

Board of Directors

Meeting Agenda

February 10th, 2022

Board of Directors Members Present:

North Sound Behavioral Health Administrative Services Organization (North Sound BH-ASO) Staff Present:

Guests Present:

- 1. Call to Order and Introductions Chair
- 2. Revisions to the Agenda Chair
- 3. Approval of the January 13th, 2022, Minutes, Motion #22-05 Chair..... Attachment
- 5. Comments & Announcements from the Chair
- 6. Reports from Members
- 7. Comments from the Public
- 8. Report from the Advisory Board. Attachment
- 9. Report from the Executive Director Attachment
- 10. Report from the Finance Officer Attachment
- 11. Report from the Governance Operations Committee

Consent Agenda Attachment

Motion #22-06

- To review and approve the North Sound Behavioral Health Administrative Services Organization claims paid from January 1st, through January 31st in the amount of \$3,134,304.26.
- Payroll for the month of January in the amount of \$161,973.87 and associated employer benefits in the amount of \$68,882.28.

12. Action Items

Vote for Chair and Vice Chair

For Board Approval

Asian American Chemical Dependency Treatment Services (ACTS) <u>Summary:</u>

ACTS is a Behavioral Health Agency previously contracted with the BHO. They are a specialized outpatient provider for the American Korean population; however, they will treat anyone who wishes to access their services. They are licensed for both mental health and substance use services. ACTS reached out to the ASO inquiring of a contract for the non-Medicaid population requesting their services. This is a Fee for Service (FFS) contract, services will be paid on encounters through our data system. ACTS was a contracted provider in the BHO network.

Motion# 22-07

North Sound BH-ASO-ACTS-ICN-22 for the provision of outpatient services to individuals who are non-Medicaid. The contract term is January 1, 2022, through December 31, 2022, with an automatic one-year renewal on January 1, 2023, based on continued compliance with the terms of the contract.

Compensation Works Contract **Summary:**

Compensation Works is a human resource agency specializing in compensation assessments. This agency conducted our previous survey in 2016. This is an update to the information gathered previously to the Benchmark and Benefit Assessment Survey.

Motion #22-08

• Compensation Works-North Sound BH-ASO-Benefit Assessment Contract-22 for the provision of benefit analysis of the North Sound BH-ASO. The term of the contract will expire when the assessment and analysis is completed and accepted by the North Sound BH-ASO. The maximum consideration on this contract is up to \$20,000.

Snohomish County Juvenile Treatment <u>Summary:</u>

Snohomish County Juvenile Treatment program is a diversion program for at risk youth. The number of referrals has increased due to the Blake bill. This funding is Mental Health Block Grant funds set aside for Evidence Based Practices training and implementation of EBPs, such as Dialectical Behavior Therapy (DBT), Functional Family Therapy (FFT) and Multisystemic Family Therapy (MFT). Snohomish Superior Court has been a contractor of the BHO/ASO for several years.

Motion #22-09

North Sound BH-ASO-Snohomish County Superior Court-19 Amendment 4 for the provision of \$116,866 in funding to support evidence-based practices with at risk youth. The contract term is July 1, 2019, through June 30, 2022, with an automatic one-year renewal on January 1, 2022, based on continued compliance with the terms of the contract.

For Ratification

Substance Abuse Block Grant (SABG) Summary:

The Hand Up Project is a non-profit agency in Snohomish County working with individuals who are unhoused in need of housing and support. They have administered the HARPS housing subsidies in the past and are continuing to provide the services with Substance Abuse Block Grant (SABG) Funding. The funding is for a 6-month period, January – June 2022.

Motion #22-10

North Sound BH-ASO-Hand Up Project-PSC-20 Amendment 2 for the provision of housing subsidies to unhoused individuals. The maximum consideration for this contract is \$200,000. The contract term is December 1, 2020, through June 30, 2022, with an automatic one-year renewal on July 1, 2022, based on continued compliance with the terms of the contract.

13. Adjourn:

Next Meeting: March 10th, 2022

North Sound Behavioral Health Administrative Services Organization

Board of Directors

Meeting Minutes

January 13th, 2022

Board of Directors Members Present:

- **Peter Browning Chair**, Commissioner, Skagit County; Chair (in place of Chair Johnson)
- Sam Low, County Council, Snohomish County
- **Cindy Wolf**, Council Member, San Juan County
- Nicole Gorle, Legislative Analyst, Snohomish County; designated alternate for Nate Nehring, Snohomish County Council
- George Kosovich, Skagit County Public Health; designated alternate for Peter Browning
- Barbara LaBrash, Human Services Manager, San Juan County; designated alternate for Cindy Wolf, County Council Member
- Cammy Hart-Anderson, Snohomish County Human Services; designated alternate for Dave Somers, Snohomish County Executive
- Heidi Beazizo, Sr. Legislative Analyst, Snohomish County; designated alternate for Jared Mead, County Council
- Jared Mead, County Council, Snohomish County
- Perry Mowery: Human Services Supervisor, Whatcom County, designated alternate for Satpal Sidhu, County Executive
- Pat O'Maley Lanphear, North Sound BH-ASO Advisory Board, Vice Chair

North Sound Behavioral Health Administrative Services Organization (North Sound BH-ASO) Staff Present:

- **Joe Valentine**, Executive Director; North Sound BH-ASO
- Darrell Heiner, Accounting Specialist; North Sound BH-ASO
- Margaret Rojas, Assistant Director; North Sound BH-ASO
- Joanie Wenzl, Clerk of the Board; North Sound BH-ASO



Guests Present:

No guests were present

Call to Order and Introductions - Chair Browning

The Chair called the meeting to order and asked the Clerk of the Board to read the names of participants via MS Teams

Revisions to the Agenda – Chair

The Chair asked if there were any revisions to the agenda, there were none

Approval of the December 9th, 2021, Minutes, Motion #22-01 - Chair

Cindy Wolf moved the motion for approval, Cammy Hart-Anderson seconded, none opposed, no abstentions, all in favor, Motion #22-01 carried.

Comments & Announcements from the Chair

Chair Browning noted that during the Governance and Operations meeting, there were nominations for Chair and Vice Chair for 2022 discussed. Nominations were Peter Browning for Chair and Cindy Wolf for Vice Chair.

Additional nominations are to be emailed to the Clerk of the Board and voting will take place during the February 10th meeting.

Reports from Members

- Whatcom County:
 - Issues and challenges regarding the COVID Omicron Variant
 - Crisis Response System concerns
- San Juan County:
 - Weather issues
 - New Chair for San Juan Council
 - Advisory Board update/recent Human services meeting
 - Homelessness will be addressed during the upcoming retreat
 - San Juan providers capacity availability
 - Information and education to the Board of Health
- o **Island County:**
 - No update
- Snohomish County:
 - County Council ratified a salary increase for Designated Crisis Responders (DCRs)
- o Skagit:
 - Groundbreaking celebration (supported housing)
 - Gratitude to the ASO for working with the counties regarding funding

Comments from the Public

There were no comments from the public

State Audit Exit Conference (1:45 p.m.): Megan M., CPA, Karyna Orcutt, Assistant Audit Manager

The Auditors presented the State Audit Exit Conference and answered questions

Report from the Advisory Board

Pat O'Maley Lanphear gave the Report from the Advisory Board

Report from the Executive Director

Joe Valentine gave the report from the Executive Director which included the following topics:

- JANUARY 2022 FUNDING ALLOCATIONS
- GOVERNOR'S 2022 SUPPLEMENTAL BUDGET REQUESTS-BEHAVIORAL HEALTH
- RECOVERY NAVIGATOR PROGRAM [RNP]
- COMMUNITY BEHAVIORAL HEALTH RENTAL ASSISTANCE PROGRAM [CBRA]
- HOST [Homeless Outreach Stabilization Team]
- DEPARTMENT OF HEALTH GRANT AWARDED TO THE NORTH SOUND YOUTH AND FAMILY COALITION [YFC]
- CRISIS SERVICES UPDATE
- DISASTER DECLARATION
- WORKFORCE DEVELOPMENT UPDATE
- ANNOUNCING NEW NORTH SOUND BH-ASO STAFF PERSON
- POLICY ON BILLING DEADLINES

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Report from the Finance Officer

Joe gave the report from the Finance Officer and answered questions

All matters listed with the Consent Agenda have been distributed to each Member for reading and study, are considered to be routine, and will be enacted by one action of the Executive Committee with no separate discussion. If separate discussion is desired, the item may be removed from the Consent Agenda and placed on the Regular Agenda by request of a member.

Consent Agenda

Motion #22-02

- To review and approve the North Sound Behavioral Health Administrative Services Organization claims paid from December 1st, 2021, through December 31st, 2021, in the amount of \$1,711,406.54.
- Payroll for the month of December in the amount of \$153,119.28 and associated employer benefits in the amount of \$61,493.59.

Cindy Wolf moved the motion for approval, Sam Low seconded, none opposed, no abstentions, all in favor, Motion # 220-02 carried

Action Items

For Board Approval

Summary:

Health Care Authority

This contract is being offered to North Sound BH-ASO to implement a Homeless Outreach Stabilization Team (HOST) focusing on individuals with substance use disorders. This is a multidisciplinary team to include, but not limited to, Behavioral Health Professionals, RNs, Prescribers, Peers and case managers.

The annual funding for the program is \$956,080. However, HCA is providing the first year's funding in the January amendment for the period of January – June 2022 for startup costs. North Sound will be releasing a Request for Qualifications in January.

Motion #22-03

■ HCA-NS BH-ASO-K5757 for the provision of the HOST program in the North Sound Region in the amount of \$956,080 with a term of January 1, 2022, through June 30, 2022.

Cindy Wolf moved the motion for approval, Perry Mowery seconded, none opposed, no abstentions, all in favor, motion #22-03 carried

Summary:

COVID Substance Abuse & Mental Health Block Grant

Funding was set aside for the current Opiate Outreach programs to expand/enhance services. The programs identified needs such as Narcan Kits, flexible funding for personal needs and other needs such as transportation.

Additional six-month funding is added to the Snohomish County contract for a co-responder program.

Motion #22-04

- NS BH-ASO-Island County-ICN-Amendment 9 to provide additional opiate outreach funding in the amount of \$20,000. The contract term is July 1, 2019, through June 30, 2022, with an automatic one-year renewal on July 1, 2022, based on continued compliance with the terms of the contract.
- NS BH-ASO-Community Action of Skagit County (CASC)-ICN-Amendment 6 to provide additional opiate outreach funding in the amount of \$26,700. The contract term is July 1, 2019, through June 30, 2022, with an automatic one-year renewal on July 1, 2022, based on continued compliance with the terms of the contract.
- NS BH-ASO-Snohomish County-ICCN-Amendment 5 to provide additional opiate outreach funding in the amount of \$15,000 and \$160,446 for a co-responder program. The contract

term is July 1, 2019, through June 30, 2022, with an automatic one-year renewal on July 1, 2022, based on continued compliance with the terms of the contract.

• NS BH-ASO-Whatcom County-ICN-Amendment 9 to provide additional opiate outreach funding in the amount of \$30,000. The contract term is July 1, 2019, through June 30, 2022, with an automatic one-year renewal on July 1, 2022, based on continued compliance with the terms of the contract.

Cammy Hart-Anderson moved the motion for approval, Perry Mowery seconded, none opposed, no abstentions, all in favor, Motion #22-04 carried

Adjourn 2:58 p.m.

Next Meeting: February 10, 2022



Advisory Board Brief

February 3, 2022

The Advisory Board met on February 1, and the following items were discussed:

— Advisory Board

- The Ad Hoc Committee met to review current Bylaws. Board reviewed the revisions and a clean draft. Motion was made to approve the Bylaws as written, further in condition on coming back in April to further review in terms of passed legislation. Motion carried.
- Pat and Duncan attended the first North Sound BH-ASO Review Committee in efforts to increase Advisory Board engagement in planning and development. The Board will be creating a process for members of the projected participation on the Review Committee.
- Michelle Osborne presented the findings of the Diversity, Racial Equity, and Inclusion [DREI] report.
- Michael McAuley, North Sound BH-ASO; Clinical Director introduced Megan Drake. Megan is newly hired as a Quality Specialist. Megan comes with an extensive knowledge and experience in the mental health and crisis system field.
- Joe reviewed the changes in the North Sound BH-ASO Clinical Oversight structure. It was suggested to incorporate the Advisory Board in the organizational chart.

— Executive Director

- Report was not given to accommodate the DREI presentation. Members were given a written report in the meeting packet. Members were encouraged to send Joe any questions or concerns.
- The Action Items were passed and recommended to the Board of Directors for approval.

— Finance/Executive Committee

— The January Expenditures were passed and recommended to the Board of Directors for approval.

— Advisory Board Resignation and Membership

- Ron Coakley has resigned from the Board. Deanna Randall-Secrest has been appointed to serve. Deanna comes with 24 years in corrections. Currently the Administrative Lieutenant with the Skagit County Sheriff's Office. Motion was made to approve Deanna's appointment for Skagit County. Motion was seconded. All in favor.
- Island
 - 2 Vacancies
- San Juan
 - 3 Vacancies
- Skagit
 - No Vacancies
- Snohomish
 - 2 Vacancies
- Whatcom
 - 2 Vacancies

North Sound BH ASO Executive Director's Report February 10, 2022

1. BEHAVIORAL HEALTH LEGISLATIVE BILLS

- Below is a partial list of behavioral legislative bills of interest to the BH-ASOs.
- February 3 was the last day that policy bills had to be passed out of their committee.

Bill Number	Brief Description
HB 1735	Makes changes to last year's HB1310 to allow for use of force by
Passed out of the	peace officers under certain circumstances, including transporting
House to Senate	a person for evaluation and treatment, or "providing other
Law&Justice	assistance under civil or forensic commitment laws."
HB 1773	Significantly expands the situations in which a court order for
Referred to	Assisted Outpatient Treatment (AOT) can be filed. Would
House Rules	require a new BH-ASO position to coordinate AOT services in
	the region.
HB 1865	Establishes Certified Peer Specialists and Certified Peer Specialist
Referred to	trainees as new professions to be certified by the Department of
House Rules	Health. Establishes standards and training for supervision of peer
	specialists, and specific training requirements for peer specialists
	practicing as peer crisis responders.
SB 5638	Allows an applicant for associate licensure as a social worker,
Referred to	mental health counselor, or marriage and family therapist to work
Senate Rules	while their application for associate licensure is pending.
SB 5644	Establishes a plan to create standards and a training curriculum for
Referred to	co-responder teams.
Senate Rules	
SB 5655	Requires the state hospitals to establish the capacity to provide
No action taken	short term detention and civil commitment services for persons
in Senate Ways	who experience difficulties being admitted to community facilities.
&Means	
SB 5884	Requires Department of Health to create a certification for
Referred to	"behavioral health support specialists". These are defined as
Senate Rules	paraprofessionals with at least a bachelor's degree who practice in
	partnership with a licensed behavioral health professional

2. BH-ASO LEGISLATIVE BUDGET PRIORITIES

- The BH-ASOs have adopted two key priorities for funding. The first is for \$20 million to cover the increased costs for Involuntary Commitment hearings [ITA Court Costs].
- The rising cost of ITA hearings continues to use a larger percentage of each BH-ASO's flexible general funds each year.
- The second is for a 7% rate increase for non-Medicaid services to complement legislation proposing a 7% increase in Medicaid rates. Our concern is that if the rate increase is on the Medicaid side only, it will become even harder for agencies to have adequate resources to provide non-Medicaid services. [see attachment 1-BH-ASO legislative talking points]
- WSAC has included the request for adequate funding for ITA court costs in its own legislative letter [see attachment 2]

3. NEW BUDGET PROVISOS FOR CHILDREN AND YOUTH SERVICES

- Last year's budget legislation included two new funding provisos for children and youth services to be administered by BH-ASOs. HCA is still finalizing the program descriptions and contract requirements.
- The combined requirements and funding for these two programs would likely require the establishment of a separate BH-ASO coordinator position.
 - a) Mobile Youth Crisis Teams: this funding was included as part of last year's HB 1477, establishing the 988-crisis line. The funding has already been included in our budget, but we have not yet received the program requirements. BH-ASO Clinical staff have worked on a conceptual model to provide crisis stabilization services to children, youth and families based on some best practice models in other states.
 - b) Regional Clinical Response Teams: this funding proviso has just been presented to the BH-ASOs. Funding would be provided to each region to establish a team that would receive referrals for children and youth in need of inpatient psychiatric beds and manage the process to coordinate placements or alternative treatment plans, communicating with referring EDs, providers, schools, community partners, and families.

4. RECOVERY NAVIGATOR PROGRAM [RNP]

- Reponses to the "Request for Qualifications" [RFQ] to select the lead entity for the RNP program in Skagit, Island, and San Juan counties were reviewed and scored by the BH-ASO RFQ evaluation committee on January 28.
- The committee was represented by two Advisory Board members, two county coordinators, one ASO staff member and two LEAD Technical Assistants (TAs). The LEAD TAs did not score the proposals but provided valuable feedback and information.
- The successful bidders were:
 - Skagit Community Action for Skagit County
 - ➤ Island County Human Services for Island County
 - Compass Health for San Juan County

• We continue to work with the LEAD programs in Snohomish and Whatcom County to coordinate the new RNP program with the existing LEAD programs.

5. WHATCOM COUNTY CO-RESPONSE COMMUNITY RESPONSE RFQ

- We are developing an RFQ (Request for Qualifications) to select an organization to provide a "co-response" program in Whatcom County.
- The co-response RFQ will be modeled on other co-response programs we are now funding such as the Compass Health IMPACT program, and the new Mt. Vernon Police Co-response program.
- The RFQ will allow for a broader scope than the traditional mobile crisis outreach team model and is part of our effort to experiment with different models that coordinate behavioral health and law enforcement response to persons in the community actively struggling with behavioral health issues.
- The RFQ is scheduled to be released on Friday, February 11.

6. HOMELESS OUTREACH STABILIZATION TEAM [HOST]

- We submitted the required plan to HCA at the end of January that describes how we will use the \$956,080 that has been allocated to the region for to establish a HOST program.
- The plan included a draft statement of work and a proposed procurement process.
- We met with county coordinators on Monday to determine whether any counties were interested in operating this program directly or felt there might be organizations in their county that would be interested AND could meet the clinically focused program requirements.
- It was decided we would first issue a request for "Letters of Interest", followed by a bidder's conference for interested organizations, and then release a formal "RFQ" [Request for Qualifications].
- The RFQ would include some additional elements: consideration would be given to organizations that could build the program by expanding an existing program, and willingness for the HOST Team to provide case consultation to other counties.
- Still to be determined is whether the proposals received would allow us to take advantage of other funding so the services could be offered in more than one county.
- The Request for Letters of Interest will be issued on Monday, February 14.

7. CRISIS SERVICES UPDATE

- a) Weekly Crisis Capacity Indicator Report through January 29 [attachment #3]. The reported number of Calls to the Crisis Line and dispatches of mobile crisis outreach teams dipped a little during the holidays but have climbed back up since the beginning of January.
- **b)** Monthly Crisis Services Dashboard through **December** [attachment #4]. There was a dip in the number of crisis service dispatches over the holidays.

8. DIVERSITY, RACIAL EQUITY, AND INCLUSION INITITIATIVE [DREI]

- Our DREI consultants have completed a DREI maturity assessment that measures views and beliefs of staff, Advisory Board Members, and Board of Directors regarding where we're at as an organization in our understanding of racism.
- This assessment was presented at an all-staff meeting and will be presented to the Advisory Board and Board of Directors at their February meetings.
- The next steps will include: individual interviews with staff, the formation of an internal DREI workgroup which will include Advisory Board members, a series of trainings on racism and anti-racism strategies, and the development of an anti-racism workplan.

9. CHANGES TO BH-ASO CLINICAL OVERSIGHT STRUCTURE [see attached 2022 Organizational Chart]

With the continued expansion of clinical programs to be administered by the BH-ASO, we have made two adjustments to our internal clinical oversight structure:

- 1) Michael McAuley's role and title as "Clinical Manager" is being changed to "Clinical Director". The Clinical Director will be responsible for providing "leadership" to clinical program operations and development as opposed to just oversight and "coordination". This will support more streamlined decision making in clinical operations. Most BH-ASOs already have a position designated as "Clinical Director".
- 2) Glenn Lippman's role as "Medical Director" will be prioritized to focus on quality oversight, clinical consultation, credentialing, and utilization management. This will mean less need for Glenn to participate in portions of meetings and activities focused primarily on administrative operations.

2022 Budget Priorities - Behavioral Health Administrative Services Organizations

Involuntary Treatment Act (ITA) - Court Costs

PROBLEM:

• Under RCW 71.05 and 71.34, Washington State's Involuntary Treatment Act (ITA) allows for individuals (13 and older) to be committed by a court order to a free-standing behavioral health Evaluation and Treatment facility (E&T), a secure withdrawal management facility, or psychiatric hospital against their will for a limited period. Involuntary civil commitments are meant to provide for the evaluation and treatment of individuals with a mental or substance use disorder who may be either gravely disabled or pose a danger to themselves or others, and who refuse or are unable to enter treatment on their own. An initial commitment may last up to 120 hours, but can be extended for additional periods of 14, 90, and 180 days, as necessary. At present, ITA Courts may charge BH-ASOs whatever fee amount they so choose for their services and these free vary greatly across the state. The BH-ASOs continue to fully fund ITA Courts and related services although it continues to represent an increasing percentage of our overall GFS Non-Medicaid funding, which takes funding away from critical behavioral health treatment services. (Please note the ITA court costs breakdown for each BH-ASO region on pages 2 & 3.)

SOLUTIONS:

PROVISO: \$25 million* in one-time funding to BH-ASOs to defray ever rising ITA court costs.

Direct HCA, in coordination with BH-ASOs, to assess the current state-wide ITA court fee structure
and make recommendations for funding and standards to define what are appropriate costs to bill
for to the appropriate legislative committees by October 31, 2022.

*In State Fiscal Year 2021, BH-ASOs spent more than \$17.6 million of GFS non-Medicaid funding on ITA Court Costs. 2022 looks to significantly out pace that as demand is at an all-time high and with existing courts raising their costs and new courts coming online throughout the state.

Non-Medicaid Crisis System Funding

PROBLEM:

• The behavioral health crisis system must be able to serve anyone, regardless of payer. Providers and payers repeatedly express concern about the stability and capacity of the crisis system. Federal laws and regulations exclude certain items from Medicaid federal financial participation and as an added pressure Medicaid funds do not cover any behavioral health services provided to someone not covered by Medicaid, including hospitalizations. The result is that in regions across the state, BH-ASOs are having to utilize an increasing percentage of their State non-Medicaid funding for hospitalizations, E&T commitments and everrising ITA court costs, thus limiting funding to support community-based crisis services. While progress was made by the Legislature in 2021, the ongoing pandemic continues to challenge a crisis system that remains underfunded and understaffed, while also exacerbating a growing demand for crisis services. In addition, the non-Medicaid population more broadly encompasses people of color, immigrants, and minorities than on the Medicaid side. Increasing non-Medicaid funding helps avoid any unintended access and equity issues.

SOLUTION:

• A 7% (\$6.65mil) increase to the GFS non-Medicaid appropriation (please note details on page 2).

Non-Medicaid GFS Appropriation:

- 2021-23 Operating Budget
 - Section 215 (6) \$95,066,000 for 2022 and \$95,066,00 for 2023 provided solely for persons and services not covered by the Medicaid program.
 - \$72,275,000 is for BH-ASOs (76%)
 - \$22,791,000 is for MCOs (24%)*

*Would recommend that an 85% BHASO / 15% MCO split makes more sense and better reflects actual need.

Non-Medicaid Funding & ITA Court Costs By BH-ASO Region:

Spokane -

- 1. In State Fiscal Year 2021, the total expenditures for Crisis Outreach and ITA Investigations was \$12,652,395.
 - The total non-Medicaid expenditures were \$6,149,187
 - o \$4,015,370 was General Fund State
 - o \$2,133,817 was 1/10th of 1% Local Sales Tax Funds.
- 2. In State Fiscal Year 2021, ITA Court Costs were \$2,054,094.
 - o \$465.819 was General Fund State
 - \$1,588,275 was 1/10th of 1% Local Sales Tax Funds.

King -

- 1. In State Fiscal Year 2021, the total expenditures for Crisis Outreach and ITA Investigations was \$10,252,554.77
 - The total non-Medicaid expenditures were;
 - o General Fund State \$ 7,380,902.27
 - Other non-Medicaid funds (MHBG, SABG) \$854,529.37*
 - o 1/10th of 1% Local Sales Tax Funds \$434,752
- 2. In State Fiscal Year 2021, ITA Court Costs General Fund State were \$9,626,386.

*This includes: ITA Non-Medicaid – Mobile Crisis (5480 Proviso). \$399,999.96 + MHBG \$58,692.00 + City of Seattle funding \$395,837.41

Thurston/Mason -

- 1. In State Fiscal Year 2021, the total expenditures for Crisis Outreach and ITA Investigations was \$4,003,827
 - The total non-Medicaid expenditures were \$1,431,231
 - o \$190,230 was General Fund State (13%)
 - o \$672,054 was Federal Block Grant funds (47%)
- 2. In State Fiscal Year 2021, ITA Court Costs were \$1,440,965.

Great Rivers -

- 1. In State Fiscal Year 2021, the total expenditures for Crisis Outreach and ITA Investigations was \$5,669,257.
 - The total non-Medicaid expenditures were \$2,257,240
 - o \$1,040,064 General Fund State (46.1%)
- 2. In State Fiscal Year 2021, ITA Court Costs General Fund State will be roughly \$745,025.

North Sound -

- 1. In State Fiscal Year 2021, the total expenditures for Crisis Outreach and ITA investigation was \$10,082,952.72
 - The total non-Medicaid expenditures were \$6,081,143.66
 - o \$3.533.311.64 was General Fund State
- 2. In State Fiscal Year 2021, ITA Court Costs General Fund State were \$2,131,653.01.

Greater Columbia -

- 1. In State Fiscal Year 2021, the total expenditures for Crisis Outreach and ITA Investigations was \$10,645,841.82
 - The total non-Medicaid expenditures were \$ 3,991,676.06
 - o \$1,600,000.00 was General Fund State
- 2. In State Fiscal Year 2021, ITA Court Costs General Fund State were \$1,528,832.79.

Salish -

- 1. In State Fiscal Year 2021, total expenditures for Crisis Outreach and ITA Investigations was \$4,248,542.
 - Non-Medicaid Expenditures for Mobile Outreach and ITA Investigations = \$1,872,540
 3% was Flexible GFS
- 2. In State Fiscal Year 2021, ITA Court Costs were \$115,000.

Commented [SJL1]: If the Title of the section is Non-Medicaid, then Salish's Medicaid details should be removed. I summed the total and then struck the Medicaid bullet.







(360) 753-1886

www.wsac.org

January 28, 2022

Senator Rolfes, Chair, Ways & Means Committee

Senator Wilson, Ranking Member, Ways & Means Committee

Senator Frockt, Vice Chair, Capital, Ways & Means Committee

Senator Robinson, Vice Chair, Operating & Revenue, Ways & Means Committee

Senator Honeyford, Ranking Member, Capital, Ways & Means Committee

Senator Brown, Assistant Ranking Member, Operating, Ways & Means Committee

Senator Schoesler, Assistant Ranking Member, Capital, Ways & Means Committee

Senator Liias, Chair, Transportation Committee

Senator King, Chair, Transportation Committee

RE: Supplemental Budget Priorities

Dear Legislative Budget Leaders:

Representative Ormsby, Chair, Appropriations Committee

Representative Stokesbary, Ranking Member, Appropriations Committee

Representative Tharinger, Chair, Capital Budget Committee

Representative Steele, Ranking Member, Capital Budget Committee

Representative Fey, Chair, Transportation Committee

Representative Barkis, Ranking member, Transportation Committee

Washington's thirty-nine counties recently finished their own budgeting processes and understand the difficulties you face in setting priorities and balancing the myriad needs before you, as they faced those same challenges themselves. The economic uncertainty resulting from the pandemic, while offset by strong economic performance and federal assistance in some areas, leaves other areas lacking. A strong state and local government partnership remains essential to the health and well-being of Washington's residents – your shared constituency. On behalf of the counties, WSAC looks forward to working with you and asks for your support in these critical areas as you develop your own budget priorities.

Budget Leadership Page 2 January 28, 2022

FULLY FUND STATE v. BLAKE

The Supreme Court's decision in <u>State v. Blake</u> presents an unprecedented challenge to the state's criminal justice system that severely impacts the already backlogged court system worsened by the pandemic. While the state provided counties with funds to alleviate the fiscal impact of resentencing and vacating convictions and reimbursing the associated legal financial obligations (LFOs) for FY 2021-22, additional resources will be necessary to unwind 50 years of simple possession convictions. It is difficult to determine the exact cost of the <u>Blake</u> decision going forward. However, we have been able to gather some estimates for superior court costs and associated services, such as prosecution, defense, and clerk time. Based on data shared by the superior court clerks' association going back to 1999, we anticipate LFOs to reach at least \$200 million and possibly much more according to data from the Administrative Office of the Courts.

Tracking LFOs going back to 1971 will take significantly more time and effort due to the systems in use back then and the fact that, in many cases, it would require clerks to search through paper files and microfiche, assuming they still exist. We anticipate costs for resentencing and vacations to reach at least \$100 million for superior court cases. Please bear in mind that neither of these figures includes county district courts, which are not yet remotely understood, nor any costs that cities may incur in municipal courts. The state should continue to provide funds for counties to cover the full cost of <u>Blake</u>.

INVOLUNTARY TREATMENT ACT COURT COSTS AND NON-MEDICAID FUNDING

The non-Medicaid side of the behavioral health (BH) system relies heavily on state funding in order to provide important services for those experiencing a BH crisis. In particular, there has been a significant growth in Involuntary Treatment Act (ITA) services and court costs. The Behavioral Health Administrative Services Organizations (BH-ASOs) continue to fully fund ITA courts and related services, although it represents an increasing percentage of their overall GFS non-Medicaid funding which, in turn, reduces funding available for other critical BH treatment services. In fact, in some regions, ITA court costs are now utilizing more than 40% of these critical non-Medicaid funds. We request that the state increase GFS Non-Medicaid funding by \$20 million to help offset these ever-rising ITA court costs and would free up valuable resources for other badly needed crisis programs and treatment services.

FUND EQUITABLE PUBLIC DEFENSE

It should come as no surprise that counties continue to request that the state provide additional funding for trial court public defense services. Counties cannot continue to fund this alone and hope the state will reinforce its commitment to the constitutional right to effective legal representation and address the systemic inequities that are inevitable in a system funded by disparately situated counties.

VETERAN SERVICE OFFICERS

In 2019 the legislature created the veterans service officer (VSO) fund to be used to fund VSO programs in counties (RCW 43.60A.230 and 235). However, the legislature only funded two, one-time pilot projects. While this program costs the state up front, the return on its investment would be significant. For example, before the start of the pandemic, Skagit County employed a county VSO for two years at a cost of \$60,000 annually. The return on that investment was over \$1 million in federal VA funds paid to the veterans and their families as a result of the work done by this one VSO. There is no doubt that this is a worthy and fruitful cause. We hope that you will consider funding additional VSOs across the state to help our Veterans.

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INCREASE RATES FOR INDIVIDUAL SUPPORTED EMPLOYMENT AND COMMUNITY INCLUSION

Counties are the contractual provider and monitor of funding for individuals with intellectual and developmental disabilities (I/DD) from the Developmental Disabilities Administration (DDA) for individual supported employment and community inclusion (also known as community access) services. The rates for these services were set 10 years ago and have not been increased, but for a small, temporary bump to address increase costs related to the pandemic, since then. While this small adjustment addresses the pandemic related expenses, there is an urgent and ongoing need to bring the hourly rate into alignment with the increased costs of doing business since the rate was established 10 years ago. Part of this urgent need is due to a staffing crisis. Without an increased rate, providers are unable to offer a competitive, livable wage to recruit and retain a qualified workforce. A reduced workforce threatens our robust services for those with intellectual and developmental disabilities with consequences. We encourage you to pass and fund SB 5790 which addresses this very issue.

PROVIDE FUNDING FOR LOCAL PLANNING

WSAC supports the Governor's proposed \$19.3 million investment to support local implementation of state planning requirements.

When the state enacted the Growth Management Act in 1990, it also provided significant funding support to assist local government implementation efforts. Since then, funding has varied widely and reduced to less than \$1 million per biennium. However, requirements for periodic review of comprehensive plans and the robust analysis that must be performed to complete those reviews and updates remain in place. Regular reviews and updates are typically a two- or three-year process for most jurisdictions, and all counties lack dedicated, reliable funding to assist in meeting planning requirements. Smaller counties, especially, struggle to maintain staff and other capacity requirements to meet statewide planning responsibilities without assistance. Even though aid isn't provided in most cases and dedicated funding resources are lacking, counties that fail to meet requirements may be subject to penalties.

At the same time, the legislature continues to enact and consider new requirements for local planning. An example from the 2021 session is HB 1220. While HB 1220 included new requirements counties to address the ongoing housing crisis by including measures in comprehensive plans to assure the provision of housing for all economic sectors, funding was never provided. Because funding wasn't provided, local governments are not required to implement the provisions of HB 1220, nor do they have the resources.

The state is also experiencing a significant gap in available data and fact-based information about planning implementation and the effectiveness of the state's planning framework. We all need good information as new proposals are being considered and implemented, and rulemaking continues to occur, rather than anecdotal reports and assumption. Resources are needed to conduct data collection and research to develop knowledge and provide answers for well-informed and data-supported policy decisions. The Governor's proposal addresses this need.

PROVIDE ADDITIONAL INVESTMENTS IN BEHAVIORAL HEALTH, HOMELESSNESS, AND AFFORDABLE HOUSING

The pandemic has highlighted the fact that we need additional investments in human services. We all know that this crisis has led to lost jobs and wages, increased mental health issues, such as anxiety and

Budget Leadership Page 4 January 28, 2022

depression, housing instability, and substance use abuse. While short-term funds (e.g. CARES) and fixes (e.g. eviction moratorium) are available now, these mechanisms are not permanent. Counties will continue to need to pay for increased costs associated with the services they provide. Without additional funding to support these services, our most vulnerable people will fall through the cracks.

CONTINUE INVESTMENTS IN LOCAL PUBLIC HEALTH

Our public health system has led state and local pandemic response efforts for nearly two years. Local public health has served as the frontline defenders and coalition builders in working with schools, long-term care facilities, businesses, and healthcare. Local response is critical to support more extensive recovery and response efforts. The Department of Health's additional "Contain the Spread" package would continue this robust response system, including support for community-based care coordination, outbreak investigation, vaccination promotion, and efforts to transition from response to recovery. This funding is vital to ongoing containment efforts, maintaining an ability to shift to evolving local needs and look ahead to the public health crises that have been augmented from the pandemic. Additionally, this decision package ask includes a backfill of \$11.8 million that was taken from local health allocation at the end of 2021. The "Contain the Spread" and COVID-19 vaccination packages were fully funded in the Governor's proposed budget.

INVEST IN PANDEMIC RESILIENCY AND RECOVERY

The pandemic has spotlighted the critical need for a robust recovery plan for individual health, community well-being, and societal resiliency. The pandemic underscores the crucial need for county programs and services investments to protect and prepare our communities for future emergencies. Local governments need to be empowered to work with state agencies to look beyond the immediate needs of the pandemic. Together, we must consider addressing inequities in wealth, access to critical services, and systemic discrimination. Bolstering governmental systems and private-public partnerships in behavioral health, public health, healthcare, and business will guide local investments so that they complement state and federal efforts rather than duplicate.

INCLUDE COUNTIES IN TRANSPORTATION PLANNING AND FUNDING

The county transportation system has been inadequately funded for years. As the state increased the gas tax from 23 cents to 49 cents, county direct fuel tax distributions have only increased by ½ cent. As a result, counties have been forced to look locally for transportation funding options. However, those resources, the bulk of which are capped at an unsustainably low level, are necessary for a myriad of other obligations. In addition to ever-increasing revenue challenges, rising costs related to fish passage barrier replacement, materials such as gravel and fuel, and deteriorating bridges, have left counties in a tenuous position. Counties request they be included in transportation planning and funding decisions.

INVEST IN FISH PASSAGE BARRIER REMOVAL

Counties appreciate the 2019-2021 investments in the Fish Passage Barrier Removal Board (FBRB). But these investments fall far short of the demand. Counties have at least 4,000 inventoried barriers in the state injunction case area. As the rules and regulations of culvert replacement have expanded, so too have the costs. Local government culvert replacements now usually exceed \$1 million each and are often more expensive. With limited resources locally to pay for this infrastructure, and very few statewide resources available, the importance of fully funding the FBRB is even more critical. We

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support the FBRB's efforts toward a statewide watershed approach and plan for culvert investment and request full funding of the FBRB's prioritized project list.

FULLY FUND PUBLIC WORKS ASSISTANCE ACCOUNT

The Public Works Assistance Account (PWAA) is a crucial funding source in our efforts to provide the necessary infrastructure for our communities. While we appreciate the investment made in the current budget, the need for funding still far outpaces the monies available. Further, more than \$1 billion has been diverted from the PWAA over the last decade. With the new federal infrastructure package, counties ask you to take advantage of the federal investment in infrastructure and the state's additional revenue to fully fund the account. Infrastructure investments are needed to address aging systems that cannot keep up with current population growth, environmental needs, or support our state's growing economy.

ALLOCATE LOCAL RECORDS GRANT FUNDING

In 2017, the legislature created a dedicated funding source for the Local Records Grant Program administered by the State Archives. This has been an important program to provide technical support to local governments to improve management of public records. Through what we assume was a mere oversight, the dedicated funds for the grant program that were not distributed in 2020 due to the pandemic were not re-allocated for the 2021-23 budget. Please correct this oversight in the supplemental budget to ensure the additional funding of grants to meet demand for this important program.

FUND PERS 1 COLAS

Counties support the policy of providing COLAs to retirees, who are often on fixed incomes. However, counties already pay an additional unfunded liability surcharge of 4.88% on PERS 2 rates to make up for the unfunded liability for PERS 1 at its current funding levels. This surcharge is projected to end after 2025; however, another COLA could result in prolonging the need for that surcharge by increasing the unfunded liability. The last COLA adopted in 2020 was estimated to add \$129 million to the PERS 1 unfunded liability and increase local government employers' PERS costs by \$78 million over a ten-year period. The current COLA would cost cities and counties an additional \$101.3 million over the next decade. WSAC respectfully asks that any additional costs incurred for COLAs for PERS 1 be fully funded by the state without passing any additional cost increases on to local governments.

We appreciate your consideration and would be happy to discuss these matters with you and your staff in greater detail. Counties endeavor to work in close partnership with the state to deliver the services and programs your mutual constituents rely on. Please do not hesitate to contact us if you have any questions or concerns.

Budget Leadership Page 6 January 28, 2022

Sincerely,

Director of Government Relations

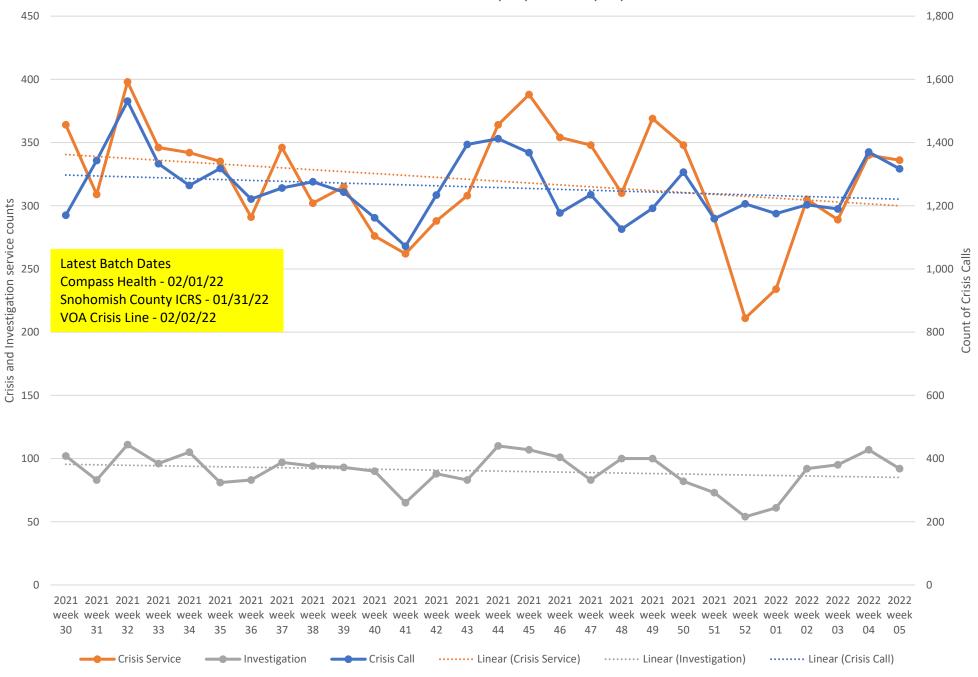
c: David Schumacher, Office of Financial Management Scott Merriman, Office of Financial Management

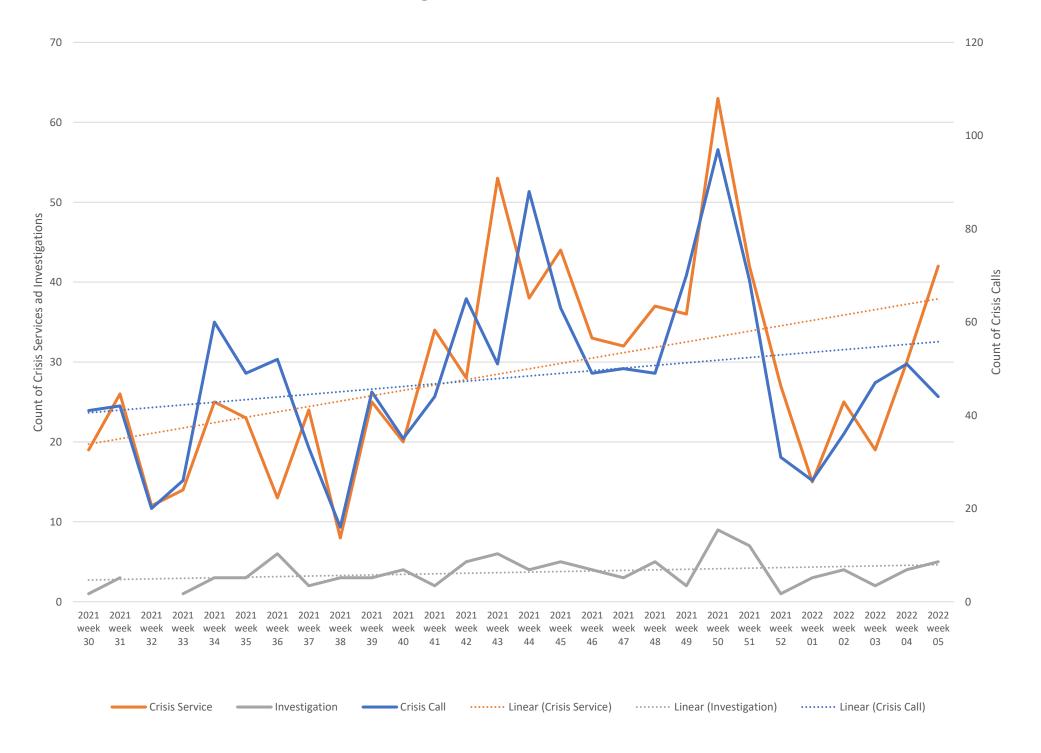


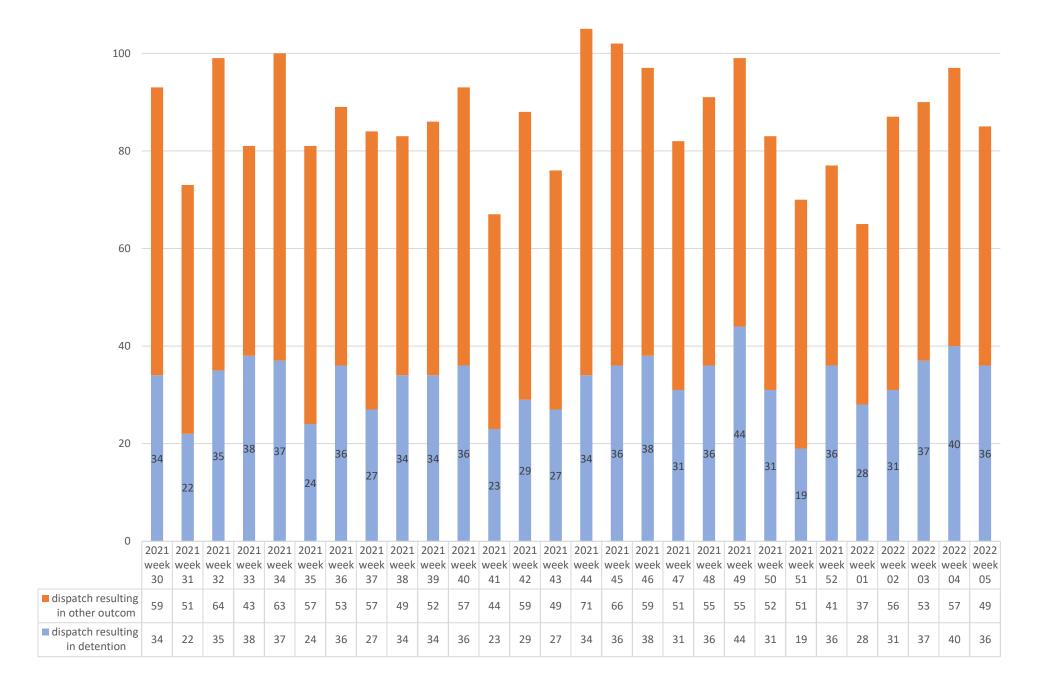
Weekly Crisis Capacity Indicator Snapshot

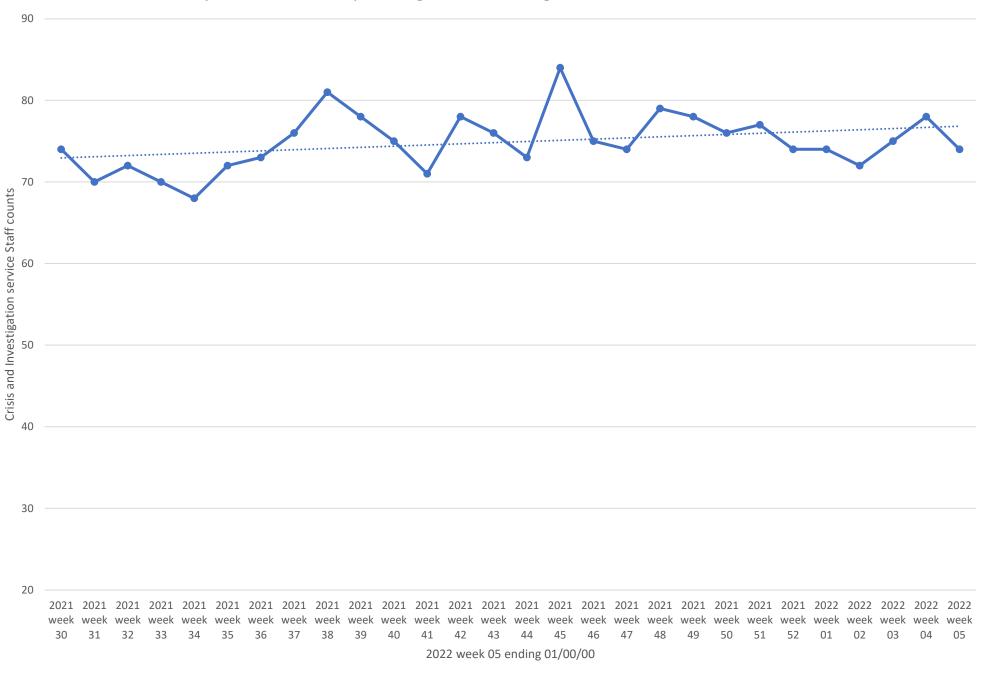
	* Weekly Clisis Capacity illulcator shapshot
Page 2	Crisis Data - dates 07/18/21 to 01/29/22
Page 3	Crisis Data: Ages 0-17 - dates 07/18/21 to 01/29/22
Page 4	All DCR Dispatches - dates 07/18/21 to 01/29/22
Page 5	Weekly Staff Count - Staff providing Crisis or Investigaion services 07/18/21 to 01/29/22
Page 6	Hospital placement locations (Invol and Vol) - No adjustment has been made for timely data - recent weeks likely low
Page 7	Telehealth only, crisis and investigation services from 07/18/21 to 01/29/22
Page 8	Crisis Service Unit Percent - Crisis Service units divided by Crisis units + Investigation units
Page 9	Washington State Indicators of Anxiety or Depression Based on Reported Frequency of Symptoms During Last 7 Days
Page 10	Place of Service -Crisis Services, percent of total by week
Page 11	Place of Service -Investigations, percent of total by week
Page 12	New COVID-19 Cases Reported Weekly per 100,000 population - 11/11/20 to 02/02/22
Page 13	Total Hospitalized Adults - COVID-19 (confirmed or supected) 7 day average
Page 14	HB 1310 Data collected with LE Declines 07/18/21 to 01/29/22
Page 15	HB 1310 Data collected with LE Response or Other 07/18/21 to 01/29/22

Crisis Data - dates 07/18/21 to 01/29/22

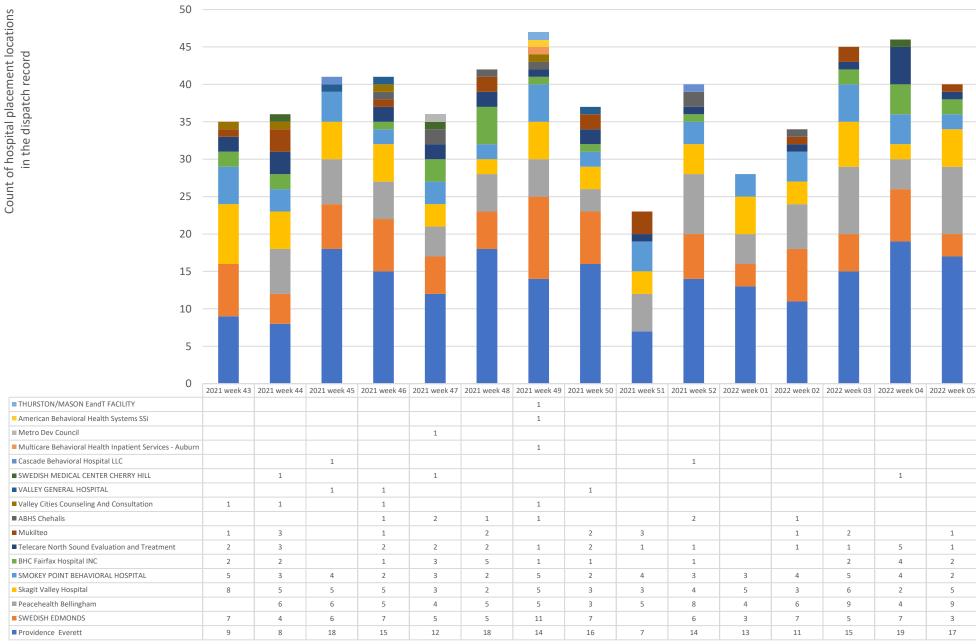


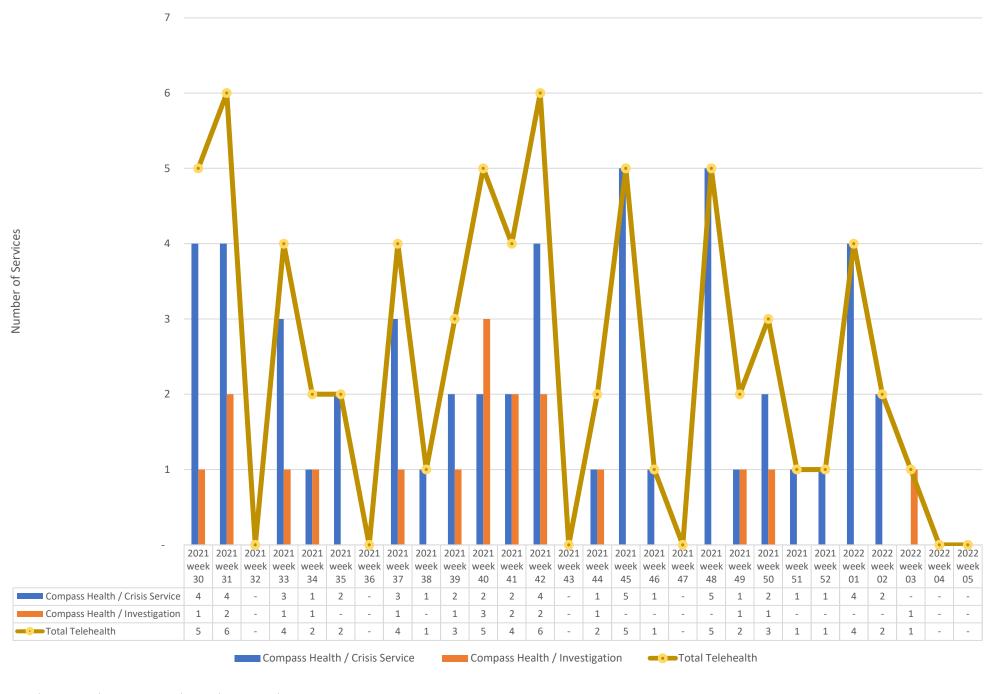


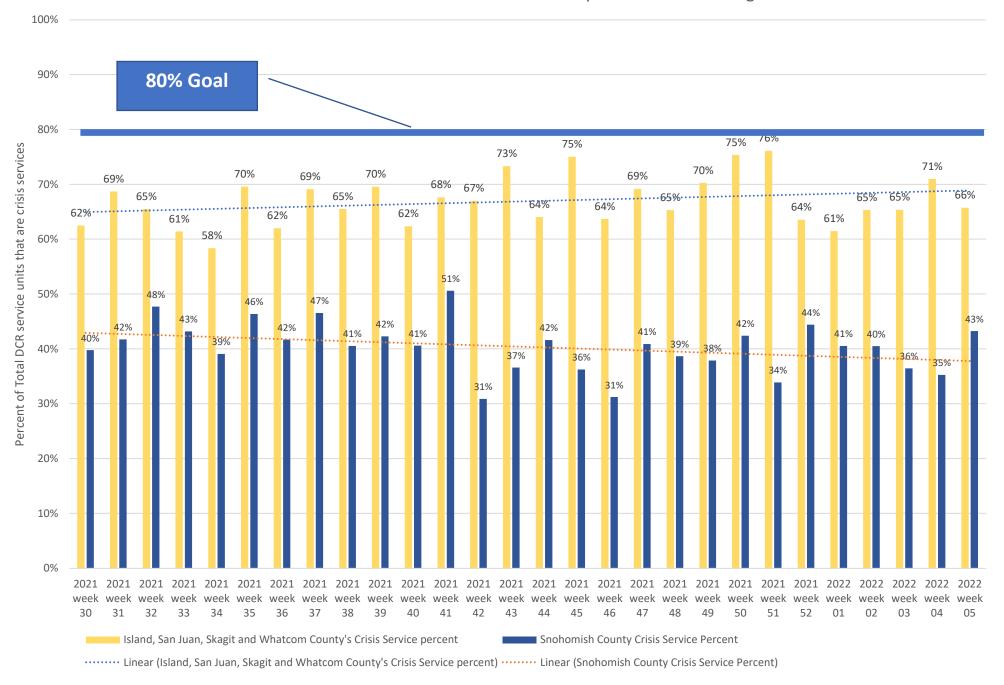




Hospital placement locations (Invol and Vol) - No adjustment has been made for timely data - recent weeks likely low







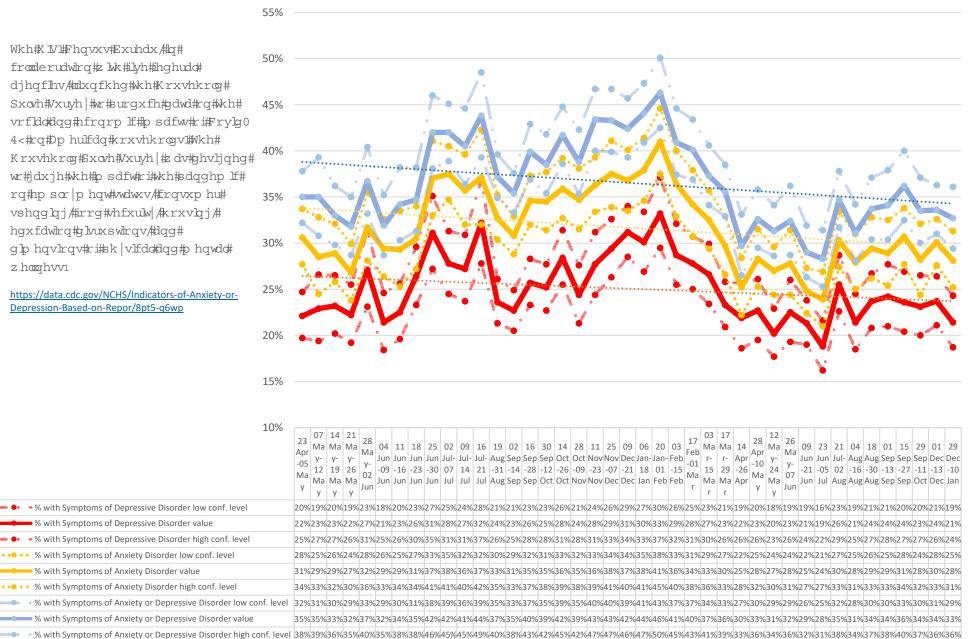
Washington State Indicators of Anxiety or Depression Based on Reported Frequency of Symptoms During Last 7 Days

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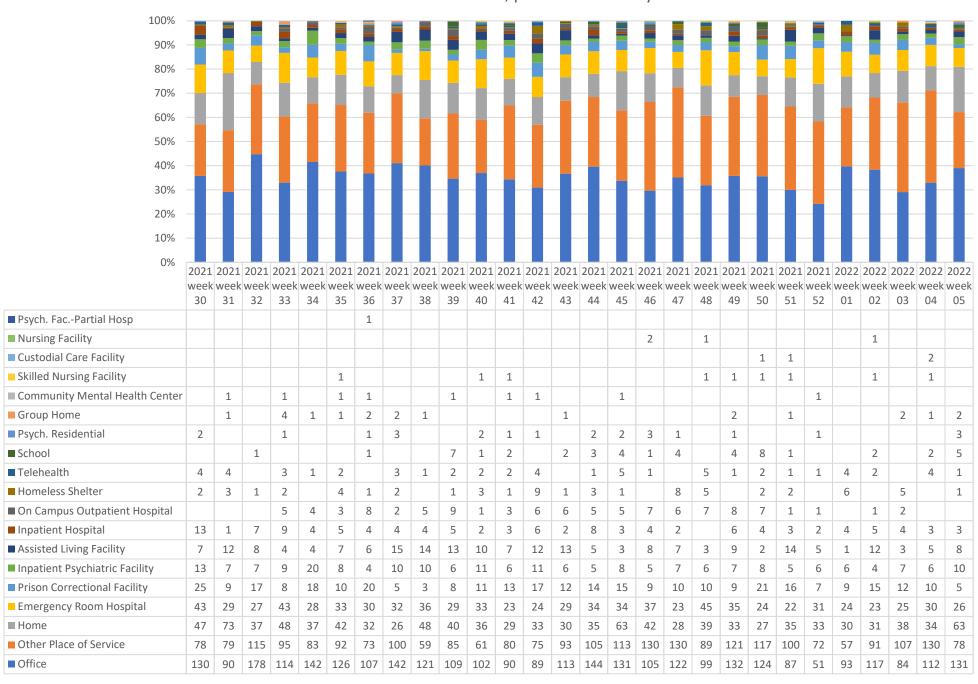
https://data.cdc.gov/NCHS/Indicators-of-Anxiety-or-Depression-Based-on-Repor/8pt5-q6wp

• % with Symptoms of Depressive Disorder low conf. level % with Symptoms of Depressive Disorder value

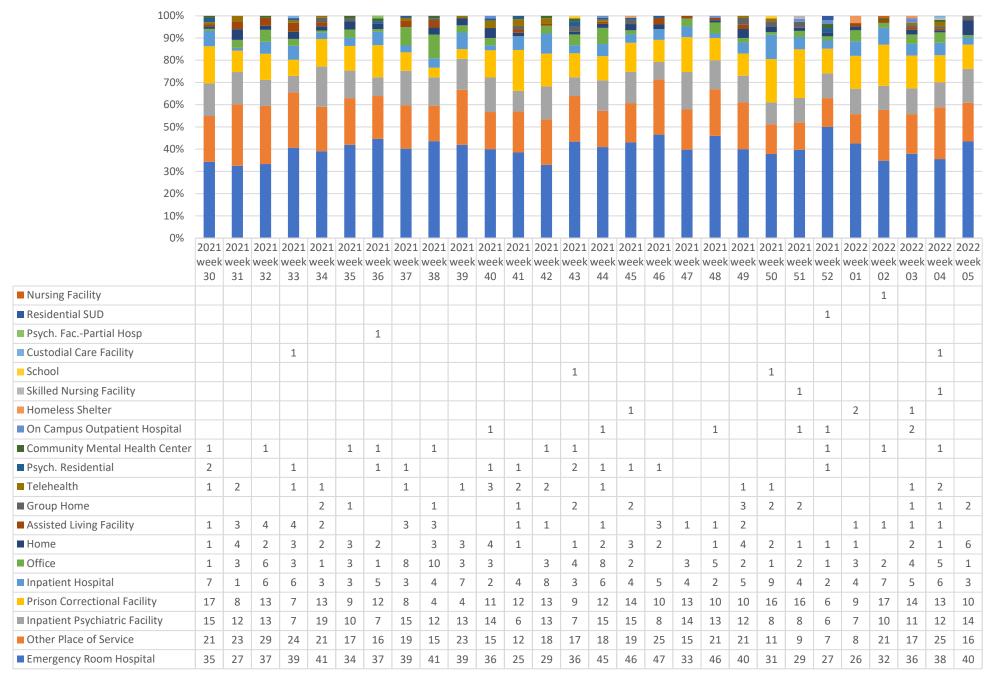
% with Symptoms of Anxiety Disorder low conf. level % with Symptoms of Anxiety Disorder value % with Symptoms of Anxiety Disorder high conf. level

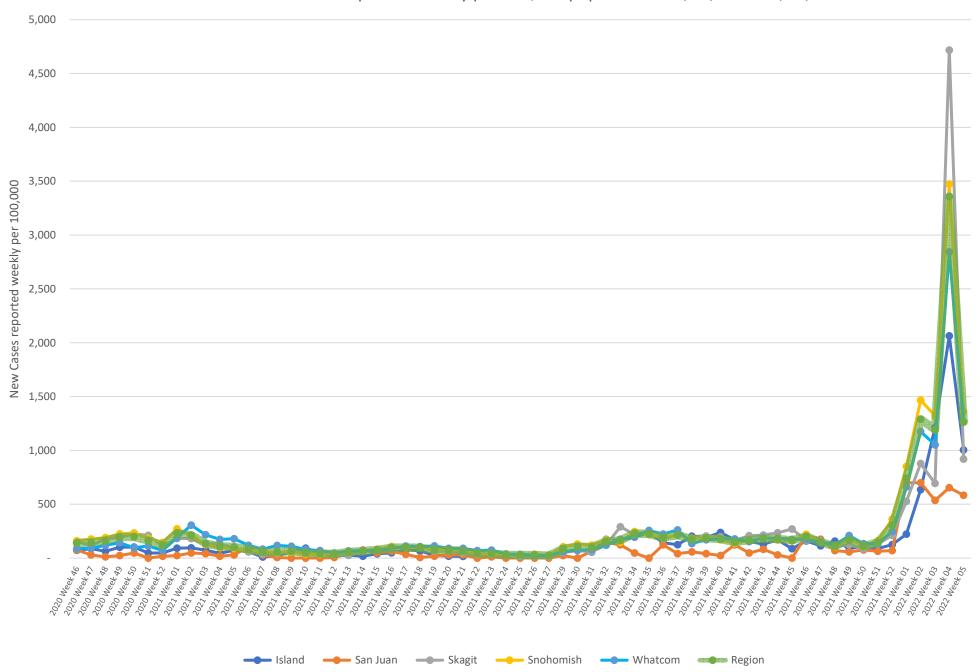


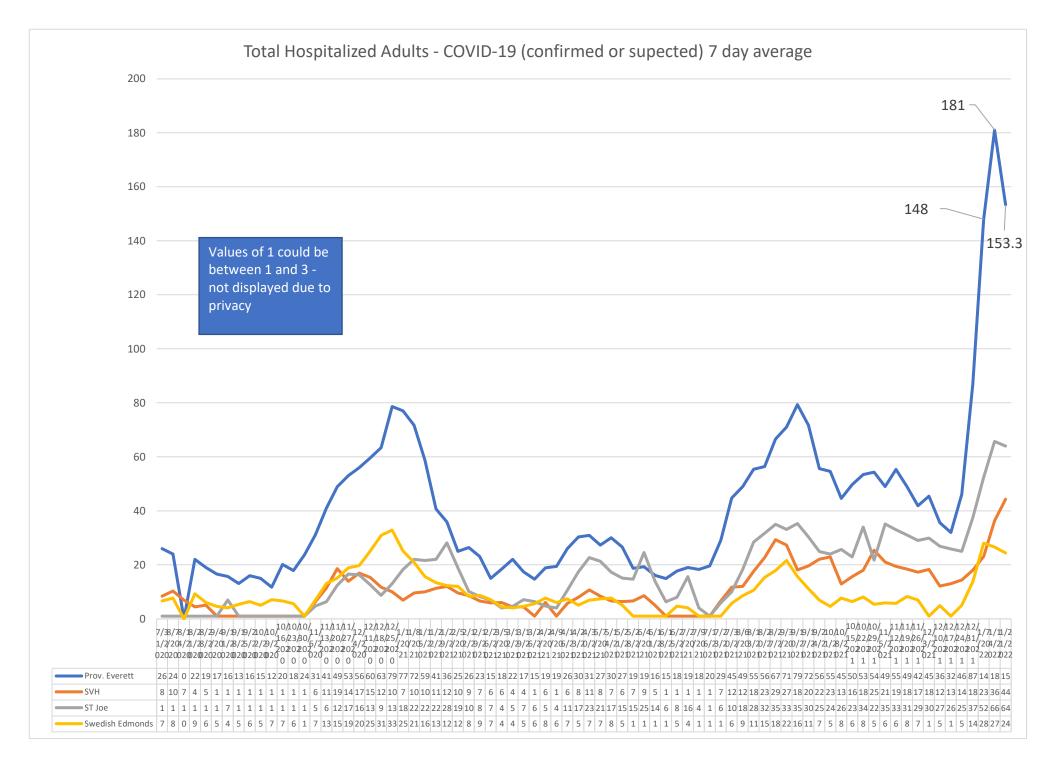
Place of Service - Crisis Services, percent of total by week

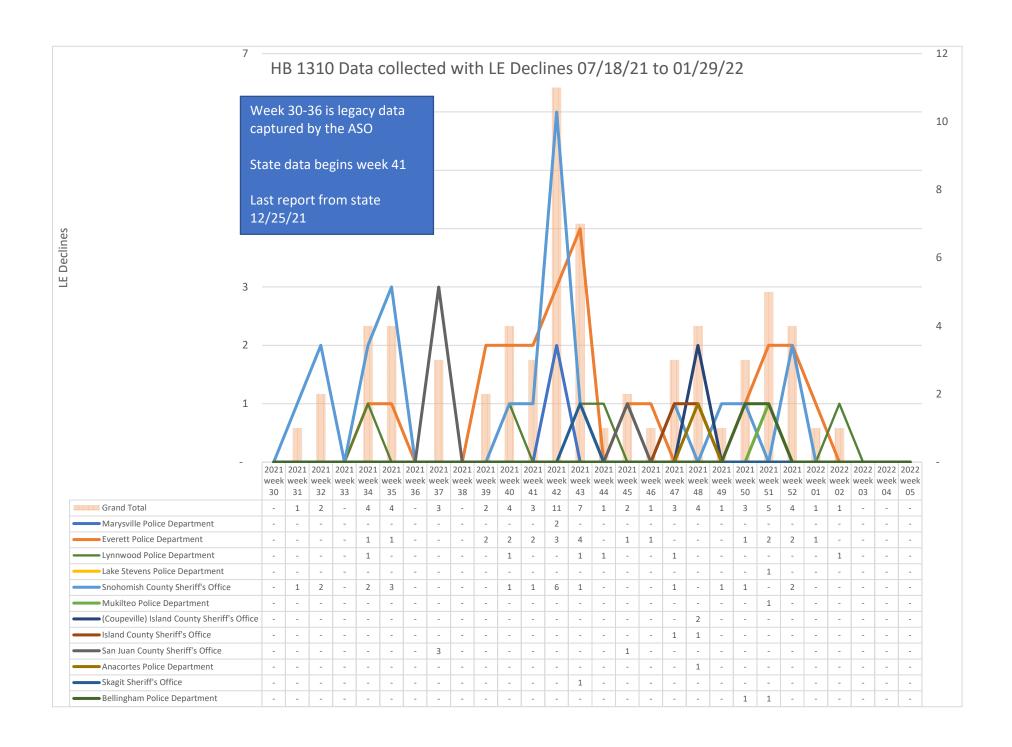


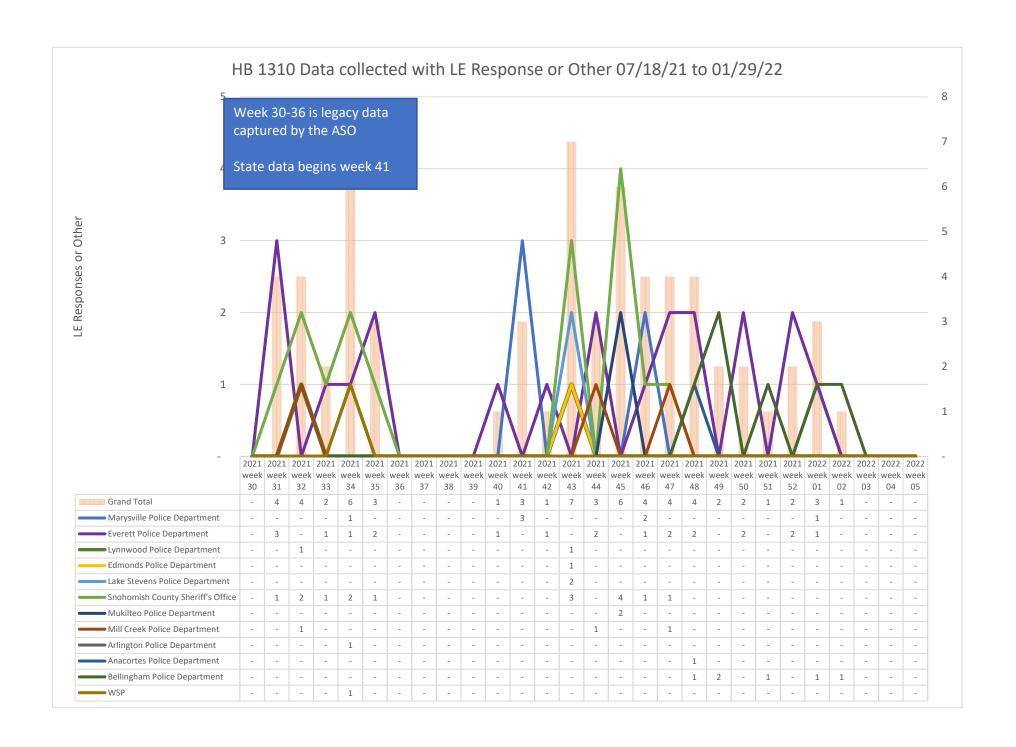
Place of Service -Investigations, percent of total by week









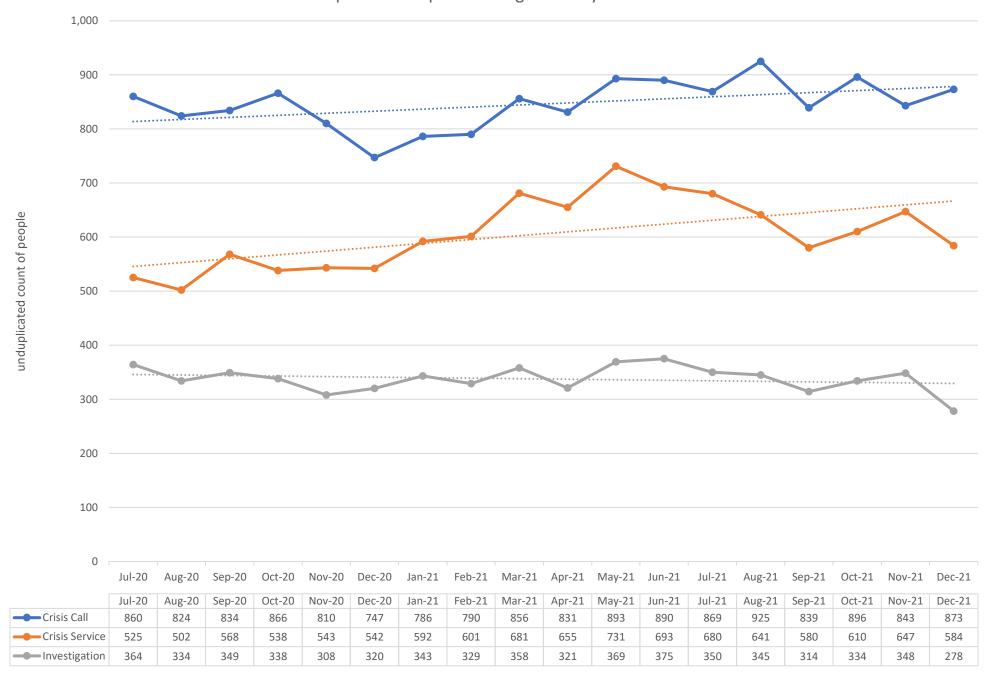


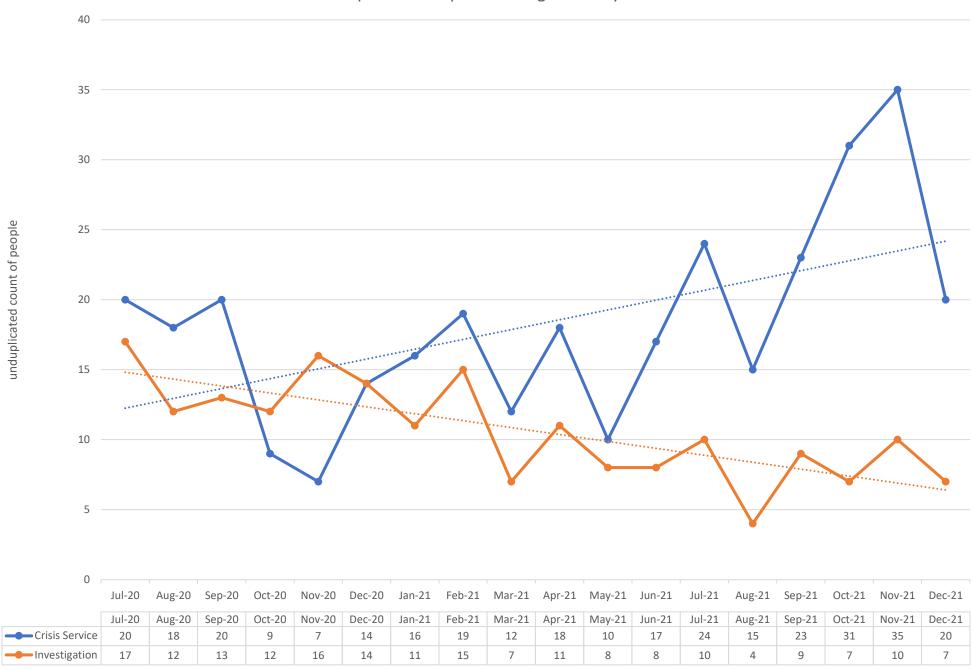


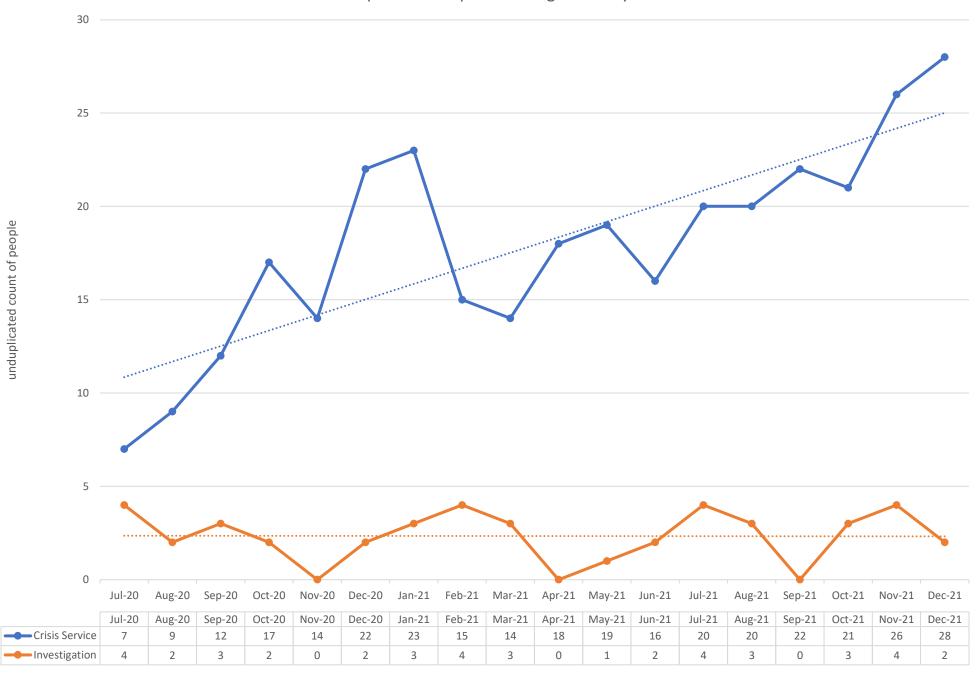
North Sound Crisis System Dashboard

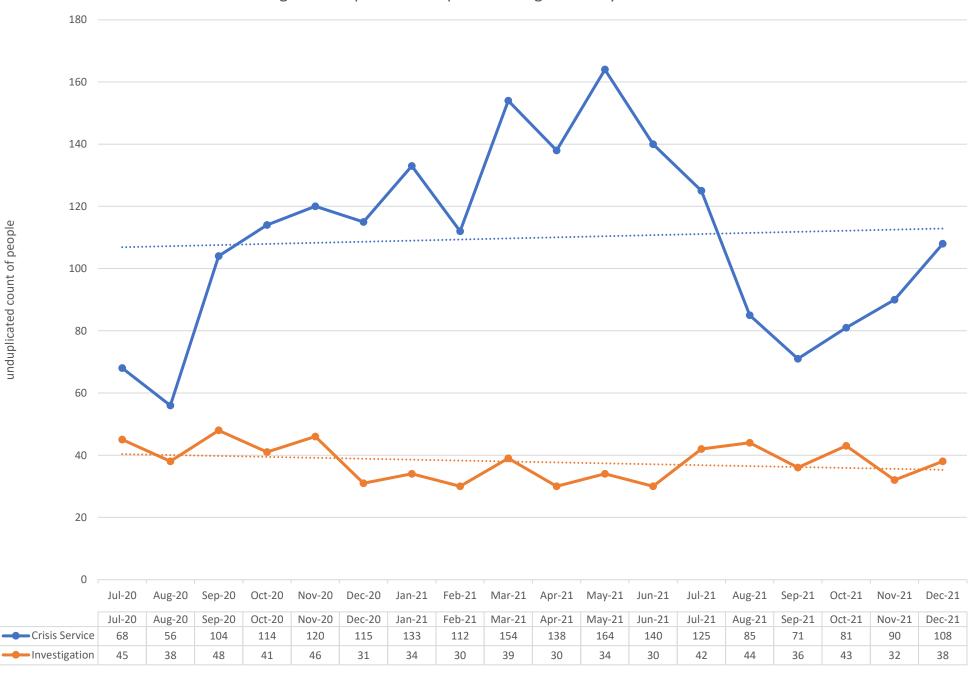
	<u>-</u>
Page 2	Unduplicated People receiving a crisis system service
Page 3	Island - Unduplicated People receiving a crisis system service
Page 4	San Juan - Unduplicated People receiving a crisis system service
Page 5	Skagit - Unduplicated People receiving a crisis system service
Page 6	Snohomish - Unduplicated People receiving a crisis system service
Page 7	Whatcom - Unduplicated People receiving a crisis system service
Page 8	Region Designated Crisis Responder (DCR) Investigations
Page 9	Region DCR Investigation Referral Sources
Page 10	Region DCR Investigation Outcomes

Unduplicated People receiving a crisis system service

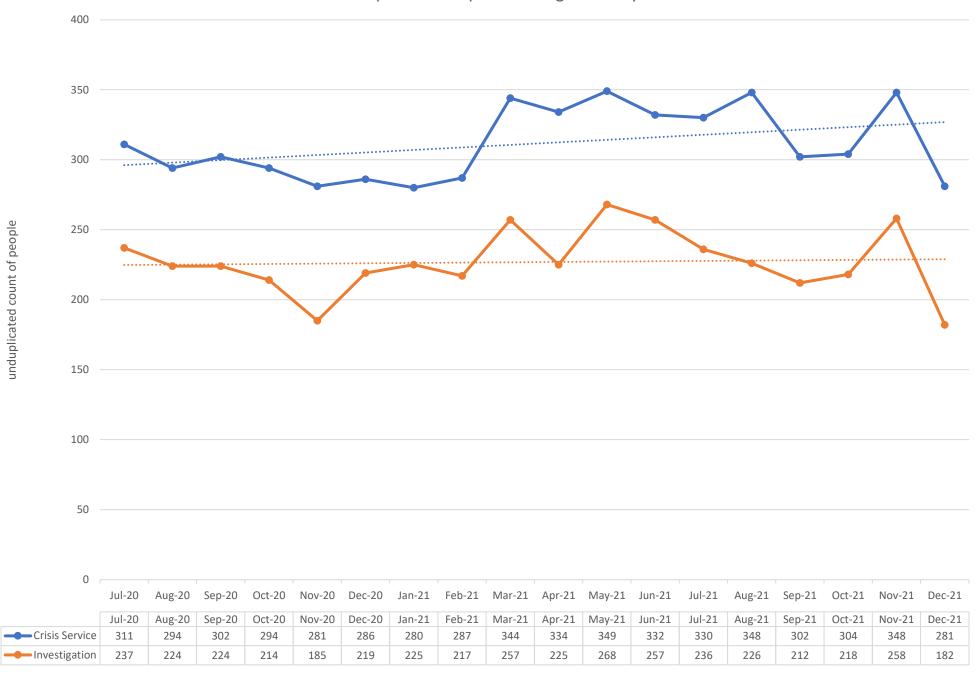


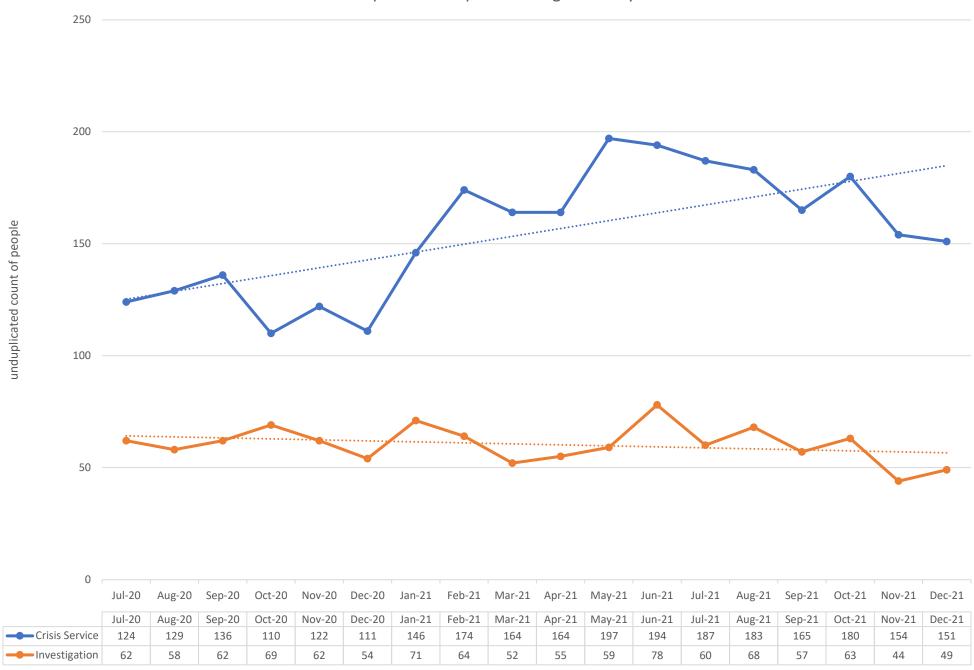


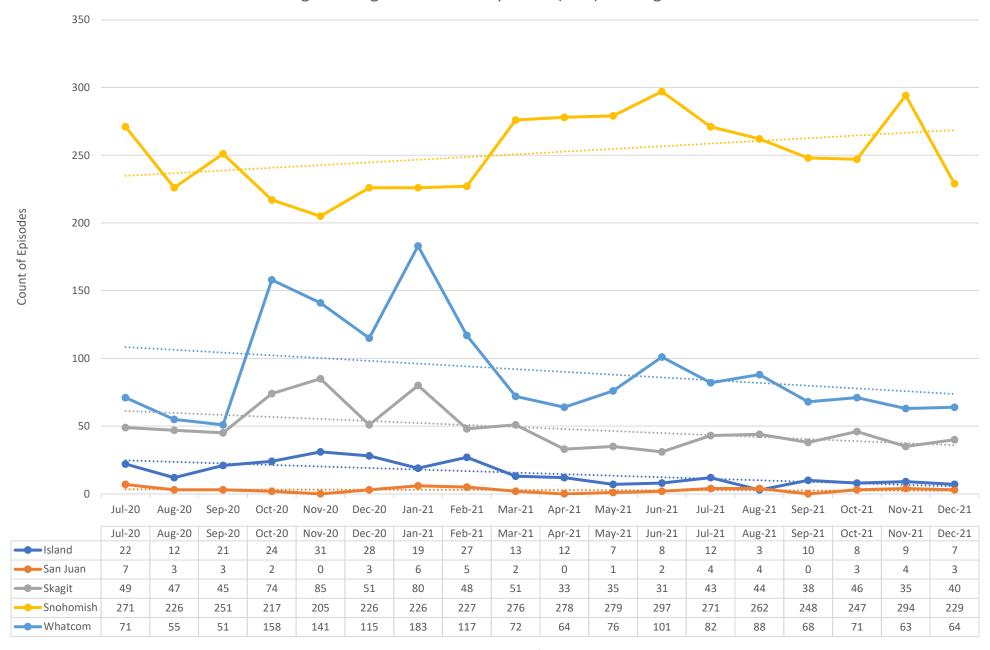




Snohomish - Unduplicated People receiving a crisis system service







Month of Dispatch

■ School

■ Community

■ Care Facility

Professional

■ Law Enforcement

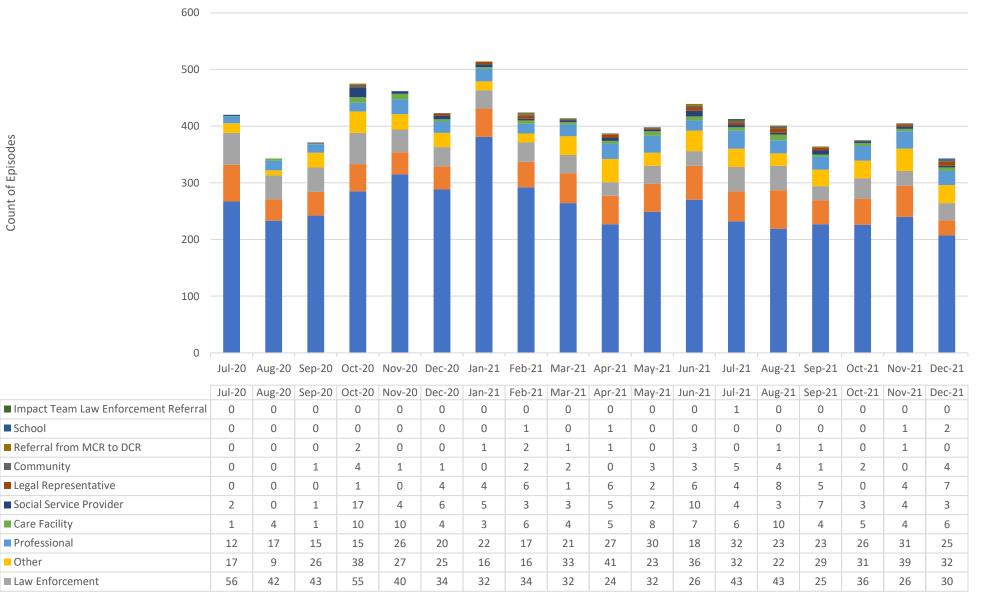
Other

Family

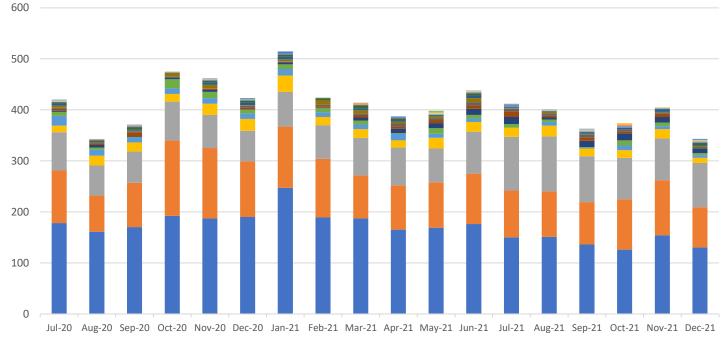
■ Hospital

■ Legal Representative

■ Social Service Provider

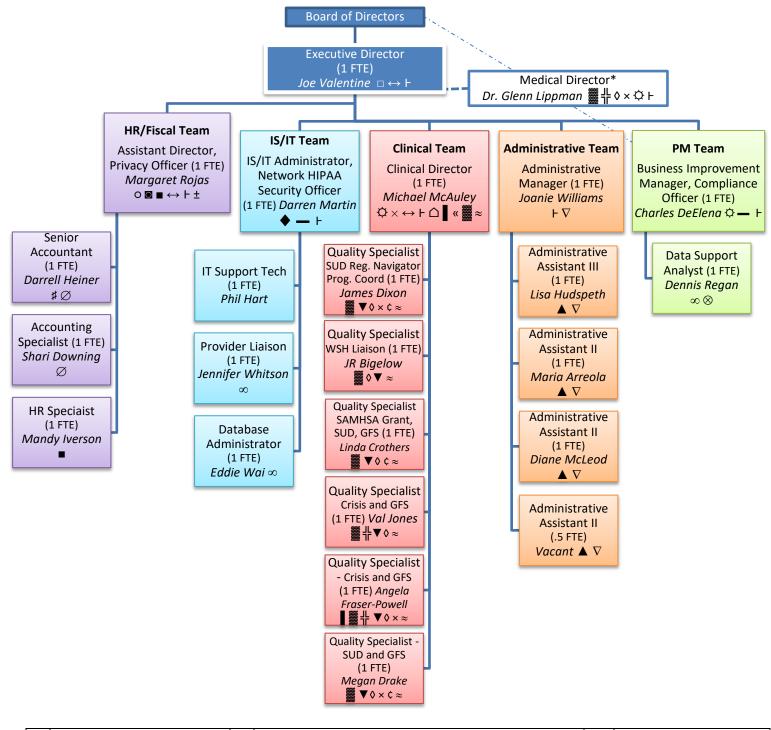


Month of Dispatch



	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21
■ Petition filed for outpatient evaluation	0	0	0	0	0	1	2	0	0	0	0	0	0	0	0	0	0	1
■ Referred to chemical dependency residential program	0	0	0	0	0	1	0	0	0	0	3	0	0	0	0	0	0	0
Referred to chemical dependency intensive outpatient program	2	0	1	0	1	0	0	0	0	0	1	1	0	1	2	0	0	2
Referred to chemical dependency inpatient program	1	1	0	0	0	0	0	0	0	0	2	1	0	1	1	3	1	1
■ Referred to acute detox	1	0	0	2	1	1	0	1	1	0	1	1	0	1	1	0	1	1
■ Referred to sub acute detox	1	0	2	0	1	0	0	0	3	0	0	1	1	0	1	3	0	1
Filed petition - recommending LRA extension.	0	2	2	1	2	2	4	0	1	4	1	2	5	0	1	3	1	2
■ No detention - E&T provisional acceptance did not occur within statutory timeframes	2	2	5	0	3	4	3	5	6	4	1	4	1	1	1	0	1	5
■ Detention to Secure Detox facility (72 hours as identified under 71.05)	5	2	2	0	5	5	6	0	4	2	2	5	2	1	3	3	5	1
■ No detention - Unresolved medical issues	4	1	1	7	7	1	4	8	6	3	4	8	1	3	1	0	1	1
■ Referred to crisis triage	2	1	2	2	1	3	1	3	3	7	3	6	5	5	6	4	3	5
■ Non-emergent detention petition filed	4	3	8	0	2	4	1	3	5	4	6	7	11	3	7	4	6	0
■ Did not require MH or CD services	2	5	2	3	4	1	4	1	6	9	10	12	14	4	12	14	11	8
■ Referred to non-mental health community resources.	8	4	1	18	12	7	9	8	8	1	11	7	7	5	1	10	7	4
■ Returned to inpatient facility/filed revocation petition.	19	12	9	11	11	11	13	9	9	13	8	7	0	7	2	9	6	5
Referred to voluntary inpatient mental health services.	13	19	18	15	22	23	32	16	17	14	21	19	18	21	15	15	18	10
■ Other	75	59	61	76	65	60	68	66	74	74	66	82	105	108	90	82	82	87
Referred to voluntary outpatient mental health services.	103	71	87	148	138	109	120	115	84	87	89	99	92	89	83	98	108	79
■ Detention (72 hours as identified under the Involuntary Treatment Act, RCW 71.05).	178	161	170	192	187	190	247	189	187	165	169	176	150	151	136	126	154	130

Month of Dispatch



pu.	¢	Addictions Specialist	•	Customer services/information and referral: General Information and referral and overall customer service	æ	Member Services
regend	∇	Administrative Services	•	Customer services/information and referral: Specific information and referral and customer service on BH clinical services	0	Network Development Administrator
	\leftrightarrow	ASO Executive Team	\otimes	Data Analyst	±	Privacy Officer
	\Diamond	Care Management/Care Coordination	8	Encounter Data Processing	-	Program Integrity, Fraud and Abuse
		Children's Specialist	Ø	Financial Reporting	0	Provider Relations Administrator
	#	Claims Administration		Government/Community/Tribal Liaison	☼	Quality Management
	\Box	Clinical Director	×	Grievances and Appeals		Staff and Provider Training
	╬	Crisis response system, including oversight of delegation to VOA	*	Information Technology		Utilization/Care Management Administrator
	«	Crisis Triage Administrator	Τ	Leadership Team		

^{*}Independent Sub-Contractor

North Sound Behavioral Health Administrative Services Organization February 10th, 2022 Board of Directors Financial Notes

HIGHLIGHTS

- 1. The Budget to Actuals Looks pretty good considering this is only for one month. Our state funds are showing a large positive variance due to receiving the November amendment amount in January, it would be higher, but we didn't receive January's regular payment yet. We also noticed that we are missing two MCO payments. We are working to resolve the payment issues.
- 2. The Revenue and Expense statement is currently showing a large income which is mainly due to the payment of the November amendment amounts in January. Our GFS fund balance at 12/31/21 is \$4,806,895 with a required reserve amount of \$3,090,242 leaving us with a spendable reserve amount of \$1,716,653.
- 3. The one thing to note is the decrease in the Medicaid fund balance, this is due to a change in our method for calculating MCO expense for our crisis system and enables us to pull down the MCO revenue that was building up in the fund balance. Current MCO revenue is not covering current expense and it looks like the remaining fund balance will be used up in February. We are planning to renegotiate our funding contracts with the MCOs and present data on the percentage of ITA investigations that are Medicaid billable.
- 4. We have included a January to June projection of our revenues and expenditures to try and forecast possible areas of concern. There are some variances but nothing serious considering that this is a projection. Withdrawal Management does appear that it will run over budget. This projection also forecasts that we will have to use an estimated \$724.672 of state funds to cover the MCO shortfall.

NOTES

- 1. We are presenting the financial statements for January 2022 for the Behavioral Health Administrative Services Organization (ASO).
- 2. These monthly statements are prepared for the Board's use only. They provide a snapshot of expenses and revenue for a single calendar month compared with a hypothetical "year to date" projection. However, neither revenues nor expenditures occur on an equal 1/12 amount each month.

- 3. The North Sound BH-ASO adopts "calendar year" budgets, but the allocations from the state are done on a state fiscal year basis [with adjustments every 6 months]. The exceptions are Federal Block Grant Funds which are allocated for the entire fiscal year.
- 4. Revenues and expenses are managed independently within each of the major fund categories: Medicaid, State General Fund, Mental Health Block Grant, Substance Abuse Block Grant, and SAMHSA [a direct grant we receive from the federal government for our rural Medication Assistance Treatment program].
- 5. Within 'State General Funds', allocations are further subdivided between general state funds, and the multiple "Proviso" funds allocated for specific services.
- 6. We have added two new lines at the bottom of the "Revenue and Expense" tab which shows the beginning and ending fund balance within each fund category for the state fiscal year. I also added some additional lines at the bottom to show the Net Income from Operations before the transfer of funds to the BHO.
- 7. The Budget to Actuals statement includes notes on areas where there is a variance between the hypothetical year to date budget and actual revenues and expenditures. I also added additional lines at the bottom to show the transfer of funds separate from the normal operations.

NORTH SOUND BEHAVIORAL HEALTH ADMINISTRATIVE SERVICE ORGANIZATION PRELIMINARY REVENUE and EXPENSE STATEMENT for JANUARY 2022* BUDGET TO ACTUALS

			YTD		YTD		Variance	
REVENUES		2022	2022		2022	F	avorable	
Intergovernmental Revenues		Budget	Budget		Actual	(Ur	nfavorable)	
HRSA	\$	333,333	27,778		0		(27,778)	•
MHBG		3,088,440	257,370		82,277		(175,093)	
SABG		5,339,865	444,989		855,057		410,069	
State Funds		25,083,404	2,090,284		5,764,372		3,674,088	Got Novemb
Medicaid (MCO)		5,102,632	425,219		347,796		(77,423)	Missing two
Total Intergovernmental Revenues		38,947,674	3,245,640		7,049,502		3,803,862	-
Misc. Revenue **		0	0		0		-	
Interest Revenue		3,500	292		222		(70)	_
TOTAL REVENUES	\$	38,951,174	\$ 3,245,931	\$	7,049,723	\$	3,803,792	-
EXPENDITURES Inpatient Treatment	\$	1,150,000	95,833	\$	103,223		(7,389)	
ITA Judicial	4	2,300,000	191,667	Ψ	211,426		(19,760)	
Crisis Services		14,639,597	1,219,966		1,086,042		133,925	
MH Crisis Stabilization		1,500,000	125,000		121,886		3,114	
E&T Services		1,100,000	91,667		112,254		(20,587)	
E&T Discharge Planner		107,294	8,941		7,036		1,905	
Jail Services		367,536	30,628		20,454		10,174	
PACT Services		511,716	42,643		38,776		3,867	
MHBG Expenditures ***		1,371,893	114,324		61,778		52,547	
HARPS & DOC Housing		1,197,343	99,779		48,720		51,059	
DMA County Contracts		581,292	48,441		20,732		27,709	
SABG Expenditures ****		3,920,240	326,687		294,200		32,487	
Withdrawal Management		900,000	75,000		108,148		(33,148)	
HRSA		304,921	25,410		44,802		(19,392)	
Juvenile Drug Court		139,800	11,650		6,600		5,050	
Other MH Services *****		1,244,501	103,708		118,250		(14,542)	
Other SUD Services		3,046,419	253,868		0		253,868	
Ombuds		216,000	18,000		13,446		4,554	
Advisory Board		19,998	1,667		0		1,667	
Subtotal - Services		34,618,550	2,884,879		2,417,772		467,107	•
Administration		4,332,624	361,052		338,061		22,991	
TOTAL EXPENDITURES	\$	38,951,174	\$ 3,245,931	\$	2,755,833	\$	490,098	-

Excess of Revenues Over (Under) Expenditure.

\$ 4,293,890

* THIS IS AN UNAUDITED STATEMENT

^{*} Medicaid and State revenue are paid in advance. MHBG, SABG and SAMHSA revenue are paid on an expens reimbusement method. Expenses are recognized when the bill is received.

NORTH SOUND BEHAVIORAL HEALTH ADMINISTRATIVE SERVICE ORGANIZATION PRELIMINARY REVENUE and EXPENSE STATEMENT for JANUARY 2022*

DEVENIUS	YTD	YTD	YTD	YTD	YTD	YTD
REVENUES	2022	2022	2022	2022	2022	2022
Intergovernmental Revenues	Totals	Medicaid	State	MHBG	SABG	HRSA
HRSA	0					-
MHBG	82,277			82,277		
SABG	855,057				855,057	
State Funds	5,764,372		5,764,372			
Medicaid (MCO)	347,796	347,796				
Total Intergovernmental Revenues	7,049,502	347,796	5,764,372	82,277	855,057	0
Misc. Revenue **	0		0			
Interest Revenue	222		222			
TOTAL REVENUES	\$ 7,049,723	\$ 347,796	\$ 5,764,593	\$ 82,277	\$ 855,057	\$ -
EXPENDITURES						
Inpatient Treatment	\$ 103,223		\$ 103,223			
ITA Judicial	211,426		211,426			
Crisis Services	1,086,042	558,842	366,320		160,880	
MH Crisis Stabilization	121,886		0	121,886		
E&T Services	112,254		112,254			
E&T Discharge Planner	7,036		7,036			
Jail Services	20,454		20,454			
PACT Services	38,776		38,776			
MHBG Expenditures ***	61,778			61,778		
HARPS & DOC Housing	48,720		48,720	,		
DMA County Contracts	20,732		20,732			
SABG Expenditures ****	294,200				294,200	
Withdrawal Management	108,148				108,148	
HRSA	44,802					44,802
Juvenile Drug Court	6,600		6,600			
Other MH Services *****	118,250		118,250			
Other SUD Services	0		0			
Ombuds	13,446	10,622	2,824			
Advisory Board	0		0			
Subtotal - Services	2,417,772	569,464	1,056,615	183,663	563,227	44,802
A 1 - 1 - 1 - 1 - 1 - 1	220.051	5 0 6 2 1	252 152			
Administration	338,061	79,624	252,172	h 102 :::	Φ 562.22=	6,264
TOTAL EXPENDITURES	\$ 2,755,833	\$ 649,088	\$ 1,308,787	\$ 183,663	\$ 563,227	\$ 51,066
Net Income	\$ 4,293,890	\$ (301,293)	\$ 4,455,806	\$ (101,387)	\$ 291,830	\$ (51,066)
Beginning Fund Balance 12/31/21	5,704,731	531,177	6,219,280	(96,902)		
Ending Fund Balance Note: State Fund Balance also includes	9,998,621	229,884	10,675,086	(198,289)		(57,453)

Note: State Fund Balance also includes Proviso Fund Balances which are designated for specific expenditures

^{*} THIS IS AN UNAUDITED STATEMENT

^{*} Medicaid and State revenue are paid in advance. MHBG, SABG and SAMHSA revenue are paid on an expense reimbusement method. Expenses are recognized when the bill is received.

NORTH SOUND BEHAVIORAL HEALTH ADMINISTRATIVE SERVICE ORGANIZA PROJECTED REVENUE and EXPENSE STATEMENT for JANUARY TO JUNE 20 BUDGET TO ACTUALS

		YTD	YTD	,	Variance
<u>REVENUES</u>	2022	2022	2022	F	avorable
Intergovernmental Revenues	Budget	Budget	Actual	(Uı	nfavorable)
HRSA	\$ 333,333	166,667	166,667		1
MHBG	3,088,440	1,544,220	1,366,878		(177,342)
SABG	5,339,865	2,669,933	2,354,560		(315,373)
State Funds	25,083,404	12,541,702	15,730,305		3,188,603
Medicaid (MCO)	 5,102,632	2,551,316	2,642,807		91,491
Total Intergovernmental Revenues	38,947,674	19,473,837	22,261,217		2,787,380
Misc. Revenue **	0	0	0		-
Interest Revenue	3,500	1,750	1,500		(250)
TOTAL REVENUES	\$ 38,951,174	\$19,475,587	\$ 22,262,717	\$	2,787,130
EXPENDITURES					
Inpatient Treatment	\$ 1,150,000	575,000	\$ 466,000		109,000
ITA Judicial	2,300,000	1,150,000	1,250,000		(100,000)
Crisis Services	14,639,597	7,319,799	7,488,598		(168,800)
MH Crisis Stabilization	1,500,000	750,000	678,549		71,451
E&T Services	1,100,000	550,000	260,972		289,028
E&T Discharge Planner	107,294	53,647	53,647		-
Jail Services	367,536	183,768	183,768		-
PACT Services	511,716	255,858	255,858		-
MHBG Expenditures ***	1,371,893	685,947	691,196		(5,250)
HARPS & DOC Housing	1,197,343	889,512	903,415		(13,903)
DMA County Contracts	581,292	290,646	290,646		-
SABG Expenditures ****	3,920,240	1,960,120	1,819,294		140,826
Withdrawal Management	900,000	450,000	659,611		(209,611)
HRSA	304,921	152,461	152,461		(1)
Juvenile Drug Court	139,800	69,900	69,900		-
Other MH Services ****	1,244,501	622,251	782,173		(159,923)
Other SUD Services	3,046,419	1,523,210	1,559,688		(36,479)
Ombuds	216,000	108,000	82,900		25,100
Advisory Board	19,998	9,999	9,999		-
Subtotal - Services	34,618,550	17,600,116	17,658,675		(58,560)
Administration	4,332,624	2,166,312	1,985,332		180,980
TOTAL EXPENDITURES	\$ 38,951,174	\$19,766,428	\$ 19,644,007	\$	122,421

Excess of Revenues Over (Under) Expenditure.

\$ 2,618,710

- * Medicaid and State revenue are paid in advance. MHBG, SABG and SAMHSA revenue are paid reimbusement method. Expenses are recognized when the bill is received.
- ** Room Rental Fees, Tribal Conference, Salish Contract
- *** Includes Peer Bridger, PATH and COVID. Does not include Crisis or E&T
- **** Includes Opiate Outreach, PPW Housing Supports and Per Pathfinder. Does not include Cri
- ***** Includes CORS, AOT, Trueblood, FYSPRT, Outpatient Services

ATION)22*

Some programs aren't running yet
Slight difference between projected and budget
Received November amendment dollars in January

Does appear expenses will exceed budget

BHEF got shifted to MH services instead of crisis

NORTH SOUND BH-ASO Warrants Paid January 2022

Туре	Date	Num	Name	Amount
Bill Pmt -Check	01/10/2022	540335	AT&T	-81.48
Bill Pmt -Check	01/10/2022	540339	Barron Heating	-500.02
Bill Pmt -Check	01/10/2022	540345	Bridgeways	-20,509.23
Bill Pmt -Check	01/10/2022	540346	Brigid Collins	-8,839.87
Bill Pmt -Check	01/10/2022	540355	CDW-G	-413.74
Bill Pmt -Check	01/10/2022	540365	City Cab	-588.50
Bill Pmt -Check	01/10/2022	540371	Community Action of Skagit Co	-22,663.37
Bill Pmt -Check	01/10/2022	540372	Compass Health	-10,917.70
Bill Pmt -Check	01/10/2022	540376	Davenport Group Inc	-5,052.38
Bill Pmt -Check	01/10/2022	540429	Foster, Katherine	-675.00
Bill Pmt -Check	01/10/2022	540402	Greater Columbia BH-ASO	-1,875.18
Bill Pmt -Check	01/10/2022	540416	Island County Human Services	-30,137.68
Bill Pmt -Check	01/10/2022	540442	Lifeline Connections	-46,803.48
Bill Pmt -Check	01/10/2022	540316	NSBH-ASO Petty Cash	-75.00
Bill Pmt -Check	01/10/2022	540315	NSBHO-FSA	-27,000.00
Bill Pmt -Check	01/10/2022	540472	NW ESD 189	-1,612.98
Bill Pmt -Check	01/10/2022	540476	Office Depot	-73.97
Bill Pmt -Check	01/10/2022	540462	Osborne, Michelle, JD Associates LL	-9,400.00
Bill Pmt -Check	01/10/2022	540489	Pioneer Center	-319,482.08
Bill Pmt -Check	01/10/2022	540490	Pitney Bowes Leasing	-209.54
Bill Pmt -Check	01/10/2022	540512	San Juan County Health & Comm. Se	-25,717.05
Bill Pmt -Check	01/10/2022	540515	Save on Storage	-450.00
Bill Pmt -Check	01/10/2022	540522	SHI	-5,653.73
Bill Pmt -Check	01/10/2022	540529	Skagit County Public Health	-6,288.06
Bill Pmt -Check	01/10/2022	540536	Snohomish Co Human Services	-273,155.96
Bill Pmt -Check	01/10/2022	540552	Telecare Corporation	-18,252.41
Bill Pmt -Check	01/10/2022	540570	US Bank	-3,798.49
Bill Pmt -Check	01/10/2022	540573	Verizon	-1,379.81
Bill Pmt -Check	01/10/2022	540575	Volunteers of America	-161,070.67
Bill Pmt -Check	01/10/2022	540543	WA State Auditors Office	-848.25
Bill Pmt -Check	01/10/2022	540592	Whatcom County Health Department	-48,022.05
Bill Pmt -Check	01/14/2022	540726	Lifeline Connections	-51,105.88
Bill Pmt -Check	01/14/2022	540690	Lippman, Glenn	-3,237.50
Bill Pmt -Check	01/14/2022	540751	Office Depot	-714.35
Bill Pmt -Check	01/14/2022	540783	Sign Mart	-1,646.81
Bill Pmt -Check	01/14/2022	540799	Snohomish Co Human Services	-332,295.39
Bill Pmt -Check	01/14/2022	540802	SRS Property Management	-10,952.00
Bill Pmt -Check	01/14/2022	540842	Wave Business	-601.20
Bill Pmt -Check	01/14/2022	540845	Whatcom County Health Department	-2,044.53
Bill Pmt -Check	01/21/2022	540858	Access	-1,184.54
Bill Pmt -Check	01/21/2022	540898	Catholic Community Services	-186,590.29

NORTH SOUND BH-ASO Warrants Paid January 2022

Bill Pmt -Check	01/21/2022	540900	CDW-G	-11,504.21
Bill Pmt -Check	01/21/2022	540910	Comcast	-363.06
Bill Pmt -Check	01/21/2022	540913	Compass Health	-827,954.67
Bill Pmt -Check	01/21/2022	541019	Crothers, Linda-Reim	-226.00
Bill Pmt -Check	01/21/2022	540925	Davenport Group Inc	-54,583.71
Bill Pmt -Check	01/21/2022	540953	Evergreen Recovery	-6,588.40
Bill Pmt -Check	01/21/2022	540957	Firstline Communications (All Phase)	-1,071.95
Bill Pmt -Check	01/21/2022	540962	Frontline Cleaning Services LLC	-650.00
Bill Pmt -Check	01/21/2022	541132	Hand up Project, The	-53,867.00
Bill Pmt -Check	01/21/2022	541008	Lake Whatcom Center	-5,266.73
Bill Pmt -Check	01/21/2022	541134	Language Exchange, The	-100.00
Bill Pmt -Check	01/21/2022	541018	Lifeline Connections	-510.05
Bill Pmt -Check	01/21/2022	541035	Mount Baker Presbyterian Church	-1,765.16
Bill Pmt -Check	01/21/2022	541037	Mulitcare Health System	-15,616.03
Bill Pmt -Check	01/21/2022	540891	Robinson, Caileigh	-495.00
Bill Pmt -Check	01/21/2022	541121	SRS Property Management	-10,952.00
Bill Pmt -Check	01/28/2022	541240	AT&T	-81.48
Bill Pmt -Check	01/28/2022	541249	Bridgeways	-42,715.95
Bill Pmt -Check	01/28/2022	541255	Cascade Behavioral Hospital LLC	-69,818.76
Bill Pmt -Check	01/28/2022	541279	Compass Health	-70,248.75
Bill Pmt -Check	01/28/2022	541306	Evergreen Recovery	-3,764.80
Bill Pmt -Check	01/28/2022	541477	Jones, Val-Reimb	-1,292.73
Bill Pmt -Check	01/28/2022	541354	Lifeline Connections	-1,224.03
Bill Pmt -Check	01/28/2022	541380	NW ESD 189	-4,159.88
Bill Pmt -Check	01/28/2022	541396	Pioneer Center	-97,794.74
Bill Pmt -Check	01/28/2022	541398	Pitney Bowes Leasing	-1,939.97
Bill Pmt -Check	01/28/2022	541399	Pitney Bowes Pur Power	-35.57
Bill Pmt -Check	01/28/2022	541400	Providence-Everett	-12,212.82
Bill Pmt -Check	01/28/2022	541360	Rojas, Margaret-Reim	-595.00
Bill Pmt -Check	01/28/2022	541420	Save on Storage	-480.00
Bill Pmt -Check	01/28/2022	541447	Snohomish Co Juvenile	-6,600.10
Bill Pmt -Check	01/28/2022	541456	Telecare Corporation	-4,681.26
Bill Pmt -Check	01/28/2022	541480	Volunteers of America	-179,724.28
Bill Pmt -Check	01/31/2022	EFT	Skagit County Auditor	-3,500.00
				-3,134,304.26
				-3,134,304.26
				-3,134,304.26