

Oklahoma Department of Mental Health and Substances Abuse Services

Terri White, Commissioner

Juarez McCann, Lead Financial Officer

FY'14 Budgeted FTE						
	Supervisors	Classified	Unclassified	\$0 - \$35 K	\$35 K - \$70 K	\$70 K - \$\$\$
10 - Central Administration	31	1	103.75	38	56.75	10
20 - Inpatient Hospitals	51	417.25	253.75	499.5	148.25	23.25
30 - Community Based Programs	108.75	246.75	539.75	511	232.25	43.25
40 - Substance Abuse Programs	10	20	64.25	43.5	40.75	0
50 - Prevention	6.75	1	20.75	6.25	14.5	1
63 - Residential Care Programs	0	0	0	0	0	0
70 - Medicaid Match - Behavioral Health	0	0	0	0	0	0
88 - Information Services Division	1	0	8	2	5	1
Total	208.5	686	990.25	1100.25	497.5	78.5

FTE History					
	2014 Budgeted	2013	2010	2009	2004
10 - Central Administration	105	118	137	163	148
20 - Inpatient Hospitals	671	709	754	810	810
30 - Community Based Programs	787	870	888	915	796
40 - Substance Abuse Programs	84	176	197	224	134
50 - Prevention*	22	0	0	0	0
63 - Residential Care Programs	0	0	0	0	0
70 - Medicaid Match - Behavioral Health	0	0	0	0	0
88 - Information Services Division**	8	9	0	0	0
Total	1676	1882	1976	2112	1888

*21 FTE were moved from the Substance Abuse Programs Division to the newly created Prevention Division in FY-14

**The Information Services Division was created in FY-13

FY'14 Projected Division/Program Funding By Source						
	Appropriations	Federal	Revolving**	Local	Other*	Total
10 - Central Administration	\$7,319,159	\$604,904	\$3,208,941	\$0	\$70,000	\$11,203,004
20 - Inpatient Hospitals	\$37,489,932	\$810,344	\$10,505,466	\$0	\$1,753,946	\$50,559,688
30 - Community Based Programs	\$118,023,074	\$14,086,200	\$44,266,782	\$0	\$974,230	\$177,350,286
40 - Substance Abuse Programs	\$30,832,757	\$17,565,539	\$8,390,507	\$0	\$115,095	\$56,903,898
50 - Prevention	\$2,385,178	\$12,979,662	\$39,275	\$0	\$0	\$15,404,115
63 - Residential Care Programs	\$3,883,420	\$0	\$0	\$0	\$0	\$3,883,420
70 - Medicaid Match - Behavioral Health	\$133,502,556	\$0	\$0	\$0	\$0	\$133,502,556
88 - Information Services Division	\$3,385,382	\$83,147	\$857,790	\$0	\$413,807	\$4,740,126
Total	\$336,821,458	\$46,129,796	\$67,268,761	\$0	\$3,327,078	\$453,547,093

*Inter-agency Funds

**Current FY-14 BWP including revisions #1-4

FY'13 Carryover by Funding Source						
	Appropriations	Federal	Revolving	Local	Other*	Total
FY'13 Carryover	\$0	\$0	\$0	\$0	\$0	\$0

*Inter-agency Funds

No Funds were carried over from FY-13 to FY-14

What Changes did the Agency make between FY'13 and FY'14	
1.) Are there any services no longer provided because of budget cuts?	N/A
2.) What services are provided at a higher cost to the user?	N/A
3.) What services are still provided but with a slower response rate?	N/A

FY'15 Requested Division/Program Funding By Source						
	Appropriations	Federal	Revolving	Other*	Total	% Change
10 - Central Administration	\$7,319,159	\$604,904	\$3,208,941	\$70,000	\$11,203,004	0%
20 - Inpatient Hospitals	\$37,489,932	\$810,344	\$10,505,466	\$1,753,946	\$50,559,688	0%
30 - Community Based Programs	\$148,764,349	\$14,086,200	\$44,266,782	\$974,230	\$208,091,561	17%
40 - Substance Abuse Programs	\$134,792,648	\$17,565,539	\$8,390,507	\$115,095	\$160,863,789	183%
50 - Prevention	\$4,335,178	\$12,979,662	\$39,275	\$0	\$17,354,115	13%
63 - Residential Care Programs	\$3,883,420	\$0	\$0	\$0	\$3,883,420	0%
70 - Medicaid Match - Behavioral Health	\$151,983,573	\$0	\$0	\$0	\$151,983,573	14%
88 - Information Services Division	\$3,385,382	\$83,147	\$857,790	\$413,807	\$4,740,126	0%
Total	\$491,953,641	\$46,129,796	\$67,268,761	\$3,327,078	\$608,679,276	34%

*Inter-agency Funds

FY'15 Top Five Appropriation Funding Requests	
	\$ Amount
1. Maintain existing programs (see detail below)	\$26,520,788
2. Smart on Crime Initiative	\$96,610,000
3. Improving Behavioral Health Access for Oklahoma's Health and Safety	\$12,600,179
4. Health Homes	\$3,000,000
5. Provider sustainability rate increase (3.25%)	\$5,975,300

How would the agency handle a 3% appropriation reduction in FY'15?

ODMHSAS' \$336.8M in State appropriations includes \$186.8M to fund core services and \$150M for Oklahoma's Behavioral Health Medicaid matching funds. Because ODMHSAS is required to keep cuts from impacting entitlement funding, loss of appropriated funds will result in a direct reduction of core services. A flat budget, assuming that the department's maintenance request is not funded, is an actual reduction of \$21M needed to maintain core services at the current level. This alone is a 6.2% cut to the agency's total appropriations and will eliminate services to over 7,000 Oklahomans. Therefore, an additional 3% cut to appropriations would result in an actual loss of \$31.1M in core services funding and the elimination of services to approximately 10,912 Oklahomans (a 14% reduction in people served). Cuts would be experienced by both public and private providers, and would negatively impact State and local resources such as increased costs for incarceration, local law enforcement and hospital emergency services. The impact on Oklahoma families will be devastating. And, public safety will be compromised.

How would the agency handle a 5% appropriation reduction in FY'15?

An additional 5% cut to appropriations, assuming the department's maintenance request is not funded, would result in an actual loss of \$37.8M in core services funding and the elimination of services to approximately 13,263 Oklahomans (a 17% reduction in people served). Cuts would be experienced by both public and private providers, and would negatively impact State and local resources such as increased costs for incarceration, local law enforcement and hospital emergency services. The impact on Oklahoma families will be devastating. And, public safety will be compromised.

Federal Government Impact

1.) How much federal money received by the agency is tied to a mandate by the Federal Government?
None - The agency provides state match for the Medicaid program but do not receive the corresponding federal dollar

2.) Are any of those funds inadequate to pay for the federal mandate?
No

3.) What would the consequences be of ending all of the federal funded programs for your agency?
Ending block and categorical grants will result in a 9% reduction of Mental Health and Substance Abuse Treatment and Prevention services. Also ending Federal Medical Participation will cost the State over \$300M in behavioral health services.

4.) How will your agency be affected by federal budget cuts in the coming fiscal year?
Any budget cut to the \$38M in federal funds received by the agency will result in the reduction and/or elimination of the respective programs. Homeless grant, Shelter grant, SPF SIF grant, Drug Court Expansion grant, OK Adult State Wide Category grant, and Youth Suicide Prevention grant etc. will be reduced and/or eliminated to absorb reduced funding.

5.) Has the agency requested any additional federal earmarks or increases?
ODMHSAS applies for new categorical grants each year.

Division and Program Descriptions

Divis: Central Administration

The Central Administration program provides administration, direction, planning and technical assistance to facilities operated by the Department as well as to contract providers. It sets standards, policies and goals for programs and monitors programs to ensure required criteria are met. Additionally, Central Administration performs evaluations and data analysis and maintains an automated information system of clients receiving services.

Divis: Community Based Mental Health Programs

Community Mental Health Programs - This program consists primarily of community mental health centers which provide a wide variety of services including case management for adults and children, crisis intervention, psychiatric rehabilitation, medication services, and other outpatient mental health services. Additionally, community based programs include non-traditional services such as housing, employment services, peer advocacy, drop in centers, and consumer run services.

Divis: Inpatient Hospitals

Inpatient Hospitals - Publicly funded hospitals provide acute inpatient psychiatric care for individuals residing in community mental health center service areas who do not have psychiatric inpatient care available or longer term care for individuals who are a danger to themselves or others and are unable to temporarily function in a community setting. The Oklahoma Forensic Center conducts forensic evaluations for the judicial system and provides inpatient care for persons found not guilty by reason of insanity. Additionally, the facility provides services for competency restoration.

Divis: Residential Care Programs

Residential Care Programs- Programs provide supportive assistance with daily living activities, socialization and recreational activities to adults with serious mental illness who reside in the homes. The purpose of these activities is to improve the residents' ability to care for themselves and to interact with others.

Divis: Substance Abuse Programs

Substance Abuse Programs- Programs are responsible for providing substance abuse services. Treatment services include medically supervised detoxification, non-medical detoxification, residential treatment, day treatment, sober living, DUI school, Drug Court and other outpatient services. More than one hundred private non-profit contractors provide substance abuse programs. Prevention services include awareness activities, training, public education, technical assistance to communities and materials to inform the public on the dangers and consequences of substance abuse. The purpose of program is to provide a continuum of services to individuals with substance abuse disorders so they may return as sober and productive members of society. Another purpose is to educate the public on the dangers and consequences of substance abuse.

Divis: Prevention Programs

Prevention Programs- ODMHSAS uses a strategic prevention framework to plan and implement effective prevention services. The role of these prevention efforts is to create healthy communities in which people have a high quality of life, including: healthy environments at work and in school; supportive communities and neighborhoods; connections with families and friends; and, communities free of substance abuse and mental health problems. The department maintains a statewide network of regional prevention coordinators to support local prevention initiatives along with a statewide Prevention Resource Center to assist with public outreach and information. Priority initiatives include the statewide prescription drug and Naloxone programs, Synar Compliance and underage drinking enforcement efforts, suicide prevention, mental health first aid training, conducting the statewide Oklahoma Prevention Needs Assessment, the Oklahoma State Epidemiology Outcomes Workgroup, and SBIRT (screening, intervention and referral program) for primary care providers.

Performance Measure Review					
	FY13	FY12	FY11	FY10	FY09
Central Administration					
1. Percent of Total Budget	2.80%	4%	4%	4%	4%
2. Consumer Satisfaction Survey (# of providers responding)	81	81	82	95	85
3. % of MH consumers rating quality positively	84%	88%	92%	95%	93%
4. % of SA consumers rating quality positively	95%	94%	94%	95%	90%
Community Based Programs					
1. % of adult Oklahomans w/serious psychological distress served (Indigent)	34%	34.1%	30.8%	28.8%	26.7%
1a. % of Oklahoman children (9-17) w/serious emotional disturbance served	9.60%	11.1%	9.1%	6.8%	7.1%
2. % of clients readmit. To inpatient < 30 days after discharge	6.20%	6.6%	5.5%	6.2%	7.1%
3. PACT - % decrease in jail days	70%	70%	49%	94%	65%
4. PACT - % decrease in hospital usage (blended years)	75%	75%	80%	79%	71%
5. System of Care - % law enforcement contacts	51%	65%	47%	42%	60%
6. System of Care - % decrease days in restrictive placement	49%	35%	30%	36%	30%
7. System of Care - % decrease in self harm attempts	42%	38%	39%	21%	40%
8. Decrease in arrests of mental health court participants	92%	90%	88%	88%	91%
9. Decrease in unemployment rate of mental health court participants	81%	84%	86%	86%	94%
Inpatient Hospitals					
1. Number of hospital inpatient days	44,500	43,745	48,800	48,261	57,322
2. Median length of stay (days)	7	7	7	7	7
3. % readmission within 30 days of planned discharge	7.50%	6.6%	5.5%	6.2%	7.1%
Residential Care Programs					
1. Admissions/readmissions to state hospitals	4	8	11	17	19
Substance Abuse Programs					
1. % of clients who become employed	34.70%	32.2%	27.0%	25.0%	27.0%
2. % of adult Oklahomans w/dependence or abuse of illicit drug or alcohol (indigent) served	21%	22.0%	21.1%	22.1%	22.9%
2a. % of Oklahomans children (12-17) w/dependence of abuse of illicit drug or alcohol	7.38%	6.0%	5.7%	4.6%	6.3%
3. % readmit to resident treatment within 30 days of discharge from resident treatment	3.30%	3.0%	5.0%	3.4%	2.9%
4. % decrease in unemployment of drug court graduates	92%	88%	86%	83%	87%
5. % increase in income of drug court graduates	100%	96%	87%	85%	81%