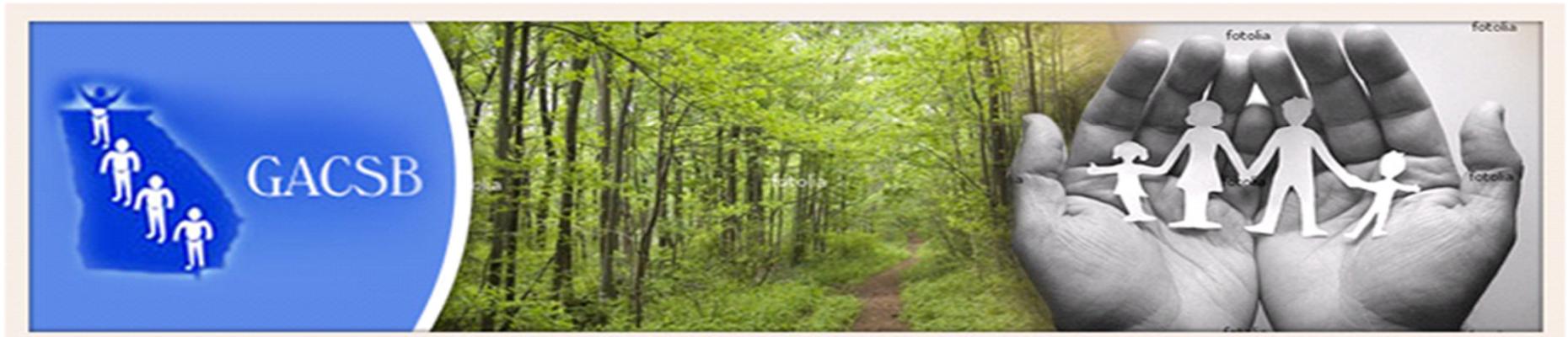


Georgia Association of Community Service Boards, Inc



Tom Ford, CEO Lookout Mountain Community Services

Jennifer Hibbard, COO View Point Health

Statewide Care Management Entities

- Lookout Mountain Community Services and View Point Health operate the two CME's throughout the state of Georgia
- The CME's serve as *the* "locus of accountability" for defined populations of youth with complex challenges and their families who are involved in multiple systems
- The CME's are accountable for improving the quality, outcomes and cost of care for populations historically experiencing high-costs and/or poor outcomes

Georgia Statistics on the Populations We Serve

- *Over 2.3 Million* face the challenge of living with mental illness.
- *Suicide* is the *11th* leading cause of death.
- One out of every 10 families is affected by intellectual disabilities.
- 41% of Georgians with addictive diseases report needing treatment but are not receiving it.
- SED youth

**Georgia is ranked *47th* in
Spending Per Capita
*\$46.54***

1st	District of Columbia	\$360.57
26th	Delaware	\$106.04
51st	Idaho	\$ 36.64

State Safety Net for Individuals with Mental Illness, Addictive Diseases and/or Developmental Disabilities

- **Community Service Boards created by HB 100 in 1994**
- **Further defined in 2002**
- **Created to provide mental health, developmental disabilities, and addictive diseases services**
- **Authorized to provide health, recovery, housing, or other supportive services;**
- **Public agencies;**
- **Instrumentalities of the State**
- **Created for nonprofit and public purposes to exercise essential governmental functions.**
- **OCGA § 37-2-6**

History of C&A Fee for Service

- SFY2006 process began to move C&A funding of services from primarily block grant to a fee-for-service (FFS) payment system
- Only pay for defined services; provider not paid for non-billable services
- Many new small providers; little accountability
- Increased fragmentation of system

Fragmented System of Care

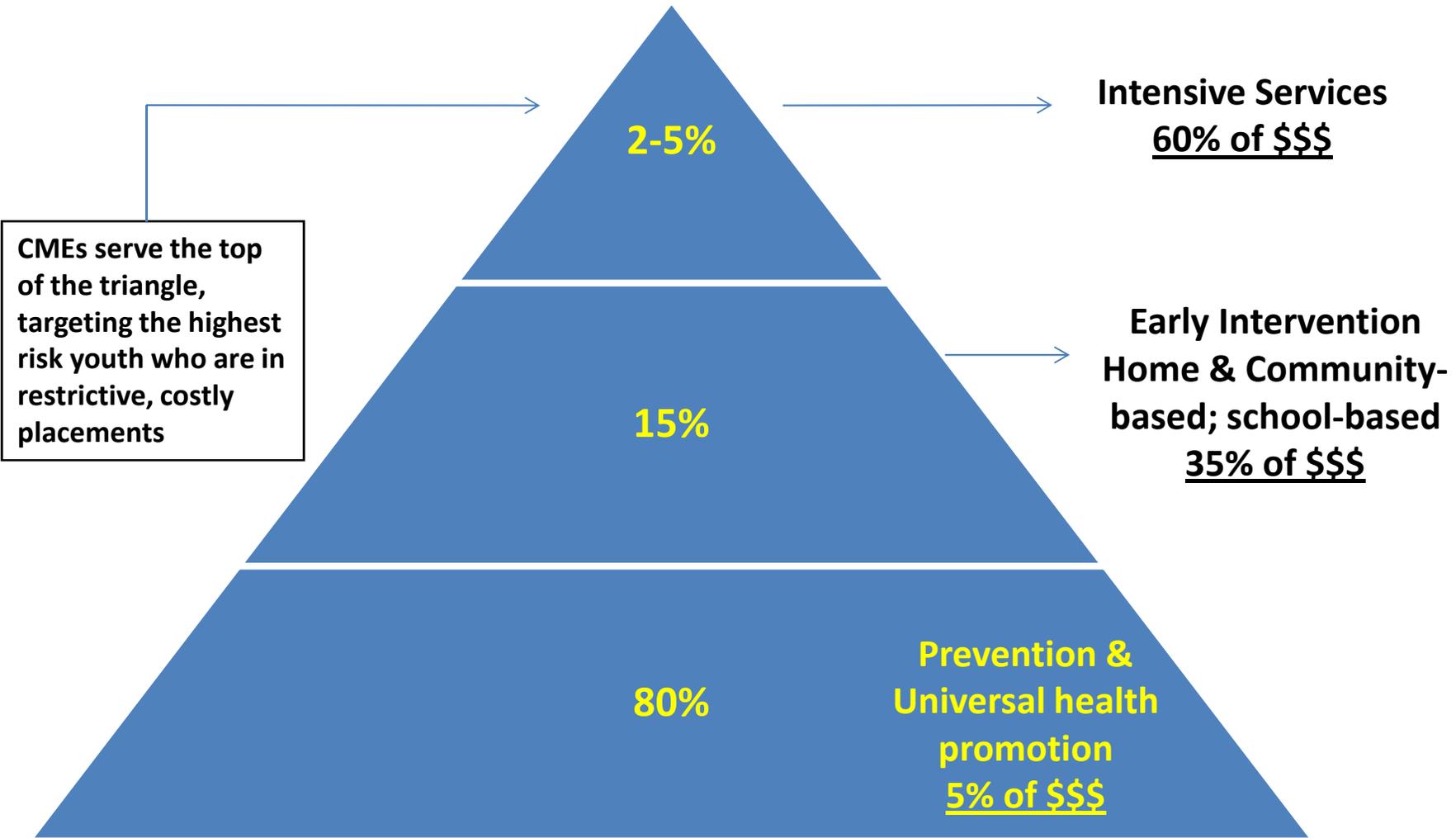
- Services are driven by payer source rather than individual need
- A change in payer source results in a disruptive change in provider and possible change in level of service regardless of individual need
- Inconsistent quality among providers
- Limited focus on prevention and early intervention services

Care Management Entity

Care is values based:

- Youth-guided and family-driven
- Individualized
- Strengths-based, resiliency focused
- Culturally and linguistically competent
- Community-based, integrated with natural supports
- Coordinated across providers and systems
- Solution focused
- Data-driven, evidence-informed

Prevalence Utilization for target populations within Georgia's SOC.

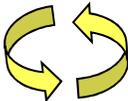
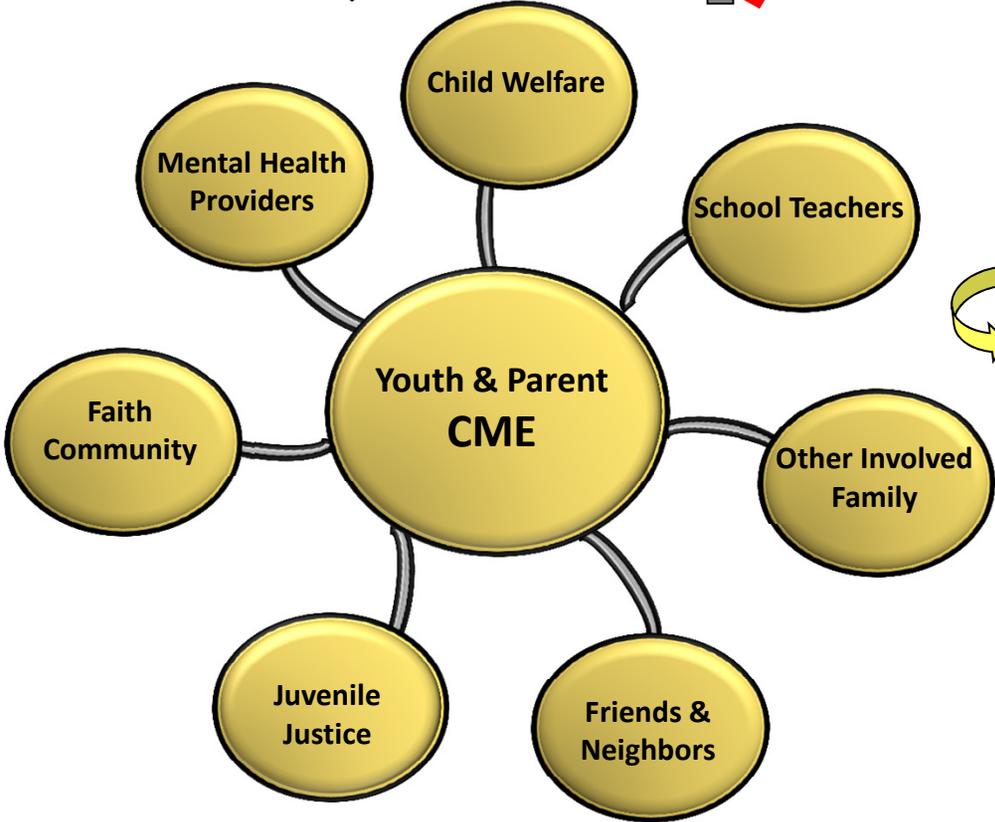


Wraparound Visual

Inpatient Hospital &
Psychiatric Residential Treatment Facility



Sources of Income:
*Money Follows the Person
*Balance Incentive Program
* State Dollars



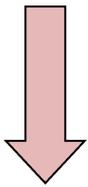
Ongoing Community Services:
*CSU
* Respite
* Co occurring behavioral health

High Fidelity Wraparound
Planning Process

CME OUTCOMES...

(DATA PROVIDED BY APS HEALTHCARE)

\$14,318,220



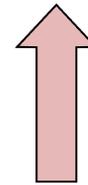
\$615,025

REDUCING COST OF RESTRICTIVE CARE

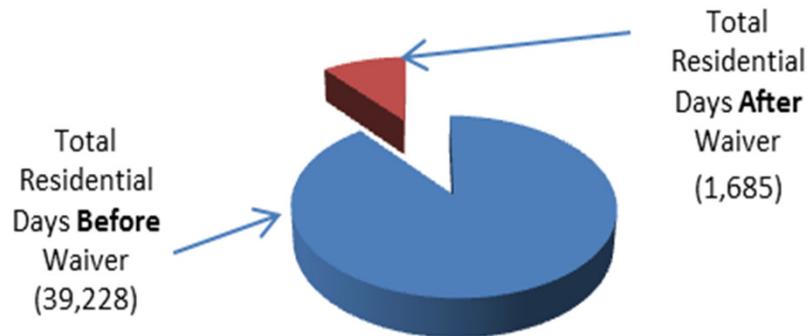
- ◆ At a cost of \$365/day for a residential bed, the total bed days before CME cost the state **\$14,318,220**.
- ◆ After CME involvement through the waiver, costs were reduced to **\$615,025**.

INCREASING QUALITY OF CARE IN THE COMMUNITY

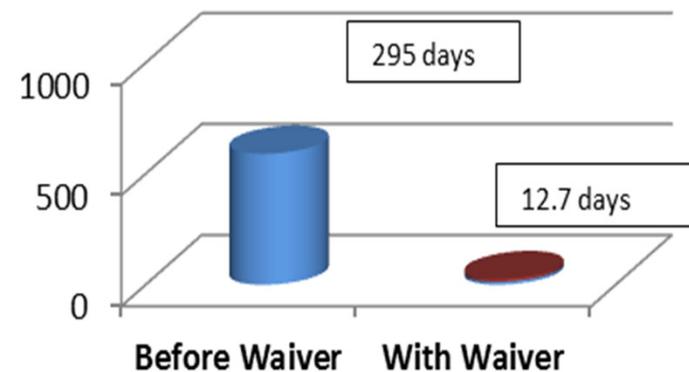
- ◆ Locally driven and managed care
- ◆ Increasing natural supports and family capacity to respond to crisis
- ◆ Decreasing dependences on formal service systems
- ◆ Improved youth functioning in school, home and community



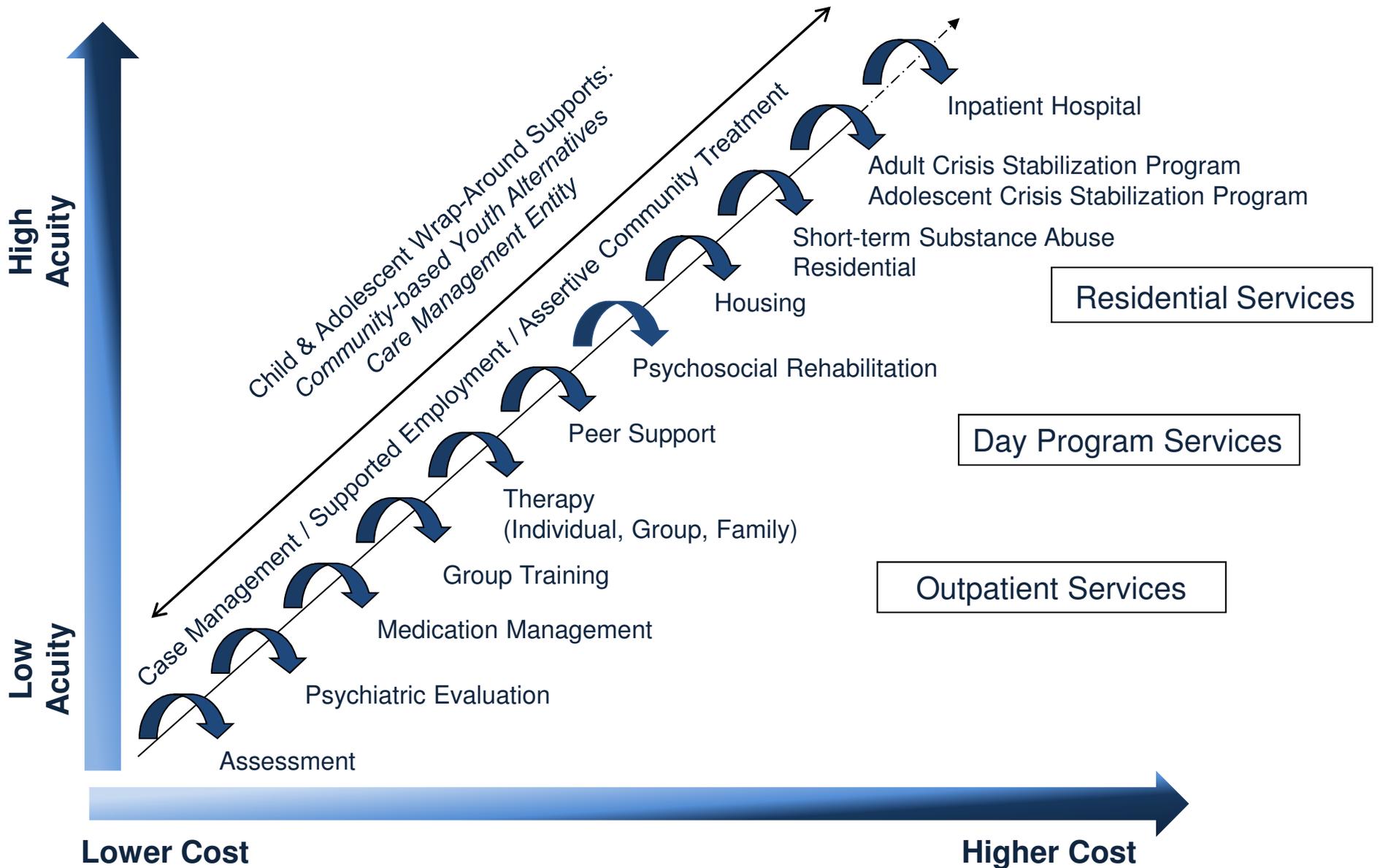
Total Days Institutionalized CBAY Youth served by CMEs for One Year



Average Days in Residential Treatment Per CBAY Youth



Comprehensive Service Array



Why and How?

- Create complementary, not duplicate, treatment systems
- Utilize Community Service Boards to leverage federal and state dollars that other providers cannot bring to bear.
- Create a coordinating body to provide a holistic focus on the needs of children and families

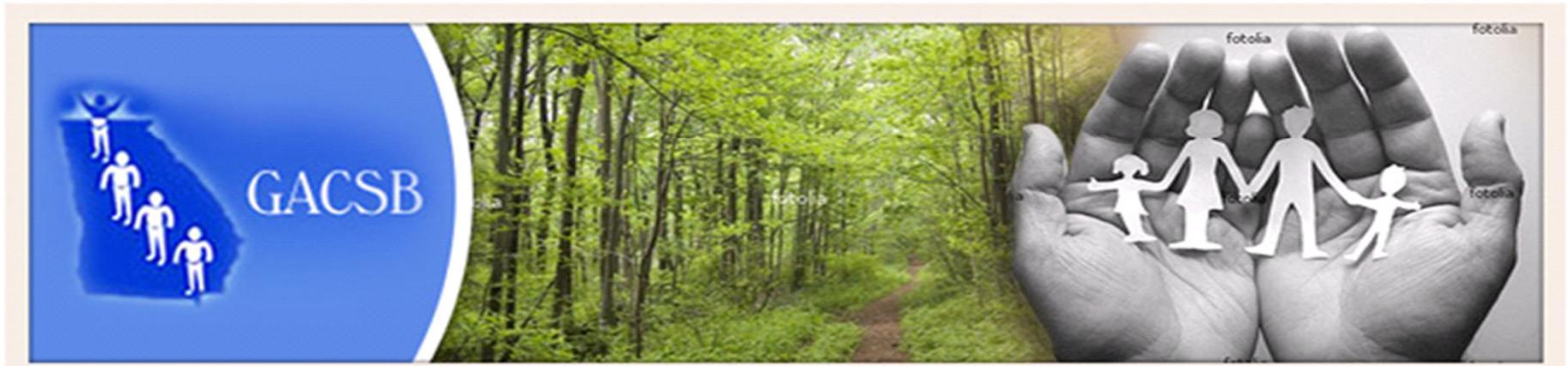
Recommendations for C&A Services

- Establish a single benefit package for children receiving publically funded MH services
- Establish one set of standards to allow for a single provider network
- Require evidence-based practices with measurable outcomes
- Allow flexible funding focused on outcomes rather than frequency of contact

Recommendations for C&A Services

- Utilize system of care principles which include all necessary services and agencies needed to meet the needs of the child and family
- Utilize certified parent partners to facilitate navigation in the system

Georgia Association of Community Service Boards, Inc



Robyn Garrett-Gunnoe

Association Director

Georgia Association of Community Service Boards

912-312-3205

rgunnoe@shpllc.com