The Oklahoma Department of Mental Health and Substance Abuse Services (452)

Lead Administrator: Terri White, Commissioner of the ODMHSAS

Lead Financial Officer: Rich Edwards, CFO

FY'19 Projected Division/Program Funding By Source										
	Dept	Appropriations	Federal	Revolving	Local	Other*	Total			
Central Administration	10,88	\$9,720,170	\$2,408,015	\$2,477,968			\$14,606,153			
Treatment Beds	20,88	\$123,681,975	\$11,477,935	\$22,392,034			\$157,551,944			
Community Based Treatment & Recovery Services	30,88	\$200,215,828	\$39,723,825	\$59,183,924			\$299,123,577			
Prevention	50	\$3,490,172	\$9,578,142	\$808,426			\$13,876,740			
Total		\$337,108,145	\$63,187,917	\$84,862,352	\$0	\$0	\$485,158,414			
		FY'18 Carryover and	d Refund by Fundi	ng Source						
		Appropriations	Federal	Revolving	Local	Other*	Total			
FY'18 Carryover	ſ									
		\$0					\$0			
ODMHSAS does not carryover funds from one fiscal year to the next.										

What Changes did the Agency Make between FY'18 and FY'19?

1.) Are there any services no longer provided because of budget cuts?

Due to the utilization of savings from a change in the FMAP rate, ODMHSAS did not have to make any cuts going into SFY-2019.

2.) What services are provided at a higher cost to the user?

None

3.) What services are still provided but with a slower response rate?

No additional changes were made to ODMHSAS service delivery.

4.) Did the agency provide any pay raises that were not legislatively/statutorily required?

ODMHSAS implemented the pay adjustments that were required by HB 1024 of the 2018 session, as well as rebalancing of ODMHSAS front-line staff due to the compression and inequities created by HB 2131 from the 2014 session.

FY'20 Requested Division/Program Funding By Source										
	Appropriations	Federal	Revolving	Other	Total	% Change				
Central Administration	\$9,720,170	\$2,408,015	\$2,477,968		\$14,606,153	0.00%				
Treatment Beds	\$124,922,186	\$11,477,935	\$22,392,034		\$158,792,155	0.79%				
Community Based Treatment & Recovery Services	\$359,220,080	\$39,723,825	\$59,183,924		\$458,127,829	53.16%				
Prevention	\$6,525,837	\$9,578,142	\$808,426		\$16,912,405	21.88%				
Total	\$500,388,273	\$63,187,917	\$84,862,352	\$0	\$648,438,542	33.66%				

FY'20 Top Five Appropriation Funding Requests						
	\$ Amount	Maintenance Detail				
1. Maintain existing programs	\$18,188,588					
A. Behavioral Health Program Growth (2.4%)		\$3,175,204				
B. CHIP FMAP Decrease (96.67% to 87.71%)		\$3,352,224				
C. Federally Disallowed Defined Benefit (Pathfinder) Contribution		\$375,000				
D. Restoration of Provider Rate and Therapy Cuts		\$10,786,161				
E. Suicide Prevention (Discontinued Federal Funding)		\$500,000				
2. Smart on Crime Initiative	\$90,210,000					
3. Marijuana Treatment & Prevention Costs Resulting from SQ 788	\$3,513,989					
4. Alcohol Dependence Treatment and Prevention Resulting from SQ 792 and SB 383	\$37,817,372					
5. AOT - Full Implementation of the Labor Commissioner Mark Costello Act	\$12,600,179					
Total Increase above FY-19 Request	\$ 162,330,128	\$ 18,188,589				

Does the agency have any costs associated with the Pathfinder retirement system and federal employees?

ODMHSAS is impacted by the DHHS Department of Cost Allocation Services decision to disallow the portion of employer contributions for employees on the new defined contribution (Pathfinder) plan that is remitted to the OPERS defined benefit plan. This disallowance has an annual estimated impact to ODMHSAS of approximately \$125,000 for the current fiscal year. That amount represents our estimate of the current impact of this disallowance, however as current employees leave and they are replaced by newer employees this amount will grow over time. Based on ODMHSAS current level of federal funding this amount could eventually reach \$375,000 or more depending on the retirement selections of the federally funded ODMHSAS employees. ODMHSAS is not currently drawing any federal funds for this disallowed contribution, however the agency does not have another revenue source available to pay for these disallowed contributions and ODMHSAS will need additional state appropriations to cover these costs.

How would the agency be affected by receiving the same appropriation for FY '20 as was received in FY '19? (Flat/ 0% change)

A flat budget is a reduction of \$7.4 M, the cost of maintaining services at the current level. In addition, this cut would include an accompanying loss of \$19.6 M in federal funds for a total loss of \$27 M. Using an average cost for services of \$2,000 per person (inpatient, residential and outpatient services combined), this would mean a loss of treatment services to approximately 13,540 Oklahomans. This is in addition to the 73,000 Oklahomans who already lost services due to the forced cuts in FY16. Cuts would be experienced by both public and private providers and could result in closing satellite facilities, reducing hours, reducing services below clinical indicators, or through other actions that will adversely affect the health of Oklahomans (as well as local economies). Specifically, when individuals do not receive needed services, we see an increase in crisis situations, requiring increased law enforcement transportation and criminal justice system involvement, emergency room admissions, and foster care involvement. Additionally, federal funding could be reduced if state appropriations do not address maintenance needs.

How would the agency handle a 2% appropriation reduction in FY '20?

A flat budget is in itself a reduction of \$27 M including the accompanying loss of federal funds, the cost of maintaining services at the current level. Using an average cost for services of \$2,000 per person (inpatient, residential and outpatient services combined), this would mean a loss of treatment services to approximately 13,540 Oklahomans. An additional 2% cut to appropriations would be another \$6.7M in state funds and \$17.9M in federal funds for a total cut to treatment services of \$24.6 on top of unmet maintenance needs. That could mean the elimination of treatment services for another 12,332 Oklahomans. A combined cut to maintenance needs and a 2% cut to appropriations would mean a \$14.1 M loss in appropriated funds, plus an accompanying loss of \$37.6 M in federal matching funds, for a total loss of \$51.7 M, resulting in 25,872 Oklahomans being impacted. This is in addition to the 73,000 Oklahomans who already lost services due to the forced cuts in FY16. Cuts would be experienced by both public and private providers and could result in closing satellite facilities, reducing hours

who aneady lost services due to the forced cuts in FFF10. Cuts would be experienced by both public and private providers and could result in closing satellite facilities, reducing nours, reducing services below clinical indicators, or through other actions that will adversely affect the health of Oklahomans (as well as local economies). Specifically, when individuals do not receive needed services, we see an increase in crisis situations, requiring increased law enforcement transportation and criminal justice system involvement, emergency room admissions, and foster care involvement. Additionally, federal funding could be reduced if state appropriations do not address maintenance needs and appropriations are cut by 2%.

Is the agency seeking any fee increases for FY '20?

No, ODMHSAS is not seeing any fee increases in FY-20

- What are the agency's top 2-3 capital or technology (one-time) requests, if applicable?
- 1 Storm shelters for the Children's Recovery Center and the Rose Rock Recovery Center
- 2 Roof replacements at the Oklahoma Forensic Center and Jim Taliferro CMHC
- 3 Construct replacement building for the Lighthouse treatment facility in Woodward

Fe		Funds				
	FY 1	19 projected	FY 18	FY 17	FY 16	FY 15
BHSIS-SMHA 000088000	\$	66,654	\$ 171,703	\$ 137,363	\$ 137,363	\$ 34,341
Implementation Alcohol/Drug 000810000	\$	57,015	\$ 57,015	\$ 57,015	\$ 57,015	\$ 71,269
National School Lunch Program 105550001	\$	65,000	\$ 35,338	\$ 50,763	\$ 31,925	\$ 39,681
Shelter Plus Care 142380000	\$	208,196	\$ 269,135	\$ 208,013	\$ 232,597	\$ 219,544
Shelter Plus Care 142670000	\$	24,675	\$ 22,475	\$ 11,194	\$ -	\$ -
Drug Court Discretionary Grant Program 165850000	\$	803,754	\$ 589,492	\$ 553,119	\$ 674,167	\$ 984,510
Too Much to Lose 167270000	\$	-	\$ -	\$ -	\$ -	\$ 78,060
JMHCP 167450000	\$	-	\$ 95,510	\$ 92,675	\$ 71,702	\$ 58,759
Second Chance Act Reentry Initiative 168120000	\$	234,494	\$ 233,476	\$ 101,920	\$ -	\$ -
Justice Reinvestment Initiative 168270000	\$	1,147,305	\$ 213,591	\$ 67,134	\$ -	\$ -
National Priority Safety Programs 206160000	\$	194,061	\$ 122,864	\$ 91,730	\$ 157,230	\$ 17,940
Special Education Grants to States 840270000	\$	248,000	\$ 263,141	\$ 143,457	\$ -	\$ -
Hospital Preparedness Program (HPP) and Public Health Emergency 930740000	\$	-	\$ -	\$ -	\$ 7,603	\$ -
Enhance Safety of Children Affected by Substance Abuse Disturbances 930870000	\$	600,000	\$ 414,427	\$ 738,119	\$ 508,319	\$ 549,285
Comprehensive Community MH Services for Children with Serious Emotional 931040000	\$	3,000,000	\$ 3,108,232	\$ 722,532	\$ -	\$ 986,108
Projects for Assistance in Transition from Homelessness 931500000	\$	452,678	\$ 666,089	\$ 530,076	\$ 638,671	\$ 425,322
Research on Healthcare Costs, Quality and Outcomes 932260000	\$	44,602	\$ 98,655	\$ 40,575	\$ _	\$ -
Oklahoma Capacity Grant 932430000	\$	12,408,286	\$ 10,988,702	\$ 8,383,977	\$ 7,908,289	\$ 8,783,140
Temporary Assistance for Needy Families 935580000	\$	3,255,669	\$ 277,875	\$ 2,698,722	\$ 3,798,525	\$ 2,745,835
PPHF-Cooperative Agreement to Implement the National Strategy for Suicide Prev. 937640000	\$	-	\$ 312,009	\$ 471,991	\$ 386,713	\$ 170,284
Medicaid Administrative Claiming 937780000	\$	1,100,403	\$ 998,819	\$ -	\$ 112,269	\$ -

\$3,000,000 \$1,149,033

Total

Opioid STR 937880000	\$	11,108,387	\$ 4,195,301	\$ 1,276	\$ -	\$ -
Section 223 Demonstration Programs to Improve Community Mental Health Service 938290000	s \$	-	\$ -	\$ 800,808	\$ 181,565	\$ -
Block Grants for Community Mental Health Services 939580000	\$	7,314,940	\$ 5,170,707	\$ 4,622,507	\$ 4,706,088	\$ 4,690,734
Block Grants for Substance Abuse & Prevention Treatment 939590000	\$	17,151,147	\$ 15,895,621	\$ 15,818,977	\$ 14,935,881	\$ 16,964,671
Mental Health Disaster Assistance & Emergency Mental Health 939820000	\$	-	\$ -		\$ -	\$ 204,034
Assisted Outpatient Treatment 939970000	\$	1,000,000	\$ 834,967	\$ 360,846	\$ -	\$ -
Social Innovation Fund Pay for Success 940240000	\$	-	\$ 21,800	\$ -	\$ -	\$ -
FEMA Public Assistance Grant 970320000	\$	-	\$ -	\$ 311,023	\$ 380,797	\$ -

Federal Government Impact

1.) How much federal money received by the agency is tied to a mandate by the Federal Government?

None - The agency provides state match for the Medicaid program but does not receive the corresponding federal dollars.

2.) Are any of those funds inadequate to pay for the federal mandate?

No

3.) What would the consequences be of ending all of the federal funded programs for your agency?

Ending block and categorical grants will result in a 12.4% reduction of Mental Health and Substance Abuse Treatment and Prevention services. In addition, ending Federal Medicaid participation will cost the State over \$360M in behavioral health services.

4.) How will your agency be affected by federal budget cuts in the coming fiscal year?

Any budget cut to the \$63 M in federal funds received by the agency will result in the reduction and/or elimination of the respective programs. For example, the Homeless grant, Shelter grant, SPF SIF grant, Drug Court Expansion grant, OK Adult State Wide Category grant, and Youth Suicide Prevention grant will be reduced and/or eliminated to absorb reduced funding.

5.) Has the agency requested any additional federal earmarks or increases?

ODMHSAS applies for new categorical grants each year.

Division and Program Descriptions

Central Administration

The Central Administration program provides administration, direction, planning and technical assistance to facilities operated by the Department as well as to contract providers. It sets standards, policies and goals for programs and monitors programs to ensure required criteria are met. Additionally, Central Administration performs evaluations and data analysis and maintains an automated information system of clients receiving services.

Treatment Beds

These hospitals provide acute inpatient psychiatric care for individuals residing in community mental health center service areas who do not have psychiatric inpatient care available or longer term care for individuals who are a danger to themselves or others and are unable to temporarily function in a community setting. The Oklahoma Forensic Center conducts forensic evaluations for the judicial system and provides inpatient care for persons found not guilty by reason of insanity.

Community Based Treatment and Recovery Services

The department oversees a statewide program to administer both inpatient/residential and outpatient community-based mental health and substance abuse treatment services for qualifying Oklahomans. This is accomplished through utilization of a statewide public/private provider network. The majority of services are delivered through locally contracted provider organizations.

Mental Health Programs – This includes the delivery of outpatient mental health services across all age spectrums and severity of illness. This includes community-based outpatient services such as case management, therapy, medications, crisis intervention and inpatient services. Also included in this are initiatives to serve higher risk populations (PACT, Mental Health Court, Systems of Care etc.) The department follows a tiered delivery of services designed to serve the most severely ill first. This approach is based on key principles that stress the following: • Crisis intervention will be available to all in need. Longer-term services will be targeted to those most in need.

- A thorough face-to-face evaluation of the need for mental health services will be conducted for anyone meeting financial need criteria.
- Persons meeting defined diagnostic criteria will receive services on a timely basis, within uniformly defined time frames.
- Continuity of care between inpatient and outpatient providers will be emphasized.
- Needs are prioritized and resources carefully directed to ensure a standard of excellence for services that are delivered.

Substance Abuse Programs- This includes the delivery of outpatient substance abuse services such as medically supervised detoxification, non-medical detoxification, day treatment, sober living, DUI school, Drug Court and other outpatient services. More than one hundred private non-profit contractors and state operated facilities provide substance abuse programs. The intent is to provide a continuum of services to individuals with substance abuse disorders so they may return as sober and productive members of society.

Prevention Services

Prevention services include oversight and delivery of initiatives targeting communities throughout the state. The department oversees a network of contracted Regional Prevention Coordinators to conduct localized prevention efforts, as well as overseeing the delivery of targeted statewide initiatives such as TakeasPrescribed and the campaign to reduce prescription drug abuse, suicide prevention, 2M2L prevention of underage drinking initiative, SYNAR compliance enforcement and reporting, PACT360, SBIRT, Mental Health First Aid and a variety of other noteworthy efforts. Additionally, the department operates a publicly accessible statewide prevention clearinghouse to provide support information and materials to Oklahomans.

	FY'19 Budgeted FTE									
	Supervisors	Classified	Unclassified	\$0 - \$35 K	\$35 K - \$70 K	\$70 K - \$\$\$				
Central Administration	28	0	116	24	71	21				
Treatment Beds	113	470	584	701	323	30				
Community Based Treatment & Recovery Services	57	113	404	259	221	37				
Prevention	11	0	29	2	26	1				
Total	209	583	1133	986	641	89				

FTE History								
	2019 Budgeted	2018	2017	2015	2010			
Central Administration	116	101	111	116	145			
Treatment Beds	1054	785	801	804	824			
Community Based Treatment & Recovery Services	517	808	798	806	1191			
Prevention	29	27	23	20	32			
Total	1716	1721	1733	1746	2192			

Performance Measure Review									
	FY 18	FY 17	FY 16	FY 15	FY 14				
Measure I									
Maintain the wait time between first contact and face-to-face visit for behavioral health treatment to less than 3 days every year through 2018.	3	3	3	3	3				
Measure II									
Maintain the percentage of individuals receiving inpatient or crisis unit care who return within 180 days at 20% or below every year through 2018.	22.09%	21.85%	19.67%	20.51%	20.86%				
Measure III									
Maintain the percentage of participants in mental health reentry programs returning to prison within 36 months at 24.2% or below every year through									
2018.	23.00%	22.80%	22.30%	23.50%	24.10%				

Revolving Funds (200 Series Funds)							
	FY'16-18 Avg. Revenues	FY'16-18 Avg. Expenditures	June '18 Balance				
Department of Mental Health Revolving Fund	\$66,576,631	\$65,526,346	\$6,756,399				
This fund receives multiple revenues including, Medicaid Reimbursement, Interagency Reimbursements, Tobacco Tax, Unclaimed Lottery winnings and various others fees.							
Drug Abuse Education and Treatment Fund This funds receives court fines from various counties in Oklahoma that administer drug court programs.	\$576,718	\$608,789	\$21,356				
Capital Outlay Fund	\$13,975	\$0	\$98,187				
This fund is used for capital expenditures.							
Group Housing Loan Revolving Fund This fund receives interest on a corpus that is held by a third party to provide Housing Loans.	\$3,182	\$3,050	\$2,101				
Community-Based Substance Abuse Rev Fund This fund receives revenue from Beverage Licenses sales, DUI trainings and ADSAC assessments fees.	\$824,018	\$905,905	\$235,850				
Prevention of Youth Access to Alcohol Fund	\$18,014	\$24,342	\$63,523				
This fund receives revenue from juvenile court fines							
Medicaid Disallowance Fund This fund holds funds for disallowances related to ODMHSAS Title XIX program.	\$283,082	\$0	\$0				
This balance represents a snapshot in time and due to the pass through nature of ODMHSA	AS revenue, which includes the ongoin	ng billing of medical treatment services	, if the balances were				

pulled on another day, they may be significantly different. For example on August 30th, 2018 the balance in the ODMHSAS revenue, which includes the ongoing binning of medical dreatment services, if the balances were funds are already obligated/encumbered for payments for specific purposes (e.g., treatment services rendered and Medicaid disallowances) and/or permitted by statute to be expended for very specific purposes (e.g., Prevention of Youth Access to Tobacco, 37 O.S. 608, treatment in accordance with the Oklahoma Drug Court Act, 63 O.S. 2-503.2).