CLERMONT COUNTY
MENTAL HEALTH
& RECOVERY
BOARD

Levy Presentation to the County Commissioners

April 6, 2015

National Projections on Needs for Services

- ***Mental Health***

National studies indicate that 1 in 5 individuals will experience a mental health issue in any year, both adults and children.

Clermont County: 40,000

- ***Substance Abuse***

National studies indicate that 1 in 10 individuals will experience a substance abuse disorder in any year; due to the opiate epidemic, that number may be closer to 1 in 7.

Clermont County: 20,000; 28,600

Local Needs for Services

- *Mental Health*
- Suicides
- Youth Needs
- Supports for SMD
- Crisis Hotline/ Mobile Crisis
- Prevention Efforts

- *Substance Abuse*
- Opiate and heroin use
- Continued Need for alcohol and other drug treatment
- Medication Assisted Treatment (MAT) – costs and length
- Overdoses and Narcan
- Prevention Efforts

Impact of ACA and Medicaid Expansion

- Belief that insurance and Medicaid pay for all services for all or most individuals
- High Deductible Plans
- Loss of Medicaid due to not providing required information or possibly not paying required premium (SFY16 proposal)
- Medicaid rates (not increased in 15 years) do not cover total costs of services – essential supports
- State adding new Medicaid services in 2016: Peer Support, Intensive Home-based, Supported Employment, AOD Residential, and Wraparound
- State claim that since boards no longer pay Medicaid match, additional funds available; however, state took back portion of allocation formerly used for match

Board's Financial Projection

- *Note: Since last levy (2010), state, federal and local revenue has been less than expenses and required spending Board reserve funds to prevent deficit spending. Even using reserves is not sufficient to fund all needed services or enough of the services we fund.*

- *Expected reserves remaining at the end of SFY 2016 (June 30, 2015) are $1,000,000 in "Required" reserves and $1,020,254 in "Free" reserves. These funds will probably be needed to meet Continuum of Care requirements for services.*

SFY	2011	2012	2013	2014	2015	2016
	Actuals	*Actuals*	*Actuals*	*Actuals*	*Projections*	*Projections*
Income	$ 9,976,273	$ 6,040,114	$ 5,792,322	$ 6,176,850	$ 5,198,133	$ 5,060,075
Expenses	$10,519,219	$ 7,053,166	$ 6,864,588	$ 6,501,511	$ 6,151,726	$ 6,094,444
Difference	$ (542,946)	$(1,013,052)	$(1,072,266)	$ (324,661)	$ (953,593)	$(1,034,369)

Additional Resources

COLLABORATIVE FUNDS

- 507: $347,500 for detox, AOD residential, peer support, recovery housing development, workforce development, CPS pilot of assessment project. Gone for SFY 16 but can carry over what's not spent.
- Hotspot: $213,667 for recovery housing renovations and staffing, respite at and moving to adult residential care, crisis services, medication (MAT) and IOP treatment services. SFY15 funds must be spent by 6/30/15; funds will continue in SFY16.

LOCAL FUNDS

- IDAT: $110,000 (Municipal Court funds services to those with alcohol addiction at CRC)
- CPS: $40,000 (co-funds services for parents with AOD diagnosis who lost custody of children)
- FCFC: Pooled funds used as needed, e.g. Pressley Ridge home-based services

GRANTS

- Narcan (Interact for Health)
- Gambling Prevention and Treatment/Drug Free Coalition (OMHAS)
- Mobile Crisis (DOJ and OMHAS)
- System of Care Mental Health Services for Children (SAMHSA)
- First Episode Psychosis (OMHAS – GCB)
- Public Health Injury Prevention

(Not included in Board's Financial Projection)

Services Being Provided: Adult Mental Health (SMD Consumers ONLY)

- Medical Somatic/Pharmacological Management
- Medication
- Diagnostic Assessment
- Individual and Group Counseling
- Crisis Intervention
- CPST Individual and Groups (case management) + Essential CPST Supports
- Supportive Employment/Job Development
- Subsidized Housing
- Adult Residential
- Peer Support
- Benefit Specialist
- Forensic Monitor
- Inpatient
- Jail Assessments

Services Being Provided: Children's Mental Health

- Medical/Somatic
- Medication
- Diagnostic Assessment
- Individual and Group Counseling
- Crisis Intervention
- CPST Individual and Group
- Day Treatment
- School Based CPST, Diagnostic, Crisis, CPST Group, Consultation and Prevention
- Prevention and Consultation Outpatient
- Early Childhood Prevention and Consultation
- Prevention/Education

Services Being Provided: Alcohol/Drug

ADULTS

- Medical/Somatic
- MAT: Suboxone/Vivitrol
- Ambulatory and Inpatient Detox
- Diagnostic Assessment
- Individual, Family and Group Counseling
- Crisis Intervention
- Intensive Outpatient
- Long Term Rehab
- Case Management
- IDDT (Integrated Dually Diagnosed Treatment)
- DUI/OVI Program
- TASC
- Transportation
- Vocational/Employment
- Gambling Addiction
- Narcan Distribution
- Prevention

ADOLESCENTS

- Diagnostic Assessment
- Individual, Family and Group Counseling
- Crisis Intervention
- Case Management
- Intensive Home-based Services (Seven Challenges)
- Day Treatment (IOP and Case Management)

Additional Services

- Crisis Hotline/Mobile Crisis
- NAMI
- Special Needs Fund
- Mini-Grants (including Coalitions for Suicide and Drug Prevention)
- Opiate Task Force
- Crisis Intervention Training (CIT)
- FCF Contribution
- Miscellaneous

Numbers of Individuals Served

- Adult Mental Health – 1,000
- Children's Mental Health – 454* + 175 (FAST TRAC)
- Adolescent and Adult Alcohol/Drugs – 1,350
- Prevention Services – 5,000 (estimate)
- Community Education and Advocacy – 3,500

Note: Individuals are staying in services longer at higher cost, particularly youth coming into services younger and sicker as well as heroin addicts

*(Number is lower as most children have Medicaid or insurance; many served at schools under "Prevention")

Outcomes Being Achieved

- CRC – # Completing Treatment:
  - 590 clients have received MAT since 11/09, with 70% completion rate for IOP clients receiving MAT ; 92% completion rate since 6/1/14.
- LPS/GCB – Number Living Successfully in Community (Hospital numbers):
  - Currently 30/1,000 in group homes and 2 in state hospital, with remainder living with family or on their own.
- CFI – School-based Growth:
  - Services in all nine districts and all 49 school buildings (with some schools purchasing additional services); formal evaluation shows significant impact and support.
- Crisis Hotline/Mobile Crisis: Calls in 2014 total?
  - In 2014, a total of 1,983 crisis calls were received, and mobile crisis staff made 240 runs to be on site at a situation involving a mental health issue.
- CIT Trained Officers:
  - 60% of sworn full-time officers (138/228) as of 4/14, with 30 slated to be trained in April 2015.

Mandates for Services

- Requirement for Continuum of Care (MBR 2014)
- State and federal funds mandates
- Grant Projects
- Levy – flexible funds for local needs, match for grants

Board Administration

- Administrative Overhead – 11%; historically 4%–5%
- Less staff, lower expenses – percentage up due to decreasing funds
- GOSH – first in state to use; upfront expenses but overall savings
- FCF and FAST TRAC oversight – no cost reimbursement
- Potential of decreasing staff – 5 FTE to 4/4.5

Levies of Other Mental Health Boards

- *Only 5 counties, including Clermont, have a .5 mil – (Huron, Jefferson, Tuscarawas/Carroll, and Union) – none lower*
- *Board mental health Levies range from .5 to 2.99 mils*
- *15 counties have multiple mental health levies, some with 2 and others with 3*
- *2 Boards part of County Human Services Levy*

MENTAL HEALTH LEVY PROJECTIONS

	Renewal of Existing .5 mil Levy	Replacement of Existing .5 mil Levy	Renewal with .25 mil increase	Replacement with .25 mil increase
MARKET VALUE	$100,000	$100,000	$100,000	$100,000
NEW MILLAGE (.482997 MILLS) =	$16.90			
NEW MILLAGE (.5 MILLS) =		$17.50		
NEW MILLAGE (.482997+.25 MILLS) =			$25.66	
NEW MILLAGE (.75 MILLS) =				$26.25
Homestead Rollback 10% + Rollback 2.5%	($2.11)		(1.10)	
Cost to Taxpayer	$14.79	$17.50	$24.56	$26.25
ANTICIPATED REVENUE - 2014 VALUATION	$2,074,511	$2,129,407	$3,139,215	$3,194,110

Mental Health and Recovery Board Levy Request

Approved by Board of Directors at March 7, 2015 Meeting

Renewal with .25 increase to be on the November 2015 ballot

Community Support for Levy: Recognition of Behavioral Health Issues

- Previous Levy Campaign in 2010
- Town Hall Meetings
- Opiate Task Force
- Public Health's Community Health Improvement Plan
- Chamber's Agenda for the Future

QUESTIONS