

**Capital Area Human Services District Board Meeting
Monday, June 3, 2013**

Directors Present: Christy Burnett, Chair, Gail Hurst, Vice Chair, Sandi Record, Stephanie Manson, Gary Spillman, Denise Dugas, Amy Betts, Kristen Saucier, Dana Carpenter, Ph.D, Barbara Wilson and Kay Andrews

Directors Absent: Rev. Louis Askins, Becky Katz, Jermaine Watson, Kathy D’Albor and Victoria King

CAHSD Executive Staff Member(s) Present: Jan Kasofsky, Ph.D., Executive Director, Carol Nacoste, Deputy Director

TOPIC	RESPONSIBLE PERSON	DISCUSSION	FOLLOW-UP
Approval of the June 3, 2013 Consent Agenda and Approval of the Minutes for May 6, 2013. *Governance Process for Agenda Planning *Cost of Governance	Christy Burnett	Christy Burnett called the meeting to order at 3:00pm. Gail Hurst made a motion to approve the May 6, 2013 minutes as written and the June 3, 2013 Consent Agenda. Barbara Wilson seconded the motion. Sandi Record made a motion to move the action items from Reports from the Chairman with the Consent Agenda. The motion was seconded by Dr. Carpenter.	There were no objections and the motion passed.
Communication	Dr. Kasofsky	Two packets were distributed with CAHSD communication documents, mostly regarding Prevention activities. A synopsis of what the Prevention programs have done over the past year was included.	
Announcements	Dr. Kasofsky	<ul style="list-style-type: none"> • CAHSD Board will not meet in July based on the unanimous decision 16 years ago to not have July board meetings. • Dr. Kasofsky thanked Christy Burnett for her work as CAHSD Board Chairperson. She stated that she has done an incredible job. The board recognized and stated their appreciation. 	
Fee Schedule	Dr. Kasofsky Carol Nacoste	<ul style="list-style-type: none"> • The CAHSD Fee Schedule Policy has been updated. One revision is that CAHSD used to allow a 60-day grace period for clients to provide required financial information and the timeline is now 30 days. This financial information is used to determine eligibility and calculate copays. C. Nacoste summarized other changes made in the policy for the Board members including those related to pharmacy services as well as the policy attachments. • C. Nacoste reviewed with Board the revised CAHSD master fee 	

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		<p>schedule and the letter that will be sent to clients educating the clients of the changes. The fee schedule changes were based on calculations using the federal poverty guidelines. The previous fees were calculated at 400% above the poverty level and new fees are calculated at 200% above the poverty guidelines. Clients at 200% of the federal poverty level or below are eligible to receive free services. The indigent status does not change at all. The only status that changes is for clients who are qualifying for a reduced or discounted rate. Anyone who is 201% above poverty level, who would have paid \$10 for a \$100 fee, will be paying about \$10.35 for a typical fee. She explained how the fee schedule has changed for each discipline versus the previous mandated fee of \$100 for all services provided by all disciplines. CAHSD has created a charge master for the first time. She explained how those rates are calculated at approximately 170% above the Medicaid rate and 200% above the Medicare rate. Private insurers pay CAHSD more than Medicaid/Medicare.</p> <ul style="list-style-type: none"> • The CAHSD sliding fee scale will be reassessed and adjusted as needed if the federal poverty guideline changes. • The Fee Schedule will be followed across the board with no exceptions. 	
<p>Post MHERE Community Planning: BRAAF meetings</p>	<p>Dr. Kasofsky</p>	<ul style="list-style-type: none"> • Dr. Kasofsky stated that the CAHSD Board has two representatives that are from the largest hospitals in the community; Baton Rouge General and OLOL. Stephanie Manson, OLOL and Denise Dugas, BRGMC can provide an update regarding the challenges associated with the closure of the MHERE and taking over management of LSU Clinics. • The matrix distributed is what grew out the meeting at the Baton Rouge Area Foundation. The matrix outlines a short-term plan of what CAHSD sees as its role. Dr. Kasofsky still hasn't met with representatives from Ochsner's or Lane Memorial Hospitals. There was a meeting with Tony Speier and a decision was made on data that would be collected. The CAHSD Mobile Team will work with the local Emergency Rooms to see how the Team can help with getting referrals into CAHSD upon discharge. The BRGMC has been utilizing the Mobile Team a lot. Need to 	

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		<p>follow-up and outreach to the two other hospitals.</p> <ul style="list-style-type: none"> • Magellan is paying for Crisis Residential Units. They have one unit located in New Orleans. The unit isn't as intensive as an MHERE or a Crisis Receiving Center. Medicaid will also pay for services provided by this unit. Craig Coenson, MD, President of Magellan & Dr. Kasofsky are meeting with a local acute private psychiatric hospital to find out if they are interested in an RFP to open up a number of their beds to provide crisis stabilization. CAHSD plans to pay for a set number of indigent beds in the community who need stabilization. This would relieve some pressure on the ER's and the unit would be used as a step down unit for when clients are being discharged from an inpatient bed. 	
Parish Service Volume Expenditure/Hot Buttons Table	Dr. Kasofsky	<p>DHH requested CAHSD put this document together sorted by parish. The largest hot button issue is the loss of the MHERE and CAHSD's declining budget. The report provides the number of adults and children served by CAHSD, and the number of clinics. It provides the CAHSD contractors but doesn't include prevention - there is a separate table for those. Provider information for each parish that has contracts with CAHSD is included. The amount of funding CAHSD pays the contractors in each parish is included. The Mobile Team, Ascension Clinic cost or the clinics in EBR are not included. The Total Health Nurses are not included because they are funded by grant money.</p>	
Follow Up Ends Policy	Dr. Kasofsky	<p>Dr. Kasofsky asked if there were any questions related to the Ends Policy distributed at the last meeting. There were no questions.</p>	
HIV Grant Application	Dr. Kasofsky	<ul style="list-style-type: none"> • The focus of the grant was "Minority Women at High Risk for HIV Infection. Dr. Kasofsky explained that CAHSD recently convened the local community outreach groups who typically compete for the available funding. The groups agreed to work together with the hope of bringing the HIV Grant money to this area. They worked for approximately a month. The HIV infection rate in EBR is the highest in the country. • HAART, the lead agency, hired a grant writer who worked in conjunction with V. Gettys and K. Pino from CAHSD. During this time period, HAART was told that a current federal identification number was required in order to submit the 	

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		<p>application and was assured that HAART had the current identification number needed.</p> <ul style="list-style-type: none"> • In the process of submitting the application, it was discovered that HAART's federal identification number was expired and the application couldn't be accepted for submission. • Dr. Kasofsky stated that the time spent working on the grant wouldn't be wasted because during the process they identified best practices that will be implemented in the CAHSD female only group program. • Dr. Carpenter stated that there is a lot of press for HIV infection now. 	
BRCIC/Community Planning: Bullying	Dr. Kasofsky	<ul style="list-style-type: none"> • Dr. Kasofsky has been working with Baton Rouge Crisis Intervention Center. They feel as Magellan will be taking over what the Crisis Call Center used to do. There have been a few meetings around the topic of bullying. CAHSD has been facilitating these meetings. • There has been good participation including Magellan and the EBR school system. The EBR School System ICare has been doing interesting work around bullying and creating team leaders in the schools. • Final recommendations will probably be made for the BRCIC to take on the lead role around bullying for this region. 	
MH Court Legislation Status	Dr. Kasofsky	<ul style="list-style-type: none"> • The Session ends Thursday and it is unsure if it will run into a special session because agreement can't be reached on the budget. • People seem to be supportive of the MH Court legislation and it will more than likely pass. • MH Court doesn't have funding but does help the lead judges in the parishes define what it is and has educated a lot of legislators. • Sandi Record said she understands that some of that legislation has been changed. • Dr. Kasofsky stated that Senator Broome hasn't been in touch with her. She stated that Debbie Duckworth testified while she was away and there was an article in the The Advocate. 	
Self-Generated Revenue Report	C. Nacoste	<ul style="list-style-type: none"> • C. Nacoste explained the report. She stated that according to what has been collected thus far and based on the projections, CAHSD will still be \$1.7M short of the revenue added to our budget to 	

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		<p>collect. Hopefully, this will be used as a benchmark for next year's budget and we can start adjusting what we will be expected to collect.</p> <ul style="list-style-type: none"> • If all goes well, the revised CAHSD Fee Policy will help us to get closer to the dollars needed going forward. • There is nothing new to report from the previous month's report. 	
Medicare Collections	C. Nacoste Dr. Kasofsky	<ul style="list-style-type: none"> • C. Nacoste explained the Magellan Timely Filing report. She stated that Medicaid allows 365 days to collect on a claim. There are several CAHSD claims entered in the system that are unbillable. They are unbillable because the codes included in the CAHSD contract haven't been included in the Magellan software. • As of June 1st, March, April, and May claims with these types of problems have timed out to bill with Medicaid. In a recent conference call with Ruth Kennedy, Medicaid Director, CAHSD explained the dilemma and was assured CAHSD would get an extension to go back and clean the claims up and rebill. • The CAHSD Billing Department is working hard to clean up those claims. • CAHSD has purchased software to use for billing along with Clinical Advisor that makes it easier to push the claims through for payment. • Page 6: There is \$102,000 worth of total claims that have timed out because of the inefficient system given when Magellan came in. • Dr. Kasofsky stated that Ruth Kennedy was not aware providers were providing services that were not being paid due to Magellan system limitations. She was told by DHH that the Districts had money sitting out there because they weren't billing. 	
FY 2014 Budget Prevention Funding, Funding Allocations	C. Nacoste Dr. Kasofsky	<ul style="list-style-type: none"> • C. Nacoste stated that the FY 2014 Budget hasn't been given to CAHSD at this time. C. Nacoste stated that all of the contracts have been reviewed for next fiscal year. This FY, State Office told CAHSD to apply a 33% reduction on all of the CAHSD treatment contracts. CAHSD chose not to do so this year because of the difficulty the providers would have in billing. We thought CAHSD could better absorb some of the losses than some of the very small contractors. The contractors were put on notice last 	

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		<p>year that we would be reducing those contracts this year.</p> <ul style="list-style-type: none"> • The report setup was explained to the Board members. The reports provide data indicating contracts as funded for the current year, contracts as they will be funded next fiscal year, the difference between the two, and contracts not renewing for next fiscal year or that were terminated during the current fiscal year. The report lists contracts administered through the CAHSD Business Office. C. Nacoste explained why the Telemedicine contract was through the Business Office. She explained the reasoning behind cuts of specific contracts. The QoL Pharmacy Contract provisions were explained. • Savings of the contract reductions/terminations will show in another document. • DD Contracts: In each of these contracts, the individuals are to decide who their particular care providers will be. <ul style="list-style-type: none"> ➤ With DD, a family member can be elected as the provider and then coordinate the services provided. Many will hire companies because of the reporting responsibilities. ➤ If a contracted provider on the list is not selected by a family for the upcoming year, CAHSD will not contract with that provider for the upcoming year. ➤ Contract status can change because the parent can decide at any point to cancel an existing contract, go back to a previous provider or to a new provider or even elect to provide the care themselves. ➤ The Case Manager assists clients with making the changes. ➤ CAHSD conducts un-announced audits on these contracts to make sure that clients are receiving the care and that the caregivers are there when they are supposed to be. ➤ Contract increases are due to either more clients selecting the services of that provider or that the level of client care has increased. ➤ The State Wide Vendor Payment System issues payment for these services. 	
		<ul style="list-style-type: none"> • Addiction Recovery Contracts: There is an overall 37% decrease 	

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		<p>from the current year to next year in the State General Fund portion of their funding. A lot of these contracts have Federal Block Grant funding which must be used for a specific purpose. State General funds are the dollars used to determine how much funding will be added to the Federal Block Grant.</p> <ul style="list-style-type: none"> • Mental Health Contracts: These contracts have a 29% cut overall. Mental Health contracts are almost all General Funding. • Prevention Contracts: West Baton Rouge did get a request to increase budget by \$3k and was approved. Bert Allain wanted to increase school outreach. • Final CAHSD Budget will be available at the next meeting. Looks like there was an amendment yesterday that put another \$200K into our budget for DD Services. We are sure that money will vetoed or taken out before the final budget is reached. FYI for those Board members from EBR Parish, Senators Dan Claitor & Bodie White tried twice to get \$250K funding added to CAHSD's Budget to go toward Crisis Services but were unsuccessful. 	
Contract Terminations	C. Nacoste	<ul style="list-style-type: none"> • Non renewed contracts were discussed. Some are moving to the BRAVE Program and some can bill Medicaid. There was discussion that Ascension Parish Counseling notified CAHSD by letter that they do not want to contract with CAHSD this year. There was discussion that a conversation needs to be had with the Ascension Parish President to make sure he is aware of their non-renewal. O'Brien House had two contracts to do Prevention in two different zip codes. CAHSD reduced their funding and combined the two contracts. Every effort was made to be fair in all parishes. 	
Report from Chairman			
Board Policy Review by Direct Inspection/Board Business			
Board Membership Status:	Karen Bray	<ul style="list-style-type: none"> • Dr. Dana Carpenter and another candidate were submitted by EBR to the Governor for consideration of reappointment/appointment. 	
Election of Officers	Christy Burnett	<p>C. Burnett stated that a nominating sheet is included in the packet but other nominations can be accepted at this time. There was motion to accept the nominees listed on the nominating sheet by Kay Andrews and seconded by Amy Betts. The new CAHSD Board Chair/Vice Chair are:</p>	

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		Chair: Victoria King/EBR Vice Chair: Kathy D’Albor/Iberville	
Board Members Self Evaluation Form	Christy Burnett	Board members who have not submitted the self-evaluation form were asked to do so as soon as possible. A copy of the form is included in the meeting packet in the binder.	
Policy Review Assignment: Governance Process/Style- Denise Dugas	Denise Dugas	D. Dugas stated that she reviewed the Governance Process/Style, Page 20 of 58 and the Board is in compliance.	
Community Participation	Christy Burnett	There was no community participation.	
		Christy Burnett stated that she had enjoyed her role as Board Chair the past year. She extended congratulations to Vickie King and Kathy D’Albor in their roles as the new Chair and Vice Chair.	
Next Meeting	Christy Burnett	The next Board meeting will be held on August 5, 2013 @ 3:00p.m. @ 4615 Government Street, Building 2, Baton Rouge, LA in Conference Room 200.	