

CENTRAL FLORIDA BEHAVIORAL HEALTH NETWORK
Board of Directors' Meeting Minutes
December 20, 2019 Meeting

Members: Clara Reynolds, Chair
Craig Latimer, Treasurer
Brena Slater, Secretary
Ray Gadd
Deputy Stephanie Krager
Joshua T. Barnett
Guy Blanchette
Dr. Jerome Jordan
Josh Dillinger
Kathleen Peters
Nancy Hamilton
Kevin Lewis
Ray Fischer
Robert C. Rihn
Thomas Stormanns
Victoria Scanlon
Teri Saunders

Members Absent: J. Scott Eller
Nathan L. Scott
Tracey Kaly
Patrick Heidemann
Dr. Ayesha Johnson
Alvin Wolfe

**Board of Directors'
Attorney:** John Bakas

CFBHN Staff: Linda McKinnon, President and CEO
Marcia Monroe
Julie Patel
Carrie Hartes
Luis Rivas
Laura Gross
Mary Wynhoff

CFBHN Guests: Melissa Leslie, DCF
April Lott, Directions
Barbara Daire, Suncoast
Craig Gilman, CBIZ
Rob Gilbright
Stacey Cook-Hawk, SalusCare
Joseph Rutherford, Gracepoint
Joe Lallanilla, Gracepoint

1. TOPIC: Call to Order/Introductions/Announcements

- The meeting was called to order at 10:00a.m.
- CEO advised that Marcia Monroe was retiring at the end of this year. There will be a formal retirement gathering on 1/15/20 with the location still to be determined.
- Luis Rivas, CFBHN'S new Director of Supportive Housing & Community Development, was introduced. The position was previously held by David Clapp, who has accepted the appointment to Chief Clinical Office due to Marcia Monroe's retirement.

- Senator Rick Scott letter - the letter was a supportive response to an advocacy letter from the CEO in relation to the CEO's role with the National Council for Behavioral Health.
- COU Audit – The audit took place in early December and was on site for a week. They interviewed 296 people and 26 network service providers. The board was identified as being well-informed and one of the network's biggest strengths. Many strengths were seen in leadership and governance & they felt that providers were respected by the board and network staff. There were many strong and positive attributes as well as best practices identified that included: good resource management, a knowledgeable board, the usage of a board packet and the electronic ability within the packet via links, risk management processes, data quality, scorecard process which they would like to see replicated, and placing people in residential services, benchmarking the network along with other ME's, a strong C&FA department & supporting of peers working in the community, Telehealth & Uberhealth usages, law enforcement engagement in the community meetings & committees, housing development in the community.

They identified a gap in residential beds for females and some issues with FIT (Family Intensive Treatment) program and if the vouchers could be used in a more flexible manner. They talked about the challenges of child welfare and fully integrating with them. There's a high turnover and more cross-training between the systems is needed.

Some best practices identified were the Helping Hands Program in Polk County, the use of SOAR, Contracts using SharePoint, the monitoring and how everything is tracked.

They interviewed the providers and for the most part, providers felt supported by the network.

The CEO thanked everyone for their involvement in the audit. The Chair thanked the board members for their involvement and experience on some of the tougher questions.

- DCF Accountability Act- DCF is filing a bill to create a grading system for Managing Entities and CBC's. This will be used to determine contract renewals. Linda is one of three representatives for the ME on the workgroup developing the matrix.

2. TOPIC: Consent Items (Routine Business/Committee Recommendations)

Discussion

& Decisions:

The Board approved:

- The November 6, 2019 Minutes
- August – September 2019 Financials

3. TOPIC: Action Items (Items Requiring Presentation, Public Comment & Discussion Prior to Action)

Discussion

& Decisions:

Audit Report YE June 30, 2019

Craig Gilman provided the year-end audit results for CFBHN. There were no instances of non-compliance, material uncertainties, fraud, or illegal acts identified. The network's total support and revenue and operating expenses are up about 6% due to new contracts with the Network.

Q. Relating to "other contract revenue", what contracts are outside of DCF contracts?

A. The network has 2 school system contracts (Hillsborough and Pasco) and a grant contract with the Healthy St. Pete Foundation.

New Developments relative to accounting standards; two specifically may have some impact over the next couple of years regarding financial statement disclosures for the Network.

- Revenue Recognition Standards – requiring entities to consider transactions other than contributions and investment returns relative to accounting criteria when recording revenue.
- Accounting for Contributions – the clarification of determining what qualifies as a contribution vs exchange transaction (grant). Government grants are included in this standard.
- Lease Accounting Standards – this standard won't apply for a couple of years but when it does, it will require that leases not reflected as assets or liabilities now to be included on financial statements.

Chair and board members recognized and commended Julie Patel, CFBHN CFO, for all her hard work that resulted in a clean audit.

A motion was made and second to approve the audit and the motion carried.

CFBHN Annual Risk Analysis Report

This report is a CARF requirement and presented to the Board QI Committee at every meeting and reviewed. Multi-Year Data Analysis – Incident Report Timeliness: The numbers stayed relatively the same over past 3 fiscal years. For CFBHN, each report that is late is reviewed and it's determined what can be done to ensure the timeliness of the reports moving forward. No trend changes in the Provider Incident Reports by Level of Care. Manner of Death: The Board QI Committee is focusing on this area of the report, specifically that the "unknown" is a high number (69 for FY16-17 and 83 for FY18-19). Unknown is generally due to not having a clear understanding from the ME or the provider just doesn't know, only that someone has died. The committee is looking more into this and trying to find a resolution.

Q. Is there anything being done by the network that might have resulted in a decrease in suicide rates for FY18-19?

A. Not specifically. Some of the "unknowns" may be suicides but there's no way to gauge whether the network or anyone or anything was done that resulted in a decrease in the suicide rates.

Incident Reports by Category – nothing stands out as cause for concern. The Elopement counts have decreased which could be due to length of stay for clients.

Q. What is the current definition of elopement and/or has that definition changed?

A. It hasn't changed and basically means the client left a facility without permission. The Director of QI, Stephanie Johns will be consulted on that and she can confirm that information at the next meeting.

The network has focused largely reducing the amount of inadvertent PHI from the network to a third party. The network has worked hard to educate the staff as violating the disclosure policy is a serious risk. Inappropriate data release is also a serious risk and tracked very closely by the network.

This report does not require a vote as it's part of the Network's CQI Plan which was already approved by the board. It's simply being presented to the board.

4. TOPIC: Information Items:

Discussion

& Decisions:

CEO Report

State has hired consultants to conduct a Medicaid billing Review. The network was one of 3 ME's randomly chosen to participate in the review. The stated reason for the review was that ACHA should be paying for services that DCF is paying for and to maximum revenues. The network was advised that this isn't a potential payback situation but the letter that came out doesn't quite feel that way. They're looking for possible double billing for the same service, if providers are billing for individual vs group, denials, etc.

The Medicaid Audit was expected to be completed by the end of the year, but the network is still waiting for a list of the individuals whose records will be reviewed. The providers have been notified of their participation. A conference call between the network and the auditors suggested all the information that needed to be pulled and submitted would happen a week ago but still waiting. The state and the consultants are working on a Business Associate Agreement (BAA). The providers are to submit the required documentation to the network and the network will send to the state and there is concern about HIPPA and release of information with this process.

Melissa Leslie clarified that with confidentiality concerns, there's been more thoughtful negotiations with the consultants. No specific date for the push out is known yet but she'll share that information as soon as she knows. Providers that were randomly selected are Centerstone, Operation Par, Gracepoint, Directions, Suncoast, and Peace River. Providers haven't been told what specific information will need to be pulled and submitted but it's believed it will probably be looking at how services were billed and for about 100 clients.

Q. Does this audit pertain to traditional or managed Medicaid?

A. Managed

Q. Is it for claims paid or claims submitted?

A. That's still not known but what is known is that they're choosing individuals that are Medicaid eligible that have been paid for services through DCF funding.

Q. What is the board's responsibility or accountability, if any, to be sure the providers are billing the correct insurance?

A. The network's contract with the dept. has changed. The network was required to be the last resort biller but that was removed from the contract a few years back. The guidelines for the network to receive Medicaid data was also removed. The Network was advised by the Dept. not to create barriers for clients needing services & the Network has been stringent on this. Evidence of a denial or non-billable service from providers is requested when asked to pay and providers are asked to sign a monthly attestation as well even though it's not a requirement.

Currently, the deadline is January 10th but that date may be extended.

Both Suncoast and Directions have had very intensive audits recently and both received clean audits. The Chair congratulated them both for a clean audit.

It's expected that DCF will become more stringent with the use of DCF dollars for Medicaid eligible people and it's feared that some providers won't have the best outcomes even though they're doing the best they can. Many providers are over producing but aren't credited for over producing/over serving and doing more with less. Of the provider's that are being audited, there's \$1.3M in over production.

The CEO was advised verbally that the Dept. will be renewing the network's contract for 2 years rather than 5 years. This is not related to any performance issues and will be the same 2-year blanket for all the ME's. If Legislative language isn't changed, it appears the contracts will go out for bid in 2 years. It's disappointing given all the work that went into the renewal process.

Melissa confirmed that there will be a 2-year blanket contract renewal for all of the ME's whose contracts are coming up for renewal except for 2 of the ME's in another region who were up for renewal at the end of this year that have already been renewed for five years.

The CEO advised that the network may need to call on people to help educate on the need to change SB 12 as it appears that CFBHN will not be eligible for a renewal at the end of two years, and will be forced to bid on the contract. Melissa Leslie is checking on this issue with headquarters.

Department Directors Report

No report today but will report on 4DX and ROSC at a future meeting,

5. TOPIC: Committee Reports

Executive Committee:

No report for December 2019

Governance Committee:

No report for December 2019

Finance Committee:

Report presented by Gilman at today's meeting.

Quality Improvement Committee:

Next meeting is 1/16/20 and an update will be provided at the next meeting.

IS Strategic Committee:

Network and providers continue to work diligently on arising issues

Legislative Committee:

All LBR's are moving forward. The network is working closely with Hillsborough County and working with Pasco County on the Recovery through Work program. Pinellas Co. Marchman Act Beds – detox beds have been filed and being sponsored by Senator Rouson and Representative DeCeglie. There is also a project for 15 SRT beds in Hillsborough County, sponsored by Senator Bean.

Diversity Committee:

The Board committee met with the staff members of the diversity committee and discussed mutual goals and reviewed survey results. Response to the survey results by Board members was not as anticipated. The results received reflected a lack of awareness regarding diversity issues. Next steps are to create additional educational opportunities for the board and network staff. Once the Committees determine that we have the competencies required this initiative will be expanded throughout the provider network.

6. TOPIC: Regional Council Reports

Circuit 20:

No December meeting. Next meeting 1/10/20.

Circuit 13:

Met on 12/3/19 that was a combined meeting for both Nov. and Dec. The next meeting is 1/28/20.

They discussed law enforcement initiatives such as the CIT Crisis Intervention Team) Training for law enforcement. Network providers are working to enhance the CIT program. Deputy Krager provided an excellent overview from the Sheriff's department. TPD working to find ways to divert some 9-1-1 calls so officers aren't dispatched for every call. This is a partnership with Gracepoint and the Crisis Center.

School projects relating to Stoneman Douglas funding as well as Child Welfare funding that's in place.

Circuit 12:

December and November meetings were both cancelled.

Circuit 10:

COU met and the day went well overall. Tri-County, Peace River, and Moore Haven Hospital all participated.

Care Coordination continues to be a vibrant activity in all 3 counties. Most clients come through system via crisis services.

Helping Hands program along with ROOTS, primarily a housing program, continue to move forward.

Peer Specialist (PS) training at TCHS on 3/16 – 3/20/20 to be facilitated by Beth Picora, C&FA Specialist with CFBHN. TCHS has hired 3 PS's and is hoping to hire 6 more.

Tri County Human Services and the Peace River Center continue with a telehealth service. Protocols are being developed and 31 individuals have been served in the 3 months of operation.

Circuit 6 Pinellas

Continue to work on the Wellness Connection & moving forward with the architect for CSU at PEMHs and reworking the campus.

Pinellas County has contracted with KPMG consultants to look at the delivery of behavioral health services and SOC overall in the county. Interviews have started and April had hers yesterday. The completion timeline has been moved back to February.

Linda mentioned that the consultants just had a meeting with the PICA steering committee and members were asked to sign a document of support and agreeance with specific principles. She'll include the document in the next meeting's board packet. The network & consultants had a conference call relating to data and information being requested from the consultants. The network will be providing a number of reports including some access to SharePoint for the Counties use.

Circuit 6 Pasco

No report

7. TOPIC: Open Agenda

Chair recommended moving forward, a board meeting schedule of every other month, still on the 4th Friday except for in December. The schedule would be Feb, April, June, August, Oct., and December. A motion was made and second to accept that schedule. The motion carried.

A discussion was brought up on whether or not FAME has been discussing the issues related to dollars supporting mental health in schools but no additional dollars to provide ongoing services in the community. There is interest in identifying managing entities to coordinate school referrals to the community but no additional funds have been identified for this service. Network leadership met with Representative Jennifer Webb who is sponsoring part of that bill, and discussed this need.

Q. Will providers have to be prepared to do ROI forms to keep track of base funding items?

A. The network submitted a version of ROI forms, however the Department has determined that they will be creating a uniform document to be utilized across the state. We have not received the document to review from the Department yet.

Chair mentioned first lady and bullying initiative, Dr. Eric Hall, from Hillsborough County, will be speaking to how funding would support this.

Josh B. – Governor’s Opioid Taskforce, by the AG, asked the BOCC’s to solicit their strategies. Meeting being called 1/9/2020 to hear from the BOCC’s.

Manatee County became has authorized infectious diseases elimination via syringe exchange services. The Chair advised that Hillsborough County also has a needle exchange program in place.

Marcia thanked the board for all the years of hard work and collaborations.

8. TOPIC: Adjournment

The meeting was adjourned at 11:36am

The next meeting is scheduled for February 28, 2020.

Approval

The minutes of this meeting were approved at the Board of Directors’ meeting conducted on _____. A signed copy of the minutes may be requested in writing to:

Brena Slater, Secretary - CFBHN Board of Directors via email to lgross@cfbhn.org, via fax to 813-740-4821 or via written request.

Brena Slater, Secretary
CFBHN Board of Directors
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Respectfully submitted by _____ - Brena Slater, Secretary