volume and the priority areas of service being psychiatry, CYF, and CARE. Tiffany shared that if holding harmless was an option, it would be considered but if priority had to be given, it would be given in the other areas noted. Terry moved to adopt model, and if Department can hold harmless, we do, but that budget priorities given what they may be that may not be possible. All members supported.

Next Steps

- Finance will compile the final models, post on the website and provide to the workgroup members.
- The annual report will be generated based on the workgroup's recommendations and provided to the Joint Committee on Appropriations during the DSS budget hearing.
- Next rates to be reviewed will include justice involved services with a tentative timeline to start later in the summer.

Public Comment

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