



**PROGRAM & SERVICES POLICY COMMITTEE
MINUTES
May 20, 2024**

Trustees Present:

Dr. Victor McCarley, Committee Chair
Kevan Beamon
Jill Bucaro
Teresa Russell
Jay Wainscott
Greg West
David White
S. Tyler Wright

Staff Present

Helen E. Jones-Kelley
Bonnie Ashley
Tristyn Ball
Chandra Hightower
David Holbrook
Kimberly Priester
Tina Rezash Rogal
Christina Sanders
Beverly Stewart

Program and Services Committee Chair Dr. Victor McCarley called the Program and Services Policy Committee meeting to order at 5:32 p.m.

APPROVAL OF MEETING MINUTES – May 8, 2024

There being no changes or corrections, a motion to approve the May 8, 2024 minutes was made by Trustee David White and seconded by Trustee Greg West. The motion was approved unanimously.

FUNDING RECOMMENDATIONS

Executive Director Jones-Kelley stated that two resolutions would be presented this evening for funding for replacement of the crisis services currently provided by RI International which will come to an end on Wednesday at midnight. The Resolutions being presented are included on the chart below.

Treatment and Supportive Services

Staff recommends to the Program & Services Policy Committee for review and approval to the Board of Montgomery County Alcohol Drug Addiction and Mental Health Services to fund and contract with the following providers not to exceed the amounts identified in the table below for the period of May 23, 2024 to December 31, 2024 for the provision of services. Further the Executive Director or Board designee is authorized to sign any document necessary to execute this process.

Resolution #	Agency & Brief Service Description	CY2024	Source of Funding	Notes
24-060	Netcare Access	\$515,000	Ohio MHAS/Levy/SAMHSA CCRP Grant	Crisis Call Center
24-061	DeCoach Recovery Centre	\$440,000	Ohio MHAS/Levy/SAMHSA CCRP Grant	Crisis Mobile Response

As clarification of statements in a recent newspaper article, Executive Director Jones-Kelley stated that the agreement brought to the Board for services provided in May of this year was a five-month agreement through an MOU instead of a 12-month contract because we knew RI was struggling to meet the revenue reimbursement that they needed for their service plan. ADAMHS does not pay in advance, but instead pays for services rendered. Over the past few years, we and other ADAMHS board and providers have been working with the State to have codes that would allow the providers to draw down Medicaid dollars for eligible crisis services. When 988 was announced, it was expected that Medicaid codes would be put in place to pay for the services but they are not yet. It is important to note that we have not paid RI International \$7 million. The current MOU allows RI International to be paid up to \$1,510,845, but the provider has to earn those dollars. RI has also received state and grant funding, but altogether these funds have not allowed them to be made whole based on their rates. There are still conversations going on at the state level regarding Medicaid reimbursements. We still do not have a code for crisis units and we still do not even have a code for adult mental health services.

We heard very clearly from our community that they needed these crisis services and we had a number of town halls during the pandemic. We held 3 meetings virtually and 77 meetings in the community to provide information. We also met regularly with our providers and we regularly discussed those crisis services to be provided.

Our agency is state supervised and county administered. RI has a lot of experience in state-run systems but this is a different structure. They did try to work with us and provided valuable services to the community for which we reimbursed. They also provided a facility in the community that will become a part of the system of care. No levy dollars were used for that facility. There are also questions about them only providing 23 hours of service. That is all they can provide by law for that level of care. They were planning to add a service later that allows them to hold a person for seven days.

We began to identify other crisis providers when they were unable to draw down reimbursements based on their model so we could have a plan B in place. We agreed to waive the 120-day notice to avoid service gap or diminution. We were fortunate because we have a number of community providers and they advised us of other agencies who offer

crisis services. After we received RI's notice, we immediately notified a provider who could provide services on an interim basis. As of midnight, nothing would have changed for the members of our community other than the name of the provider. It would be the same phone numbers and same level of services.

We are recommending that we turn over the crisis call center services to Netcare in the amount of \$515,000. These dollars are coming to us through a mix of Ohio MHAS, a SAMHSA CCRP Grant, and supplemented by levy dollars. Netcare will pick up the work through the end of the year, by which time we will have issued an RFP for services beginning in 2025.

Dr. Brian Stroh, CEO and Medical Director of Netcare, provided information about Netcare services. They have been doing crisis center line since 1990. They run Franklin County homeless hotline, 22 of Ohio's counties lines, text and chat and 988. They plan to hire employees who are already answering the calls for RI and have a plan to keep the number the same for Montgomery County.

The Board members asked Dr. Stroh questions about the services being proposed. Dr. Stroh responded to questions from Board members as follows:

- Netcare was the incumbent provider in Franklin County for crisis services when an RFP was issued to build a crisis center, which became a very large project. Netcare submitted a proposal and RI came in at a lower price for Franklin County's crisis plan.
- Netcare would only be providing crisis call center services in Montgomery County, another provider would be providing mobile units. The current setup at Franklin County is Netcare operates with partners and has crisis workers who go out.
- Netcare has not yet offered jobs to existing RI staff. Without a contract, he can only explore their interest but cannot yet make a job offer.
- If existing staff members do not come on board, existing Netcare employees would absorb the work on a short-term basis while Netcare hires more staff.
- Netcare has the capacity in their existing call center for a few weeks or a month. Having RI's existing staff would help make it more seamless.
- Netcare will make every effort to hire Montgomery County residents. Netcare requires an Ohio licensure. When you hit a certain point, you have to look outside of the community as there are not a lot of certified applicants all of the time, but it is their preference to hire locally.
- Netcare works with the Columbus Police Department and Franklin County Sheriff's Office and has a long-standing relationship with both. They are CIT trainers in Franklin County.
- Netcare has stakeholder meetings with the directors of 911 and 988 at the table.

In response to questions from Board members regarding whether there were any local organizations who could provide these services, Executive Director Jones-Kelley responded that they were looking for someone to hit the ground running. They asked others in the system, local providers, their associations, and other boards who would be able to hit the ground running, and the Netcare name kept coming up. They did not want to do anything that would disrupt the services. If nothing is in place, the backup is the 988 number. They

currently answer 60 calls per month, and RI is currently taking 1200 calls per month. ADAMHS leadership talked with a local manager at 988 about whether they would be able to pick up all those additional calls and they do not have that capacity. The calls would roll to other counties throughout the state.

Executive Director Jones-Kelley presented the second provider for Crisis Services. The third piece, the crisis receiving center, would be placed on hold until more funding options were made available. It will require more staffing, so the second piece being brought forward is the crisis mobile service. Resolution #24-061 for DeCoach in the amount of \$440,000 from May 23, 2024 through the end of the year. The source of funding is the same as for the other Resolution, Ohio MHAS, the SAMHSA CCRP grant, and levy funding. We recommend DeCoach because we have met with them and they are ready to get going on Thursday. They are already doing work in the community as a provider. They are located at the old Salvation Army on Patterson Boulevard. Executive Director Jones-Kelley introduced Amy Dunkin, Regional Outreach Manager from DeCoach, to speak about the organization.

Manager Dunkin introduced herself as coming from an EMT and law enforcement background prior to switching to DeCoach. They do not want to make any promises that they cannot make happen so they plan to do this work in stages.

The Board members asked Manager Dunkin questions about the services being proposed. Manager Dunkin responded to questions from Board members as follows:

- DeCoach has been in business since 2016 and has just under 300 employees.
- Law enforcement can bring people in for recovery services.
- DeCoach's specialty is addiction treatment; they do some mental health as co-occurring with substance abuse. The level of mental health services depends on the clinical director's review, as all treatment plans are individualized.
- DeCoach has a relationship with law enforcement. They have beds and a resident monitor and they offer after-hours services.
- Anyone coming to DeCoach will get help; they have partners and make sure everyone gets the services needed.
- DeCoach has a behavioral health urgent care and they have been operating in this community.

Public Questions

The public was invited to submit questions. The themes involved how Netcare and DeCoach are staffed and how they operate, how the funding works for services, and why RI International pulled out of the community. Questions were responded to by Netcare CEO Dr. Stroh, DeCoach Manager Dunkin, and ADAMHS leadership as time allowed.

Committee Chair McCarley opened the meeting up to additional public comments:

Probate Judge David Brannon expressed concern about collaboration in the process of seeking a provider and asked the Board to delay the vote.

Ohio State Representative Phil Plummer expressed concern about the number of years we have been trying to put crisis services in place and concern about the current provider leaving our citizens hanging.

Alyssa Yates from the Montgomery County Public Defender's Office discussed concerns about her clients who are pink slipped and are high risk.

Brookville Police Chief Douglas Jerome asked if Executive Director Jones-Kelley would come to speak at the Chiefs Association to discuss the situation with RI International. Executive Director Jones-Kelley responded that she would.

Committee Chair McCarley brought the public comments section to a close and noted that there are two resolutions on the table for consideration by the Committee. He asked the Committee whether they wanted to take the motions together or separate.

Board members continued discussion of the resolutions, with some expressing concern about approving the contracts without more vetting of the providers and being put back into the same situation in the future. There were also concerns expressed that the agreement with RI International was just recently approved with no indication that they were going to be pulling out before the end of the year.

Trustee Russell noted that two individuals from the public asked to hold the vote and questioned how that worked when there are stakeholders asking for more time. Committee Chair McCarley noted that the Committee was not approving the resolutions only voting on whether to recommend that they be taken to the full Board for review. Only the full Board can approve the money and that is why we are not required to have a quorum at this meeting. We will need to have a quorum at the next full Board meeting and there will be time for questions at that meeting. Committee Chair McCarley again asked if the Committee wanted to take the motions together or separate, and Trustee West recommended they be considered together for the sake of time.

Committee Chair McCarley noted that we have had comments and questions on Resolutions # 24-060 and 24-061 and asked if there was a motion. Trustee White made a motion to forward the two Resolutions to the full Board. There was no second to the motion. The motion failed.

Trustee White asked if these are not going to be moved to the full board, what impact would this have on Thursday. Executive Director Jones-Kelley responded that the services in the community would end Wednesday at midnight.

The Board members discussed how they wanted to proceed. It was suggested by Trustee West that they could consider a 6-month or 90-day window with services continuing but only for the short term and not through the end of the year, so they could have time to vet qualified providers with stakeholders. Trustee Bucaro agreed with a 90-day solution to use Netcare and table the other services.

Committee Chair McCarley stated that there was a motion on the table that was voted down. He would allow for a new motion.

Trustee West moved to have a 90-day solution. Trustee Bucaro seconded the motion.

There was additional discussion modifying the language of the motion. Trustee West pulled his motion so it could be brought forward again with modified wording.

Trustee Bucaro made a motion to bring to the Board on Wednesday 90 days beginning Thursday to have Netcare provide services for the crisis call center to give the ADAMHS Board time to vet adequate local providers and seek input from stakeholders. There was discussion from the Board members that this language was not broad enough because it limited consideration to only local providers. Trustee Bucaro withdrew her motion.

Committee Chair McCarley asked ADAMHS Counsel Beverly Stewart if a motion could be introduced on Wednesday if we closed today with no motion being brought forward. She answered yes, a motion could be brought directly before the full Board without coming through the Program & Services Committee. Committee Chair McCarley brought the meeting to a close at 7:40 p.m.



Dr. Victor McCarley, Committee Chair

Prepared by Bonnie Ashley, ADAMHS