Community Services Department

600 W. 4th St. Davenport, Iowa 52801



(563) 326-8723 Fax (563) 326-8730

October 15, 2012

TO: Dee F. Bruemmer

FROM: Lori A. Elam

RE: Application for Redesign Transition Funds

As you are aware, SF2315 created the opportunity for counties to apply for transition funds for FY13. This is one-time assistance to support the continuation of current county core MH services as defined by the county management plan as of June 30, 2012.

Again this money is to be used to help a county through FY13. There are several eligibility requirements. The application was completed with the help of David Farmer, Budget Manager.

The application must be signed by the Board of Supervisor Chair and the Auditor, in addition to the CPC Administrator. I have kept all supporting documents if DHS has questions. The applications are reviewed by DHS and then a report is provided to the Governor and Legislators. During the 2013 Legislative Session, Legislators will decide how much money to appropriate for this transition. The application is due November 1, 2012. I will be available at the Committee of the Whole to answer any questions.

THE COUNTY AUDITOR'S SIGNATURE CERTIFIES THAT THIS RESOLUTION HAS BEEN FORMALLY APPROVED BY THE BOARD OF SUPERVISORS ON

DATE

SCOTT COUNTY AUDITOR

RESOLUTION

SCOTT COUNTY BOARD OF SUPERVISORS

OCTOBER 25, 2012

APPROVAL OF TRANSITION FUNDING APPLICATION FOR FY13

BE IT RESOLVED BY the Scott County Board of Supervisors as follows:

- Section 1. That the Transition Funding Application for FY13 is approved.
- Section 2. That the Chairman is hereby authorized to sign said agreement.
- Section 3. This resolution shall take effect immediately.



Iowa Department of Human Services **Application for Redesign Transition Funds**

| County Name: | County #: |
|--------------|-----------|
| Scott County | 82 |

Application Requirements:

Applications shall be:

1. Completed in full with one answer per box.

2. Delivered by mail or in person by 4:30 pm November 1, 2012 to:

Department of Human Services

Mental Health and Disability Services Division

Hoover State Office Building

1305 E. Walnut Street 5th Floor, Des Moines, IA 50319

- 3. Independently verified by the county auditor.
- 4. Signed by the chairperson of the county board of supervisors, county auditor, and central point of coordinator administrator.

Documentation information and materials used to complete the application may be subject to review by the department. The application for transition funds must include the following actual unaudited county financial information for state fiscal year (SFY) 2012 and projected county financial information for SFY2013, SFY2014, and SFY2015.

| Available Funds | SFY2012 | SFY2013 ESTIMATED | SFY2014 ESTIMATED | SFY2015 ESTIMATED |
|--|---|----------------------|----------------------|----------------------|
| Funds carried forward from the previous state fiscal year. Exclude any amount received from the risk pool in SFY2012. | \$3,266,601 | \$3,199,752 | \$(1,476,859) | \$367,625 |
| County funding levied. | \$3,252,241 | \$3,308,032 | \$7,900,252 | \$7,900,252 |
| Percentage of the maximum county levy amount allowed by law. | 100% | 100% | 100% | 100% |
| SFY2012 risk pool funds awarded to the county listed by the state fiscal year in which risk pool funds were or will be used. | \$277,944 | \$341,865 | | |
| Amount of SFY 2012 risk pool funds projected to be returned | | | \$0.00 | |
| Explanation of the above projected amounts of SFY2012 risk pool funds to be returned. | The county will not be returning Risk Pool fundsall remaining funds will be used in FY13. | | | · |
| Funding received in SFY 2012 through the state payment program for non- Medicaid services for individuals for whom legal settlement has not been determined. | \$703,368 | \$703,368 | \$703,368 | \$703,368 |
| Use the SFY 2012 amount as the projection for SFY2013, SFY2014, and SFY2015. | | | | |

| Other (explain) | #050.450 | A .05.075 | A (D) D) | |
|--|--|--|----------------------------------|-------------|
| Care-Keep Charges Refunds and Reimbursements | \$259,459 | \$135,975 | \$100,000 | \$100,000 |
| Expenditures | SFY2012 | SFY2013 | SFY2014 | SFY2015 |
| County administrative costs. Exclude administrative costs of county operated programs, determined using cost allocation methods consistent with OMB Circular A-87. | \$74,588 | \$77,199 | \$79,901 | \$82,698 |
| Amount needed to pay for expenses due and owing that were incurred in previous state fiscal years: | | | | |
| County administrative costs. | \$0.00 | \$77,199 | \$79,901 | \$82,698 |
| Provider payments including the cost of services for county operated programs. Exclude any additional funding the county provides for county operated programs that are over and above amounts reimbursed by third party payers or costs in excess of usual and customary | \$869,658 to VFCMHC \$93,341 to HDC \$139,805 to Oakdale | \$6,090,453 *Doesn't include the additional funds (\$962,999) requested for 2 local providers | \$6,859,136 | \$7,968,459 |
| charges for services. State charges for the cost of services listed by the fiscal year in which the charge was incurred: | | | | |
| o County's portion of the non- federal share of Medicaid. Exclude any state charges that will be forgiven consistent with 2012 Iowa Acts, SF2315 section 27. | \$0.00 | \$2,577,152 | \$15,000 | \$0.00 |
| o County's share of mental health institutes minus credits. Exclude any state charges that will be forgiven consistent with 2012 lowa Acts, SF2315 section 27. | \$0.00 | \$189,994 | \$179,220 | \$184,597 |
| County's share of state resource centers minus credits. Exclude any state charges that will be forgiven consistent with 2012 Iowa Acts, SF2315 section 27. | \$0.00 | \$231,053 | \$0.00 | \$0.00 |
| Amount paid to service providers for non-Medicaid funded services allocated into the following eligibility categories: | | | | |
| Individuals in the target population whose income is equal to or less than 150 percent of the federal poverty level. | \$3,981,846 | \$5,932,256 | \$6,696,194 | \$7,800,630 |

| | 1 | T | 1 | T |
|--|--|---|---|---|
| Individuals in the target population whose income is above 150 percent of the federal poverty level. | \$78,730 | \$81,091 | \$83,523 | \$86,028 |
| Individuals with a disability other than the target population whose Income is equal to or less than 150 percent of the federal poverty level. | \$75,018 | \$77,106 | \$79,419 | \$81,801 |
| Individuals with a disability other than the target population whose Income is above 150 percent of the federal poverty level. | \$237 | \$0 | \$0 | \$0 |
| Amount paid for non-Medicaid funded county operated programs allocated into the following eligibility categories: Include an allocation of administrative costs for county operated programs, determined using cost allocation methods consistent with OMB Circular A-87. | Scott County does not have any county operated programs. | Scott County does not have any county operated programs | Scott County does not have any county operated programs | Scott County does not have any county operated programs |
| Exclude any additional funding the county provides for county operated programs that are over and above amounts reimbursed by third party payers or costs in excess of usual and customary charges for services. | | | | |
| Individuals in the target population whose income is equal to or less than 150 percent of the federal poverty level. | N/A | N/A | N/A | N/A |
| Individuals in the target population whose income is above 150 percent of the federal poverty level. | N/A | N/A | N/A | N/A |
| Individuals with a disability other than the target population whose income is equal to or less than 150 percent of the federal poverty level. | N/A | N/A | N/A | N/A |
| Individuals with a disability other than the target population whose income is above 150 percent of the federal poverty level. Individuals Served | N/A | N/A | N/A | N/A |
| Unduplicated number of individuals who received non-Medicaid funded services paid for by the county in SFY2012 and projected for SFY2013, SFY2014, and SFY 2015. | 1588 | 2090 | 2332 | 2502 |
| | | | | |

County Core Service Information

Describe the county eligibility criteria for an individual to receive county mental health and disability services.

Enrollment Criteria:

Person must have diagnosis of MI, CMI, ID or DD.

Person must be a resident of Scott County. If person is living in another lowa County, must have Scott County legal settlement.

Scott County will arrange direct billing with the other county/state for the cost of services for persons who have legal settlement in another lowa County or are a State Case/SPP.

Service Criteria:

Service is covered under plan.

Funding is available.

Service requested is the least costly.

All other available funding outside of this system has been accessed prior to requesting county assistance.

Person/household income and resources must meet financial criteria.

There is a service need.

Service is age appropriate.

Financial Criteria:

Scott County has identified specific service situations for which financial eligibility guidelines have been adopted. These service situations and the financial eligibility and client participation required are as follows:

The state's SSA guidelines will apply to persons who are receiving twenty-four hour services so they can be eligible for the state supported maintenance services and the accompanying medical (Medicaid) coverage,

Persons in such twenty-four hour settings must apply for and accept SSA, if available. Persons who are approved for SSA and meet the client participation as determined through the SSA program would be considered eligible for twenty-four hour service with no additional client participation.

Persons in such twenty-four hour settings, who are ineligible for SSA due to income or resources, may still be eligible for financial assistance under the county plan through determination and payment of client participation above the SSA guidelines. Income and resources above the SSA limits must be applied. Prior to determination of client participation for service payment, the following deductions from income and/or resources available are allowed:

- 1) The person may retain a personal allowance equivalent to the personal allowance allowed under the SSA program.
- 2) The person shall provide the room and board payment at the SSA equivalent.
- 3) The person shall provide payment for medical expenses for which he/she is financially responsible. (Most people in twenty-four hour settings should be eligible for the Medically Needy Program and must apply and accept such assistance.)

Following the deductions of the above approved expenses, any remaining income and resources would be considered the required client participation toward the service in that twenty-four hour setting. Such client participation should be paid toward the service cost up to 100% of that service cost. For those individuals whose client participation does not equal 100% of the service cost, the county would participate in payment to the facility up to that level. At any time when the required client participation equals 100% of the service cost and no county subsidy is needed, the person should be considered a private pay consumer and would not be considered to be served under this plan.

Income earned in a supported employment, sheltered workshop, or other program would not be considered income in determination of client participation for twenty-four hour settings.

A person's liability for acute care hospitalization services will be determined according to the provisions as allowed in the lowa Code. A person's liability for commitment related services will be determined according to the provisions as allowed by the lowa Code.

Scott County believes that community based, lower level, less intensive (and less expensive) services should be made easily accessible to our citizens. Scott County also believes that those citizens with income and resources should participate in the payment for services at an appropriate level for services not falling into the above categories, utilizing a sliding fee scale.

Persons who are provided services under the Scott County Management Plan may request financial assistance from Scott County under the sliding fee schedule. Persons who have been determined eligible for SSI or SSA will be considered eligible under this sliding fee scale with zero client participation. The sliding fee schedule determines the percentage of charges each person is required to pay and is based primarily on two factors: household income and

number of dependents under the age of 18. If other payment sources are available, consumers are required to provide information to the service provider necessary for billing purposes. Charges not paid by other sources will be applied to the sliding fee schedule to determine the financial assistance to be received from Scott County.

The sliding fee schedule shall be developed annually for implementation at the beginning of each fiscal year, using the current federal poverty guidelines in effect at that time. Under the sliding fee schedule, no financial participation is required at 150% or less of the federally determined poverty level.

Enter complete list of the county co-pay and sliding fee schedule. (individual)

VERA FRENCH COMMUNITY MENTAL HEALTH CENTER

SLIDING FEE SCHEDULE FOR RESIDENTS OF SCOTT COUNTY July 1, 2012

Number of Dependents Family Income % of Consumer Participation \$ 0 - \$16,755 0 % 0 % 0 % 0 % 0 % 0 % 0 % 16,756 - 22,69522,696 - 28,63528,636 - 34,57534,576 - 40,51540,516 - 46,455 46,456 - 52,395 52,396 - 58,33558,336 - 64,27564,276 - 70,21570,216 -- 76,155 76,156 - 82,095 82,096 - 88,03588,036 - 93,97593,976 - 99,915 99,916 - 105,855

This schedule is to be used to determine financial responsibility for outpatient services. Each patient is responsible for the percent of charges not otherwise covered, at the point where the family income and number of dependent lines intersect.

105,856 - 111,795

Enter complete list of fees and co-pays the county charges for each service provided. (service provider)

VFCMHC utilizes a fee schedule.

VFCMHC also charges co-pays for individuals based on a person's income, FPL (150%) and the insurance company (if applicable).

County Sustainability Plan

Describe the facts and assumptions used when estimating revenues and expenditures for SFY2013, SFY2014, and SFY 2015.

<u>SFY2013</u>: The counties will not receive state funds- State Community Service, Allowed Growth, and Property Tax Relief. The only funding available to counties for MH/DS services is the county MH levy and SPP revenue. The current Scott County MH levy is \$3,308,032. The projected expenditures are \$5,776,119. This creates a deficit of \$1,476,859. Transition funds are needed to maintain the current level of services through FY13.

<u>SFY2014</u>: Mental health and disability services will be paid through a county base property tax equivalent to \$47.28 per capita. Scott County population is 167,095. Currently the Scott County MH levy is \$3,308,032. With funding on a per capita basis, Scott County will receive a property tax equalization payment of \$4,592,220, making the total MH levy \$7,900,252. The county is expected to have enough funds to pay for the projected non-Medicaid service expenditures. Gaps in services will be reviewed. The Eastern Iowa MH/DS Region (Cedar, Clinton, Jackson, Muscatine and Scott Counties) will review and discuss how to best implement the required core services and/or core plus services in the most cost-effective manner. Any savings from ACA will be retained for other/new services.

SFY2015: Mental health and disability services will be funded at the \$47.28 per capita. Scott County population is 167,095, creating a total MH levy of \$7,900,252. The Eastern lowa MH/DS Region will share costs for certain core and core plus services.

Identify the key steps that will be taken to ensure the level of current core county mental health and disability services continues beyond SFY2013.

Encourage State Legislators and the Governor to appropriate funds for the property tax equalization payments per SF2315 (2012 Legislative Session).

Explain how the requested moneys will be used during the transition year to provide services in a manner that shall enable the county to continue to provide services at current levels in future years within the amount of funding the county has available.

Scott County requires a minimum estimated \$1,476,859 to continue the current level of services in FY13. The transition funds will be used to continue funding the community mental health center programs, residential, vocational and transportation services as well as medications for the uninsured until June 30, 2013.

Scott County is also requesting an additional \$962,999 for two local providers (HDC and VFCMHC) that were not paid for services rendered in FY12 (January thru June, 2012). The two providers continued serving consumers without reimbursement from the county creating a significant financial strain for each agency.

Beyond FY13, the passing of SF2315 creates a per capita funding of \$47.28. This method of funding generates an additional \$4,592,220 in revenue for services. It will allow the county/region to develop and implement new/needed services. The county is expecting the State Legislature to follow through with the MH/DS Redesign plans. With the implementation of ACA (Medicaid expansion), the number of people needing funding will be reduced, ultimately saving the county/region money for new cost effective services to be developed.

Signatures:

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|----------|------------------|---------------------|----------------------|------------------------------|------------------------|-----------------------|
| LUCILIIY | / mai io me besi | i oi my knowiedd | ie mai me informati | on in this transition | tung application is a | ccurate and complete. |

| Administrator, Central Point of Coordination | Date |
|--|---|
| I have reviewed the documentation and materials to complete this trapplication is accurate and reasonable. | ansition fund application and in my opinion the |
| County Auditor | Date |
| certify that the county board of supervisors has authorized this appl | ication for transition funds. |
| Chairperson, County Board of Supervisors | Date |