

## REQUEST FOR BOARD ACTION

### HENDERSON COUNTY BOARD OF COMMISSIONERS

**MEETING DATE:** October 15, 2008

**SUBJECT:** Maintenance of Effort Fund Allocation/  
Western Highland Area Authority Quarterly Fiscal  
Monitoring Report for the period ended June 30, 2008

**ATTACHMENTS:** Yes

- 1.) Western Highlands Network Recommendations
- 2.) Provider Applications
- 3.) Quarterly Fiscal Monitoring Report

#### SUMMARY OF REQUEST:

Henderson County has \$528,612 mandated for allocation for the provision of mental health services in the county for the period between November 1, 2008 and October 31, 2009. Western Highlands LME has reviewed the Maintenance of Effort funding applications which were received by the county in September, and has recommended allocation at this time of \$510,000. Allocating this amount would leave \$18,612 in Maintenance of Effort funds to be allocated throughout the remaining fiscal year.

Western Highlands LME's specific recommendations are:

<i>Blue Ridge Community Health Services</i>	<i>\$30,000</i>
<i>Henderson County Health Department</i>	<i>\$30,000</i>
<i>Mainstay</i>	<i>\$25,000</i>
<i>Parkway Behavioral Health</i>	<i>\$100,000</i>
<i>Sixth Avenue Psychiatric Rehabilitation</i>	<i>\$200,000</i>
<i>The Free Clinics</i>	<i><u>\$125,000</u></i>
<i>Total</i>	<i><u>\$510,000</u></i>

Western Highlands also recommends that prior to approval, Parkway Behavioral Health submit a revised proposal focusing on Dual Diagnosis MH/SA consumers and support for Expanded Psychiatric Services.

Additionally, Western Highlands recommends that Blue Ridge Community Health Services, the Department of Public Health and Mainstay Inc. work with the Western Highlands LME on contracts to move services into a billable process.

#### BOARD ACTION REQUESTED:

The Board is requested to discuss the requests and recommendations for FY 2008 Maintenance of Effort funds, and to direct staff regarding their allocation.

#### Suggested Motion:

*I move the Board appropriate \$510,000 of Maintenance of Effort funds at this time as recommended by Western Highlands, request that Parkway Behavioral Health submit a revised proposal prior to release of any funding, and direct Blue Ridge, the Health Department and Mainstay to work with the Western Highlands LME on contracts to move services into a billable process.*

Henderson County MOE Proposals  
October 1, 2008  
Western Highlands Network Recommendations

The reporting requirements and clarification regarding MOE Funds has been an issue of concern in the State Legislature and the Division of MHDDSAS. The current expectation is that funds be accounted for and documented like other funds of the LME. Therefore some of the programs funded in the past may be more difficult to fund because of these reporting requirements. I am recommending \$510,000.00 out of the total request of \$637,603.00; this would leave unobligated funds of \$18,612.00 to be used at a later date to support or deal with unexpected issues.

- |                     |          |                                 |
|---------------------|----------|---------------------------------|
| 1. The Free Clinic  |          | <b>\$125,000.00 recommended</b> |
| Psychiatric Clinic- | \$45,000 |                                 |
| Community Pharmacy- | \$80,000 |                                 |

Even though the Free Clinic is not one of our contracted providers they have been a tremendous asset in helping to maintain consumers on medication while provider transitions occur. This service is linked to various other providers in the community and provides stability and strengthens the safety of consumers in need. This service is an excellent example of the community taking responsibility to find local solutions to needed problems.

- |                                      |                     |                                 |
|--------------------------------------|---------------------|---------------------------------|
| 2. Parkway Behavioral Health-        |                     |                                 |
|                                      | \$197,500 requested | <b>\$100,000.00 recommended</b> |
| Expand Psychiatric services          |                     |                                 |
| Expand CST                           |                     |                                 |
| Add additional staff for SA services |                     |                                 |
| Support Emergency Services           |                     |                                 |

This proposal offers a lot for a reasonable price; however they are providing limited MH services in Henderson County. This proposal lacks detailed budget expenses. It seems that supporting this proposal with some more defined expectations would help the expansion of services. We would expect a contract to be developed that defined how much additional capacity would be provided. I suggest an initial focus on Dual Diagnosis MH/SA consumers and support for Expanded Psychiatric Services. Prior to approval a revised proposal needs to be submitted focusing on these 2 areas.

3. Sixth Avenue Psychiatric Rehabilitation Partners-  
\$200,000 requested \$200,000.00 recommended  
Sustain existing services  
Upgrade physical facility  
Expand Outpatient & SA services  
Support for National Accreditation

This program serves are most-in-need consumers and has demonstrated the ability to support consumers and families throughout the area. The investment into this program needs to remain as a focal point for Mental Health Recovery and one that helps expand advocacy and quality services. We strongly support the Peer-to-Peer training and the activities of the Clubhouse.

4. Blue Ridge Community Health Services-  
\$30,000 requested \$30,000.00 recommended  
Expand Psychiatric Services

This service is critical to the on-going stability of the provider network and our growing Primary Care/Integrated Care efforts. Strongly support this proposal and would suggest that it may be possible to begin developing a contract with the WHN LME to move this service into a billable process. This would then free up additional MOE funds for future projects.

5. Henderson County Department of Public Health-  
Requested \$60,103 \$ 30,000.00 recommended  
Counseling for maternity clients with MH issues

The target population appears to be depressed pre/post natal mothers and some of these individuals could qualify for IPRS funding, through the LME. If they established a contract with us some of these costs could be covered. I have recommended that they be granted \$30,000.00 to help cover cost until they can develop a contract with WHN and to cover cost associated with consumers that would not qualify for state funding.

6. Mainstay Inc.- Requested \$25,000 \$25,000.00 recommended  
Domestic Violence Support Services

This is an excellent program, and does serve MH/SA consumers and needs the support of the local community and the LME. I am therefore recommending funding this program, but ask that they be directed to work with WHN to determine if there is some way to access services dollars from the LME for some of these consumers.

Respectfully Submitted  
Arthur Carder



1 Historic Courthouse Square #2  
 Hendersonville, NC 28792  
 Phone: 697-4809 Fax: 698-6014

# HENDERSON COUNTY

## Maintenance of Effort Funding Application

November 1, 2008 - October 31, 2009

### SECTION I ORGANIZATIONAL INFORMATION

Organization Name The Free Clinics	Executive Director Judith Long
Contact Person for Grant Judith Long	Phone Number 828.697.8422
Mailing Address 506 Park Hill Court	E-Mail jlong@thefreeclinics.org
City State Zip Hendersonville NC 28739	Fax Number 828.697.8453
Website address (if applicable) www.thefreeclinics.org	Received County funding in last three years? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Type of Application <input type="checkbox"/> One-Time Project <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Expansion	Amount of Funding requested \$45,000

### SECTION II PERFORMANCE MEASUREMENT

**Mission Statement**  
 Please provide the organization's Mission Statement and/or general organizational information.  
 To augment the Henderson County healthcare system by providing basic health, prevention, education, and coordination services to uninsured, low-income clients through free clinics and collaborative programs staffed with qualified volunteer healthcare professionals.

#### Performance Goals and Objectives

- Identify your organization's goals/objectives. Additional goals may be added.
- Using volunteers, TFC will offer seven clinics and community case management to low-income, uninsured Henderson County residents.
  - TFC will provide at least 2100 patient visits for at least 1200 unduplicated patients through seven clinics and case management services.
  - The value of professional services given through TFC will be at least \$1,200,000; tripling the dollars contributed to TFC.
  - TFC will continue to work collaboratively with both hospitals, healthcare organizations, and social services to provide care to patients.
  - TFC will continue to offer pharmaceutical services to over 1,000 unduplicated clients through the Community Pharmacy (adopted from Partnership for Health in July 2008).
  - TFC will continue to offer prescription assistance services to over 400 unduplicated clients through the Medi-Find Program (adopted from Interfaith Assistance Ministries) in Fall 2008.

#### Service Outcomes

Please identify measures to assess the effectiveness of your strategies, achievement of goals, efficiency of service delivery or improvement of service delivery

Outcomes	11.1.2007 - 10.31.2008 Year To Date		11.1.2008 - 10.31.2009
	Target	Actual	Target
TFC will recruit, train, and retain volunteers for the psychiatric clinic.	18	24	23
TFC will publicize the clinic broadly.	*	*	*
TFC will provide patient visits for the psychiatric clinic.	700	415	300
TFC will offer psychiatric care to unduplicated patients.	385	204	215
TFC will provide case management to psychiatric patients.	350	228	275
TFC will track the number of case management interventions for psychiatric.	1925	1326	1375

\* TFC planned to advertise broadly in local paper, on local radio, through social service, and on 211. TFC had one article in the local paper, included the clinic on 211, created a patient brochure placed at social services and other locations, and had one television spot on WLOS. TFC will continue to advertise to patients and community in the coming year.

SECTION III

SERVICE SUMMARY

Problem Statement

Identify the problem or need your Organization will address.

The Psychiatric Clinic of The Free Clinics helps to bridge the gap in access to psychiatric care for low-income, uninsured adults in Henderson County. During its first year of operation, patients had greater access to psychiatrists through the free psychiatric clinic than through other community-based providers, providers who had trouble finding and keeping psychiatrists. With the continued changed to the local mental healthcare system, including the closure of Leaps and Bounds and the drastic reduction in services at Appalachian Counseling, TFC psychiatric clinic continues to offer a critical service in Henderson County. The free psychiatric clinic ensures that uninsured patients can remain on their medications and in stable living and working situations.

Target Population

Describe the target population that will be served with the requested funds.

The primary target population for the free psychiatric clinic of The Free Clinics meets the following three criteria: Henderson County resident, uninsured, and at or below 185% of the federal poverty level. However, since the core mission of The Free Clinics is to bridge gaps in healthcare and help ensure access to care, we have been willing to see patients with MediCare or Medicaid on a one-time basis to assist with their medication management until they can get an appointment with a psychiatrist through another provider.

Service Goals

How will this service address the problem or need identified?

The free psychiatric clinic provides patients with access to psychiatric appointments and medication management, both critical elements in the maintenance of stability for persistently mentally ill persons. Primary care physicians are often unwilling to manage persistent mental illnesses (e.g., schizophrenia, bipolar, etc.); those patients need access to psychiatrists. Further, those patients need access to the medications which help them maintain stability. The free psychiatric clinic of The Free Clinics provides both access to psychiatrists and to medications through the Community Pharmacy. These patients also require intensive case management services to assist them in follow-through with appointments, medications, applications, etc. During 2007-08, TFC added more case management time for the psychiatric clinic to ensure proper care. Further, Western Highlands began working closely with TFC to help us find long-term homes for patients. By sumer 2008, a case management system had been built that was working to effectively coordinate care for long-income, uninsured patients with mental health needs. However, that system is already experiencing the tremendous strain of the recent reduction in services in Henderson County, including a waiting list for patients, including those discharged from Pardee Hospital inpatient unit. The only access that patients in Henderson County have without a significant wait and thus delay in care is once again The Free Clinics' Psychiatric Clinic.

Citizens Impacted

How many citizens will be directly impacted by the program funds?

The whole of Henderson County is directly impacted by the program funds. If persistently mentally ill patients do not have access to psychiatrists and to medications, they can and do easily decompensate. They end up in the emergency rooms, in the jails, and on the streets. Crime can increase as can waiting time at emergency rooms, not to mention the costs. Directly, 215 unduplicated patients will be affected by these program funds, in addition to their family, friends, and employers.

Funding Implications

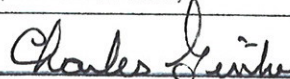
Describe the impact on your organization, clients and/or services if the requested program funds are not approved.

If these program funds were not approved, The Free Clinics would need to close the psychiatric clinic, leaving hundreds of unduplicated patients without access to psychiatric care and medication management. The impact of the closure of the free psychiatric clinic would resound throughout the county. Other service providers would not be able to meet the need; they are unable to do so now. Thus, hundreds of unduplicated patients would be left without psychiatric care, decompensating to end up in the emergency rooms, in the jails, and on the street.


Partnerships

Describe the organization's relationship to County Departments, if any. How does the organization coordinate those services with the County services?

The Free Clinics case management program works closely with patients to refer them to appropriate services for both their healthcare needs and for additional social services. TFC also works very closely with other healthcare organizations and social service agencies in Henderson County to ensure high quality care to patients. Our new facility will be completed in early September. In that new facility, TFC will adopt two programs currently run by other organizations--a prescription assistance program and the community pharmacy, effectively integrating care for low-income, uninsured persons in the county.

  
Fiscal Officer (Business Manager)

9/3/08  
Date

  
Executive Director (Program Manager)

9/2/08  
Date



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 Hendersonville, NC 28792  
 Phone: 697-4809 Fax: 698-6014

# HENDERSON COUNTY

## Maintenance of Effort Funding Application

November 1, 2008 - October 31, 2009

### SECTION I ORGANIZATIONAL INFORMATION

Organization Name The Free Clinics	Executive Director Judith Long
Contact Person for Grant Judith Long	Phone Number 828.697.8422
Mailing Address 506 Park Hill Court	E-Mail jlong@thefreeclinics.org
City State Zip Hendersonville NC 28739	Fax Number 828.697.8453
Website address (if applicable) www.thefreeclinics.org	Received County funding in last three years? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Type of Application <input type="checkbox"/> One-Time Project <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Expansion	Amount of Funding requested \$80,000

### SECTION II PERFORMANCE MEASUREMENT

**Mission Statement**  
 Please provide the organization's Mission Statement and/or general organizational information.  
 To augment the Henderson County healthcare system by providing basic health, prevention, education, and coordination services to uninsured, low-income clients through free clinics and collaborative programs staffed with qualified volunteer healthcare professionals.

**Performance Goals and Objectives**  
 Identify your organization's goals/objectives. Additional goals may be added.

- Using volunteers, TFC will offer seven clinics and community case management to low-income, uninsured Henderson County residents.
- TFC will provide at least 2100 patient visits for at least 1200 unduplicated patients through seven clinics and case management services.
- The value of professional services given through TFC will be at least \$1,200,000; tripling the dollars contributed to TFC.
- TFC will continue to work collaboratively with both hospitals, healthcare organizations, and social services to provide care to patients.
- TFC will continue to offer pharmaceutical services to over 1,000 unduplicated clients through the Community Pharmacy (adopted from Partnership for Health in July 2008).
- TFC will continue to offer prescription assistance services to over 400 unduplicated clients through the Medi-Find Program (adopted from Interfaith Assistance Ministries) in Fall 2008.

**Service Outcomes**  
 Please identify measures to assess the effectiveness of your strategies, achievement of goals, efficiency of service delivery or improvement of service delivery

Outcomes	11.1.2007 - 10.31.2008 Year To Date		11.1.2008 - 10.31.2009
	Target	Actual	Target
New patients with a mental illness in Henderson County utilizing the Community Pharmacy (formerly CHN Pharmacy)	300	145*	175
Total number of patients with a mental illness in Henderson County utilizing the Community Pharmacy (formerly CHN Pharmacy)	325	713*	550
Total number of psychotropic prescriptions filled for Henderson County residents with a mental illness through the Community Pharmacy (formerly CHN Pharmacy)	1350	1001*	1,100

\* Actual figures are through 6/30/08 or eight months. Pharmacy reports are not yet available for July and August 2008, as the staff person responsible has had family emergencies which have delayed her ability to finalize these reports.

SECTION III

SERVICE SUMMARY

Problem Statement

Identify the problem or need your Organization will address.

The Community Pharmacy of The Free Clinics helps to bridge the gap in access to psychiatric medications for low-income, uninsured adults in Henderson County. The Community Pharmacy (formerly CHN Pharmacy) is now a program of The Free Clinics, integrating care for low-income, uninsured adults with our seven clinics and community case management. The Community Pharmacy under CHN's leadership truly became the safety net medication provider for low-income, uninsured residents of Henderson County who are mentally ill and need access to medications. There is simply no where else for residents to get their anti-psychotics or anti-depressants for free or \$3 per month. In conjunction with our Psychiatric Clinic, the Community Pharmacy provides a continuum of care with psychiatric assessment and access to affordable psychotropic medications. The combination of access to psychiatrists through the free Psychiatric Clinic and medications through the Community Pharmacy ensures that uninsured patients can remain on their medications and in stable living and working situations.

Target Population

Describe the target population that will be served with the requested funds.

An estimated 22.1% of Americans ages 18 and older suffer from a diagnosable mental illness in a given year. This translates to approximately 20,734 residents of Henderson County, among whom over 4,450 are uninsured. This request for the Community Pharmacy targets Henderson County residents who are uninsured, low-income, and mentally ill. These are our neighbors who without mental health services and medications would decompensate and end up in our local Emergency Departments, inpatient Psychiatric Units, state mental hospitals, or jails.

Service Goals

How will this service address the problem or need identified?

The Community Pharmacy (formerly CHN Pharmacy) has truly become the safety net provider for the uninsured, low-income, mentally ill residents of Henderson County. These funds will continue to provide accessible, free or affordable (\$3 per month) psychiatric medications to our uninsured, low-income mentally ill. Access to affordable medications gives patients the opportunity to manage their illness in the least restrictive environment or provide critical stabilizing medications to the mentally ill who have recently been released from psychiatric inpatient stays. The Community Pharmacy will be formally integrated in the fall of 2008 with the Medi-Find prescription assistance program once the adoption of Medi-Find by TFC is complete. This will help reduce long-term cost of medications by requiring eligible patients to utilize the free drug programs available through pharmaceutical companies. Access to medications continues to be a critical need for patients, as the local mental health system is already experiencing the tremendous strain of the recent reduction in services in Henderson County.

Citizens Impacted

How many citizens will be directly impacted by the program funds?

The whole of Henderson County is directly impacted by the program funds. If persistently mentally ill patients do not have access to psychiatrists and to medications, they can and do easily decompensate. They end up in the emergency rooms, in the jails, and on the streets. Crime can increase as can waiting time at emergency rooms, not to mention the costs. Directly, 550 unduplicated patients will be affected by these program funds, in addition to their family, friends, and employers.

Funding Implications

Describe the impact on your organization, clients and/or services if the requested program funds are not approved.

If these program funds were not approved, the Community Pharmacy would not be able to afford the purchase of costly psychotropic medications needed by our uninsured, low-income, mentally ill residents, leaving hundreds of unduplicated patients without access to the medications so critical for their stability and care. The impact of the unavailability of psychiatric medications would resound throughout the county. Thus, hundreds of unduplicated patients would be left without psychiatric care, decompensating to end up in the emergency rooms, in the jails, and on the street. Any delay in access to medications for this very unstable group of patients would likely result in far more costly consequences.

Partnerships

Describe the organization's relationship to County Departments, if any. How does the organization coordinate those services with the County services?

The Free Clinics and the Community Pharmacy program have strong working relationships with the Henderson County Department of Public Health and the Department of Social Services. TFC works closely with patients to refer them to appropriate services for both their healthcare needs and for additional social services. TFC also works very closely with other healthcare organizations and social service agencies in Henderson County to ensure high quality care to patients. Our new facility is virtually complete, and we plan to relocate in late September. In that new facility, TFC will adopt the Medi-Find prescription assistance program and fully integrate our seven clinics, community case management, and the Community Pharmacy, effectively integrating care for low-income, uninsured persons in the county. Further, DSS will outpost a staff person in the new facility, easing access to Medicaid for those patients who qualify.

*Charles Gentry*  
Fiscal Officer (Business Manager)

9/3/08

Date

*[Signature]*  
Executive Director (Program Manager)

9/3/08

Date



1 Historic Courthouse Square #2  
 Hendersonville, NC 28792  
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# HENDERSON COUNTY

## Maintenance of Effort Funding Application

November 1, 2008 - October 31, 2009

**SECTION I**  
**ORGANIZATIONAL INFORMATION**

Organization Name Parkway Behavioral Health	Executive Director Sandra Layton/Blair Clark
Contact Person for Grant Sandra Layton	Phone Number 828-778-5145
Mailing Address 356 Biltmore Avenue	E-Mail slayton@parkwaybh.com
City State Zip Asheville NC 28801	Fax Number 828-254-5808
Website address (if applicable) www.parkwaybh.com	Received County funding in last three years? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Type of Application <input type="checkbox"/> One-Time Project <input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Expansion	Amount of Funding requested \$197,500

**SECTION II**  
**PERFORMANCE MEASUREMENT**

**Mission Statement**  
 Please provide the organization's Mission Statement and/or general organizational information.  
 Parkway Behavioral Health is dedicated to improving the mental health and well being of the community thru delivery of accessible behavioral health services to include: mental health, substance abuse, psychiatric evaluation and medication management, Emergency and Mobile Crisis services. Due to the closing of several Hendersonville Providers over the last year (Horizon Recovery, Appalachian Counseling and Leaps and Bounds),

**Performance Goals and Objectives**  
 Identify your organization's goals/objectives. Additional goals may be added.

- Expand on-site psychiatric services by one day per week
- Epanad Crisis Services to include hospital discharge follow up, mobile crisis, and create a transition team
- Create Community Support Team services to proavide a higher level of care to fragile consumers
- Expand to a full range of substance abuse assessment and treatment services absorbing clients of agencies no longer providing services

**Service Outcomes**  
 Please identify measures to assess the effectiveness of your strategies, achievement of goals, efficiency of service delivery or improvement of service delivery

Outcomes	11.1.2007 - 10.31.2008 Year To Date		11.1.2008 - 10.31.2009
	Target	Actual	Target
Expand on-site psychiatric services by one day per week			11/30/2008
Expand capacity by creating a Community Support Teams to provide an increase			1/10/2009
Add additional staff to expand substance abuse continuum of care services			12/1/2008
Continued stabilization of existing services such as Emergency Services, Movile			12/1/2008



SECTION III

SERVICE SUMMARY

Problem Statement

Identify the problem or need your Organization will address.

With the closing of agencies that were providing SA/MH services to the under and uninsured consumers of Henderson County, there is a huge gap in the capacity and depth of services now available to Henderson County Residents. Additionally with the decrease in in-patient hospital beds, there is even a greater need to be able to manage the more fragile and acute SA/MH consumers in the community. PBH has a plan to expanded services with support from Henderson County to help meet the needs of residence while reducing the strain on other community infrastructure such as police and DSS.

Target Population

Describe the target population that will be served with the requested funds.

Dual Diagnosis consumers, consumers receiving medicare-medicaid or uninsured consumers who are having trouble accessing psychiatry services, and indigent consumers with SA or dual SA/MH diagnosis and those in crisis needing immediate response.

Service Goals

How will this service address the problem or need identified?

1. Acquire additional space to accommodate expanded services, additional staff, additional groups. 2. Create additional services for higher acuity clients will allow for more appropriate forms of interventions for each individual. 3. Allow for Parkway to remain in business with adequate supportive infrastructure to respond to the ever changing expectations of the Division of MHDDSAS, DMA and the LME. 4. Aid covering the approximate \$60,000 in additional costs PBH will incur as it developments the systems required to assure a successful national accreditation which is required for continuation of services.

Citizens Impacted

How many citizens will be directly impacted by the program funds?

1. Psychiatry access and expanded services by up to 100 2. Expanded SA Services up to 200. 3. Create Community Support Teams to serve the most fragile consumers and attempted to divert inpatient hospitalizations. 5. Stabilization of existing services - fiscal stabilization so that we can continue expanding access for low income consumers. Psychiatric services do not pay for themselves and are a money loser for Parkway but are needed for most client and support is necessary to continue and expand service delivery.

Funding Implications

Describe the impact on your organization, clients and/or services if the requested program funds are not approved.

With State reduction in funding, the continuation and expansion of services will not be possible without outside funding support. It is essential for all agencies, if they are to continue to survive, that there are monies to support the services provided and also cover the cost of doing business. Currently, State reimbursement rates do not cover the actual cost of doing business, especially for psychiatric services. Psychiatry costs us money to continue but is a vital service to consumers so funding support is essential.

Partnerships

Describe the organization's relationship to County Departments, if any. How does the organization coordinate those services with the County services?

We have strong relationships with CJPP, TASC, Probation and Parole, DSS, The Free Clinics, Community Health Partners and many other agencies throughout Henderson County.

*Blair Clark*

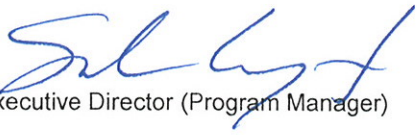
Blair Clark  
Fiscal Officer (Business Manager)

*8/25/08*  
Date

*Sandra Layton*

Sandra Layton  
FY 2008 Maintenance of Effort Funding Application

*8/25/08*

  
Executive Director (Program Manager)

8/25/08  
Date



1 Historic Courthouse Square #2  
 Hendersonville, NC 28792  
 Phone: 697-4809 Fax: 698-6014

# HENDERSON COUNTY

## Maintenance of Effort Funding Application

November 1, 2008 - October 31, 2009

### SECTION I ORGANIZATIONAL INFORMATION

Organization Name Sixth Avenue Psychiatric Rehabilitation Partners	Executive Director Jacqueline Combs
Contact Person for Grant Jacqueline Combs	Phone Number 828-697-1581
Mailing Address 714 6th Ave W	E-Mail <a href="mailto:jcombs@sixth-avenue.org">jcombs@sixth-avenue.org</a>
City State Zip Hendersonville NC 28739	Fax Number 828-697-4492
Website address (if applicable) <a href="http://www.sixth-avenue.org">www.sixth-avenue.org</a>	Received County funding in last three years? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Type of Application <input type="checkbox"/> One-Time Project <input checked="" type="checkbox"/> Continuation <input checked="" type="checkbox"/> Expansion	Amount of Funding requested \$200,000.00

### SECTION II PERFORMANCE MEASUREMENT

**Mission Statement**

Please provide the organization's Mission Statement and/or general organizational information.

Sixth Avenue West Clubhouse and Psychiatric Rehabilitation Partners exists to partner with persons with mental illness and co-occurring substance abuse to create community, and individualized planning and services, for optimal wellness, recovery, and personhood.

### Performance Goals and Objectives

- Identify your organization's goals/objectives. Additional goals may be added.
- 1 Sustained Clubhouse Psychosocial Rehabilitation
  - 2 Sustained Community Support
  - 3 Sustained Assertive Community Treatment Team Services
  - 4 Sustained Psychiatry Services
  - 5 Expansion and upgrade of physical facilities
  - 6 Expansion of Individual and Group Therapy Services to include Adults with Co-Occurring Substance Abuse
  - 7 Accreditation by the Alliance for Human Services
  - 8 National Accreditation by CARF
  - 9 Expand Peer Support Services and Supports

### Service Outcomes

Please identify measures to assess the effectiveness of your strategies, achievement of goals, efficiency of service delivery or improvement of service delivery

Outcomes	11.1.2007 - 10.31.2008 Year To Date		11.1.2008 - 10.31.2009
	Target	Actual	Target
Clubhouse Psychosocial Rehabilitation	as needed	no waiting list	Maintain no waiting list 100% of the time.
Community Support	as needed	63	75
Assertive Community Treatment Team	as needed	36	49
Psychiatry services	as needed	60	125

Expansion & Upgrade of Physical Facilities; Maintain facility License for PSR site	2 sites	3 sites	Maintain 3 sites and appropriate Licensure; ( 1PSR Clubhouse;1ACTT; 1Community Support/Outpatient)
Group Therapy	1	1	5
Individual Therapy	Referred to necessary services	Referred to other providers	Offer in agency as indicated per individual criteria
Capacity to offer substance abuse assessments and co-occurring services	0	hired LCAS	groups as indicated by individualized criteria
Accreditation by the Alliance for Human Services	Work through Matrix	Complete Matrix	Accreditation
National Accreditation	choose accrediting body	CARF	Accreditation
Peer Support	offer groups to community	1 Peer Support Group	Peer to Peer Training and Classes provided locally.

## SERVICE SUMMARY

### Problem Statement

Identify the problem or need your Organization will address.

Our agency's specialty is enhanced services to adults with both serious mental illness and serious and persistent mental illness. Many adults with mental illness are also challenged by substance abuse. In order to provide these level of services with integrity, we will have to supplement our annual budget and will depend on MOE funding. Medicaid, state reimbursement and service definitions do not allow for the expenses of travel, psychiatry coverage, 24/7/365 first response, the realities of providing continuity of care for our targeted populations, administrative costs, supervision, training requirements and continuing education, local community resources, or bricks and mortar. With MOE funding assistance we will be able to sustain services to those Henderson County adults who are most vulnerable and to those most committed to recovery. MOE funding will also enable our agency to support a full continuum of care, as a comprehensive service provider agency. The only one in the Western Highlands Network.

### Target Population

Describe the target population that will be served with the requested funds.

The official target populations are: SPMI/Severe and Persistent Mental Illness; SMI/Serious Mental Illness; ASM/Adult Stable,( to include a secondary diagnosis of substance abuse).

### Service Goals

How will this service address the problem or need identified?

Sixth Avenue is designed to offer adults with mental illness a full array of services under one agency. With our expansion of outpatient services, including psychiatric care, individual therapy, group therapy, and substance abuse assessment and groups, our enrolled clients have an opportunity for the very best continuity of care and a full services array. The capacity to sustain this array of services will have a direct impact on Henderson County by decreasing the burden of cost on other community resources i.e.:DSS, the Detention center, the Rescue Mission, law enforcement, the local hospitals, primary care homes, and other providers.

### Citizens Impacted

How many citizens will be directly impacted by the program funds?

With our current staffing pattern we have the capacity to serve a total of 175 individuals, at one time. We would not exceed that capacity and risk compromising the integrity of our services.

### Funding Implications

Describe the impact on your organization, clients and/or services if the requested program funds are not approved.

The agency would (1) be forced to cut operational costs that would directly impact the local community by increasing the burden of cost to other providers, decrease the overall quality of our services array, increase the burden on the already over-burdened provider network, and increase the costs to other community service agencies; (2) place and increased burden on the citizenship of Henderson County for charitable funds.

### Partnerships

Describe the organization's relationship to County Departments, if any. How does the organization coordinate those services with the County services?

We have a forth write relationship with Henderson County and our goal is to meet periodically with the county manager and /or county representatives. Our agency, combined with our staff with long term service to Henderson County, (collectively exceeding 150 years), has demonstrated the ability to sustain and grow the partnerships necessary to sustain individualized client needs and services, professional resources, and community partnerships. Our agency is represented on every mental health related roundtable, task force, and emergency coalition that exists in Henderson County, as well as providing a volunteer @ the Free Clinic on Tuesday evening for the psych clinic, and attending Western Highlands Network meetings. Our desire is to extend ourselves to our community in a way that is mutually life giving.

*Mary J. Stark*

Fiscal Officer (Business Manager)

9/5/08

Date

Jacqueline S. Combs

*Jacqueline S. Combs*

Executive Director (Program Manager)

9-5-08

Date



# HENDERSON COUNTY

## Maintenance of Effort Funding Application

November 1, 2008 - October 31, 2009

Historic Courthouse Square #2  
 Hendersonville, NC 28792  
 Phone: 697-4809 Fax: 698-6014

### SECTION I ORGANIZATIONAL INFORMATION

Organization Name Blue Ridge Community Health Services (BRCHS)	Executive Director Jennifer Henderson
Contact Person for Grant Milton Butterworth	Phone Number 828-233-2225
Mailing Address P. O. Box 5151	E-Mail <a href="mailto:mbutter@brchs.com">mbutter@brchs.com</a>
City State Zip Hendersonville NC 28793	Fax Number 828-692-4396
Website address (if applicable) <a href="http://www.brchs.com">www.brchs.com</a>	Received County funding in last three years? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Type of Application <input type="checkbox"/> One-Time Project <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Expansion	Amount of Funding requested \$30,000

### SECTION II PERFORMANCE MEASUREMENT

**Mission Statement**  
 Please provide the organization's Mission Statement and/or general organizational information.  
 To enhance the health of individuals and families within the community, with emphasis on the underserved.

**Performance Goals and Objectives**  
 Identify your organization's goals/objectives. Additional goals may be added.

- Western North Carolina's source for affordable medical and dental care.
- Recognized leader in community health and migrant seasonal farm worker services.
- Provide individuals and families with the education and support to achieve healthy living.
- Perpetual focus on resource and funding management to increase the organization's financial strength.

**Service Outcomes**  
 Please identify measures to assess the effectiveness of your strategies, achievement of goals, efficiency of service delivery or improvement of service delivery

Outcomes	11.1.2007 - 10.31.2008 Year To Date		11.1.2008 - 10.31.2009
	Target	Actual	Target
Increase access to psychiatric services for BRCHS patients.	200	80*	300
Increase psychiatric encounters from 165 to 700 per year.	<i>new</i>	165	700 encounters
<i>While the focus of this MOE funding will be to increase access to... ...psychiatric services, BRCHS will maintain efforts on previous outcomes:</i>			
Increase mental health access to patients.	400	727*	800
Increase counseling visits for mental health patients.	133	191*	200
* services provided (11/01/07 - 08/31/08)			

**SECTION III**  
**SERVICE SUMMARY**

**Problem Statement**

Identify the problem or need your Organization will address.  
Recent changes to the behavioral health delivery system have disrupted, complicated, and reduced access to behavioral health services in Henderson County. The erosion of behavioral health services affects patients from all economic classes, but has more acutely affected access to services in the uninsured, underserved, and special populations. Access to psychiatric care and medication management is even more limited; while at the same time, we continue to see the need for referrals for psychiatric care rise.

**Target Population**

Describe the target population that will be served with the requested funds.  
The target population for this service is all community members, especially those with barriers to accessing behavioral health services and, more specifically, those needing psychiatric care and medication management.

**Service Goals**

How will this service address the problem or need identified?  
In the past, Blue Ridge Community Health Services contracted four hours of psychiatric consultation per week through Parkway Behavioral Health (in Asheville). BRCHS will address the needs of these patients more substantially by hiring a part-time psychiatrist to provide direct psychiatric care and medication management, increasing psychiatric services available at BRCHS to twenty hours per week. Having a psychiatrist "in house" eliminates the need for lengthy travel to other providers, and creates a "one stop service" for Henderson County's neediest individuals and families.

**Citizens Impacted**


How many citizens will be directly impacted by the program funds?  
All of Henderson County's ~100,000 residents will be able to access Blue Ridge Community Health Services' psychiatric services; those without insurance are eligible to apply for a sliding discount based on their income. Last year BRCHS saw ~13,000 patients for ~49,000 encounters; all of these community health patients would find psychiatric services available at their medical home. BRCHS projects that 300 community members will gain access to psychiatric services contributing to a total of 800 projected to gain access to mental health services overall.

**Funding Implications**

Describe the impact on your organization, clients and/or services if the requested program funds are not approved.  
If the requested program funds are not approved, BRCHS would be forced to reevaluate the financial feasibility of providing on-site psychiatric services. This would not negatively impact BRCHS as an organization, rather the brunt of the impact would be felt by the residents of Henderson County. If BRCHS is unable to provide expanded Psychiatric services, there is a significant risk of prolonging the mental health crisis in Henderson County.

**Partnerships**

Describe the organization's relationship to County Departments, if any. How does the organization coordinate those services with the County services?  
BRCHS prides itself on its relationships with County Departments such as HCPS and HCHD. BRCHS has developed a collaborative relationship with Pardee Hospital to provide direct psychiatric care and medication management for patients by jointly utilizing a psychiatrist. This collaboration will increase access for patients coming through BRCHS' integrated care model and will add much needed continuity of care to patients being discharged from in-patient psychiatric hospital units.

 9.5.08  
Fiscal Officer (Business Manager) Date

 9-8-08  
Executive Director (Program Manager) Date



**Blue Ridge Community Health Services, Inc**  
**Projected Budget 11/1/08-10/31/09**

	Total Budget
<b>REVENUES:</b>	
Patient Revenue	283,118.37
Gross Patient Revenue	<u>283,118.37</u>
Patient Revenue Adjustments	142,868.19
Total Patient Revenue Adjustments	<u>142,868.19</u>
Net Patient Revenue	<u>140,250.18</u>
Grant/Donation Revenue	24,855.09
NC Adult Mental Health Grant	55,000.00
Henderson County Behavioral Health MTG	30,000.00
	14,775.00
Total Grant Revenue	<u>124,630.09</u>
Other Revenue	
Total Other Revenue	<u>0.00</u>
<b>TOTAL REVENUE</b>	<b><u>264,880.27</u></b>
<hr/>	
<b>EXPENSES:</b>	
Salaries	
Psychiatrist	100,000.00
Administrative	0.00
Provider Salaries	125,618.06
Total Salaries	<u>225,618.06</u>
Paid Time Off	0.00
Fringe Benefits	32,994.14
Contracted Services	0.00
Supplies	1,706.79
Training	4,561.28
Total Operational Expenses	<u>39,262.21</u>
<b>TOTAL EXPENSES</b>	<b><u>264,880.27</u></b>
<hr/>	
Net Surplus (Deficit) to Fund Balance	0.00



1 Historic Courthouse Square #2  
 Hendersonville, NC 28792  
 Phone: 697-4809 Fax: 698-6014

# HENDERSON COUNTY

## Maintenance of Effort Funding Application

November 1, 2008 - October 31, 2009

**SECTION I**  
**ORGANIZATIONAL INFORMATION**

Organization Name Henderson County Department of Public Health	Executive Director Thomas Bridges, MPH
Contact Person for Grant Diana Curran, MD	Phone Number (828) 694-6096
Mailing Address 1200 Spartanburg Hwy, Suite 100	E-Mail md@hendersoncountync.org
City State Zip Hendersonville NC 28792	Fax Number (828) 607-4691
Website address (if applicable) www.hendersoncountync.org/health	Received County funding in last three years? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Type of Application <input type="checkbox"/> One-Time Project <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Expansion	Amount of Funding requested \$60,103

**SECTION II**  
**PERFORMANCE MEASUREMENT**

**Mission Statement**  
 Please provide the organization's Mission Statement and/or general organizational information.  
 Assess the health of the community and assure that its health needs are met by preventing diseases and promoting wellness through the delivery of clinical, environmental, and community health and educational services.

**Performance Goals and Objectives**  
 Identify your organization's goals/objectives. Additional goals may be added.

- 2 Screen at risk populations who are patients of HCDPH for depression and other related mental health conditions and refer as indicated.
- 3 Provide integrated behavioral health services, including counseling and medication management, for maternal, family planning and adolescent patients with depression and related disorders.
- 4 Provide early identification and treatment to the mothers for the prevention of the adverse developmental effects on children through the expansion of behavioral health services to pregnant and post-partum patients receiving care from other providers in the community.

**Service Outcomes**  
 Please identify measures to assess the effectiveness of your strategies, achievement of goals, efficiency of service delivery or improvement of service delivery

Outcomes	11.1.2007 - 10.31.2008 Year To Date		11.1.2008 - 10.31.2009
	Target	Actual	Target
Continue screening HCDPH clients, including maternity, family planning and adolescents and refer for counseling	834	834	875
Increase the frequency of screening for HCDPH maternity clients to first visit, 28 weeks gestation visit, postpartum home visit and six-week postpartum exam.	2x/client/pregnancy	2x/client/pregnancy	4 x/ client/pregnancy and post partum

Increase the number of referred clients who receive counseling for depression and related disorders	150	149	165
Increase counseling services to prenatal clients who receive care from other community providers.	0	0	50
Increase screening and short-term counseling services for patients who are referred from outreach programs, such as public health nurses (CSC and school nurses.)	0	0	10

**SECTION III****SERVICE SUMMARY****Problem Statement**

Identify the problem or need your Organization will address.

In the annual HCDPH State of the County's Health report for the past several years, we have noted a statistically higher number of clients needing hospitalization for mental disorders and substance abuse than the state average (355.8 vs 260.0). One of our agency's methods of addressing the higher mental health needs has been to use grant funding through collaboration with other community agencies to develop an integrated behavioral health program that enhances delivery of mental health counseling services at the time of a clinical service. Our services include screening and treatment for depression and related disorders at the time of all our maternal health physicals, family planning exams, and adolescent physical exams. The highest needs for mental health services in the community are for the underserved county resident who is generally uninsured, underinsured or ethnically diverse with little access to services, especially early intervention where family counseling might prevent a mental health crisis and decrease expensive care including hospitalization. Within the past year, we have reached about 175 clients with a diagnosis of depression or a related

**Target Population**

Describe the target population that will be served with the requested funds.

Uninsured, underinsured, Medicaid, underserved, low-income and ethnically diverse residents of Henderson County, with a focus on women and children.

**Service Goals**

How will this service address the problem or need identified?

The Integrated Behavioral Health program will continue to be available for residents of our county who access primary care services at the HCDPH. Clients can be referred for the program or may call and request an appointment with the therapist. The service will be available regardless of ability to pay. Additionally, our goal for 2008-2009 is to expand the number of pregnant women served through collaboration with private prenatal care providers. The Health Behavior Intervention (HBI) program is a state Medicaid billable program. The start up for this program will occur during this year, and we will assess the feasibility of continuing this portion of the Behavioral Health program based on receipts for services. MOE funding support will allow us to provide services now while awaiting our Medicaid provider number, and to uninsured residents receiving care elsewhere in the community. We will collaborate with the Maternal Health Care Coordination program, a nursing outreach service, to identify potential clients and obtain referrals into the program, in addition to doing outreach directly to private prenatal providers of Medicaid/Emergency Medicaid recipients.

**Citizens Impacted**

How many citizens will be directly impacted by the program funds?

The Behavioral Health Program offers integrated behavioral health services through screening, crisis intervention and referrals for counseling to all maternal health, family planning, children and adolescents served by HCDPH. These numbers are maternal Health, family planning and adolescents. The program will expand to approximately xx prenatal patients through outreach to other providers in the community and 55 through short-term crisis intervention and linkage to other mental health services for patients referred through our outreach programs, including MCC, CSC and school nurses.

**Funding Implications**

Describe the impact on your organization, clients and/or services if the requested program funds are not approved.

If the Behavioral Health Program is not funded, residents of the county will lose to one of its most easily assessable counseling services for families and children in the county and one of the few bi-lingual counselors. In addition, clients screened for depression would no longer have access to crisis intervention and counseling, leading to delays in diagnosis and treatment increasing the cost to the county and hospitals.

**Partnerships**

Describe the organization's relationship to County Departments, if any. How does the organization coordinate those services with the County services?

Henderson County Department of Public Health is a county agency.

*Kesha Arant*

Fiscal Officer (Business Manager)

*9-5-08*

Date

*Thomas J. Zilly*

Executive Director (Program Manager)

*09-05-2008*

Date



1 Historic Courthouse Square #2  
 Hendersonville, NC 28792  
 Phone: 697-4809 Fax: 698-6014

# HENDERSON COUNTY

## Maintenance of Effort Funding Application

November 1, 2008 - October 31, 2009

### SECTION I ORGANIZATIONAL INFORMATION

Organization Name Mainstay, Inc	Executive Director Tanya Blackford
Contact Person for Grant Tanya Blackford	Phone Number 828-693-3840
Mailing Address 133 Fifth Avenue West	E-Mail tanyb@mainstayhelp.org
City State Zip Hendersonville NC 28792	Fax Number 828-696-3840
Website address (if applicable) mainstayhelp.org	Received County funding in last three years? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Type of Application <input type="checkbox"/> One-Time Project <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Expansion	Amount of Funding requested \$25,000.00

### SECTION II PERFORMANCE MEASUREMENT

**Mission Statement**  
 Please provide the organization's Mission Statement and/or general organizational information.  
 Through intervention, education, and advocacy, Mainstay works to promote a community in Henderson County in which individuals exercise their power to eliminate physical, emotional and sexual abuse in personal relationships.

**Performance Goals and Objectives**  
 Identify your organization's goals/objectives. Additional goals may be added.

- To provide a safe shelter for victims of domestic violence including those victims who may have mental health and/or substance abuse
- To provide services for persons with co-occurring issues of mental health and/or substance abuse and domestic violence
- To provide community support services for person with co-occurring mental health and/or substance abuse and domestic violence issues

**Service Outcomes**  
 Please identify measures to assess the effectiveness of your strategies, achievement of goals, efficiency of service delivery or improvement of service delivery

Outcomes	11.1.2007 - 10.31.2008 Year To Date		11.1.2008 - 10.31.2009
	Target	Actual	Target
50 persons with co-occurring issues will be provided in-house crisis mental health services and will be able to remain in safe shelter by November 1, 2009	60		60
Of the 75 persons served in active shelter, 65% of those who are identified as dual diagnosed will exit shelter to a home other than with the abuser and 65% of community-based clients identified as dual-diagnosed will complete 50% of their treatment goals	75		75

SECTION III

SERVICE SUMMARY

Problem Statement

Identify the problem or need your Organization will address.

Mental health services in Henderson County are difficult to access for people who are not currently in service and for those without insurance, often only available after long waiting periods. Mainstay, primarily a provider of crisis services to victims of domestic violence, will provide crisis services and community mental health support services/referrals to persons utilizing Mainstay's shelter/services. Mainstay has partnered with Blue Ridge Health Center for psychiatric assessments and medical care.

Target Population

Describe the target population that will be served with the requested funds.

Individuals with co-occurring issues of mental health/substance abuse and domestic violence. Mainstay provided services in 2007/2008 to more than 800 individuals/families. An estimated 80% of Mainstay clients have self-identified as having either substance abuse and mental illness and/or both. In addition to outreach services Mainstay provides emergency shelter to services to an estimated 280 women and children a year, most of whom are without insurance and are not currently users of the mental health care system.

Service Goals

How will this service address the problem or need identified?

Mainstay will provide support services/shelter and crisis intervention for those presenting with mental health/substance abuse and domestic violence issues. The goal of services is to help individuals/families overcome barriers that prevent them from being safe and independent members of the community.

Citizens Impacted

How many citizens will be directly impacted by the program funds?

Mainstay provides services to more than 800 individuals/families a year. Services are based on the presenting need of the person seeking services. All services are available to all persons based on willingness of the individual in question. Services are available to all residents of Henderson County. Mainstay operates a 24 hour crisis line and is staffed 24 hours a day. Mainstay makes our services available to all victims identified by the over 3000 domestic violence calls placed a year to Henderson County 911.

Funding Implications

Describe the impact on your organization, clients and/or services if the requested program funds are not approved.

Because of the lack of easily accessible mental health and substance abuse services, the needs of most clients in these categories may not be met in a timely enough manner to address the potential dangers of their circumstances as it relates to domestic violence. Untreated mental health and substance abuse issues make it impossible for victims of domestic violence to live safely with other women and children in a shelter setting or to allow them to address those circumstances which brought them into shelter.

Partnerships

Describe the organization's relationship to County Departments, if any. How does the organization coordinate those services with the County services?

Mainstay partners with DSS to provide shelter for domestic violence victims under the TANF program. Mainstay works with the Health Department for medical care for some of Mainstay's clients. Mainstay works closely with the District Attorney's Office and the Sheriff's Office to provide services to victims and offenders through Mainstay's Abuser Intervention Program.

  
Fiscal Officer (Business Manager)

Date August 14, 2008





# Western Highlands Network

A LOCAL MANAGEMENT ENTITY

September 5, 2008

Carey McLelland  
Finance Director, Henderson County  
113 N Main Street  
Hendersonville, NC 28792

Dear Mr. McLelland:

Enclosed please find the Western Highlands Network's Fiscal Monitoring Report for the 2008 fiscal year 4<sup>th</sup> quarter, ending June 30, 2008. State Law requires the LME to provide the quarterly FMR to the County Finance Officer. This report is to be provided to the Board of County Commissioners at the next regularly scheduled meeting of the Board. I have cited Legislative Bill H2077 for easy reference:

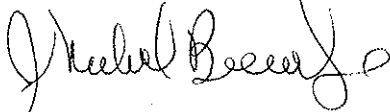
**SECTION 3(a)** G.S. 122C-117(c) reads as rewritten:

"(c) Within 30 days of the end of each quarter of the fiscal year, the area director and finance officer of the area authority shall provide the quarterly report of the area authority to the county finance officer. The county finance officer shall provide the quarterly report to the board of county commissioners at the next regularly scheduled meeting of the board. The clerk of the board of commissioners shall notify the area director and the county finance officer if the quarterly report required by this subsection has not been submitted within the required period of time. This information shall be presented in a format prescribed by the county. At least twice a year, this information shall be presented in person and shall be read into the minutes of the meeting at which it is presented. In addition, the area director or finance officer of the area authority shall provide to the board of county commissioners ad hoc reports as requested by the board of county commissioners."

Please don't hesitate to call if you have any questions.

Cordially,

Western Highlands Area Authority



J. Michael Beveridge

*Budget Specialist*

*Phone 1-800-671-6560, extension 2180*

Enclosure



Division of Mental Health, Developmental Disabilities & Substance Abuse Services  
 Quarterly Fiscal Monitoring Report  
 Western Highlands Area Authority LME

for the period ending: June 30, 2008  
 # of month in the fiscal year=====> 12  
 (July = 1, August = 2, . . . , June = 12)

1. REPORT OF BUDGET VS. ACTUAL

ITEM	PRIOR YEAR		CURRENT YEAR			
	2006-2007		BUDGET	ACTUAL	BALANCE	ANNUALIZED
	BUDGET	ACTUAL	BUDGET	YR-TO-DATE	(Col. 3-4)	PERCENTAGE **
REVENUE						
Client Fees	-	-	-	-	-	-
Medicaid - "Regular Fee-for-Service"	6,100,000	9,065,792	12,000,000	10,671,023	1,328,977	88.93%
Medicaid - CAP/MRDD	400,000	340,487	600,000	617,185	(17,185)	102.86%
Medicare	-	-	-	-	-	#DIV/0!
Insurance	-	-	-	-	-	#DIV/0!
Other Local	3,480,182	4,455,644	681,235	772,828	(91,593)	113.45%
Area Program Transfers	-	-	892,618	892,618	(0)	100.00%
Appropriation of Fund Balance *	500,000	-	1,038,470	-	1,038,470	0.00%
<b>Total Local Funds</b>	<b>10,480,182</b>	<b>13,861,923</b>	<b>15,212,323</b>	<b>12,953,655</b>	<b>2,258,668</b>	<b>85.15%</b>
County Appropriations (by county):						
Buncombe County	600,000	600,000	600,000	600,000	-	100.00%
Henderson County	528,402	528,612	528,402	528,612	(210)	100.04%
Madison County	30,000	30,000	30,000	30,000	-	100.00%
Mitchell County	18,000	18,000	18,000	18,000	-	100.00%
Polk County	74,991	74,991	74,991	74,991	-	100.00%
Rutherford County	102,168	102,168	102,168	102,168	-	100.00%
Transylvania County	170,261	170,261	99,261	99,261	-	100.00%
Yancey County	26,000	26,000	26,000	26,000	-	100.00%
<b>Total County Funds</b>	<b>1,549,822</b>	<b>1,550,032</b>	<b>1,478,822</b>	<b>1,479,032</b>	<b>(210)</b>	<b>100.01%</b>
Service Management Funds	6,215,877	6,215,877	6,373,644	6,373,644	-	100.00%
Service Delivery Funds	29,218,514	25,848,930	31,719,979	27,114,331	4,605,648	85.48%
All Other State/Federal Funds	204,633	195,709	240,000	236,146	3,854	98.39%
<b>Total State and Federal Funds</b>	<b>35,639,024</b>	<b>32,260,516</b>	<b>38,333,623</b>	<b>33,724,121</b>	<b>4,609,502</b>	<b>87.98%</b>
<b>TOTAL REVENUE</b>	<b>47,669,028</b>	<b>47,672,471</b>	<b>55,024,768</b>	<b>48,156,808</b>	<b>6,867,960</b>	<b>87.52%</b>
EXPENDITURES:						
Service Management	10,496,235	6,981,879	8,792,422	6,770,141	2,022,281	77.00%
Directly Provided Services	-	-	-	-	-	#DIV/0!
Provider Payments	35,622,971	31,659,375	44,629,412	38,580,914	6,048,498	86.45%
All Other	1,549,822	1,425,308	1,602,934	1,480,355	122,579	92.35%
<b>TOTAL EXPENDITURES</b>	<b>47,669,028</b>	<b>40,066,561</b>	<b>55,024,768</b>	<b>46,831,410</b>	<b>8,193,359</b>	<b>85.11%</b>
<b>CHANGE IN CASH BALANCE</b>		<b>7,605,910</b>		<b>1,325,399</b>		
<b>Beginning Unrestricted Fund Balance</b>		<b>4,291,232</b>		<b>6,105,452</b>		
<b>Current Estimated Unrestricted Fund Balance and percent of budgeted expenditures</b>	<b>12.81%</b>	<b>6,105,452</b>	<b>9.19%</b>	<b>5,058,100</b>		

\* "Appropriation of Fund Balance" represents the Area Program Fund Balance that has been incorporated as part of the Approved Budget. Actual Yr-To-Date should reflect Fund Balance utilized to date and an explanation needs to be provided for the specific uses of fund.  
 \*\* annualized Revenue percentage less than 90% and Expenditure percentages greater than 110% must be explained on the attachment and submitted with the Fiscal Monitoring Report

2. CURRENT CASH POSITION:

	(1)	(2)	(3)	(4)	(5)	Receivables net of Allowance for Uncollectible Receivables
	30 DAYS	60 DAYS	90 DAYS	OVER 90 DAYS	TOTAL	
Accounts Payable (Accrual Method)	3,655,250					
Account Receivable (Accrual Method)	733,314	249,964	94,696	205,491	\$ 1,283,465	\$ 1,038,312

Current Cash in Bank 17,687,628

3. SERVICE EXCEPTIONS: ( Provided Based on System Capability)

Services authorized but not billed

\* We certify (a) this report to contain accurate and complete information, (b) explanations are provided for any expenditure item with an annualized expenditure rate greater than 110% and for any revenue item with an annualized receipt rate of less than 90%, and (c) a copy of this report has been provided to each county manager in the catchment area.

Area Director: [Signature] 9/15/08 date  
 Area Finance Officer: [Signature] 9-4-08 date  
 Area Board Chair: [Signature] 9/15/08 date

CC: County Manager for each county within the catchment area.

Division of Mental Health, Developmental Disabilities & Substance Abuse Services  
Quarterly Fiscal Monitoring Report - Explanation of Revenue and Expenditure Variances  
Western Highlands Area Authority Local Management Entity  
for the period ending: June 30, 2008

ITEM	Explanation
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**Revenues:**

**Medicaid - "Regular Fee-for- Service":** Revenues for Medicaid "fee-for-Service" did not meet the budgeted expectations for FY2008. Providers have 365 days to bill for Medicaid funded services. Western Highlands will continue to monitor budgeted funds for Medicaid.

**Appropriation of Fund Balance:** These Board approved appropriations were set aside for the implementation of new initiatives and as reserves for unemployment and denied claims. Also included were prior year MOE funds returned as unspent by New Vistas to be reappropriated in FY2008. These initiatives were begun and the MOE funds were spent. Changes in cash management allowed for higher interest income than budgeted. WHN ended the year with net revenues over expenses. Fund Balance wasn't utilized.

**Service Delivery Funds:** The under utilization in Service Delivery expenditures is related to the following items: Late arrival of allocations letters for CASP funds targeted for Comprehensive Substance Abuse Treatment programs which limited full implementation and utilization; Delayed opening of Area Crisis Center and late implementation of other programs related to the Legislative Pilot to Reduce Hospital Usage; The balance of Mental Health Trust Funds allocated for FY2008 and FY2009 to be carried over into next fiscal year and settled June 30, 2009.

**Expenditures:**

Note: Western Highlands is in the process of closing the fiscal year. This report is based on unaudited figures. If there are changes, additional reconciliations or adjustments, we will identify and reflect the changes on the first quarter report for SFY 2009.