

Rolling Hills

*Regional Mental Health &
Disabilities Services*



Geographic Area: Serving the Counties of Buena Vista, Calhoun, Carroll, Cherokee, Crawford, Ida and Sac counties.

Annual Service and Budget Plan

FY 2016

Regional Access Points

An access point is an entity within the Rolling Hills Community Services Region that shall complete the MH/DS funding applications for an individual with a disability and forward them to the local Community Services Office.

Access Point	Address	Phone Number
RHCS Office - Buena Vista County	605 Cayuga St. PO Box 253, Storm Lake, IA 50588	(712) 749-2556
Plains Area Mental Health Center	728 Erie St., Storm Lake, IA 50588	(712) 213-8402
Genesis Development	1607 North Lake Ave., Storm Lake, IA 50588	(712) 732-5038
New Directions	808 Michigan St., Storm Lake, IA 50588	(712) 213-7814
Catholic Charities (Satellite Office)	1709 E. Richland St., Storm Lake, IA 50588	(712) 792-9597
Buena Vista Co. Case Management	605 Cayuga St. PO Box 253, Storm Lake, IA 50588	(712) 749-2556
Compass Pointe	824 Flindt Drive Ste. 104, Storm Lake, IA 50588	(712) 732-5136
Buena Vista Regional Med. Center	1525 West Milwaukee, Storm Lake, IA 50588	(712) 732-4030
Faith Hope and Charity	1815 West Milwaukee, Storm Lake, IA 50588	(712) 732-5127
RHCS Office – Calhoun County	515 Court St., Rockwell City, IA 50579	(712) 297-5292
Community & Family Resources	515 Court St., Rockwell City, IA 50579	(515) 297-5292
Unity-Point Health Berryhill Center	720 Kenyon Road, Fort Dodge, IA 50501	(515) 955-7171
Calhoun County Public Health	501 Court St... Rockwell City, IA 50579	(712) 297-8323
DHS Targeted Case Management	515 Court St., Rockwell City, IA 50579	(712) 297-8524
RHCS Office – Carroll County	608 North Court St., Suite A, Carroll, IA 51401	(712) 792-1234
Home Care Options	626 North Court St., Carroll, IA 51401	(712) 792-0322
Carroll County Case Management	608 North Court Suite A, Carroll, IA 51401	(712) 792-1234

New Hope Village	1211 East 18th St., Carroll, IA 51401	(712) 792-5500
St. Anthony Regional Hospital	311 South Clark, Carroll, IA 51401	(712) 792-8239
Catholic Charities	409 West 7th St., Carroll, IA 51401	(712) 792-9597
New Opportunities	23751 Hwy 30 East, Carroll, IA 51401	(712) 792-1344
Mallard View	7504 Mahogany Ave., Carroll, IA 51401	(712) 792-3785
Counseling Services	322 South 12th St., Sac City, IA 50583	(712) 662-3222
Plains Area Mental Health Center	318 South Maple St. Carroll, IA 51401	(712) 792-2991
Family Resource Center	502 West 7th St., Carroll, IA 51401	(712) 792-6440
RHCS Office – Crawford County	1202 Broadway, Suite 9, Denison, IA 51442	(712) 263-2720
Plains Area Mental Health Center	27 South Main St., Denison, IA 51442	(712) 263-3172
WESCO Industries	415 South 11 th St., Denison, IA 51442	(712) 263-6141
DHS Targeted Case Management	1527 Fourth Ave South, Denison, IA 51442	(712) 263-6760
Jackson Recovery Center	1233 Broadway, Denison, IA 51442	(712) 263-5065
Crawford County Memorial Hosp.	100 Medical Parkway, Denison, IA 51442	(712) 265-2500
RHCS Office – Ida County	401 Moorehead St., Ida Grove, IA 51445	(712) 364-2385
Ida Services Inc. (Main Campus)	651 1 st St., Battle Creek, IA 51006	(712) 365-4339
Ida Services Inc. Somerset Apts.	400 Minnesota St., Holstein, IA 51025	(712) 368-4671
Plains Area Mental Health Center	401 Moorehead St., Ida Grove, IA 51445	(712) 364-3500
Horn Memorial Hospital	701 East 2 nd St., Ida Grove, IA 51445	(712) 364-3311
RHCS Office – Sac County	1710 West Main, Sac City, IA 50583	(712) 662-7998
Sac Co. Targeted Case Management	1710 West Main, Sac City, IA 50583	(712) 662-7998
Counseling Services LLC	322 South 13 th St., Sac City, IA 50583	(712) 662-3222
Loring Hospital	211 Highland Ave, Sac City, IA 50583	(712) 662-7105
Howard Center	1319 Early St., Sac City, IA 50583	(712) 662-7844
New Opportunities	116 South State St., Sac City, IA 50583	(712) 662-7921
RHCS Office – Cherokee County	1231 West Cedar Loop 2 nd floor, Ginzberg bldg. Cherokee, IA 51012	(712) 225-6700
Cherokee County Work Services	322 Lake St. Cherokee, IA 51012	(712)225-4531
Plains Area Mental Health Center	1231 West Cedar Loop 2 nd floor, Ginzberg bldg. Cherokee, IA 51012	(712)225-2575

Targeted Case Management

RHCS offers access to cost effective, evidenced based, conflict free Targeted Case Management as described in IAC 441-25.21(1)g.

Designated Case Management agencies serving the RHCS Region must be accredited according to the rules of the Department of Human Services. Targeted Case Managers must meet the qualifications as defined in IAC 441.

Targeted Case Management and Service Coordination Services shall meet the following expectations:

- Performance and outcome measures relating to the safety, work performance, and community residency of the individuals receiving the service.
- Standards including but not limited to social history, assessment, service planning, incident reporting, crisis planning, coordination, and monitoring for individuals receiving the services.

- Methodologies for complying with the requirements of sub rule 441-25.21 g, which may include the use of electronic recording keeping and remote or internet based training.

RHCS has identified and designated the following providers for case management in the RHCS region:

Buena Vista County Case Management	605 Cayuga St. PO Box 253 Storm Lake, IA 50588	712-749-2556
Carroll County Case Management	608 N. Court St. Suite A, Carroll, IA 51401	712-792-1234
Cherokee County Case Management	1231 West Cedar Loop 2 nd Floor, Ginzberg Bldg Cherokee, IA 51012	712-225-6700
Sac County Case Management	1710 West Main, Sac City, IA 50583	712-662-7998
DHS Case Management – Calhoun	515 Court St. Rockwell City, IA 50579	712-297-8524
DHS Case Management – Crawford	1527 4 th Ave. South Denison, IA 51442	712-263-5065
<ul style="list-style-type: none"> • <i>Any other case management programs developed by a county or group counties in the region as the regional case management provider.</i> 		

The Case Management Providers listed above are the existing programs that were providing services within the Rolling Hills Community Services Region at the advent of this plan. The Governance Board made this designation to allow for choice of provider, conflict-free case management and to allow for a seamless transition for our consumers. The possibility of combining two or more of the county case management agencies into one regional entity was considered during this fiscal year to improve efficiencies, reduce overhead costs and allow for greater flexibility, however with the uncertainty of the future of Targeted Case Management due to the Medicaid Modernization Plan, no action is being taken at this time.

Crisis Planning

Emergency Services

Current basic crisis response provisions including 24 hour access to crisis response and evaluation are provided through the Community Mental Health Center and provider listed below.

Area	Provider	Location	Phone
Buena Vista	Plains Area Mental Health Center	605 Cayuga St.. Storm Lake, IA 50588	712-213-8402
Calhoun	Counseling Services, LLC	322 South 13 th St., Sac City, IA 50583	(712) 662-7998
Carroll	Plains Area Mental Health Center	608 N. Court St. Suite B, Carroll, IA 51401	712-792-2991
Cherokee	Plains Area Mental Health Center	1231 West Cedar Loop 2 nd Floor, Ginzberg Bldg Cherokee, IA 51012	712-225-2575
Crawford	Plains Area Mental Health Center	20 North 14 th St. Denison, IA 51442	712-263-3172
Ida	Plains Area Mental Health Center	401 Moorehead St. Ida Grove, IA 51445	712 364-3500
Sac	Counseling Services, LLC	322 South 13 th St. Sac City, IA 50583	712-662-3222

One of the critical Core Service Domains required of Regional Entities under IAC 441 – 25.2 (1) is that of 24-Hour Access to Crisis Response (441-25.2 (1)). Currently, the Region is providing access to such service by contracting with Plains Area Mental Health Center for a Shared On-Call System with a subcontract to Counseling Services, LLC.

One of the core tenets of mental health redesign was to begin ensuring consistent Core Services across the state. To this end, Plains Area Mental Health Center is offering a consistent Core Service for the region that ensures consistency at a rate per county population. The intent in subsequent years is for the Rolling Hills Region to evolve to include other Enhanced Core Services.

Current Services include:

1. 24 hour Crisis Response

2. Emergency Service Access

- a. Same day walk-in emergency / crisis prevention
- b. Crisis coordination / hospitalization assistance when appropriate
- c. Crisis diversion / management
- d. Crisis Evaluation

3. 24 Hour Crisis Hotline

- a. Daytime, After-hours, Weekends and Holiday Crisis Hotline
- b. 24-hour Mental Health Hotline for non-emergent calls
- c. Backed up by secondary Mental Health professional from contracted agency (Foundation II)
- d. Includes Hotline cost, On-call stipend / incident payment for back-up

4. Crisis Services Coordinator

- a. Responsible for coordinating the services of the above
- b. Development of new crisis response procedures to improve the crisis response system amongst all the players
- c. Development of MOU's amongst stakeholders
- d. Study, develop and assist in the implementation of:
 - i. Annual Crisis Conference
 - ii. Crisis Stabilization Services – Community Based and Residential
 - iii. Mobile Crisis Response Team model
 - iv. Critical Incident Stress Management Team development with the Counties
 - v. Pre-commitment Screening process
 - vi. Jail Diversion Services

A continuum of crisis prevention strategies and services are utilized and will continue to be designed, implemented and enhanced within the region. Crisis prevention, response, and resolution are also embedded in the treatment and support plans that are prepared by Network Providers, Targeted Case Management, and Service Coordination. When these plans are developed, the goal is to determine an environment and support structure that works for a person to mitigate the triggers that lead to crisis.

Scope of Services

The annual budget and planning process is utilized to identify and implement core disability service improvements. The RHCS Region will collaborate with stakeholders to assess need and to advocate for adequate funding for services and supports in the initial core and additional core service domains. RHCS is the funder of last resort. Additional funding sources will be used to empower individuals to reach their fullest potential. The RHCS Region will be responsible for services that are authorized in accordance with the Regional Management Plan and within the constraints of budgeted dollars.

Services funded by RHCS are subject to change or termination with the development of the annual budget each fiscal year. The Regional Management Plan Policy & Procedure Manual addresses mandated service access standards.

Annually, the RHCS Region staff will review actual expenditures and services provided, stakeholder input and participation, quality assurance implementation findings, waitlist information, progress toward goals and objectives, and, if any, appeal type and resolution to determine if gaps in services or barriers to services exist. In December of each year this review is submitted to the Department of Human Services.

The RHCS Chief Executive Officer proposed the following FY'16 budget to the Governing Board who in turn adopted it in March of 2015. The RHCS Chief Executive Officer is responsible for managing and monitoring the adopted budget. The Chief Executive Officer projected the need for the following services based on expenditures to date for the fiscal year and an individual service unit and rate tracking system. Development of Enhanced Core Services for the Rolling Hills Region in Fiscal Year 2016 is based on the efforts of the four task forces that have been meeting regularly since the beginning of this fiscal year: Family/Peer Support, Crisis Stabilization/Pre-screening for Commitments, Jail Diversion and Service needs for Calhoun County. As a result of these meetings, mental health services have expanded into Calhoun County, Family and Peer Support is now available within the Region and Jail Diversion is progressing within Crawford County as a Pilot Project. The Governance Board is currently considering proposals for a Community Based Crisis Stabilization Service with the intent to implement such service during Fiscal Year 2016.

<u>Core Service</u> <u>Domain: Specific</u> <u>Service</u>	<u>Description</u>	<u>MI & ID</u>	<u>DD & BI</u>	<u>FY15 Proposed</u> <u>Budget Priority</u> <u>Population</u>	<u>FY15 Proposed</u> <u>Budget</u> <u>Additional</u> <u>Population</u>	<u>Additional</u> <u>Funding</u> <u>Sources</u>
Initial Core Services						
Treatment: Assessment & Evaluation	The clinical review by a mental health professional of the current functioning of the individual using the service in regard to the individual's situation, needs, strengths, abilities, desires and goals to determine the appropriate level of care.	Yes	No	\$ 30,000	\$ 0	Medicaid, Insurance

<p>Treatment: MH Outpatient Therapy</p>	<p>Services will consist of evaluation and treatment services provided on an ambulatory basis for the target population including psychiatric evaluation, medication management and individual, family, and group therapy.</p>	<p>Yes</p>	<p>No</p>	<p>\$ 25,750</p>	<p>\$ 0</p>	<p>Medicaid, Insurance</p>
<p>Treatment: Medication Prescribing & Management</p>	<p>Services provided directly to or on behalf of the individual by a licensed professional as authorized by Iowa law including, but not limited to, monitoring effectiveness of and compliance with a medication regimen; coordination with care providers; investigating potentially negative or unintended psychopharmacologic or medical interactions; reviewing laboratory reports; and activities pursuant to licensed prescriber orders. Services with the individual present provided by an appropriately licensed professional as authorized by Iowa law including, but not limited to, determining how the medication is affecting the individual; determining any drug interactions or adverse drug effects on the individual; determining the proper dosage level; and prescribing medication for the individual for the period of time before the individual is seen again.</p>	<p>Yes</p>	<p>No</p>	<p>\$ 60,000</p>	<p>\$ 0</p>	<p>Medicaid, Insurance</p>

Treatment: MH Inpatient Treatment	Acute inpatient mental health services are 24-hour settings that provide services to treat acute psychiatric conditions. Primary goal is to provide a comprehensive evaluation, rapidly stabilize symptoms, address health and safety needs and develop a comprehensive and appropriate discharge plan.	Yes	No	\$ 103,000	\$ -	Medicaid, Insurance
<u>Core Service</u> <u>Domain: Specific</u> <u>Service</u>	<u>Description</u>	<u>MI & ID</u>	<u>DD & BI</u>	<u>FY15 Proposed</u> <u>Budget Priority</u> <u>Population</u>	<u>FY15 Proposed</u> <u>Budget</u> <u>Additional</u> <u>Population</u>	<u>Additional</u> <u>Funding</u> <u>Sources</u>
Basic Crisis Response: 24-hour Access to Crisis Response	Program designed to stabilize an acute crisis episode, which is available 24 hours a day, 365 days a year.	Yes	Yes	\$ 300,000	\$ -	
Basic Crisis Response: Evaluation	The process used with an individual to collect information related to the individual's history and needs, strengths, and abilities in order to determine appropriate services or referral during an acute crisis episode.	Yes	Yes	\$ 20,397	\$ -	
Basic Crisis Response: Personal Emergency Response System	An electronic device connected to a 24-hour staffed system which allows the individual to access assistance in the event of an emergency.	Yes	Yes	\$ 17,510	\$ 15,450	Medicaid
<u>Core Service</u> <u>Domain: Specific</u> <u>Service</u>	<u>Description</u>	<u>MI & ID</u>	<u>DD & BI</u>	<u>FY15 Proposed</u> <u>Budget Priority</u> <u>Population</u>	<u>FY15 Proposed</u> <u>Budget</u> <u>Additional</u> <u>Population</u>	<u>Additional</u> <u>Funding</u> <u>Sources</u>

Support for Community Living: Home Health Aide	Unskilled medical services which provide direct personal care. This service may include assistance with activities of daily living, such as helping the recipient to bathe, get in and out of bed, care for hair and teeth, exercise, and take medications specifically ordered by the physician.	Yes	No	\$ 5,150	\$ -	
Support for Community Living: Home & Vehicle Mod	A service that provides physical modifications to the home or vehicle that directly address the medical health or remedial needs of the individual that are necessary to provide for the health, welfare, and safety of the member and to increase or maintain independence.	Yes	No	\$ 5,150	\$ -	Medicaid
Support for Community Living: Respite	A temporary period of relief and support for individuals and their families provided in a variety of settings. The intent is to provide a safe environment with staff assistance for individuals who lack an adequate support system to address current issues related to a disability. Respite may be provided for a defined period of time; respite is either planned or provided in response to a crisis.	Yes	No	\$ 3,605	\$ -	Medicaid

Support for Community Living: Supportive Community Living (Daily)	Services and supports to enhance an individual's ability to regain or attain higher levels of independence or to maximize current levels of functioning.	Yes	No	\$ 100,000	\$ -	Medicaid
Support for Community Living: Supportive Community Living (Hourly)	Services provided in a non-institutional setting to adult persons with mental illness, intellectual, or developmental disabilities to meet the persons' daily living needs.	Yes	Yes	\$ 64,800	\$ 15,450	Medicaid
<u>Core Service</u> <u>Domain: Specific Service</u>	<u>Description</u>	<u>MI & ID</u>	<u>DD & BI</u>	<u>FY15 Proposed Budget Priority Population</u>	<u>FY15 Proposed Budget Additional Population</u>	<u>Additional Funding Sources</u>

<p>Support for Employment: Supported Employment</p>	<p>An approach to helping individuals participate as much as possible in competitive work in integrated work settings that are consistent with the strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice of the individuals. Services are targeted for individuals with significant disabilities for whom competitive employment has not traditionally occurred; or for whom competitive employment has been interrupted or intermittent as a result of a significant disability including either individual or group supported employment, or both, consistent with evidence-based practice standards published by the Substance Abuse and Mental Health Services Administration.</p>	<p>Yes</p>	<p>Yes</p>	<p>\$ 355,160</p>	<p>\$ 25,750</p>	<p>Medicaid</p>
<p>Support for Employment: Prevocational Services</p>	<p>Services that focus on developing generalized skills that prepare an individual for employment. Prevocational training topics include but are not limited to attendance, safety skills, following directions, and staying on task.</p>	<p>Yes</p>	<p>No</p>	<p>\$ 20,600</p>	<p>\$ -</p>	<p>Medicaid</p>

Support for Employment: Day Habilitation	Services that assist or support the individual in developing or maintaining life skills and community integration. Services will enable or enhance the individual's functioning, physical and emotional health and development, language and communication development, cognitive functioning, socialization and community integration, functional skill development, behavior management, responsibility and self-direction, daily living activities, self-advocacy skills, or mobility.	Yes	Yes	\$ 24,720	\$ 16,500	Medicaid
Support for Employment: Job Development	Services that assist individuals in preparing for, securing and maintaining gainful, competitive employment. Employment will be integrated into normalized work settings, will provide pay of at least minimum wage, and will be based on the individual's skills, preferences, abilities, and talents.	Yes	Yes	\$ 72,100	\$ -	Medicaid
<u>Core Service</u> <u>Domain: Specific Service</u>	<u>Description</u>	<u>MI & ID</u>	<u>DD & BI</u>	<u>FY15 Proposed Budget Priority Population</u>	<u>FY15 Proposed Budget Additional Population</u>	<u>Additional Funding Sources</u>

Recovery Services: Family Support	Services provided by a family support peer specialist that assists the family of an individual to live successfully in the family or community including, but not limited to, education and information, individual advocacy, family support groups, and crisis response.	Yes	Yes	\$10,300	\$ -	Medicaid
Recovery Services: Peer Support	A program provided by a peer support specialist including but not limited to education and information, individual advocacy, family support groups, crisis response, and respite to assist individuals in achieving stability in the community.	Yes	Yes	\$10,300	\$ -	Medicaid
<u>Core Service</u> <u>Domain: Specific</u> <u>Service</u>	<u>Description</u>	<u>MI & ID</u>	<u>DD & BI</u>	<u>FY15 Proposed</u> <u>Budget Priority</u> <u>Population</u>	<u>FY15 Proposed</u> <u>Budget</u> <u>Additional</u> <u>Population</u>	<u>Additional</u> <u>Funding</u> <u>Sources</u>
Service Coordination: Case Management	Service provided by a case manager who assists individuals in gaining access to needed medical, social, educational, and other services through assessment, development of a care plan, referral, monitoring and follow-up using a strengths-based service approach that helps individuals achieve specific desired outcomes leading to a healthy self-reliance and interdependence with their community.	Yes	Yes	\$ 1,500	\$ -	Medicaid

<p>Service Coordination: Health Homes</p>	<p>A service model that facilitates access to an interdisciplinary array of medical care, behavioral health care, and community-based social services and supports for both children and adults with chronic conditions. Services may include comprehensive care management; care coordination and health promotion; comprehensive transitional care from inpatient to other settings, including appropriate follow-up; individual and family support, which includes authorized representatives; referral to community and social support services, if relevant; and the use of health information technology to link services, as feasible and appropriate.</p>	<p>Yes</p>	<p>Yes</p>	<p>\$ 15,450</p>	<p>\$ -</p>	<p>Medicaid</p>
<p>Service Coordination</p>	<p>The coordinators are responsible for ensuring equal and timely access for all individuals seeking Mental Health and/or Disability Service within the region. An action of a coordinator involving a clinical decision shall be made in conjunction with a professional who is trained in the delivery of the mental health or disability service addressed by the clinical decision.</p>	<p>Yes</p>	<p>Yes</p>	<p>\$225,669</p>		

Total Core by population				\$1,471,161	\$73,150	
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Additional Non-Core Services

NON-CORE SERVICES	DESCRIPTION	CORE POPULATION	FISCAL YEAR 2016 BUDGET
Transportation	Transportation to and from Day Habilitation and Vocational Programs.	MI, ID, DD	\$16,480
Information and Referral Services	Service that informs individuals of available services and programs.	MI & ID	\$75,000
Consultation and Public Education Services	To educate the general public about the realities of mental health and mental illness.	MI & ID	\$50,000
Prescription Medicine	Prescription psychiatric medications for persons having a mental health diagnosis.	MI	\$5,150
Residential Care Facilities	Community Facility providing care and treatment.	MI	\$154,500
Peer Drop-In Center	Program that offers a safe, supportive environment within the community for individuals who have experienced mental/emotional problems.	MI	\$60,000
Work Activity	Vocational services provided in a sheltered work setting that offer meaningful work opportunities that build skills to move toward community living.	MI & ID	\$552,080
School Based Therapy	Therapy services provided in a school setting with linkage to other services.	MI	\$20,000
Commitments	Any commitment expenses including sheriff transportation, legal representation, and advocate costs.	MI	\$82,550
Community Support	Outreach and support for individuals with mental illness in their home environment.	MI	\$25,000
Total Non-Core			\$1,040,760

Enhanced Core Services to be implemented in Fiscal Year 2016

ENHANCED CORE SERVICES

FISCAL YEAR 2016 BUDGET

COMMUNITY BASED CRISIS STABILIZATION SERVICE: Program designed to stabilize an acute crisis episode and to restore an individual and family to their pre-level of functions. The program will also contain a transitional living component for those individuals in need of additional support beyond 3-5 days for Crisis Stabilization for linkage to community resources and assistance with finding housing to ensure success and recovery upon return to community living. **\$589,224**

JAIL DIVERSION PROGRAM: Program designed to provide mental health treatment and intervention for individuals with mental illness upon their release to permanently stabilize them within their community in the hope of preventing recidivism. Program will be piloted in Crawford County in FY2016 with the possible expansion in Sac and Calhoun Counties. **\$0**

Only cost associated with this service may be Coordinator of Disability Service time which is reflected under services. We anticipate savings in transportation, committal costs and hospitalizations – Amount to be determined

Regional Administrative Costs

Direct Administrative			\$215,860
Purchased Administrative			\$62,496
Total Administrative			\$278,356
Total RHCS Budget			\$3,452,651

All of the expenses in addition to revenues are outlined in the FY'16 RHCS budget (Attachment A).

Fiscal Year 2016 Revenue:

County	2013 population	2016 Levy	Reserve	35.00 Per Capita Contribution
Buena Vista	20,567	\$236,027	\$483,818	\$719,845
Calhoun	9,926	\$201,017	\$146,393	\$347,410
Carroll	20,598	0	\$720,930	\$720,930
Cherokee	11,945	0	\$418,075	\$418,075
Crawford	17,434	0	\$610,190	\$610,190
Ida	7,141	\$96,429	\$153,506	\$249,935
Sac	10,071	\$357,399	\$0	\$352,485
Total	97,682	\$890,872	\$2,532,912	\$3,418,870

Additional Revenue anticipated for FY'16: Social Services Block Grant - \$149,102

Additional Funds Available: Projected 2015 Regional Ending Fund Balance: \$1,653,597

Financial Forecasting Measures

Historical service utilization is the starting point for all financial projections. The Rolling Hills Community Services Region has been operating under one single budget for its first year of operation which will continue. The region had approximately 8 months history of expenditures in developing its second year of operation projected budget. There continue to be changes in the system which leads to some unpredictability in forecasting. New people continue to access the Iowa Health and Wellness Plan and a waiting list was recently implemented for HCBS ID Waiver. The region is forecasting the cost of new services that are being developed based on cost estimates from other similar programs in the state.

The Chief Executive Officer has projected a financial forecast for the Rolling Hills Region through 2021 based on an overall 3% increase. **(Attachment B)** Service Expenditures are likely to decrease in Fiscal Year 2017 as the Region shifts away from sheltered employment to community based employment for the individuals that we serve. This will be achieved through the additional expenditure amount that was included under Supported Employment which will allow for the creation of a Multi-Agency Adult Career Exploration Program and the hiring of two Marketing Employment Development Managers.

The Governance Board approved a per capita contribution for FY'16 which was based on a number of factors including continued positive relationships between counties based on an equal dollar investment into the region system of pooled funds, the need for utilizing fund balances for the county contribution and recognition of the legislature's desire to have fund balances around 25 percent.

Throughout the year, RHCS regional staff and stakeholders have identified unmet needs and areas for service development, which are incorporated into subsequent service plans and budgets. RHCS Region gathers information through the Advisory Board that meets quarterly and the four Task Forces that have been meeting since the inception of the region.

The region will utilize the input and information from these groups to effectively and responsibly plan for use of available financial resources. Beyond the historical information used to develop this budget, the following items were included for expansion of services during FY16. These include the development of Crisis Stabilization Services and Jail Diversion.

Provider Reimbursement Provisions

The RHCS Region will contract with MH/DS providers whose base of operation is within the region. RHCS Region may also honor contracts that other regions have with their local providers or may choose to contract with providers outside of the region. A contract may not be required with providers that provide one-time or as needed services. A fee for service approach will be utilized in most provider contracts outlining the services to be provided and the rate of reimbursement. All payments will be based on a pre-authorized request for service authorization with the exception of court ordered payments, such as civil commitment costs. As described above in Scope of Service and Budget Financing Provisions, RHCS Region provides funding by incorporating all available funding and insurance resources in its system of care. RHCS will ensure that individuals apply for all funding sources prior to accessing regional funding, including Medicaid, Medicare and other funding mechanisms which ensure that individuals and their families are able to optimally live, work, and recreate in integrated communities of their choice.

The region may also utilize block grant payments when a service does not fit the traditional methods of payment based on a pre-approved individual service request. Requests for grant funding opportunities may also be offered by RHCS Region based on an assessed community need in order to engage providers in Evidence Based Practices.

When a non-traditional provider arrangement is more appropriate than a fee for service approach with a contracted provider, the Coordinators of Disability Services will work with the region's CEO to request such arrangements. A non-traditional provider may be an individual, organization and/or business who delivers services in the consumer's home and/or other community setting. Non-traditional providers typically are individuals, organizations, or businesses which do not provide MH/ID/DD services as a part

of their normal business. These services are not to provide treatment but are supportive and may be rehabilitative in focus, and are initiated when there is a reasonable likelihood that such services will benefit the consumer's functioning, assist them in maintaining community tenure, and act as an alternative way to achieve the consumer's stated goals or outcomes. A request for funding can be made by any consumer, or the consumer's authorized representative, to utilize non-traditional providers for services as approved in the RHCS Regional Management Plan. Non-traditional providers may be subject to certain licensing, certification, accreditation or other state approval standards.

Each service provider shall provide monthly billing invoices within 60 days of service provision, and other information requested of the provider for utilization review. The monthly billings shall include the following information:

- Name and unique identifier of each individual served during the reporting period.
- Dates of service
- Number of units of service delivered to each individual served.
- When requested, attendance records.
- Unit rate and total cost of the units provided to each individual. Copayments or other charges billed to other sources shown as deductions on the billing.
- Actual amount to be charged to the Region for each individual for the period.

RHCS staff shall review the billings and additional utilization information in comparison with service funding authorizations in place. Non-emergency services delivered without service funding authorization shall be deducted from the billing.

All eligible bills shall be paid within 60 days of receipt of required documentation unless unforeseen circumstances exist.

No billings received more than 60 days after the close of the fiscal year in which the service was provided shall be considered for payment by RHCS unless there is a statutory obligation or unforeseen circumstances exist as approved by the CEO. Fiscal year for RHCS is July 1-June 30.

It is the intent of RHCS that only RHCS staff shall authorize services for residents of the RHCS region. Due to that, it is the policy of RHCS that if another county, region, or the State, determines residency in error or approves services for persons who do not have residency in their region, RHCS may not assume retroactive payment. When written notification is received by RHCS of the error, RHCS staff shall authorize services according to the policies and procedures set forth in this manual.

ATTACHMENT A: ROLLING HILLS REGIONAL MENTAL HEALTH/DISABILITY SERVICES BUDGET

Name of Region: Rolling Hills Community Services Region
 Chief Executive Officer: Dawn Mentzer
 Address: 605 Cayuga St. Storm Lake, IA 50588
 Telephone & Email: 712-749-2556 dmentzer@bvcountyiowa.com

BEGINNING FUND BALANCE AND RECIEPTS		Budget 2015/2016	Re-estimated 2014/2015	Actual
BEGINNING FUND BALANCE	1	-	-	
OTHER RECIEPTS				
2250 Mental Health & Disability Services Equalization	2	-		
2540 Distributions from MHDS Regional Members	3	3,418,870	-	-
2X Other Intergovernmental Revenues	4	149,102	-	-
4X & 5X Charges for Services	5	-	-	-
6X Use of Money & Property	6	-	-	-
8X Miscellaneous Revenue	7	-	-	-
	8			
	9			
	10			
	11			
SUBTOTAL OTHER RECIEPTS	13	3,567,972	-	-
	14			
TOTAL RESOURCES	15	3,567,972	-	-

EXPENDITURES		Budget 2015/2016	Re-estimated 2014/2015	Actual
SERVICES TO PERSONS WITH:				
40XX MENTAL ILLNESS	1 6	2,044,535	-	
42XX INTELLECTUAL DISABILITIES	1 7	1,055,580	-	
43XX OTHER DEVELOPMENTAL DISABILITIES	1 8	74,180	-	
47XX BRAIN INJURY	1 9	-	-	
44XX GENERAL ADMINISTRATION				
4411 Direct Administration	2 1	215,860		-
4412 Purchased Administration	2 2	62,496		-
4413 Distribution to MHDS Regional Fiscal Agent	2 3		-	-
44xx TOTAL GENERAL ADMINISTRATION	2 4	278,356	-	-
45XX COUNTY PROVIDED CASE MGMT				
	2 5	-	-	-
46XX COUNTY PROVIDED SERVICES				
	2 6 7	-	-	-
TOTAL MH/DS EXPENDITURES				
	2 8	3,452,651	-	-
	2 9			
ENDING FUND BALANCE:				
	3 0 1			
Fund Balance - Restricted	3 2	-	-	-
Fund Balance - Committed	3 3	-	-	-
Total Ending Fund Balance	3 4	115,321		
TOTAL REQUIREMENTS				
	3 5	3,567,972	-	-

MULTI-COUNTY REGIONAL MENTAL HEALTH/DISABILITY SERVICES REGION -

Detail

EXPENDITURES			Budget 2015/2016	Re-estimated 2014/2015	Actual
SERVICES TO PERSONS WITH:					
40XX MENTAL ILLNESS					
400X	Information & Education Services	1	125,000		
402X	Coordination Services	2	563,016		
403X	Personal & Environmental Support	3	40,685		
404X	Treatment Services	4	835,724		
405X	Vocational & Day Services	5	165,810		
406X	Lic/Certified Living Arrangements	6	128,750		
407X	Inst/Hospital & Commit Services	7	185,550		
	40XX Subtotal	8	2,044,535	-	-
42XX INTELLECTUAL DISABILITIES					
420X	Information & Education Services	9	-		
422X	Coordination Services	10	-		
423X	Personal & Environmental Support	11	170,980		
424X	Treatment Services	12	-		
425X	Vocational & Day Services	13	858,850		
426X	Lic/Certified Living Arrangements	14	25,750		
427X	Inst/Hospital & Commit Services	15			
	42XX Subtotal	16	1,055,580	-	-
43XX OTHER DEVELOPMENTAL DISABILITIES					
430X	Information & Education Services	17			
432X	Coordination Services	18			
433X	Personal & Environmental Support	19	31,930		
434X	Treatment Services	20			

EXPENDITURES			Budget 2015/2016	Re-estimated 2014/2015	Actual
44XX GENERAL ADMINISTRATION					
4411	Direct Administration	3	215,860		
4412	Purchased Administration	3	62,496		
4413	Distribution to MHDS Regional Fiscal Agent	4		-	-
	44xx Subtotal	1	278,356	-	-
45XX COUNTY PRVD CASE MGMT					
		4			
46XX COUNTY PRVD SERVICES					
		2	-	-	
		4			
		3	-	-	
		4			
		4			
TOTAL MH/DS EXPENDITURES					
		5	3,452,651	-	-

MHDS Regional Members		Distributions received from Regional Members		
1	Buena Vista	\$	719,845	
2	Calhoun	\$	347,410	
3	Carroll	\$	720,930	
4	Cherokee	\$	418,075	
5	Crawford	\$	610,190	
6	Ida	\$	249,935	
7	Sac	\$	352,485	
8				
9				
10				
11				
12				
13				

ATTACHMENT B

Rolling Hills Community Services Region

35.00 per capita

	Year	2014	2015	2016	2017	2018	2019	2020	2021
County Tax Dollars	County Max Levy Amount		\$ 4,618,405.00	\$4,091,362.00	\$4,153,029.00	\$4,153,029.00	\$4,153,029.00	\$4,153,029.00	\$4,153,029.00
	County Contribution		\$4,498,769	\$3,418,870	\$3,418,870	\$3,418,870	\$3,418,870	\$3,418,870	\$3,418,870
	Other Taxes								
	Other Misc County Rev.(ie:Client remb.)								
	Total County Revenue	\$0	\$4,498,769	\$3,418,870	\$3,418,870	\$3,418,870	\$3,418,870	\$3,418,870	\$3,418,870
State Dollars									
	Mental Health & Disability Services Equalization		\$337,904						
	Total State Revenue	\$0	\$337,904	\$0	\$0	\$0	\$0	\$0	\$0
Federal Dollars									
	SSBG (SPP)	\$ -	\$149,102	\$149,102					
	Total Federal Revenue	\$0	\$149,102	\$149,102	\$0	\$0	\$0	\$0	\$0
	County / State / Federal Revenue	\$0	\$4,985,775	\$3,567,972	\$3,418,870	\$3,418,870	\$3,418,870	\$3,418,870	\$3,418,870
	Region/Countries Beginning Fund Balances	0	\$0	\$2,191,729	\$2,307,050	\$2,273,229	\$2,135,827	\$1,891,737	\$1,537,759
	Total Funds Available	\$0	\$4,985,775	\$5,759,701	\$5,725,920	\$5,692,099	\$5,554,697	\$5,310,607	\$4,956,629
	Actual/Projected Expenditures		\$2,794,046	\$3,452,651	\$3,452,691	\$3,556,272	\$3,662,960	\$3,772,849	\$3,886,034
	Actual/Estimated Ending Fund Balance		\$2,191,729	\$2,307,050	\$2,273,229	\$2,135,827	\$1,891,737	\$1,537,759	\$1,070,595
	% of carryover	#DIV/0!	78.44%	66.82%	66%	60%	52%	40.76%	28%

Dollars above 25% fund balance

	\$863,162.75	\$863,172.75	\$889,067.93	\$915,739.97	\$943,212.17	\$971,508.53
	\$1,443,887.25	\$1,410,056.25	\$1,246,759.34	\$975,997.42	\$594,546.54	