



A Community Mental Health / Developmental Disabilities / Addictive Diseases Program

*Administration
P.O. Box 5328
2100 Comer Avenue
Columbus, GA 31906*

*(706) 596-5588
FAX (706) 596-5589*

**NEW HORIZONS BEHAVIORAL HEALTH
BOARD OF DIRECTORS
2100 Comer Avenue – New Horizons Training Room
Columbus, GA 31906**

Date of Meeting: March 11, 2024

Members Present: Damon Hoyte, Nancy Schroeder, April Hughes,
Terry Edwards, LaVerne Chaffin, and Karen Johnson

Members Excused: Ed Harbison, Joseph Williams, Linda McElroy,
David Ranieri, Sandra Gill, and Edwina Turner

Staff Present: Andrea Winston, Susan Gallagher, Randall Newberry,
LaKaren Rickman, Cyndy Pattillo, Karen Cotton-Everett,
Chloe Landreth, and Molly Jones

CALL TO ORDER: The meeting was called to order by Board Chair Damon Hoyte at 3:36 p.m.
A quorum was established at that time.

RECOGNITION OF GUEST(S) ATTENDING TODAY'S MEETING: No guests were in
attendance.

*** SECRETARY'S MINUTES (Approval of February 12, 2024 minutes):** M/S/P Laverne
Chaffin/Karen Johnson to approve the February 12, 2024 minutes, Board approved.

FINANCIAL REVIEW: Susan reported that Medicaid Waiver, Medicaid Fees, and GIA-FFS
were significantly below budget in January. This was expected as we transitioned to CareLogic.
The Revenue Acquisition Department (RAD) team is working to ensure staff understand
CareLogic processes, reports, and how to move claims through the billing system. January
expenses were \$142,939 over budget with salaries and benefits being the largest contributors to the
budget variance. The Year to Date deficit is \$625,861 and for the month ending January 31st, a
monthly deficit of \$349,148. We continue to operate under the CCBHC model with no CCBHC
payment rate from DBHDD. We have been working with DBHDD for funding to support our
CCBHC activities and anticipate a contract amendment providing an additional \$625,000 through
June 30. This amendment supports personnel costs and is in addition to the \$505,000 contract
amendment awarded in December. January 2024 Financial KPI scores indicated Days Cash on
Hand is 154.58 days with total daily expenditures of \$59,185.

An initial FY25 budget meeting was held in February with members of the finance team. They will meet in March to finalize the FY25 budget that will be presented to the Board in June. Efforts to automate purchasing and check requests processes continue and a list of agency-approved supplies is being created to streamline purchasing. We are looking at lease/purchase building opportunities, especially for Midtown Recovery, Integrated Health, and Youth Serving programs. An ERC tax credit of approximately \$625,000 is expected that will improve our cash position on the Balance Sheet.

CERTIFIED COMMUNITY MENTAL HEALTH CENTER UPDATE: Andrea reminded Board Members that the CCBHC initiative focuses on improved access to services for all individuals with a new payor type billed under Medicaid. With many layers of certification and requirements, this initiative has been the biggest project we have undertaken.

- a. **MTM/DBHDD MEETINGS:** There have been countless meetings with MTM and DBHDD throughout the CCBHC process, often as many as 10 hours of meetings per week. From the early stages of the steering committee, to attestation, and certification, the process has been a long, stressful, and challenging one.
- b. **COST REPORT:** New Horizons was selected as a CCBHC candidate with an initial \$4 million dollar DBHDD contract from November 1, 2021 through October 30, 2023. Other members of our CCBHC Cohort include: Advantage Behavioral Health, Pineland Behavioral Health, and River Edge Behavioral Health. New Horizons Steering Committee participated in several MTM Cost studies prior to the contract that gave us a global look at cost of services by providers, service codes, programs, and disabilities. In addition to our financial reporting system and the proposed new Electronic Health Record, a Cost Accountant position was included in the CCBHC budget with C. Reid Denson hired to fill that position. Reid initially worked with Sherry Smith and Tara Malone to complete the MTM SPQM Costing report using FY20 data. The decision was made to move from SPQM Costing process to the CMS (Medicaid) Cost Report. Upon the loss of our CFO, Susan was identified to work with Tom Hoover, Advantage CFO, on the Cost Study, CCBHC Readiness, Budgets, Audits, DBHDD reporting, and the CareLogic transition. FY22 information was later added to the Cost Report calculations and Reid quickly became known as the go-to person among the CSBs regarding the Cost Report process and provided group and staff trainings. Our CMS Cost Report is an Excel Workbook with over 74 tabs and pivot tables, supported by 19 separate schedules and the audited financial statements.
- c. **SUBMITTED PPS RATE:** In January of 2024, we began the final push to establishing a PPS rate. Working closely with the DBHDD CCBHC Team and their MTM consultants, we began developing anticipated costs and the Community Mental Health Needs Assessment. We had numerous meetings and over 18 hours of technical assistance with MTM during February in order to meet the February 29th PPS deadline. There were many sessions with DBHDD reviewing staff productivity, defending projected Unique Daily Visits, and adjustments to the PPS rate. A tentative rate has been submitted and we are waiting for approval.

- d. **COMMUNITY NEEDS ASSESSMENT:** LaKaren reviewed the Needs Assessment that was conducted to assess barriers that exist in our service area that limit access to behavioral health services and to investigate crucial limited or nonexistent services across the service area. The report assesses the needs and service gaps across the eight-county region that New Horizons serves. Data was collected from community surveys, a focus group, and from interviews with key informants. Secondary data was analyzed to estimate the prevalence of mental health disorders and provide a socioeconomic context of the residents in the NHBH service area. Behavioral Health needs for our service area were identified and prioritized based on data collected. These priorities were measured within the context of NHBH's existing programs, resources, strategic goals, and partnerships with the following criteria considered: Barriers to accessing services, specific community and individual needs in the service area, and alignment of needs with NHBH strategic plan and core capabilities. As a result, the assessment addressed these key priorities for FY24 to FY27: Advance workforce development initiatives that support our community's needs, enhance and expand NHBH levels of care, access, services, and scope of services in the communities, and empower NHBH service area, families, and individuals through mental health education, access, and stigma reduction.
- e. **NEXT STEPS:** Currently, we are awaiting results from our DBHDD site visit for CCBHC Certification, have made "substantial progress" per DBHDD on the PPS rate (which they state will be in place by July 1, 2024), our site visit for NADD Accreditation is nearly complete, the new Electronic Health Record, CareLogic, has been implemented and will be configured and mapped for CCBHC billing, required reporting/data collection/KPIs for CCBHC are being reviewed, and the DBHDD Provider Manual updates are needed and expected soon. Andrea gave a shout out to all the staff who have worked diligently in this process to help us reach these goals.

ORGANIZATIONAL CLIMATE SURVEY RESULTS: The survey is conducted annually in December through the GACSB Association. 141 employees participated in the FY24 survey, an increase over previous years. Employees were surveyed about the mission and purpose of the organization, provision of feedback, coworkers, and teamwork, communication, resources and procedures, opportunities for growth, compensation, work-life balance, fairness, diversity and security, and meaningfulness of the work. Overall, more than 70% of employee responses were positive responses. Of those surveyed, 90% or more were familiar with the mission, vision, and values of NHBH and could see the link between their work and the organization. Additionally, over 90% of employees felt supported by their coworkers and experienced a sense of teamwork. The lowest ranked responses were regarding compensation with only 47% agreeing that they are paid fairly for the work they do. Comparisons to NHBH and other CSBs in Georgia (New Horizons scored higher in every domain) who participated in the survey and a five-year comparison (consistent overall) of NHBH domain scores were also reviewed. Results of the survey were reviewed in SEC and PI meetings and an action plan will be developed to address concerns.

NADD CERTIFICATION SITE VISIT: Karen reported that the mission of the National Association for the Dually Diagnosed (NADD) is to promote leadership in the expansion of knowledge, training, policy, and advocacy for mental health practices that promote a quality life for individual with dual diagnosis (Intellectual Developmental Disabilities/Mental Illness) in their communities. NADD is committed to supporting organizations in improving services for the dually diagnosed individuals and offers trainings in treating clients who are dually diagnosed and certification programs for direct support and clinical staff. The accreditation is a requirement for CCBHC certification through DBHDD. The survey took place February 28th – March 1st with two surveyors on-site, one focused on our I/DD Residential Program and one on Outpatient Services. The visit included chart reviews and tours of programs. An additional surveyor is scheduled to visit on March 14th to more closely review the Outpatient Services standards/policies prior to our final report being sent.

DEVELOPMENT, MARKETING, AND PUBLIC RELATIONS: Chloe reported on a number of outreach events that she and other New Horizons staff attended recently including the Men’s Resource Fair, Maintaining the Total Man, and the Goodwill Hiring Event in LaGrange. Upcoming events on her schedule are: Lonnie Jackson Elementary School Resource Fair, NHBH I/DD Talent Show, Harris County Health Fair, Clay County Women’s Health Fair, DRC Resource Fair, and the Stewart County First Saturday event. I/DD individuals and several staff had a great time at the Night to Shine, sponsored by the Tim Tebow Foundation and Cascade Hills church. Social Media contacts dipped slightly over the last month, but are expected to increase. Our new Mobile Unit should be ready to roll in April and Chloe is preparing a schedule for the outreach program to reach as many locations as possible. Mental Health First Aid class, made possible in partnership with Columbus Family Connections, is offered May 30th from 8:30 am to 5:00 pm for faith leaders and other community advocates. Chloe regularly attends many community meetings to further enhance our agency partnerships. Other upcoming projects include: I/DD Awareness Month proclamation to be presented at City Council this week, Columbus CEO video distributed this month, suicide prevention public service announcement to begin filming this week, a 30-minute special with Marquis Hill to air on WRBL March 30th, and the Recovery on the River date is set for September 20th.

ANNOUNCEMENTS:

Board Members were encouraged to reach out to their local county commissioners to discuss the Opioid Settlement meetings for their counties that will determine how the settlement funds will be distributed.

PUBLIC COMMENT:

Board Members were appreciative of information/data contained in the Needs Assessment related to demographics, prevalence of mental illness/substance abuse, and diversity in their communities and of how these needs will be addressed, and the role Board Members can play in bridging the gap.

Karen Johnson asked for clarification of some of the acronyms used in the meeting, DBHDD, CCBHC, MTM, SPQM, KPI. In the past, a list was created to aid in understanding these terms. A new list will be compiled as there are many new additions.

ADJOURNMENT: At 5:10 p.m. M/S/P April Hughes/Terry Edwards to adjourn the meeting, Board approved.

Damon Hoyte
Chairperson