

**Capital Area Human Services District Board Meeting  
Monday, February 7, 2011**

**Members Present:** Sandi Record, Chairperson; Kay Andrews; Rev. Louis Askins; Amy Betts; Christy Burnett; Sue Bushey; Dana Carpenter, Ph.D.; Kathy D’Albor; Wayne Delapasse; Gail Hurst; Vickie King; Kay Long; Gary Spillman; Jermaine Watson; and Barbara Wilson

**Members Absent:** Tandra Davison; and Becky Katz, Vice Chair

**CAHSD Executive Staff Members:** Jan Kasofsky, Ph.D., Executive Director; Carol Nacoste, Deputy Director

| <b>ITEM</b>   | <b>RESPONSIBLE PERSON</b>         | <b>DISCUSSION</b>   | <b>FOLLOW-UP TIMELINE</b>  |
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| <p><b>Consent Agenda</b></p> <ul style="list-style-type: none"> <li>Approval of Agenda February 7, 2011</li> <li>Approval of January 10, 2010 Minutes</li> </ul>  | <p><b>Sandi Record, Chair</b></p> | <p>The meeting was called to order at 3:00p.m. by Sandi Record, Chair.</p> <p>Amended agenda to add Action to Mission Statement item. Motion for approval of the January 10, 2011 minutes with the revised consent February agenda made by Christy Burnett, seconded by Amy Betts and unanimously carried.</p>  | <p><b>Action taken, motion carried</b></p>   |
| <p><b>Reports from Executive Director</b></p> <ul style="list-style-type: none"> <li>Communications: Discussion on Communicating to Parish Government &amp; Legislators</li> <br/> <li>Mission Statement Revisited</li> </ul> | <p><b>Dr. Kasofsky</b></p>        | <p>A lot of changes are going on within the state and the Board needs to discuss the importance of communicating with local governments. Discussion will be held later in the meeting.</p> <p>Attention was drawn to the <i>New York Times</i> article on the impact mental health care has on the police force. More people with mental illness are requiring more time with first responders; and rural law enforcement is often tied up for a day with one patient. CAHSD provides CIT free of charge and trains officers to handle behavioral health crises.</p> <p>The CAHSD Mission Statement needs to be updated. According to CARF, it is important to change the mission statement as the agency changes. The original statement, which has served CAHSD well for eight years, needed an explanation for the services CAHSD provides. A statement that focuses on a more holistic approach and evolves with the needs of the people that we serve has been requested by CAHSD staff – the draft Mission Statement is more concise/clear and covers all aspects of CAHSD services. Rev. Askins believes that there needs to be more than one meeting for discussion before approving the revised statement because he believes that the original statement was comprehensive and should be incorporated into the new instead of being discarded. It was noted that the Board was not neglectful in using the original mission statement. Further discussion noted that the revised statement is person-centered and more clearly defines what CAHSD does.</p> <p>Motion for approval of the draft CAHSD Mission statement made by Kay Andrews, seconded by Kathy D’Albor and unanimously carried.</p> | <p>Amy Traylor will add Mission Statement as tag line to all future agendas.</p><br><p><b>Action taken, motion carried</b></p> |

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| <ul style="list-style-type: none"> <li>Coordinated System of Care (CSoC), Community-wide &amp; Judges Meetings</li> <li>Safety Net Accountable Care Organization</li> </ul> |                    | <p>The Coordinated System of Care (CSoC) Fact Sheet was distributed. The CSOC was initiated by the Governor’s office to develop a system of Medicaid funded behavioral health care revolving around children at risk for out of home placement. The system will eventually encompass all children and adults. The system will be parish based and if a provider does not exist in the parish, mobile services could be provided.</p> <p>The first CSOC community meeting was held on January 7<sup>th</sup> to discuss Region 2 completing an application to establish the CSOC for this area. Vivian Gettys, CAHSD, will be coordinating the application. Over 100 people attended the January 7<sup>th</sup> meeting. CAHSD is providing facilitation and grant writing. The community will develop the criteria, not just one agency to provide assessment and treatment. It was noted that Ascension Parish has followed the DSS regions and is not included in the CSOC for Region 2. A judge from the Ascension is going to the Governor’s office to request that the parish be included in the Region 2 system of care.</p> <p>Since the January 7<sup>th</sup> meeting, a judges’ focus group was convened. The judges want to make sure providers are available in each parish.</p> <p>The next two CSOC community meetings will be held on February 14<sup>th</sup> and February 23<sup>rd</sup> at the BREC administrative office, room 1030, located at 6201 Florida Blvd. EBR is donating the room at BREC and Coca-Cola is donating water.</p> <p>Drs. Christopher Hunte and Sharon Parsons with Southern University and Cecile Guin with LSU will be part of a focus group to make sure families are part of the system.</p> <p>CAHSD clients will not be easily absorbed into the private sector once healthcare reform is implemented. Our Lady of the Lake Regional Medical Center (LOL) contacted Dr. Kasofsky to discuss a Safety Net Accountable Care Organization (ACO) partnership. The Safety Net is being developed for the CAHSD population and will connect community based providers with the hospitals to limit ongoing crises and the frequent use of the ERs.</p> <p>National consultants are working with LOL to develop a proposal for a \$10M grant from the Center of Medicaid Innovations. If awarded, CAHSD will provide the behavioral health part of the ACO. Data will be collected to determine the number of people who access the hospital for needs that should be taken care of in the community. There will be disincentives under healthcare reform for the hospitals to treat this population. Another meeting will be held at the end of this</p> |                    |

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| <ul style="list-style-type: none"> <li>• Managed Care</li> <br/> <li>• Infant Child Family Center Funding Strategy</li> <br/> <li>• Ends Policy 2011</li> <br/> <li>• 2012 Budget</li> <br/> <li>• Communication (continued from page 1)</li> </ul> |                    | <p>week. A demonstration project is the best way to test different models.</p> <p>The managed care companies, Magellan met with CAHSD twice and Value Options have met with CAHSD three times. Both companies stated that CAHSD has the infrastructure in place to be a provider under healthcare reform and they would not want to wait until someone else comes in to build one. Louisiana is a desirable state because of its bad health outcomes.</p> <p>There is a funding strategy meeting scheduled with Senator Broome for February 10<sup>th</sup> at 10:00am at the Infant, Child and Family Center (ICFC) located at 8415 Goodwood Blvd., Suite 200. All Board members are welcome to attend. CAHSD requested that the ICFC become a line item in the state budget because it won't be sustainable to continue to be funded through CAHSD escrow. Once the Medicaid plan is in place, ICFC should be able to bill for their services.</p> <p>Over 10,000 women in this region were screened using Dr. Chasnoff's tool for substance use during pregnancy. The data is entered into a national database. Currently the screening tool is used in all the WIC clinics. However, the state is looking to use a different tool, which causes a concern for ongoing consistent data collection.</p> <p>The Ends Policy (specific to 2011) is an outtake of the strategic plan outline that was presented to the Board in December. Policy objectives are strategic for CAHSD. The overall policy statement is to be structurally and functionally prepared to operate clinics in a managed care, managed Medicaid environment within the context of health care reform. The policy is divided between Purpose A and Purpose B. Dr. Kasofsky will give the Board an update at six months and the final status report will be given in December.</p> <p>Motion for approval of the Ends Policy made by Rev. Askins, seconded by Kay Andrews and unanimously carried.</p> <p>Representative Ponti advised Dr. Kasofsky to wait to speak with legislators on the region's increased population until after the census is published. Safety is an issue with people being deinstitutionalized into this region. Discharges are being tracked through the state office and through CAHSD clinics and the contract provider, for ACT/FACT Teams. Aside from state acute hospitals, there will be 400 people with developmental disabilities discharged from public facilities into the community.</p> <p>The Board returned to the discussion about communicating with local governments of being aware of population increases and budget cuts. The Board</p> | <p><b>Action taken, motion carried</b></p> |

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| <ul style="list-style-type: none"> <li>MHERE Update</li> </ul>   |  | <p>agrees that the process needs to begin. It was suggested that CAHSD request getting on the agendas for parish council/police jury meetings. Mr. Spillman asked what will be requested of the police juries/parish councils. Dr. Kasofsky replied that the juries and councils need to be aware of CAHSD, what it means to their parish, and make them aware of state budget cuts and how it will impact the parish budgets. Awareness is the critical piece – the ask could be that the region is gaining population and state budget cuts will have an impact on first responders and potentially the safety of the citizens. It is suggested that CAHSD draw up a resolution and ask for the councils/juries support after a short/concise presentation. The presentation will include a brief introduction about CAHSD, money spent in the parish, number of cases in the parish, work done with law enforcement, and ask the parish to provide support in CAHSD’s budget cuts not being as deep as the other regions. It was suggested CAHSD invite the head of the medical association from each parish to attend the jury/council meeting because they have a good lobby. The hospitals will be invited to attend.</p> <p>There is an MHERE meeting on February 10<sup>th</sup> at 8:00am to discuss services with the Department of Correction’s Medical Director. The Board is invited to attend this meeting along with the ICFC and CSoC meetings.</p> | <p>Call parishes to determine dates and times and try to get on the agenda.</p> <p>Amy Traylor to send out upcoming meeting information to Board.</p> |
| <p><b>Reports from Chair</b></p> <ul style="list-style-type: none"> <li>Agenda Planning Policy Review</li> <li>Other Business</li> </ul> | <p><b>Sandi Record</b><br/><b>Kathy D’Albor</b></p> <p><b>Sandi Record</b></p> | <p>The Agenda Planning Policy was reviewed by Kathy D’Albor. The Board is in compliance with the policy. The Chairperson’s Role Policy will reviewed by Gary Spillman at the March meeting.</p> <p>The March meeting will be held on the 14<sup>th</sup> because the 7<sup>th</sup> is a furlough day. The May meeting will be moved to May 9<sup>th</sup> due to Dr. Kasofsky and Carol Nacoste being at a conference.</p> <p>Sandi Record, Chair, asked the Board their opinions on the presentation last month by Tony Keck. Someone noted that we are not sure what CAHSD’s role will be under healthcare reform, but it has a good chance to continue to serve this community. Policy setting and implementing services is very different. There are many unknowns. Dr. Kasofsky noted that the Safety Net ACO will make CAHSD stronger and more efficient and will give the agency a lot of opportunities with operations. It was noted that the Board appreciated Kathy Kliebert joining Tony Keck so that she is aware of the Board’s concerns. The state has not decided on an electronic health record. CAHSD will review two other vendors because Anasazi has not been certified. Dr. Kasofsky will give an update at the next meeting.</p>   |   |
| <p><b>Adjournment/<br/>Next Meeting Date</b></p>   |  | <p>The next meeting will be held on March 14, 2011 at 3:00 p.m. at 4615 Government Street, Building 2, Room 205.</p>  |   |