

**COUNTY OF MILWAUKEE**  
**Behavioral Health Division Administration**  
INTER-OFFICE COMMUNICATION

**DATE:** November 18, 2011

**TO:** Supervisor Lee Holloway, Chairman – Milwaukee County Board

**FROM:** Héctor Colón, Acting Director, Department of Health and Human Services  
*Prepared by Paula Lucey, Administrator, Behavioral Health Division*

**SUBJECT:** **Report from the Acting Director, Department of Health and Human Services, Requesting Authorization to Enter Into 2012 Purchase of Service Contracts for the Behavioral Health Division for the Provision of Adult and Child Mental Health Services and Alcohol and Other Drug Abuse (AODA) Services**

**Policy Issue**

Section 46.09 of the Milwaukee County Code of General Ordinances requires County Board approval for the purchase of human services from nongovernmental vendors. Per Section 46.09, the Acting Director of the Department of Health and Human Services (DHHS) is requesting authorization to enter into 2012 purchase of service (POS) contracts with community agencies for the Behavioral Health Division (BHD). Approval of the recommended contract allocations will allow BHD to provide a broad range of rehabilitation and support services to adults with mental illness and/or substance abuse problems and children with serious emotional disturbances.

**Discussion**

**Adult Community Services – Alcohol and Other Drug Abuse Services (AODA)**

<b>Total Adjusted 2011 Contract Allocation:</b>	<b>\$6,191,639</b>
<b>Proposed 2012 Contract Allocation:</b>	<b>\$5,638,501</b>

Contract allocations recommended for 2012 for individual organizations are itemized below and in the attached resolution. Earlier this year, DHHS received notification from the State of Wisconsin that TANF funding would be cut by 10%, or a total of \$493,900, significantly impacting the amount of funds available for voucher treatment and recovery support services in 2012. Additionally, while Access to Recovery (ATR) funding remains in tact and at the highest national award from the Substance Abuse and Mental Health Services Administration (SAMHSA) at \$3,245,069 for 2012, there is a corresponding 63% increase in the number of individuals to be served in 2012 as compared to 2011. BHD continues to receive funding and provide services for three separate SAMHSA grants for just over \$1 million. BHD also continues to receive a smaller prisoner re-entry grant from the State that will continue through June

2012. All told, BHD has secured more than \$8 million in competitive grant awards. A portion of all of these grant funds are included in the 2012 contract allocations for Central Intake Unit (CIU) services, training and co-occurring infrastructure development. The remaining grant funds are for administrative expenses, evaluation, and direct treatment and recovery support services through the Wiser Choice voucher network. It is notable, however, that BHD has to serve significantly more individuals with significantly less funding, and as such some alterations to the Purchase of Service, non-voucher based services were necessary.

BHD is obligated to spend a minimum of 5% of the TANF allocation on evaluation. In order to meet this requirement, BHD has a number of contracts in place. BHD will contract with NIATx to support Continuous Quality Improvement initiatives with our many agency vendors, supported in part through ATR funding and TANF funding as well. BHD will also contract with Vital Voices for \$19,936 through TANF evaluation funds to conduct peer-operated consumer satisfaction surveys (increase is denoted in the mental health subsection) as they have throughout 2011. Finally, BHD will contract with the Bridge Health Clinics and Research Centers (The Bridge) to perform process evaluation of the TANF system; \$42,400 of their contract amount is accounted for with TANF funds. This is a significant decrease from the 2011 amount allocated for TANF evaluation services due to the TANF funding cuts instituted by the State. The remainder of the contract allocation to The Bridge of \$69,300 is for the provision of evaluation services for the SAMHSA Treatment for Homeless grant administered by BHD. Included in the TANF evaluation component is collection of National Outcomes Measure (NOMS) data, responsibility for analyzing the data, supervision of data collection and recommending corrective actions based on the results of the evaluation, preparation of reports summarizing program results, and procedures to ensure privacy and confidentiality.

Genesis Behavioral Services Detoxification contract is reduced by \$100,000 consistent with the 2012 Adopted Budget. The American Society of Addiction Medicine Patient Placement Criteria (ASAM PPC) is the authoritative criteria for level of care decisions amongst substance abuse providers, and all certified providers are required by the State to use approved patient placement criteria. BHD has mandated the use of ASAM PPC since 2004. In 2010, ASAM published Supplement on Pharmacotherapies for Alcohol Use Disorders, which updated patient placement criteria for detoxification. The supplement refined the admitting criteria for social detoxification to include consideration of CIWA-Ar scores in the moderate withdrawal range. BHD has been working with Genesis throughout the course of 2011 to restructure the detoxification contract to more closely align with the ASAM PPC by expanding the social detoxification component to reduce expenditures without reducing the number of individuals that can be safely and appropriately served in that setting. These efforts will continue to be maintained and enhanced throughout 2012. Social detoxification provides supportive non-pharmacologic care. Simple interventions such as reassurance, reality orientation, monitoring of signs and symptoms of withdrawal, and general nursing care are effective. In controlled trials, these interventions were sufficient to manage 85% of emergency room patients and 60% of inpatients. However, the use of social detoxification always should include provisions for

back-up medical evaluation and treatment (rescue protocols) for the introduction of pharmacologic therapies as needed.

The Central Intake Unit (CIU) services remain vital to the functioning of the Wiser Choice system, as they serve as the "front door" at which individuals gain entry into the system. M&S Clinical Services continues to serve the general population. Justice 2000 will continue to serve the drug court population. Wisconsin Community Services (WCS) serves the criminal justice population. Included in the WCS purchase of service contract are funds from two grants that fund voucher services for the correctional population. The Prisoner Reentry Initiative 3 (PRI) grant will end on 6/30/12 and the SAMHSA Offender Reentry Program grant will end on 9/30/12. Because of this, and based on a weighted average calculation, the WCS contract is reduced by \$49,326 to a 2012 total of \$258,963 for CIU services. IMPACT will continue to serve the general population and subcontract with United Community Center for the monolingual Spanish speaking population. Because IMPACT is operating two sites, has demonstrated financial need and has a funding disparity with the most comparable CIU, a funding increase of \$30,000 has been added to their CIU contract for a total of \$509,412 in 2012.

BHD recommends continuation of the St. Charles contract to provide additional training coordination that is required under the TANF, ATR and other SAMHSA grants and offset by those grants. The contract amount has been reduced by \$70,214, to a total for 2012 of \$403,126. This decrease is attributed to significantly fewer funds required for a specialized training that was necessary in 2011 to add Recovery Check Up services and decreased funds required for workforce development and training. This change will not impact core services and represents the elimination of some one-time funding allocated to this agency in 2011.

Faith Partnership Network operates a provider resource center for the Wiser Choice system. Although the ATR 3 funding remains in place, BHD received a 21% decrease in funds from the ATR 2 grant to the ATR 3 grant. As such, BHD recommends that the Faith Partnership Network be decreased by 15%, bringing their 2012 allocation to \$68,000.

The State of Wisconsin has put their Intravenous Drug Program out for competitive bid in 2011 and results of this are not yet announced. The RFP was divided into two categories; one for prevention and outreach and the other for treatment services. BHD did not competitively apply for the prevention and outreach funds, affording the previous contract awardee of BHD, AIDS Resource Center of Wisconsin (ARCW) the opportunity to apply competitively on their own. As such, the \$263,957 contract amount previously awarded to ARCW as a pass-through from the State is not included in the 2012 contract amounts.

The State of Wisconsin also put out for bid "Family Centered Treatment Services for Cocaine & Other Substance Use" funding. Meta House, who has historically received this funding but had \$68,800 of pass-through funds from BHD for childcare, is competitively applying for the funds whereas BHD is not. As such, the pass-through funds are not included in the 2012 allocations.

The AODA contract allocations by agency are as follows:

<b>Agency</b>	<b>Adjusted 2011 Contract</b>	<b>Proposed 2012 Contract</b>
AIDS Resource Center	\$263,957	\$0
Bridge Health Clinics/Research	\$130,341	\$111,500
Faith Partnership Network	\$80,000	\$68,000
JFS - Fighting Back	\$753,220	\$753,220
Genesis Behavioral Services	\$2,872,145	\$2,772,145
Guest House	\$130,913	\$130,913
IMPACT	\$479,412	\$509,412
Justice 2000	\$45,000	\$45,000
M&S Clinical Services	\$547,700	\$547,700
Meta House	\$68,800	\$0
NIATx	\$38,522	\$38,522
St. Charles Youth & Family Serv	\$473,340	\$403,126
Wisconsin Community Services	\$308,289	\$258,963
<b>Total AODA POS Contracts</b>	<b>\$6,191,639</b>	<b>\$5,638,501</b>

**Adult Community Services - Mental Health (MH)**

<b>Total 2011 Adjusted Contract Allocation:</b>	<b>\$10,514,725</b>
<b>Proposed 2012 Contract Allocation:</b>	<b>\$10,511,123</b>

Contract allocations recommended for 2012 for individual organizations are itemized below and in the attached resolution. Plans are underway to ensure that 2012 will be a transition year for BHD to convert more purchase of service contracts to fee for service. The federal Substance Abuse and Mental Health Services Administration (SAMHSA) provides Wisconsin with \$26 million and \$7 million in block grants for substance abuse and mental health services respectively. The two block grants ensure a base for community services and foster system transformation. There are reporting requirements under the federal block grant programs and the HSRS mental health and AODA modules contain required data that is reported to SAMHSA. HSRS is a 27 year-old legacy mainframe system using old programming code. The current HSRS can be cumbersome and expensive to change while newer technology promises to be less expensive and more flexible. At the same time, the federal government is encouraging states to develop systems that collect claim-like, encounter-level data. Upgrading outdated HSRS components and permitting encounter-level data is now necessary, and in fact the end of a two-year phase-in period by the State to comply with these changes will arrive in 2012. Fee for service agreements support the collection of encounter level detail that will be required under block grant reporting. In 2010, BHD converted mental health group homes from purchase of service to fee for service. The same number of people continues to

be served through fee for service as were served under purchase of service for mental health group home services and it provides more consumer-driven choice.

BHD is preparing to convert the Outpatient Mental Health contracts to fee for service by the beginning of the third quarter of 2012. Throughout 2011, BHD has been developing the infrastructure and provider network identified in the 2011 Budget for additional outpatient capacity to purchase psychotherapy services for trauma counseling. This will afford BHD the opportunity to revise the structure of the Crisis Walk-In Clinic, enhance services for individuals presenting in need, enhance choices available to consumers in need of outpatient services, and further efforts to integrate the mental health and substance abuse systems. As the program is currently being piloted, there are plans to expand these efforts further in 2012. Additionally, plans are underway to convert all Targeted Case Management and Community Support Program contracts to fee for service within the next two years.

In 2012, the proposed recommended contract allocation for the Medical College of Wisconsin (MCW) is \$1,038,443. This represents a slight decrease in the contract based on the MCW desk review and discussions with the vendor.

The contract recommendation for Our Space is a \$30,000 increase for a total contract award of \$348,162 in 2012. This increase will afford BHD the opportunity to appropriately recognize the contributions of Peer Support staff who have participated in leadership opportunities within the Mental Health Redesign initiative, and also to expand Peer Support Services through the BHD system as part of the Community Investment initiative included in the 2012 Budget.

In 2012, the BHD-operated Targeted Case Management (TCM) program will be outsourced. As indicated in the 2012 Budget, there will be no lay-offs as a result of this initiative and staff will be reassigned elsewhere in the Division. BHD Administration is working on putting together a plan including determining what community agencies will expand their caseloads. BHD plans to bring back a report in January with additional TCM contracts and hopes to have the caseloads moved to the community by March 2012.

Also included in the 2012 Budget is a \$3 million community investment. BHD is starting to work on plans to implement the new initiatives and also working with the Mental Health Redesign Committee to put forward some additional recommendations for community expansion. At this point, BHD is not ready to allocate contract dollars for these items, with the exception of the expanded peer support contract mentioned above. BHD will return to the Board in a future cycle with additional contracts related to this investment.

Recommendations presented herein are all intended to preserve current clinical treatment capacity as delineated in the 2012 Budget.

<b>Agency</b>	<b>Adjusted 2011 Contract</b>	<b>Proposed 2012 Contract</b>
Alternatives to Psychological Consult	\$338,223	\$338,223
ARO Behavioral Health	\$224,112	\$224,112*
Bell Therapy	\$1,564,690	\$1,564,690
Community Advocates	\$180,589	\$180,589
Grand Avenue Club	\$135,000	\$135,000
HealthCare for the Homeless	\$1,443,338	\$1,443,338
Medical College of Wisconsin	\$1,072,045	\$1,038,443
Mental Health America	\$272,300	\$272,300
Milwaukee Mental Health Associates	\$603,506	\$603,506
NAMI	\$30,000	\$30,000
Our Space	\$318,162	\$348,162
Project Access	\$601,855	\$601,855
Transitional Living Services	\$1,922,378	\$1,922,378
Vital Voices	\$130,961	\$130,961
Wisconsin Community Services	\$1,677,566	\$1,677,566
<b>Total MH POS Contracts</b>	<b>\$10,514,725</b>	<b>\$10,511,123</b>

\*ARO Behavioral Health absorbed the contract and services previously provided by Social Rehab & Residential Resources in 2011.

### **Child and Adolescent Community Services**

<b>Total 2011 Contract Allocations:</b>	<b>\$12,223,952</b>
<b>Proposed 2012 Contract Allocations:</b>	<b>\$12,266,723</b>

#### *Overview*

Overall contract allocations for 2012 in BHD's Child and Adolescent Community Services Branch will increase \$42,771 from 2011. 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), FISS (Family Intervention and Support Services), Healthy Transitions Initiative and MUTT (Mobile Urgent Treatment Team). As a special managed care program under Medicaid, all remaining services are purchased on a fee-for-service basis through the Wraparound Milwaukee Provider Network. Individual Purchase of Service contract allocations being recommended are enumerated in the resolution.

#### *Care Coordination Services*

In 2012, BHD desires to purchase regular care coordination services for court-ordered youth from Child Welfare and Juvenile Justice in the Wraparound Milwaukee program from eight agencies recently selected through the 2012 Request for Proposals (RFP) process. Similarly, BHD

will purchase care coordination services for voluntary, non-court involved youth in the REACH program from three agencies selected through the same RFP process.

Care Coordination agencies facilitate the Wraparound care planning teams, help develop the individual treatment plans and arrange, provide and monitor services for children with serious emotional and mental health needs and their families. Screening and assessment services are also provided by three of these recommended agencies.

The total number of slots budgeted in 2012 for the Wraparound and REACH programs is for an average daily enrollment of 956 youth/families with an estimated total of 1,400 families served during the entire year in those two programs.

The eight agencies providing care coordination services, transitional care coordination in the Healthy Transitions Program and screening and assessment for Wraparound and REACH are:

<b>Care Coordination Agency</b>	<b>Service Type</b>	<b>2012 Proposed Contract</b>
Alternatives in Psychological Consultation	Regular Care Coordination	\$ 812,490
My Home, Your Home	Regular Care Coordination	\$ 812,490
Aurora Family Service	Regular Care Coordination	\$ 812,490
Willowglen Community Care	Regular Care Coordination	\$ 812,490
	Screening/Assessment	<u>\$ 140,000</u>
		\$ 952,490
AJA Counseling Center	Regular Care Coordination	\$ 812,490
	REACH	<u>\$ 569,400</u>
		\$ 1,381,890
La Causa, Inc.	Regular Care Coordination	\$ 1,044,630
	REACH	\$ 604,987
	Screening/Assessment – Safe Schools	<u>\$ 290,000</u>
		\$1,939,617
St. Aemilian-Lakeside	Regular Care Coordination	\$ 909,215
	REACH	<u>\$ 604,987</u>
		\$ 1,514,202
St. Charles Youth and Family	Regular Care Coordination	\$ 812,490

Services	Screening/Assessment	\$ 160,000
	Transitional Specialist	<u>\$ 283,828</u>
		\$ 1,256,318
<b>Care Coordination Total:</b>		<b>\$ 9,481,987</b>

*Services Supporting Wraparound Milwaukee*

For 2012, BHD recommends continuing an agreement initiated with the Department of Health Services (DHS) to have the Wisconsin Council on Children and Families provide or arrange for program evaluation, staff training and management information and technical support necessary to maintain our Medicaid Capitation contract with DHS.

BHD also proposes to contract again with Families United of Milwaukee for advocacy and support for families served by Wraparound Milwaukee. Families United was the top ranked agency in the RFP process for 2012. This minority owned and operated agency continues to represent and advocate for families of youth with serious mental and behavioral needs. It also provides educational advocacy to help our youth obtain an Individual Education Plan (IEP), achieve appropriate school placements and reduce unnecessary residential and day treatment services.

Fiscal intermediary services support the purchase of services from relative caregivers for youth, and BHD recommends that this contract be continued in 2012.

<b>Support Services for Wraparound</b>	<b>Service Type</b>	<b>2012 Proposed Contract</b>
Wisconsin Council on Children and Families	Program Evaluation, Training Technical Assistance and IT Support	\$ 607,719
Families United of Milwaukee	Family and Educational Advocacy	\$ 450,000
Milwaukee Center for Independence	Fiscal Intermediary	\$ 25,000
<b>Support Services for Wraparound Total:</b>		<b>\$ 1,082,719</b>

*Mobile Urgent Treatment Services*

For 2012, Wraparound Milwaukee will again operate 24/7 mental health crisis intervention services for all Milwaukee County families. The Mobile Urgent Treatment Team (MUTT) will serve an estimated 1,500 families in 2012. Additionally, the Bureau of Milwaukee Child Welfare will again fund a dedicated MUTT team for foster families (MUTT-FF). The MUTT-FF team has been effective at reducing the incidence of failed foster placements through the provision of 24/7 crisis intervention services to foster parents who are experiencing a mental health or behavioral crisis with a child in their care.



The MUTT-MPS dedicated crisis team was disbanded in June 2011 due to the State reduction in funds available to the Milwaukee Public School system.

To support BHD's professional team of 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 24 hour, seven day per week coverage. St. Charles was the only agency to submit a bid to provide these services for the Milwaukee County MUTT program for 2012.

Additionally, St. Charles is providing some Psychiatrist coverage for the medication clinics and was chosen through the recent RFP process to provide eight crisis group home beds at Haven House for boys placed through the MUTT team and Wraparound Program.

<b>Agency Providing Support Services</b>	<b>Service Type</b>	<b>2012 Proposed Contract</b>
St. Charles Youth and Family Services	Crisis Group Home (Haven House)	\$ 456,000
	Psychiatry Services for Medication Clinics	\$174,720
	Mobile Crisis Services for Community and Foster Care System	\$ 746,297
<b>MUTT Support Services Total:</b>		<b>\$ 1,377,017</b>

*Family Intervention and Support Services (FISS)*

For 2012, the Wisconsin Department of Children and Family Services will continue to contract with BHD to provide an array of case management and mental health services to an average of 60 families in the Family Intervention and Support Services Program (FISS). This program 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 petition. FISS is fully funded by the Bureau of Milwaukee Child Welfare.

St. Charles Youth and Family Services, who received the highest score during the last RFP process is recommended to provide FISS services in 2012.

<b>Agency Providing Support Services</b>	<b>Service Type</b>	<b>2012 Proposed Contract</b>
St. Charles Youth and Family	Early Intervention	\$ 325,000

Services (CHIPS Diversion)  
**FISS Support Services Total: \$ 325,000**

*Summary*

The following are the total contract recommendations for BHD's Child and Adolescent Community Services Branch for 2012 as compared to 2011.

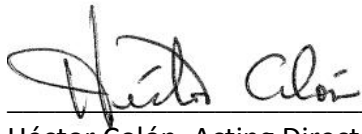
<b>Agency Providing Support Services</b>	<b>Adjusted 2011 Contract</b>	<b>2012 Proposed Contract</b>
AJA Counseling Center	\$ 1,213,260	\$ 1,381,890
Alternatives in Psychological Consultation	\$ 1,074,560	\$ 812,490
Aurora Family Service	\$ 379,600	\$ 812,490
Families United of Milwaukee	\$ 440,990	\$ 450,000
La Causa, Inc.	\$ 1,948,599	\$ 1,939,617
Milwaukee Center for Independence	\$ 25,000	\$ 25,000
My Home, Your Home	\$ 797,160	\$ 812,490
St. Aemilian-Lakeside	\$ 1,573,150	\$ 1,514,202
St. Charles Youth and Family Service	\$ 3,289,154	\$ 2,958,335
Willowglen Community Care	\$ 862,160	\$ 952,490
Wisconsin Council on Children and Families	\$ 620,319	\$ 607,719
<b>Total 2012 Proposed POS Contracts:</b>		<b>\$12,266,723</b>

**Recommendation**

It is recommended that the County Board of Supervisors authorize the Acting Director, DHHS, or his designee, to enter into 2012 purchase-of-service contracts for mental health, AODA, and child and adolescent treatment services with provider agencies for the time period of January 1 through December 31, 2012 (except as otherwise noted) with the contractors listed and in the amounts specified in the attached resolution. Approval of the recommended contract allocations will allow for the provision of identified high priority community-based services for children and adults having serious and persistent mental illness, substance abuse problems, or other emotional needs.

**Fiscal Effect**

The amounts recommended in these contracts have been included in BHD's 2012 Budget. A fiscal note form is attached.

A handwritten signature in black ink, appearing to read "Héctor Colón", written over a horizontal line.

Héctor Colón, Acting Director  
Department of Health and Human Services

cc: County Executive Chris Abele  
Tia Torhorst, County Executive's Office  
Terrence Cooley, County Board  
Patrick Farley, Director, DAS  
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