

La Clinica de Familia, Inc.
Mental Health Services Transition Plan

Dona Ana County – Las Cruces and Anthony
CLINICAL STAFF 66 FTE/PTE ADULTS = 943 CHILDREN = 693 Within last 90 days

STAFF CONSUMERS	<u>Outpatient Therapy</u> 15 (15 Licensed Therapist) 648 Adults & Children Adults 80% SMI	STAFF CONSUMERS	<u>Psychosocial Rehabilitation (PSR)</u> 9 (9 Certified Staff) 45 100% SMI
STAFF CONSUMERS	<u>Assertive Community Treatment (ACT)</u> 12 (1 Prescriber, 1 LPN, 1.5 Therapist, 9 Certified Staff) 56 100% SMI	STAFF CONSUMERS	<u>Medication Management/Tele</u> 8 (4 Psychiatrist, 3 Nurse Practitioner, 1 Certified Staff) 410
STAFF CONSUMERS	<u>Comprehensive Community Support Services (CCSS)</u> 6 (6 Certified Staff) 123 100% SMI or SED	STAFF CONSUMERS	<u>Behavior Management Services (BMS)</u> 2 (2 Certified Staff) 6 100% SED
STAFF CONSUMERS	<u>Treatment Foster Care (TFC)</u> 3 (3 Licensed Therapists; 8 Treatment Coordinators) 51 (Shelter = 8) 100% SED	STAFF CONSUMERS	<u>Multi-Systemic Therapy (MST)</u> 4 (Licensed Therapists) 20 100% SED
STAFF CONSUMERS	<u>Mobile Crisis Response Team</u> 7 310 hours / 15 hours non-organization clients	STAFF CONSUMERS	<u>Crisis Housing</u> CCSS Staff 4 100% SMI
STAFF CONSUMERS	<u>Boys Group/Shelter/Residential</u> (Shared Staff Outpatient) 7 Group 100% SED /9 Shelter 88% SED (current)	STAFF CONSUMERS	<u>Girls Group/Shelter/Residential</u> (Shared Staff Outpatients) 4 Group 100% SED /13 Shelter 69% SED
STAFF CONSUMERS	<u>Tele-Psychiatry Contractors (pt)</u> NOT NEEDED	STAFF CONSUMERS	<u>Community Corrections</u> 1 (which is part of the 15 outpatient) 36 which is part of the 648 serviced in outpatient
Services NO LONGER Provided:			
Adult Residential, Safehouse, Access to Recovery (ATR), DWI School, Magistrate Drug Court (DC), Outpatient Substance Abuse (OPSA), Registered Clients (referrals from various Courts/CYFD/Probation/Parole – mandated treatment), Transitional Reporting Center (TRC), US Probation/Parole (USPO)			

LCDF TRANSITION STATUS

Budget negotiated with MCO's as of 6/12/2015, start-up funds received from 2 of 5 organizations

2,098 Original count sent by Parker Dennison Consultants as of 4/7/2015

- 2,460 number of High Risk Consumers tallied from the MCO's lists
- 540 are **current** La Clinica de Familia Patients
- 1,920 new Consumers to enroll into LCDF's System
- As of 7/14/2015 we have received 399 Consumer Packets (within the last 5 work days)
- 70 entered into our system
- 17 missing information
- 50 in after 5:00 p.m. yesterday
- 262 currently being entered
- GOAL enter 69 packets per day by August 3, 2015

439 Consumer Records Copied and Demographics entered into our IT system, Assessments are being verified and it is our hope that the majority of those outstanding will be updated before Transition. If not, the Assessments will be scheduled ASAP. **(ALL Assessments for CYFD Consumers are up-to-date)**

All Programs that are currently active with the exception of Treatment Foster Care will be transferred on August 1, 2015. (TFC could take up to 5 more months).

Change of Scope submitted, but had a setback due to the submission of incorrect addresses, and additional sites being added (Mobile Crisis – services originally intended to be acquired by another organization)

STAFF

On Saturday July 11th, 25 LFNM staff went through Orientation and received Letters of Hire for LCDF.

On July 17th and 18th Orientation for 25 staff each day is scheduled for a total of 75 by Monday – these are current staff.

On Monday July 6th 8 new staff for the Transition were Oriented. Every Monday Orientation for new staff and those filling current vacancies and filling the vacancies resulting from LFNM Reduction in Force in December will be Orienting.

TFC will go through Orientation once their Transition date is verified.

LISCENSING & CERTIFICATION

- CMHC: Letter of interest sent and received by BHSD. Application completed and mailed out with all documentation and check on 7/2/15
- Pharmacy: Applications completed. Custodial licenses reviewed and approved by inspector. Main Pharmacy at Griggs site Class B license is pending, next NM Pharmacy Board meeting on August 20th
- CYFD:
 - BMS Completed application, turned in to CYFD and received readiness review notification on 7/13/15
 - CCSS Completed application, turned in to CYFD and received readiness review notification on 7/13/15
 - Group Home Boys: Completed application, turned in to CYFD physical walk through (review) scheduled for July 20th
 - Group Home Girls: Completed application, turned in to CYFD physical walk through (review) scheduled for July 20th
- Shelter: Completed and pending notification. Attended state wide meeting for shelter providers on 7/7/15

FACILITIES

Lease for Anthony site signed and secured

Lease for existing Griggs sites – secured need to sign lease by next week

Lease for Group Homes - secured sign next week

Lease for Crisis Home – signed and secured

New sites on Griggs – new landlord negotiations positive – should hear by end of business today

LCDF Barriers and Challenges to Providing Services as of 8/3/15

1. Receiving accurate and current information regarding Programs, Sites, Staff, and Consumers
2. Consumer information is on paper and in Behavioral Health Electronic Record (BHER)
 - a. Pursued a transfer of information from LFNM to LCDF's system = Continuity of Care Document (CCD) transfer with items such as demographics
 - b. CCD was not practical because of cost and limited amount of information that would be transferred – such as Medication List, Assessments etc. would have to be individually entered so staff was hired and is process
 - c. Today was the 1st day our IT staff was given permission to have full access to the building to plan for transfer
3. Current LFNM staff have ongoing responsibilities to provide services until the end of July so access to knowledgeable staff has been limited
4. Working closely with day to day billing and credentialing issues with MCO's Such as:
 - a. MCO's want all same day services billed line item by line item with Revenue Codes per services noted to account for utilization. (MCO's were let known that our billing system is not capable of combining all same day services on one claim) MCO's are supposed to get back to us on how we need to bill to be able get reimbursement.
 - i. DANGER's:
 1. denials and will raise red flags with auditors
 2. will this be presumed as fraudulent claims
 3. even though multiple claims are submitted and denied (because only one service is reimbursable) the other claims will be denied
 4. these denials will be a nightmare to work thru for staff
5. HURRY UP AND WAIT – UNTIL 8/1/15

LONG TERM

1. Melding the two Cultures of the two Organizations
2. Rebuilding the TRUST of the Community in the services under LCDF
3. Reestablishing Relationships and Reputation of the overall program with Collaborators
4. Funding – bringing back the dropped programs for Substance Abuse
5. ACCESS:

On 7/28/13 when LFNM replaced the 3 organizations providing services in Dona Ana County - our communities access to Mental Health Services was already stressed.

 - Referrals from LCDF to any of the services could have up to a 4 month waiting period before being seen

- If the reason for a referral was episodic – our patient often had dealt with that issue or just moved on
6. My understanding is the 3 organizations in Dona Ana County ALONE served over 4,000 Consumers with 313 staff
 7. In working with the MCO's and the State – I have repeatedly stated:
 - a. In 3/6/12 months I would like to review the revenue generated under the FQHC model of payment to assure that the payment structure is in fact working, as the services for behavioral health are so different than those of medical/dental
 - i. Under FQHC you can only be reimbursed for one service per day
 Example: 1 Dental appointment
 1 Medical appointment
 1 Behavioral Health
 - b. Mental Health Consumers may receive up to 5 services in one day depending on the needs of the Consumer
 - c. If one of our Medical PCP's sees a Consumer for Medication Management and for an inner ear infection, will be receive payment for the two services? AND isn't this the intent of an INTEGRATED System?
 - d. The thought is that the cost of the multiple services will be offset by the FQHC reimbursement rate for those attending a Group session – REMAINS TO BE SEEN AND ANYALYSED
 8. Depending on the result of the analysis of the expenses and revenues and access or productivity, if the demand and the revenues warrant it – I will ask for a second infusion of funds to bring LCDF to the level of staffing to provide services to the 4,000+ in Dona Ana County that were being seen at the time of the first Transition.

LCDF REGULATORY & LEGISLATIVE RECOMMENDATION

1. Standardization of Credentialing process between all NM State contracted MCO's – enforced