COUNTY OF MILWAUKEE

INTEROFFICE COMMUNICATION

DATE: August 30, 2013

TO: Supervisor Marina Dimitrijevic, Chairwoman, Milwaukee County Board of

Supervisors

Kerry Mitchell, Director, Department of Human Resources

FROM: Héctor Colón, Director, Department of Health & Human Services

Prepared by: Susan Gadacz, Director, Community Services Branch - Behavioral

Health Division

SUBJECT: From the Director, Department of Health and Human Services, Requesting

Authorization to Create One Position of Fiscal Specialist, One Position of Administrative Coordinator – BHD and One Position of Integrated Services Coordinator for the Community Recovery Services (CRS) Program within the

Adult Community Services Branch at the Behavioral Health Division

<u>Issue</u>

The Director, Department of Health and Human Services (DHHS) is requesting authorization to create one position of Fiscal Specialist, one position of Administrative Coordinator – BH and one position of Integrated Services Coordinator for the Community Recovery Services (CRS) program. In July 2013, the County Board passed a resolution (File #13-517) for Milwaukee County Behavioral Health Division (BHD) to start offer CRS services as of September 1, 2013. As part of the report and this initiative, BHD indicated that new positions must be created to assist with increased workload and start-up of this program. Therefore BHD is now returning to the Board to seek approval for the creation of three positions.

Background

CRS is a Medicaid psychosocial rehabilitation benefit for persons with a severe and persistent mental illness, mood disorder, or other psychotic disorder. It is a voluntary benefit, meaning an individual willingly participates in CRS. The individual also must be at or below 150% of the federal poverty level (FPL) and at a specific functioning level. CRS reimburses the following three core services:

- Community Living Support Services assists individuals in transitioning from a supervised living situation such as a Community Based Residential Facility (CBRF) or Adult Family Homes (AFH) to their own home
- Supported Employment Services assists individuals with managing symptoms and behaviors to acquire and maintain competitive employment (must use the evidence-based Individual Placement and Support (IPS) model)

 Use of Peers as Providers – utilizes recovery-based experiences of certified peer specialists to assist others to move towards recovery

Psychosocial rehabilitation benefits are entitlements and are a carve-out benefit from the beneficiary's Medicaid HMO. These benefits are county administered and require a 60% federal/40% local (public funds such as state revenues or tax levy) cost sharing.

Over the past few months, HHN committee members have heard informational reports from BHD on the risks and benefits of adding another psychosocial rehabilitation benefit to its continuum of care and approved moving forward in July 2013. BHD has taken many preparatory steps necessary to administer CRS including:

- Partnering with DMHSAS to offer person-centered care trainings to our CSP, TCM, and Recovery Support Coordination (RSC) agencies
- Applying for and receiving funding from DMHSAS for infrastructure development for the use of peers as providers that allowed BHD to host an Employer Summit to provide partner agencies information on employing peers
- Providing financial assistance to individuals to sit for the peer specialist certification examination and offering preparatory study groups in partnership with Our Space prior to the examination
- Sponsoring, in partnership with the Community Linkages Action Team of the Mental Health Redesign Task Force, a two-day Individual Placement and Support (IPS) supported employment workshop that covered the IPS principles and fidelity
- Getting approval from DMHSAS for the single coordinated care plan (SCCP) currently used by RSCs to develop an individualized plan of care or recovery plan for individuals participating in services delivered through CSB

Now, BHD is returning to the Board to seek approval for three positions that will be dedicated to the CRS program and assist with enrollment, billing and implementation of the various aspects of this new initiative. The positions will be funded through additional revenue collected related to CRS enrollment. The Administrative Coordinator will assist in the completion of the required Mental Health/AODA Functional Screen and the assessment of all individuals that request participation in the CRS program. The Administrative Coordinator will work in partnership with the community based service providers, certified peer specialists, and the recovery support coordinators in the completion of the Medicaid enrollment packet for CRS. This position will also act as the liaison between the Community Services Branch and other necessary services that will allow for successful implementation of the requested CRS services for every individual interested in participating in CRS.

The Integrated Service Coordinator will oversee the program implementation for the county and be the primary point of contact to the State's Divisions of Health Care Access and Accountability and Mental Health and Substance Abuse Services for the CRS program. This position will have extensive knowledge of the 1915(i) requirement in the Social Security Act and serve in a back-up capacity to the Director of the Community Service Branch for the

implementation elements of Medicaid State Plan Amendment related to CRS. This position will assist the staff in the Quality Assurance Department within the Community Services Branch on the thoroughness of the documentation and completion of the Medicaid enrollment packets and ensure accuracy of this information prior to its submission to the state. The position will be responsible for the CRS data reporting to the state on a quarterly basis and have knowledge of both the Avatar and state PPS system for human services performance data entry.

The Fiscal Specialist will be responsible for the submission of the Medicaid billing claims to the Wisconsin Forward Portal This position will need extensive working knowledge of the DHS 106 Administrative Code for the financial record documentation requirements, the allowable Healthcare Common Procedure Coding System (HCPCS) codes, available modifiers, and rates for allowable services within CRS. This includes the distinction of a per diem and a periodic rate and when the travel time is an allowable activity. The Fiscal Specialist will complete all of the billing for the CRS program for Milwaukee County and knowledge of Avatar, SCRIPTS, CMHC, and the Medicaid Provider Handbook.

Recommendation

To assist BHD with implementing the CRS program, it is recommended that the County Board of Supervisors allow the Director, Department of Health and Human Services, or his designee, to create the following positions actions beginning on October 24, 2013:

Position Description	Pay Range	FTE	2013 Impact	2014 Impact
CREATIONS				
Administrative Coordinator - BHD	27	1	\$15,144	\$78,750
Fiscal Specialist	05P	1	\$10,169	\$52,878
Integrated Services Coordinator	31	1	\$17,558	\$91,304
			\$42,872	\$222,932

All costs mentioned above include salary, social security and active fringe benefits. The 2014 Requested Budget for BHD includes these three positions.

Fiscal Impact

The creation of three positions as detailed above results in no tax levy impact. The cost of the positions is off-set by additional Federal revenue draw down for CRS services. The County Board has approved \$275,000 in start-up funds for this program for 2013, which is also included in the 2014 Requested Budget for BHD. The start-up funds may off-set the costs of the positions until revenue is collected through CRS. Therefore no additional tax levy is needed.

Respectfully Submitted:

Héctor Colón, Director

Department of Health & Human Services

cc: County Executive Chris Abele

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