

Performance Budgeting - A Presentation to House Finance HSS Budget Subcommittee

Melissa Stone, Director

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-DBH Introduction

Vision:

Improved quality of life through the right service to the right person at the right time

Mission:

To manage an integrated and comprehensive behavioral health system based on sound policy, effective practices and open partnerships

Core Services

Mental health and substance use disorder services ranging from prevention, screening, outpatient, residential and acute psychiatric care.

Who We Serve:

- -Severely Emotionally Disturbed Children & Youth (SED)
- -Severely Mentally III Adults (SMI)
- -Substance Use Disordered Youth & Adults (SUD)
- -Adults and Youth in the Community to Prevent Behavioral Health Risk Factors

Standard:

-Quantity: How Much Did We Do?

-Quality: How Well Did We Do It? (Effectiveness and Efficiency)

-Outcome: Is Anyone Better Off?



Division of Behavioral Health Behavioral Health System of Care

(source ABS FY2014 Authorized)

MEDI	CAID	SRVCS
	RDU	

Behavioral Health Medicaid Services \$202,559.0

Other Funds: \$717.5 1%

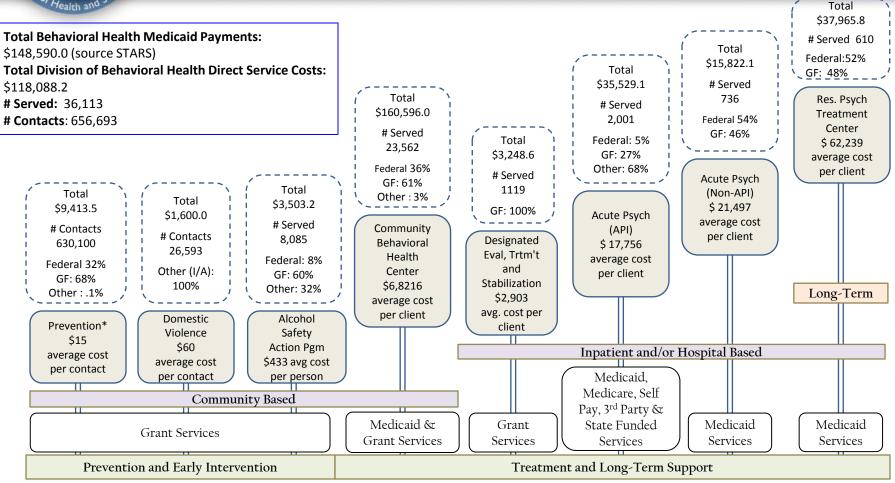
> Federal Funds: \$119,076.8 59%

General Funds: \$82,765.0 40%

BEHAVIORAL HEALTH RDU - \$146,513.4 (the Division of Behavioral Health)					
Grants & Services for Non-Medicaid Eligible \$99,781.5	Alaska Psychiatric Institute \$33,188.9	Management and Oversight \$13,543.0			
Other Funds: \$6,711.8 7%	Other Funds: \$25,736.2 71%	Other Funds: \$1,173.3 9%			
Federal Funds: \$9,014.0 9%	Federal Funds: \$0	Federal Funds: \$3,017.7 22%			
General Funds: \$84,055.7 84%	General Funds: \$7,452.7 29%	General Funds: \$9,352.0 69%			



Division of Behavioral Health Behavioral Health System of Care Cost Per Service Per Year in FY 2012**



^{*} Prevention group includes mental health promotion, substance abuse prevention, fetal alcohol syndrome awareness and diagnoses, and suicide prevention

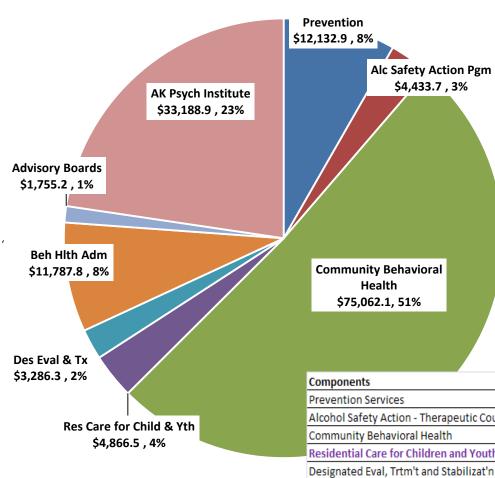
^{**}Data Sources for Funding and Services:

DBH Program SFY 2012 Expenditures are from Actuals in ABS (MOE as of 11-29-12); Medicaid Payments in SFY 2012 are from STARS (SFY12 Base Datasets 9-25-2013). Prevention/Early Intervention SFY 2012 contacts/persons are from grantee quarterly reports (FAS counts are from AKAIMS). Treatment/Long-Term Support SFY 2012 client counts are from AKAIMS/EDI and STARS (SFY12 Base Datasets 9-25-2013).

FY2014 Authorized Budget

by Component

Source: ABS FY2014 Authorized



FY2014: \$146,513.4; 345 PFT, 28 NP

UGF: \$81,252.9; DGF: \$19,607.5; Fed: \$12,031.7;

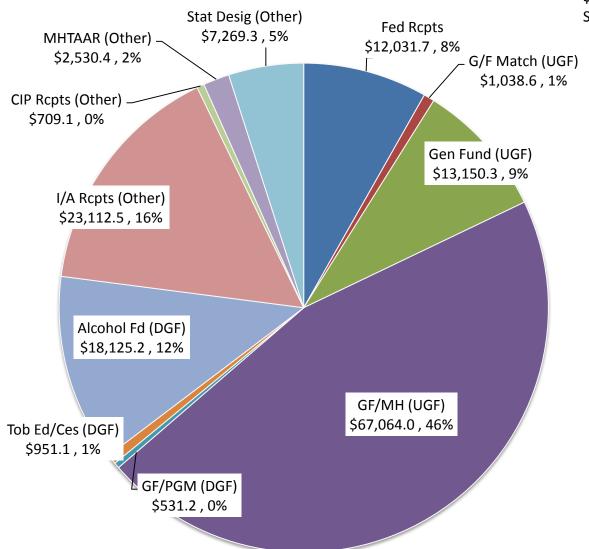
Other: \$33,621.3

(Other: I/A Rcpts, CIP Rcpts, MHTAAR, Stat Desig)

- Prevention Services
- Alcohol Safety Action Therapeutic Courts
- Community Behavioral Health
- Residential Care for Children and Youth
- Designated Eval, Trtmt & Stabilization
- Behavioral Health Administration
- Advisory Boards
- Alaska Psychiatric Services

Components	GF \$s	Fed \$s	Other \$s	Total \$s	FTEs
Prevention Services	6,598,400	3,934,500	1,600,000	12,132,900	-
Alcohol Safety Action - Therapeutic Courts	2,319,300	310,100	1,804,300	4,433,700	22 PFT, 3 NP
Community Behavioral Health	67,250,400	4,504,200	3,307,500	75,062,100	
Residential Care for Children and Youth	4,601,300	265,200		4,866,500	2 PFT
Designated Eval, Trtm't and Stabilizat'n	3,286,300	1	-	3,286,300	
Behavioral Health Administration	8,198,900	2,917,800	671,100	11,787,800	66 PFT, 19 NP
Advisory Boards	1,153,100	99,900	502,200	1,755,200	7 PFT
Alaska Psychiatric Services	7,452,700		25,736,200	33,188,900	248 PFT, 6 NP
	100,860,400	12,031,700	33,621,300	146,513,400	345 PFT, 28 NP

FY2014 Authorized Budget by Fund Source



FY2014: \$146,513.4; 345 PFT, 28 NP

UGF: \$81,252.9; DGF: \$19,607.5; Fed:

\$12,031.7; Other: \$33,621.3 Source: ABS FY2014 Authorized

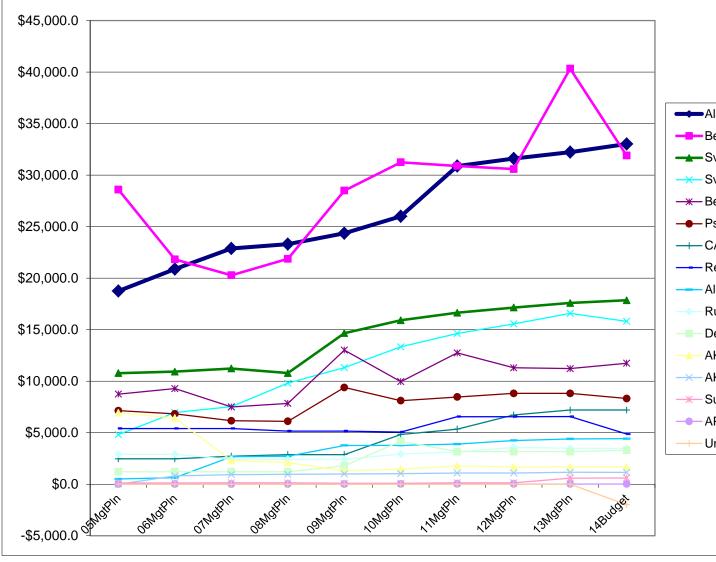


Behavioral Health Appropriation Increase (05-14): \$45 million (45.7%) -- An annual increase of 4.3%

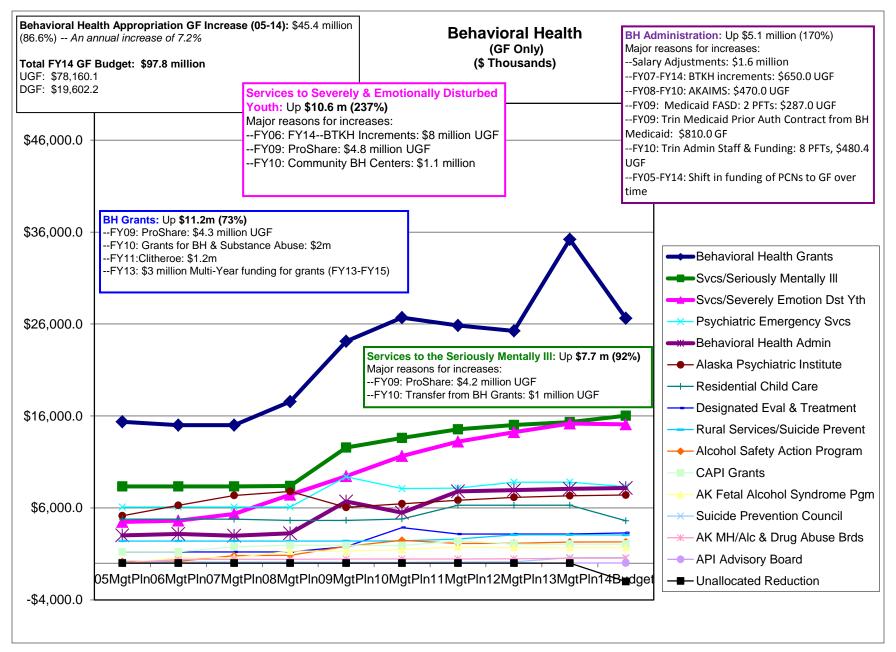
Behavioral Health (All Funds) (\$ Thousands)

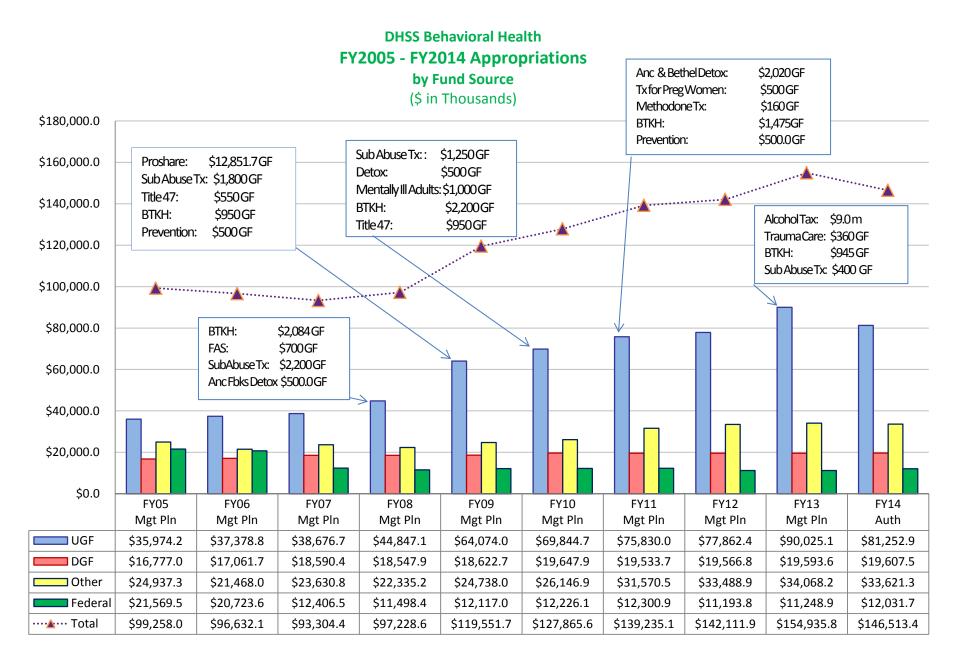
Total FY14 Budget: \$143.3 million

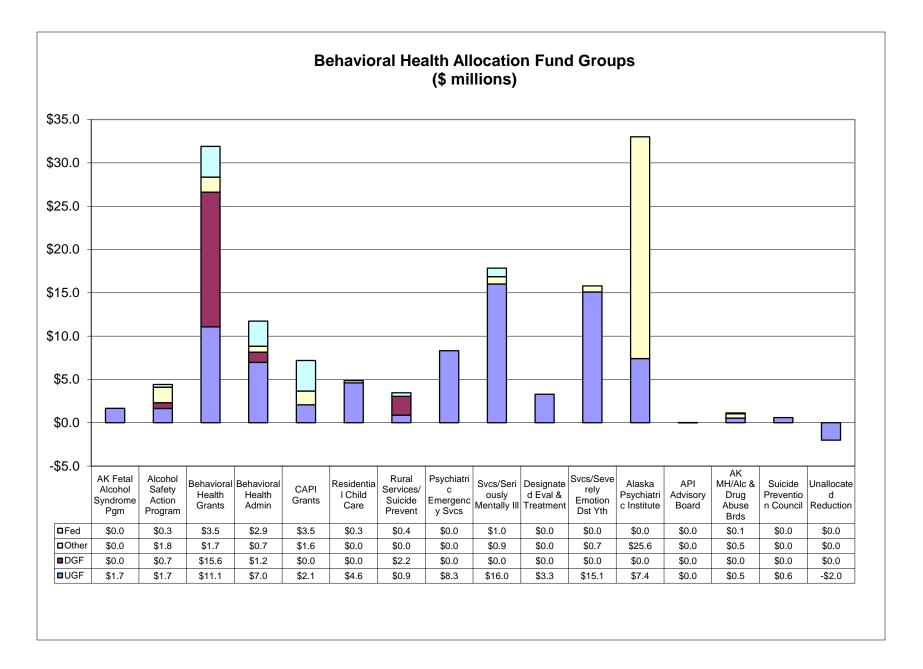
UGF: \$78,160.1 DGF: \$19,602.2 Other: \$33,482.6 Fed: \$12,020.4

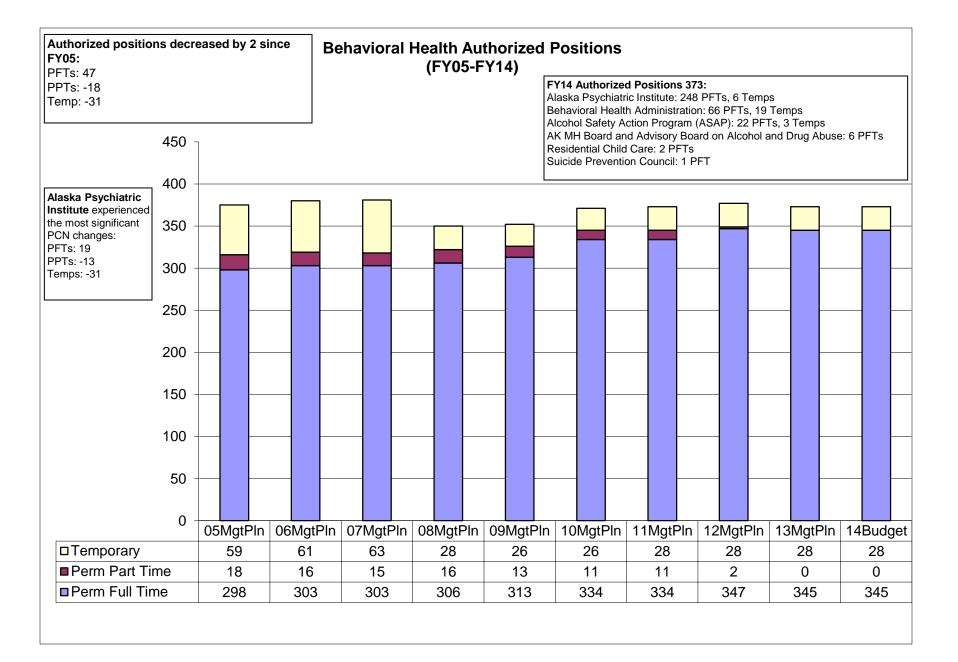


- → Alaska Psychiatric Institute
- Behavioral Health Grants
- Svcs/Seriously Mentally III
- Svcs/Severely Emotion Dst Yth
- Psychiatric Emergency Svcs
- --- CAPI Grants
- Residential Child Care
- Alcohol Safety Action Program
- Rural Services/Suicide Prevent
- Designated Eval & Treatment
- AK Fetal Alcohol Syndrome Pgm
- -X- AK MH/Alc & Drug Abuse Brds
- * Suicide Prevention Council
- API Advisory Board
- Unallocated Reduction









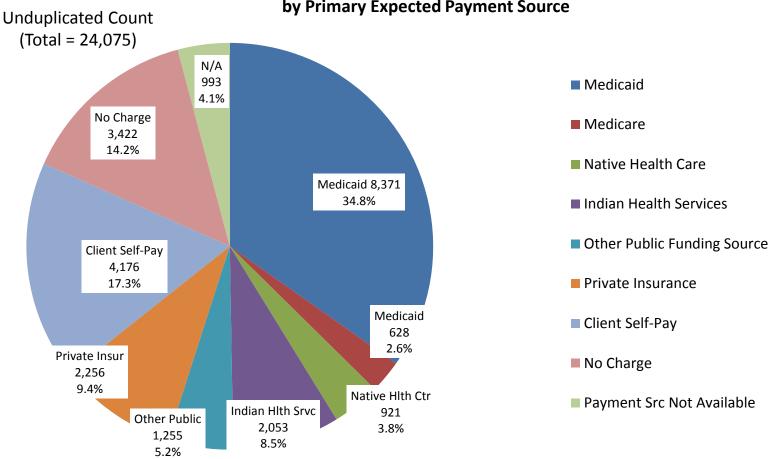


Primary Expected Payment Source for Community-Based Behavioral Health Services

SFY2013 (Prelim) Unduplicated Count and Percent of Individuals Who Received

Community-Based Behavioral Health Services

by Primary Expected Payment Source









Alaska Psychiatric Institute

Alaska Psychiatric Institute Budget FY2005 Mgmt Plan – FY2014 Authorized (\$s in thousands)

	FY05	FY06	FY07	FY08	FY09	FY10	FY11	FY12	FY13	FY14	\$	%
	Mgt PIn	Auth	Increase	Increase								
Personal Services	15,660.4	17,582.9	18,715.3	19,028.6	20,179.5	21,504.1	22,962.1	24,457.9	25,946.3	26,629.0		
Travel	63.3	63.3	63.3	63.3	63.3	53.3	52.0	67.0	67.0	67.0		
Services	1,786.4	2,198.3	2,908.9	3,015.3	2,554.5	1,875.2	3,742.9	3,706.0	3,682.5	3,961.5		
Commodities	1,019.2	819.2	969.2	969.2	990.4	990.4	990.4	990.4	990.4	990.4		
Capital Outlay	47.3	47.3	47.3	47.3	-	-	-	-	-	-		
Grants, Benefits	169.4	169.4	169.4	169.4	569.4	1,569.4	3,119.4	2,386.3	1,541.0	1,541.0		
	18,746.0	20,880.4	22,873.4	23,293.1	24,357.1	25,992.4	30,866.8	31,607.6	32,227.2	33,188.9	14,442.9	77.0%
UGF	5,148.9	6,283.3	7,359.9	7,798.4	6,063.0	6,453.3	6,835.5	7,152.7	7,322.0	7,452.7	2,303.8	44.7%
Other	13,597.1	14,597.1	15,459.4	15,433.4	18,228.7	19,439.6	23,930.9	24,454.9	24,905.2	25,736.2	12,139.1	89.3%
Federal	-	-	54.1	61.3	65.4							
PFT	229	217	221	225	227	240	241	250	248	248	19	
PPT	13	12	12	13	11	9	9	-	-	-	(13)	
NP	37	39	42	7	7	7	6	6	6	6	(31)	

Days						
- / -						
FY	2013					
	% of Rillable					
Rillahle		Paid				
		1522				
2641	12.74%	2069				
3627	17.50%	0				
5371	25.92%	3286				
285	1.38%	248				
3433	16.57%	0				
3355	16.19%	0				
20724		7125				
		2 undor 6E a	nd "unincure	l" and CANA	Nic Chronic an	d A cuto
aiiiis Oiliy leta	ited to the Chron	iic and Acute	condition are	paiu, tilerei	iore the data i	11 11115
	d all their Medica	are psyc. Inp	atient days (19	90 lifetime d	ays exhausted	d) – This is
	Billable Days 2012 2641 3627 5371 285 3433 3355 20724 billable ervation – no	Days Mix 2012 9.71% 2641 12.74% 3627 17.50% 5371 25.92% 285 1.38% 3433 16.57% 3355 16.19% 20724 billable ervation – non-billable able to bill due to ages over 18 aims only related to the Chron	## Solution	% of Billable Days by Payer Paid Days 2012 9.71% 1522 2641 12.74% 2069 3627 17.50% 0 5371 25.92% 3286 285 1.38% 248 3433 16.57% 0 3355 16.19% 0 20724 7125 billable ervation – non-billable able to bill due to ages over 18-under 65 and "uninsured aims only related to the Chronic and Acute condition are	% of Billable Days by Payer Paid Days Mix Days	W of Billable Days by Payer Paid Days Mix Days



Alaska Psychiatric Hospital / Alaska Recovery Center

- Only Alaska state operated acute care psychiatric hospital
- Joint Commission Accredited
- 80 bed facility for children, youth and adults
- Provides short-term hospitalization for individuals who need psychiatric

Unit	Beds	Services
Chilkat	10	Youth 13-18
Susitna	26	Adult Acute Care
Katmai	24	Adult Acute Care
Denali	10	Neuropsychiatric Care
Taku	10	Forensic / Secure Unit

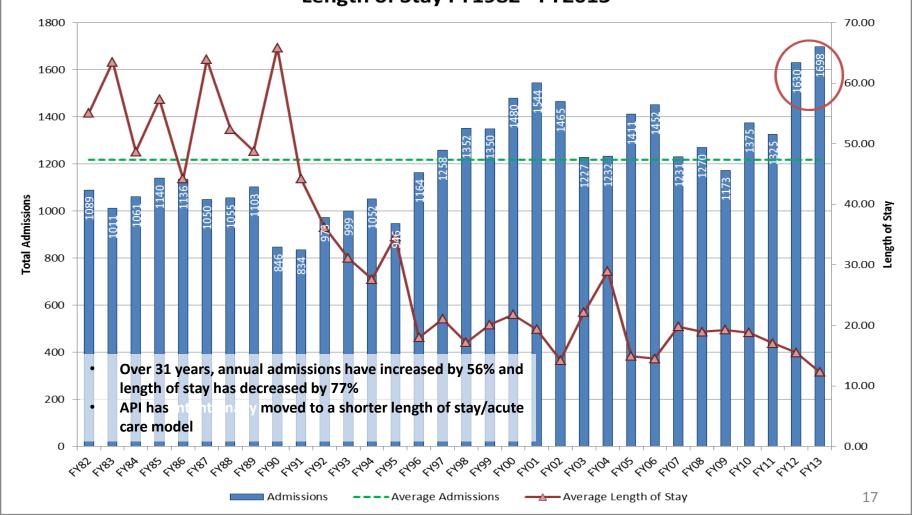
care that is not available in their home or community

Provides telemedicine to nine behavioral health clinics



Alaska Psychiatric Hospital / Alaska Recovery Center

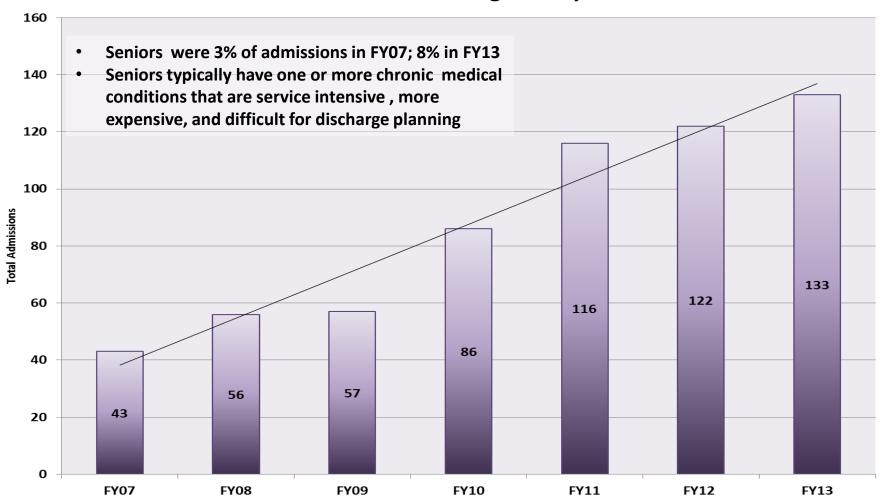
31 Years of Admission to the Alaska Psychiatric Institute with Average Length of Stay FY1982 - FY2013





Alaska Psychiatric Hospital / Alaska Recovery Center

Total Admissions for Patients Age 60+ by Fiscal Year





Fraud, Waste, Abuse

Goal: Address fraud, waste, and abuse and to insure compliance with program rules.

Reviews/Investigations

- Conduct clinical reviews of outpatient service to insure medical necessity.
- Conduct medical reviews for all psychiatric admissions to inpatient care.
- Perform reviews; approve agencies to operate behavioral health /substance use clinics.
- Complete reviews of all Residential Psychiatric Treatment Centers to assure quality of care & compliance with program standards.
- Conduct complaint or quality of care investigations.
- Conduct utilization reviews thru claims analysis and AKAIMS reports.
- Cooperate with other licensing agencies or Medicaid Fraud Control Unit in reviews or complaint investigations.

Corrective Action

- Develop corrective action plans for agencies and monitor progress.
- Facilitate system changes to support compliance.
- Refer suspected overpayments to DHSS Program Integrity Unit.

Technical assistance

Provide customized, targeted, and general trainings and technical assistance.



-Sequestration Impacts

FY2013 Sequestration Impacts - Behavioral Health

Federal Grant Name	Pre- Sequestration Federal Allocation	Sequestration	Final Federal Allocation	Impact to Program
		Behavio	oral Health Adr	ministration
Data Infrastructure Grant	\$ 132,941	\$ -	\$ 132,941	This federal award is not subject to sequestration
		Communi	ty Behavioral H	Health Services
Mental Health Block Grant	\$ 741,538	\$ 37,498	\$ 704,040	Received notice of cut on 6/20/13. Re-purposed funds to cover the \$37,498.
Substance Abuse Block Grant	\$ 4,903,771	\$ 260,229	\$ 4,643,542	Received notice of cut on 8/16/13. FFY ends 9/30/13. Re-coded SFY13 sub-recipient awards during re-appropriation utilizing GF from projects that had closed out the year with an unspent balance.
PATH - Transition from Homelessness	\$ 300,000	\$ -	\$ 300,000	This federal award is not subject to sequestration
Strategic Prevention Framework State Incentive Grant	\$ 2,135,724	\$ -	\$ 2,135,724	This federal award is not subject to sequestration
AK Youth Suicide Prevention	\$ 480,000	\$ -	\$ 480,000	This federal award is not subject to sequestration
Medicare		\$ 8,139		Reduced revenue collection shifts costs to general fund



-Sequestration Impacts

FY2014 Sequestration Estimates - Behavioral Health

112011 Sequestration Estimates Behavioral freditif					
Federal Grant Name	Estimated SFY2014 Federal Allocation	Possible Sequestration (5%) During SFY 2014	Est. SFY2014 Federal Allocation w Sequstr.	Impact to Program	
		Behavio	oral Health Adı	ministration	
Data Infrastructure Grant	\$ 132,941	\$ -	\$ 132,941	This federal award is not subject to sequestration	
		Communit	y Behavioral H	Health Services	
Mental Health Block Grant	\$ 704,040	\$ 35,202	\$ 668,838	Fewer employment support staff and mentors (1x1 mentoring, personal hygiene coaching, on-time practice) will result in lower employment outcomes for people served.	
Substance Abuse Block Grant	\$ 4,643,542	\$ 232,177	\$ 4,411,365	Fewer treatment slots in Anchorage, Barrow, Fairbanks and Palmer, resulting in longer wait time to access services, increased pressure to shorten stay in care. Reduced services to approximately 92 individuals in 4 ASAP communities resulting in increased recidivism Reduced number of prevention contacts to approximately 6,659 people in the 8 impacted communities. Decreased community coalition activities and school-based substance use prevention strategies.	
PATH - Transition from Homelessness	\$ 300,000	\$ -	\$ 300,000	This federal award is not subject to sequestration	
Strategic Prevention Framework State Incentive Grant	\$ 2,135,724	\$ -	\$ 2,135,724	This federal award is not subject to sequestration	
AK Youth Suicide Prevention	\$ 480,000	\$ -	\$ 480,000	This federal award is not subject to sequestration	
Medicare		\$ 74,800		AK Psychiatric Institute revenue shortage. API is obligated by statute to provide care . Loss of revenue cannot impact direct patient care. May require spending freeze, admin recruitment holds.	