

Department of Mental Health

OVERVIEW

The Department of Mental Health (DMH) is a cabinet level agency that is responsible for ensuring that quality mental health services are available in all communities in Ohio. The Department employs approximately 3,140 personnel. In the last ten years since the passage of the Mental Health Act of 1988, Ohio has successfully transitioned to a state-managed, locally-administered mental health system.

The Department works with local mental health boards to ensure the provision of mental health services. There are 50 single-county or multi-county mental health boards covering all 88 counties in Ohio. The boards are responsible for planning, funding, monitoring, and evaluating the service delivery system within their geographic areas. The community mental health boards contract with local service providers to deliver mental health services in the community.

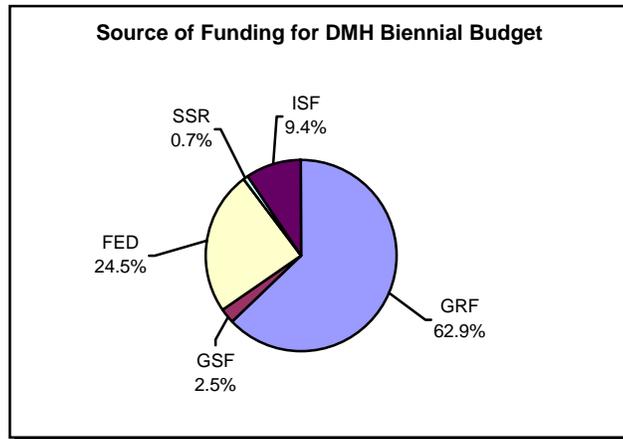
The Mental Health Act of 1988 created a paradigm shift in how public mental health services are funded, planned, and provided. It also changed the nature of the relationships between the Department, its state-operated hospitals, community mental health boards, and community service providers. Since the enactment of the Mental Health Act of 1988 several state hospitals have closed. For the hospital system as a whole, inpatient utilization was reduced from 3,000 in FY 1989 to 1,300 in FY 1997, a 67 percent reduction. Today, inpatient utilization is just under 1,200. As the hospital population has decreased, so has the number of DMH personnel.

Executive Recommendations

The Department currently has a total all funds annual budget of about \$806.6 million. The Executive has recommended a 1.1 percent increase in FY 2002 over FY 2001 estimated expenditures and a 0.8 percent increase in FY 2003 over FY 2002 recommended appropriation levels. During the biennium, the Department's recommended appropriations equal approximately \$1.6 billion. In FY 2002, appropriations for the Department are approximately \$815.6 million. In FY 2003, this figure increases to \$822.2 million. General Revenue Fund appropriations represent 62.9 percent of the total agency budget. The GRF portion of the Department's budget increases by 0.4 percent in FY 2002 (over FY 2001 estimated spending levels) and decreases by 0.3 percent in FY 2003 (over FY 2002 appropriations).

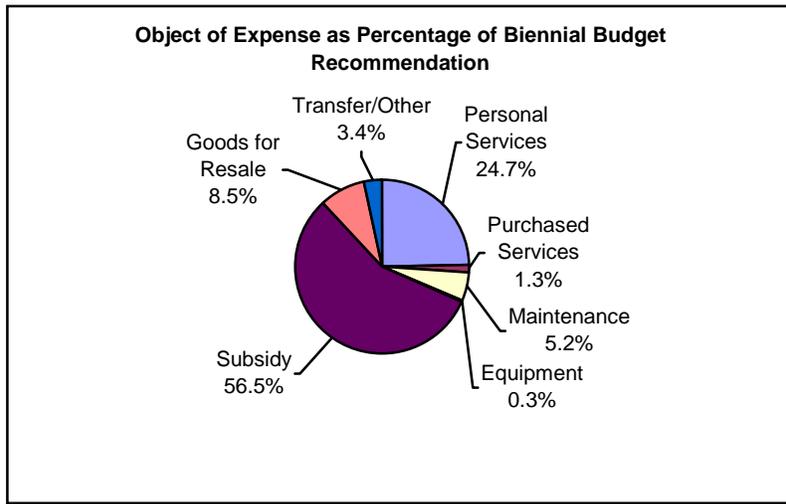
Appropriations by Fund Group

The following chart illustrates the various funding sources of the Department of Mental Health’s biennial budget, as recommended by the Executive.



Appropriations by Object of Expense

Over 56 percent of the Department’s recommended \$1,637,796,000 biennial budget is designated for subsidies. Recommended subsidy levels in FY 2002 total approximately \$458.1 million, a decrease by 1.1 percent over FY 2001 estimated spending levels. A FY 2003 increase of 1.8 percent will bring this object of expense to approximately \$466.2 million. Operating expenses for the agency account for 31.5 percent of the recommended biennial budget. In FY 2002, approximately \$260 million will be spent in this area. This decreases by about 1.1 percent in FY 2003 to approximately \$257.1 million.



ADDITIONAL FACTS AND FIGURES

Department of Mental Health Staffing Levels (FTE's)						
Division	1996	1997	1998	1999	2000	2001*
State Hospital	3,983.6	3,383.1	3,067.8	2,938.4	2,810.3	2,818.9
Central Office	220.4	219.9	239.9	241.2	241.5	238.5
Psychiatric Services	69.2	21.2	0.0	0.0	0	0
Office of Support Services	111.5	111.2	106.9	108.1	86.2	82.8
Totals	4,384.7	3,735.4	3,414.6	3,287.7	3,138.0	3,140.2

*Through December 2000

The table above reflects the number of full-time equivalents (FTE's) employed at of the end of the first pay period of each fiscal year from 1996 to 2000; FY 2001 FTE's reflects an average through December 2000. Overall, the number of DMH personnel has dropped precipitously as the agency continued to downsize and close state psychiatric hospitals during this period. However, several other specific events can be identified that affected the figures in the table. For example, at the beginning of FY 1996, most of the psychiatric services staff were transferred to the Department of Rehabilitation and Correction (DRC) when that agency assumed responsibility for the provision of mental health services in state prisons. The remainder of the psychiatric services staff were merged with central office at the beginning of FY 1998.

Another example of a specific event that affected the staffing levels at DMH during this time period would be the transfer of Oakwood Psychiatric Hospital to DRC at the beginning of FY 1997 (a drop of 158.5 FTE's at DMH during one pay period).

Two other events that occurred at the beginning of FY 1999 are worth noting. First, hospital staff dropped by 16.9 FTE's in one pay period as DMH out-sourced dietary services at one of its Behavioral Health Care Organizations (a new term for state psychiatric hospitals after the statewide system was re-organized). Second, DMH experienced a decrease of 22.4 FTE's at its Office of Support Services when the laboratory and many of the personnel who staffed it were transferred to DRC in December 1998 (FY 1999).

In FY 2000 the Department experienced a slight reduction in staff levels. This is not attributable to a specific event other than the normal hospital downsizing that has occurred over the years. However, relative to previous years, this downsize was small downsize.

FY 2002 and FY 2003 staffing levels are not included in the table. The Department will be working with community mental health boards to develop a plan to determine what areas of the mental health system will absorb the impact of the budget action. If the cuts were made to hospitals, roughly 200 positions would have to be eliminated in order to balance the Department's budget. At this point in time, FY 2002 and 2003 staffing levels are yet to be determined.

ANALYSIS OF EXECUTIVE PROPOSAL

COMMUNITY AND HOSPITAL SERVICES

Program Series 1

Purpose Provides for the stabilization and treatment of acutely mentally ill adults including transition back to their local communities for treatment. Ensures the availability of quality community mental health treatment programs.

The following table shows the line items that are used to fund this program series, as well as the Governor’s recommended funding levels.

Fund	ALI	Title	FY 2002*	FY 2003*
GRF	334-408	Community and Hospital Mental Health Services	\$356,469,000	\$352,720,000
GRF	335-419	Community Medication Subsidy	\$7,682,000	\$7,702,000
GRF	335-502	Community Mental Health Programs	\$38,167,000	\$38,167,000
GRF	335-508	Services for Severe Mentally Disabled	\$60,405,000	\$60,905,000
Total GRF			\$462,723,000	\$459,494,000
149	334-609	Hospital Rotary-Operating Expenses	\$10,451,000	\$10,451,000
150	334-620	Special Education	\$153,000	\$153,000
4N8	335-606	Family Stability Incentive	\$7,461,000	\$7,647,000
3A7	335-612	Social Services Block Grant	\$9,314,000	\$9,314,000
3A8	334-613	Federal Letter of Credit	\$9,000	\$ 0
3A8	335-613	Federal Grant-Community MH Board Subsidy	\$960,000	\$960,000
3A9	335-614	Mental Health Block Grant	\$12,755,000	\$12,738,000
3B0	334-617	Elementary & Secondary Education Act	\$203,000	\$214,000
3B1	335-635	Community Medicaid Expansion	\$157,480,000	\$165,355,000
324	334-605	Medicaid/Medicare	\$8,792,000	\$9,044,000
4X5	333-607	Behavioral Health Medicaid Services	\$2,759,000	\$2,828,000
485	334-632	Mental Health Operating	\$1,991,000	\$1,990,000
5L2	334-619	Health Foundation/Greater Cincinnati	\$132,000	\$95,000
632	335-616	Community Capital Replacement	\$250,000	\$250,000
692	334-636	Community Mental Health Board Risk Fund	\$361,000	\$370,000
Total Non-GRF			\$213,071,000	\$221,409,000
Total funding: Community and Hospital Services			\$675,794,000	\$680,903,000

* amounts rounded to the nearest thousand

Specific programs within the Community and Hospital Services program series that this analysis will focus on include:

- **STATE OPERATED HOSPITAL SERVICES**
- **COMMUNITY SERVICES PROVIDED BY LOCAL AGENCIES**
- **COMMUNITY SERVICES PROVIDED BY STATE EMPLOYEES**

STATE OPERATED HOSPITAL SERVICES

Program Description: DMH has consolidated and closed many of its state psychiatric hospitals. It currently operates five Behavioral Health Care Organizations or BHCO's (formerly known as state psychiatric hospitals) at nine inpatient sites located throughout the state. They are as follows:

Appalachian Psychiatric Healthcare System

- Athens Campus
- Cambridge Campus

Massillon Psychiatric Center

Northcoast Behavioral Healthcare System

- Cleveland Campus (formerly Cleveland Psychiatric Institute)
- Northfield Campus (formerly Western Reserve Psychiatric Hospital)
- West Campus (formerly Northwest Psychiatric Hospital in Toledo)

Pauline Warfield Lewis Center

Twin Valley Psychiatric System

- Columbus Campus (formerly Central Ohio Psychiatric Hospital (COPH))
- Dayton Campus (formerly Dayton Mental Health Center)

The role of these state facilities in Ohio's mental health care system has changed dramatically over the last two decades. Previously, state-operated psychiatric hospitals provided mostly long-term care for individuals with severe mental illness. Now, they provide services of varying duration to three distinct populations.

First, they provide short-term hospitalization for individuals who are experiencing an acute psychiatric episode. These individuals are usually stabilized in the hospital and then discharged to the community for care in less than 30 days.

Second, state hospitals provide services to individuals committed in forensic status by the judicial system. This includes forensic patients who receive care in maximum-security facilities at Twin Valley Psychiatric System – both Columbus and Dayton campuses. Forensic patients currently account for approximately 50 percent of the state psychiatric hospital population.

Third, state hospitals provide services to a very small number of individuals who require long-term care in a hospital setting, because appropriate community placements that meet their particular needs are not yet available.

The average daily resident population in state hospitals is just under 1,200. State psychiatric hospitals serve a total of over 6,000 individuals a year.

After several years of litigation, the department and community mental health boards reached an agreement regarding the funding of the state's public mental health system, and the role the Department and the boards play in that system. The agreement, known as the "408 Settlement", created collaboration between community mental health boards and state-operated BHCO's (state hospitals). Under this agreement, seven collaboratives were organized around the nine BHCO sites, and they work together to develop hospital

utilization plans. This collaborative process has become fully operational and the aims of the settlement agreement are being met. The settlement agreement ends June 30, 2001. Through the community mental health plan, known as the “Mutual Systems Performance Agreement”, the Department and the boards are working together to come up with a new funding approach for succeeding years.

Funding Source: GRF and federal

Line Items: GRF 334-408, Community Mental Health and Hospital Services; GRF 334-409, Volunteer Recruitment; Fund 3A6 334-608, Federal Miscellaneous; Fund 149 334-609, Central Office Rotary-Operating; Fund 3BO 334-617, Elementary/Secondary Education Act; Fund 150 334-620, Special Education; Fund 324 334-605, Medicaid/Medicare; Fund 485 334-632, Mental Health Operating.

Implication of the Executive Recommendation: The Executive recommended a 2.1 percent increase in FY 2002 and a 1.1 percent decrease in FY 2003 for line item 334-408. This line item provides funding for community and hospital services. The recommended level of funding would require cuts in mental health services and operations, especially in FY 2003, in either the community or at hospitals.

The Dayton Daily News published an article on February 28th, 2001 reporting that the Department of Mental Health plans to close the maximum-security unit at the Twin Valley Psychiatric System – Dayton Campus to help lower costs in light of budget cuts. The article reported this unit closure involves eliminating 50 jobs and transferring dozens of patients to the Columbus campus. According to the Department, because of the appropriation increase in GRF line item 334-408, plus the savings that will occur due to the consolidation of the hospital maximum-security forensic services in Dayton and Columbus to the Columbus Campus, hospital services are expected to stay relatively constant in FY 2002.

For 2003, the essentially flat funding across all subsidy lines and the cut in GRF line item 334-408, in combination with rising costs due to pay raises and other factors, will result in a decrease in services. Currently, the Department, in collaboration with community mental health boards, is working on a plan to determine what areas of the mental health system will absorb the impact of the budget action. If the cuts were made to hospitals, roughly 200 positions would have to be eliminated in order to balance the Department’s budget. This would require the closure of 1 to 3 campuses, depending on which facilities are targeted.

COMMUNITY SERVICES PROVIDED BY LOCAL AGENCIES

Program Description: The Department is responsible for the oversight of behavioral healthcare services managed locally by 50 community Alcohol, Drug Addiction and Mental Health Services (ADAMH) boards that are directly responsible for the local planning and funding of these services. The local system of care’s primary role is to provide acute care services for person who do not have the financial ability to purchase private care. Community mental health boards contract with community agencies to provide services such as individual and group counseling, residential treatment, crisis intervention, case management, and employment assistance to persons with severe and persistent mental illness. Over 400 community agencies provide mental health services to more than 178,000 adults and 72,000 youth each year. More than 54,000 of the adults are certified as severely mentally disabled (SMD) and over 30,000 of the youth are considered to have a serious emotional disturbance (SED).

Funding Source: GRF subsidies, federal Medicaid reimbursement, federal grants, and IMD Medicaid reimbursement

Line Items: GRF 334-408, Community Mental Health and Hospital Services; GRF 335-508, Services for Severely Mentally Disabled; GRF 335-419, Community Medication Subsidy; GRF 335-502, Community Mental Health Programs; Fund 3B1 335-635, Community Medicaid Expansion; Fund 3A7 335-612, Social Services Block Grant; Fund 3A8 335-613, Federal Grant–Community Mental Health Subsidy; Fund 3A9 335-614, Mental Health Block Grant; Fund 4X5 333-607, Behavioral Health Medicaid Services.

Implication of the Executive Recommendation:

The Executive recommended relatively flat funding for two major department line items: 334-408 received a 2.1 percent increase in FY 2003 and a 1.1 percent decrease in FY 2002; and 335-508 received flat funding in FY 2002 and a 0.8 percent increase in FY 2003. These line items contain sources of the funding for community services provided by local agencies. The recommended level of funding would require cuts in mental health services and operations, especially in FY 2003, in either the community or at hospitals. As a result, other local initiatives may be deferred to minimize costs. The Department will be working with community mental health boards to determine what areas of the mental health system will absorb the impact of the budget action.

The Executive also recommended a 0.3 percent decrease in community medication subsidy funding (line item 335-419) in FY 2002 and a 0.3 percent increase in FY 2003. This line item assists community mental health boards with the purchase of psychotropic medication for indigent persons. However, the appropriation levels do not fund all the medication costs for indigent persons, and the community mental health boards generally pick up the remaining costs. Given the relatively flat funding over the biennium for the medication subsidy and the increase in demand for new, more effective, but more expensive, psychotropic medications in the community, boards could experience an increase in expenditures.

COMMUNITY SERVICES PROVIDED BY STATE EMPLOYEES

Program Description: The Community Support Network (CSN) Program, formerly known as State Operated Services (SOS), re-deploys state hospital staff in the community, at the request of local community mental health boards, to fill gaps in community service systems as well as to provide expertise regarding the treatment of individuals who are at substantial risk for hospitalization. There are approximately 600 state employees currently performing this function. Local community health boards must pay the state for CSN services that they request. (Boards can choose to pay for CSN services with state subsidies that they are to receive.)

Currently, 83 CSN programs exist statewide, which provide a variety of services to both adult and juvenile client populations. Services are delivered through a diversity of treatment teams including forensic, residential, substance abuse, and community teams. Approximately 5,000-6,000 persons annually receive CSN services.

Funding Source: GRF, federal Medicaid and Medicare reimbursement

Line Items: GRF 334-408, Community Mental Health and Hospital Services; Fund 324 334-605, Medicaid/Medicare.

Implication of the Executive Recommendation: The Executive recommended a 2.1 percent increase in FY 2002 and a 1.1 percent decrease in FY 2003 for line item 334-408. This line item provides funding for community and hospital services. Community mental health boards, at their request, purchase CSN services to fill gaps in community service treatment systems. The recommend level of funding would require program cuts, especially in FY 2003, in either the community or at hospitals, or both. Like other Department services, levels of CSN service are not set by the Department, but are determined based on local board decisions. The Department expects the constraints on local funding will lead to termination of some CSN programs, resulting in employee reductions in both FY 2002 and FY 2003.

FORENSIC SERVICES

Program Series 2

Purpose To fund regional community forensic psychiatric centers to provide competency, sanity, and second opinion evaluations for common pleas courts. To support mental health services linkages for individuals entering and leaving jails and prisons. To develop and implement a uniform tracking and monitoring program for forensic mental health patients who are to be conditionally released.

The following table shows the line items that are used to fund this program series, as well as the Governor’s recommended funding levels.

Fund	ALI	Title	FY 2002*	FY 2003*
GRF	332-401	Forensic Services	\$4,260,000	\$4,339,000
Total funding: FORENSIC SERVICES PROGRAM SERIES			\$4,260,000	\$4,339,000

* amounts rounded to the nearest thousand

FORENSIC SERVICES

Program Description: The department and the community mental health boards work with local jails, state prisons, law enforcement agencies, community mental health and substance abuse treatment provider organizations, and courts to provide continuity of care for persons entering and leaving local jails and state prisons who need mental health and substance abuse treatment. DMH and community mental health boards also coordinate with state hospitals, community psychiatric evaluation centers, other community mental health boards, and local providers to develop and implement programs, policies, and procedures for community-based systems of forensic care.

Twelve state-funded regional community psychiatric centers provide sanity and competency evaluation services for municipal courts, juvenile courts, and courts of common pleas. They provide evaluations in many settings including jails, hospitals, and in the community. It should be noted that two regional community psychiatric centers, one in Cuyahoga County and the other in Lake County, receive no state funding under the Forensic Services Program as these counties started their centers on their own.

Funding Source: GRF

Line Items: GRF 332-401, Forensic Services

Implication of the Executive Recommendation: The Executive recommended a 3.1 percent decrease (\$136,000) in FY 2002 and a 1.9 percent increase (\$79,000) in FY 2003 for the Forensic Services program. According to the Department, these funding changes will not affect the level of community based forensic services provided. However, due to the level of funding and the rising costs in the community, there will be some reprioritizing of services that may end up affecting community forensic service levels.

OFFICE OF SUPPORT SERVICES

Program Series 3

Purpose To provide ancillary services to state facilities, as well as community agencies.

The following table shows the line items that are used to fund this program series, as well as the Governor’s recommended funding levels.

Fund	ALI	Title	FY 2002*	FY 2003*
151	235-601	General Administration	\$76,095,000	\$78,182,000
5M2	333-602	PWLC Campus Improvement	\$1,000,000	\$ 0
Total funding: LABORATORY AND PHARMACY SERVICES			\$77,095,000	\$78,182,000

* amounts rounded to the nearest thousand

LABORATORY AND PHARMACY SERVICES

Program Description: The Office of Support Services (OSS) provides wholesale food, processed food, and pharmacy services to 15 state agencies and 90 community mental health clinics. By buying in volume, with a customer base in excess of 50,000, OSS is generally able to purchase and sell its services below the current market rate. Program operations are totally self-supporting and are funded out of a rotary account (line item 235-601).

In FY 1999, laboratory services were consolidated with, and relocated to the Department of Rehabilitation and Correction. More than 22 FTE’s were transferred to DRC as part of this re-organization.

Funding Source: sale of goods and services to other state and community agencies; payment from City of Cincinnati as part of a memorandum of agreement between the City, the United States Postal Service, and the Department

Line Items: Fund 151 235-601, General Administration; Fund 5M2 333-602, PWLC Campus Improvement

Implication of the Executive Recommendation: The Executive recommendations match the Department’s funding request for the Office of Support Services.

The Controlling Board established line item 333-602 on October 4, 2000. The \$1.0 million appropriated comes from City of Cincinnati as part of a memorandum of agreement between the City, the United States Postal Service, and the Department. These funds will be used to pay architect design and administration fees and will allow the Department to accelerate the campus improvement/consolidation project at the Pauline Warfield Lewis Center, which will in turn free up approximately 50 acres upon which the U.S. Postal Service will construct a new regional distribution facility. This will maintain approximately 2,300 jobs within the City of Cincinnati.

PROGRAM SUPPORT

Program Series 4

Purpose Provides targeted technical assistance, program development, and clinical expertise in state hospital and community settings.

The following table shows the line items that are used to fund this program series, as well as the Governor’s recommended funding levels.

Fund	ALI	Title	FY 2002*	FY 2003*
GRF	333-100	Personal Services – Central Administration	\$17,024,000	\$16,807,000
GRF	333-200	Maintenance-Central Administration	\$2,276,000	\$2,319,000
GRF	333-300	Equipment-Central Administration	\$491,000	\$500,000
GRF	333-402	Resident Trainees	\$1,473,000	\$1,500,000
GRF	333-403	Pre-Administration Screening Expenses	\$638,000	\$650,000
GRF	333-416	Research Program Evaluation	\$956,000	\$972,000
GRF	334-506	Court Costs	\$959,000	\$977,000
Total GRF			\$23,817,000	\$23,725,000
149	333-609	Central Office Rotary-Operation	\$2,014,000	\$2,038,000
3A7	333-612	Social Services Block Grant	\$25,000	\$25,000
3A8	333-613	Federal Grant-Administration	\$87,000	\$58,000
3A9	333-614	Mental Health Block Grant	\$642,000	\$642,000
3B1	333-635	Community Medicaid Expansion	\$6,550,000	\$5,550,000
324	333-605	Medicaid/Medicare	\$379,000	\$375,000
485	333-632	Mental Health Operating	\$131,000	\$134,000
Total Non-GRF			\$9,828,000	\$8,822,000
Total funding: PROGRAM SUPPORT			33,645,000	32,547,000

*amounts rounded to the nearest thousand

■ **CENTRAL ADMINISTRATION**

This analysis will not address the following: Children’s Services and Prevention; Consumer Services; Mental Health Policy, Research, and Community System Development; Office of Forensic Services; Licensure and Certification; Subsidy for Court Commitment Hearings, Medical Director and Quality Assurance; and Liaisons to Local Systems. Recommended funding over the biennium for each of these programs is less than FY 2001 estimated expenditures and may affect continuation levels of activity.

CENTRAL ADMINISTRATION

Program Description: The Administration, comprised of the Central Office, is responsible for the total operation of the Department, including establishing the overall mission and direction, coordination, monitoring, and policy formulation related to ensuring the development of a comprehensive, statewide mental health services system. The system consists of 50 Boards, 5 Behavioral healthcare organizations (BHO), the Department’s Community Support Networks (CSN) and over 400 community contract agencies. This program has central office staff that provide technical assistance and support to all the components of the mental health system.

Funding Source: GRF, federal grants, and revenues from the sale of goods and services

Line Items: GRF 333-100, Personal Services; GRF 333-200, Maintenance; GRF 333-300, Equipment; Fund 149 333-609, Central Office Rotary–Operating; Fund 3A8 333-613, Federal Grant-Administration; Fund 3A9 333-614, Mental Health Block Grant.

Implication of the Executive Recommendation: The Executive recommended a 0.9 percent increase in FY 2002 and a 3.3 percent decrease in FY 2003 for Program Support. This level of funding is less than the cost of continuation, especially in FY 2003, as pay raises will increase the Department’s expenditures.

DEBT SERVICE PAYMENTS

Program Series 5

Purpose To cover debt service payments on bonds issued for long-term capital construction projects.

The following table shows the line items that are used to fund this program series, as well as the Governor’s recommended funding levels.

Fund	ALI	Title	FY 2002*	FY 2003*
GRF	333-415	Rental Payments OPFC	\$24,755,000	\$26,275,000
Total funding: DEBT SERVICE PAYMENTS PROGRAM SERIES			\$24,755,000	\$26,275,000

* amounts rounded to the nearest thousand

DEBT SERVICE PAYMENTS

Program Description: This program covers debt service payments on bonds issued for long-term capital construction projects.

Funding Source: GRF

Line Items: GRF 333-415, Rental Payments OPFC

Implication of Recommendation: The Executive has recommended continuation funding for debt service.

Temporary Law: Sets an aggregate limit of \$58.6 million that DMH may pay to the Ohio Public Facilities Commission from line item 333-415, Rental Payments OPFC, pursuant to leases and agreements made under section 154.20 of the Revised Code.

PERMANENT AND TEMPORARY LAW

This section describes permanent and temporary law provisions contained in the executive budget that will affect the department's activities and spending decisions during the next biennium.

Permanent Law Provisions

Oversight of DRC Mental Health Services (section 5119.06 of the Revised Code)

The bill eliminates the Department's oversight and audit duties regarding Department of Rehabilitation and Correction (DRC) mental health programs.

Certification of Mental Health Facilities (sections 3923.30, 3923.28 and 5119.01 of the Revised Code)

The bill eliminates certain responsibilities for the certification of mental health facilities held by the Department, and provides certain accrediting organizations with the authority to approve the outpatient mental health facilities formerly certified by the Department. It also requires the Department to reduce the certification requirements it has established through the adoption of rules. It specifies that the purpose of the reduction in requirements is to increase the cost-effectiveness of community mental health services. The reduction must occur not later than 90 days after the bill's effective date.

Temporary Law Provisions

New Line Items (Section 72)

Fund	Line item	Name
5M2	335-602	PWLC Campus Improvement
632	335-616	Community Capital Replacement
5LW	334-619	Health Foundation/Greater Cincinnati
3A8	334-613	Federal Letter of Credit
3A6	335-608	Federal Miscellaneous

Forensic Services (Section 72)

Temporary law restricts how funds in GRF line item 322-401, Forensic Services, may be used as follows:

- To provide psychiatric services to courts of common pleas;
- Funds to be allocated through community mental health boards to certified community agencies in accordance with administrative rule to be used for forensic training to community mental health boards and to forensic psychiatric residency programs in state psychiatric hospitals and to provide psychiatric evaluations of patients of forensic status in DMH facilities prior to conditional release to the community;
- To support projects involving mental health, substance abuse, courts, and law enforcement to identify and develop appropriate alternative services to institutionalization for non-violent

mentally ill offenders, and to provide linkages to community services for severely mental disabled offenders released from Department of Rehabilitation and Correction institutions;

To provide forensic monitoring and tracking in addition to community programs serving persons of forensic status on conditional release or probation.

Residency Traineeship Programs (Section 72)

Temporary law requires that the appropriation for line item 333-402, Resident Trainees, be used to fund training agreements entered into by DMH for the development of curricula and the provision of training programs to support public mental health services.

Pre-Admission Screening Expenses (Section 72)

Temporary law requires that line item 333-403, Pre-Admission Screening Expenses, be used to ensure that uniform methods for pre-admission screening for persons in need of mental health services be in place statewide.

Rental Payments to the Ohio Public Facilities Commission (Section 72)

Sets an aggregate limit of \$51.0 million that DMH may pay to the Ohio Public Facilities Commission from line item 333-415, Rental Payments OPFC, pursuant to leases and agreements made under section 154.20 of the Revised Code.

Community Medication Subsidy (Section 72.02)

Requires that appropriations in line item 335-419 must be used to provide subsidized support for psychotropic medication needs of indigent citizens in the community to reduce unnecessary hospitalization because of lack of medication. It also may be used to provide subsidized support for methadone costs.

General Community Mental Health Programs (Section 72.02)

Requires that appropriations in line item 335-502 must be distributed on a per capita basis to community mental health boards. The purpose of the appropriation is to provide subsidy for general mental health services.

Mental Health Services for Severely Mentally Disabled Persons (Section 72.02)

Requires that appropriations in line item 335-508 must be used to serve the severely mentally disabled population. Temporary law sets aside \$2.7 million in each fiscal year to be transferred from the GRF (335-508) to Fund 4N8, Family Stability Incentive.

Mental Health Services to Juvenile Offenders Project (Section 72.02)

This new temporary language gives the Department authority to continue to receive cash transfers from partnering agencies (DYS, CJS, and JFS) to fund current and any future projects, established in this biennium, related to effective treatment for juvenile offenders.

Behavioral Health Medicaid Services (Section of 72.02)

Temporary law requires DMH to administer the IMD Medicaid program as delegated by the Department of Human Services, and to use funds in line item 333-607, Behavioral Health Medicaid Services, to make payments for free-standing psychiatric hospital inpatient services.

REQUESTS NOT FUNDED

The Department requested total funding of \$872,426,061 in FY 2002 and \$929,593,908 in FY 2003; the Executive recommended \$815,549,091 and \$822,246,597, respectively. The Executive recommendations are below the Department's requested level of funding by \$56,876,970 in FY 2002 and \$107,347,311 in FY 2003.

The Executive partially funded the following requested items.

- The Department requested \$49,603,379 in FY 2002 and \$44,573,127 in FY 2003 to partially restore funding for Integrated Behavioral Healthcare Systems (IBHS). The requested increase is to fund the hospital systems budget to 100 percent plus inflation. The Executive recommended \$33,872,383 in FY 2002, \$15,730,996 below the requested level of funding, and \$12,807,201 in FY 2003, \$31,765,926 below the requested level of funding.
- The Department requested \$2,849,625 in FY 2002 and \$2,998,763 in FY 2003 to restore the Central Office budget to 100 percent of continuation for payroll, maintenance, equipment and information technology expenses. The Executive recommended \$1,264,279 in FY 2002 and \$415,481 in FY 2003.
- The Department requested \$359,307 in FY 2002 and \$368,290 in FY 2003 to partially restore the Forensic Services budget to the FY 2001 level. The executive recommended \$127,478 in FY 2002 and \$103,522 in FY 2003.
- The Department requested \$2,928,434 in FY 2002 and \$2,996,823 in FY 2003 to increase the capabilities of Central Office to utilize E-Government technology and to improve the efficiency to several programs through automation of forms, processes, and reporting. The Executive recommended \$1.0 million in both FY 2002 and FY 2003.

The Executive did not fund the following requested items.

- The Department requested \$4,947,543 in FY 2002 and \$11,990,455 in FY 2003 to support 6 Program of Assertive Community Treatment (PACT) projects, three in urban areas and three in rural areas.
- The Department requested \$2,545,000 in FY 2002 and \$5,108,625 in FY 2003 to add two new projects for partnership with alternative education programs in each year of the biennium.
- The Department requested \$1,500,000 in FY 2002 and \$4,537,500 in FY 2003 to provide initial funding for an employment program that would address the specific needs of the mentally disabled to gain employment.
- The Department requested \$3,074,000 in FY 2002 and \$3,081,365 in FY 2003 to increase IBHS capability to utilize E-Government technology and to improve efficiency by automating several functions including clinical decision-making. According to the Department, these improvements are needed to meet JCAHO accreditation standards & specifications in the Department's Information Technology plan.

- The Department requested \$2,729,747 in FY 2002 and \$8,785,690 in FY 2003 to assist local mental health systems in building capacity to better identify people in the workforce who are having mental health problems and to assist in linking them to appropriate services.
- The Department requested \$500,000 in FY 2002 and \$512,500 in FY 2003 to support training for schools and providers on depression awareness and treatment.
- The Department requested \$1,896,423 in FY 2002 and \$3,779,729 in FY 2003 to purchase psychotropic medications and provide cost-effective care for indigent clients in the community mental health system.
- The Department requested \$2,000,000 in FY 2002 and \$5,040,000 in FY 2003 to develop community forensic programs and provide mental health diversion alternative services. The goal of such programs is to decrease inappropriate incarceration of mentally ill offenders in local jails, reduce recidivism, and increase public safety.
- The Department requested \$3,907,854 in FY 2002 and \$1,624,870 in FY 2003 to improve Medicare and other third-party billing systems.
- The Department requested \$2,500,000 in FY 2002 and \$5,562,500 in FY 2003 to provide funding for increases in Community Mental Health Medicaid state match obligation in order to avoid further local disruption in service delivery.
- The Department requested \$4,765,236 in FY 2002 and \$5,376,580 in FY 2003 to implement the new Health Insurance Portability and Accountability Act (HIPAA) regulations.
- The Department requested \$1,475,000 in FY 2002 and \$5,011,875 in FY 2003 to provide funds to the mental health boards for training and professional development.
- The Department requested \$1,625,000 in FY 2002 and \$2,665,625 in FY 2003 to implement effective treatment programs for juvenile offenders with serious emotional disturbances and to address the behavioral healthcare needs of juvenile offenders.
- The Department requested \$500,000 in FY 2002 and \$1,512,500 in FY 2003 to develop a two-year pilot project designed to meet the behavioral health care needs of juvenile offenders in rural Ohio.
- The Department requested \$1,000,000 in FY 2002 and \$2,525,000 in FY 2003 to expand early childhood mental health initiatives.
- The Department requested \$1,875,000 in FY 2002 and \$1,921,875 in FY 2003 to expand early childhood mental health initiatives for young children not covered by Medicaid or private insurance.

LSC Budget Spreadsheet by Line Item, FY 2002 - FY 2003

Fund	ALI	ALI Title	2000	Estimated 2001	Executive 2002	% Change 2001 to 2002	Executive 2003	% Change 2002 to 2003
DMH Mental Health, Department of								
GRF	332-401	Forensic Services	\$ 4,156,383	\$4,395,782	\$ 4,259,513	-3.1%	\$ 4,338,858	1.9%
GRF	333-100	Personal Services-Central Administration	\$ 18,141,793	\$17,027,859	\$ 17,024,323	0.0%	\$ 16,807,353	-1.3%
GRF	333-200	Maintenance-Central Administration	\$ 2,359,408	\$2,348,974	\$ 2,276,155	-3.1%	\$ 2,318,555	1.9%
GRF	333-300	Equipment-Central Administration	\$ 703,232	\$506,598	\$ 490,894	-3.1%	\$ 500,038	1.9%
GRF	333-402	Resident Trainees	\$ 1,365,663	\$1,519,977	\$ 1,472,858	-3.1%	\$ 1,500,294	1.9%
GRF	333-403	Pre-Admission Screening Expenses	\$ 645,750	\$658,665	\$ 638,246	-3.1%	\$ 650,135	1.9%
GRF	333-415	Lease Rental Payments	\$ 29,399,997	\$28,600,000	\$ 24,754,900	-13.4%	\$ 26,275,300	6.1%
GRF	333-416	Research Program Evaluation	\$ 926,270	\$984,933	\$ 956,224	-2.9%	\$ 972,178	1.7%
GRF	333-701	Cambridge Environment Improvement	---	\$1,000,000	\$ 0	-100.0%	\$ 0	N/A
GRF	334-408	Community & Hospital Mental Health Services	\$ 343,537,836	\$349,242,440	\$ 356,469,071	2.1%	\$ 352,719,838	-1.1%
GRF	334-506	Court Costs	\$ 1,010,915	\$989,465	\$ 958,791	-3.1%	\$ 976,652	1.9%
GRF	335-419	Community Medication Subsidy	\$ 7,181,673	\$7,701,549	\$ 7,682,295	-0.3%	\$ 7,701,549	0.3%
GRF	335-502	Community Mental Health Programs	\$ 37,294,696	\$38,166,674	\$ 38,166,674	0.0%	\$ 38,166,674	0.0%
GRF	335-508	Services for Severely Mentally Disabled	\$ 58,549,469	\$60,405,135	\$ 60,405,135	0.0%	\$ 60,905,135	0.8%
General Revenue Fund Total			\$ 505,273,085	\$ 513,548,051	\$ 515,555,079	0.4%	\$ 513,832,559	-0.3%
149	333-609	Central Office Rotary-Operating	\$ 1,435,170	\$2,735,685	\$ 2,013,823	-26.4%	\$ 2,037,918	1.2%
149	334-609	Hospital Rotary-Operating Expenses	\$ 6,155,814	\$2,196,668	\$ 10,451,492	375.8%	\$ 10,451,492	0.0%
150	334-620	Special Education	\$ 170,832	\$105,250	\$ 152,500	44.9%	\$ 152,500	0.0%
4N8	335-606	Family Stability Incentive	\$ 4,934,599	\$7,300,000	\$ 7,460,600	2.2%	\$ 7,647,115	2.5%
General Services Fund Group Total			\$ 12,696,415	\$ 12,337,603	\$ 20,078,415	62.7%	\$ 20,289,025	1.0%
324	333-605	Medicaid/Medicare	\$ 605,651	\$700,846	\$ 379,009	-45.9%	\$ 375,219	-1.0%
324	334-605	Medicaid/Medicare	\$ 14,775,824	\$13,350,726	\$ 8,791,748	-34.1%	\$ 9,043,700	2.9%
3A6	333-608	Community & Hospital Services	---	\$928	\$ 0	-100.0%	\$ 0	N/A
3A6	335-608	Federal Miscellaneous	---	\$43,474	\$ 0	-100.0%	\$ 0	N/A
3A7	333-612	Social Services Block Grant	\$ 0	\$25,000	\$ 25,000	0.0%	\$ 25,000	0.0%
3A7	335-612	Social Services Block Grant	\$ 9,503,475	\$9,250,982	\$ 9,314,108	0.7%	\$ 9,314,108	0.0%
3A8	333-613	Federal Grant-Administration	\$ 7,190	\$202,760	\$ 87,000	-57.1%	\$ 58,000	-33.3%

LSC Budget Spreadsheet by Line Item, FY 2002 - FY 2003

Fund	ALI	ALI Title	2000	Estimated 2001	Executive 2002	% Change 2001 to 2002	Executive 2003	% Change 2002 to 2003
DMH Mental Health, Department of								
3A8	334-613	Federal Letter of Credit	\$ 30,100	\$34,684	\$ 9,000	-74.1%	\$ 0	-100.0%
3A8	335-613	Federal Grant-Community Mental Health Board Sub	\$ 339,272	\$1,308,406	\$ 960,000	-26.6%	\$ 960,000	0.0%
3A9	333-614	Mental Health Block Grant	\$ 521,177	\$1,044,212	\$ 642,264	-38.5%	\$ 642,264	0.0%
3A9	335-614	Mental Health Block Grant	\$ 15,852,228	\$16,128,136	\$ 12,754,654	-20.9%	\$ 12,737,654	-0.1%
3B0	334-617	Elementary & Secondary Education Act	\$ 166,653	\$189,215	\$ 202,774	7.2%	\$ 214,340	5.7%
3B1	333-635	Community Medicaid Expansion	\$ 2,148,709	\$4,465,264	\$ 6,550,000	46.7%	\$ 5,550,000	-15.3%
3B1	335-635	Community Medicaid Expansion	\$ 133,942,288	\$151,424,000	\$ 157,480,000	4.0%	\$ 165,355,000	5.0%
5L2	334-619	Health Foundation/Greater Cincinnati	\$ 1,392	\$251,600	\$ 131,600	-47.7%	\$ 94,869	-27.9%
Federal Special Revenue Fund Group Total			\$ 177,893,959	\$ 198,420,233	\$ 197,327,157	-0.6%	\$ 204,370,154	3.6%
485	333-632	Mental Health Operating	\$ 4,143	\$127,764	\$ 130,959	2.5%	\$ 134,233	2.5%
485	334-632	Mental Health Operating	\$ 1,663,798	\$2,651,013	\$ 1,991,448	-24.9%	\$ 1,989,912	-0.1%
4X5	333-607	Behavioral Health Medicaid Services	\$ 6,824,591	\$2,775,000	\$ 2,759,400	-0.6%	\$ 2,828,385	2.5%
5M2	333-602	PWLC Campus Improvement	---	\$1,500,000	\$ 1,000,000	-33.3%	\$ 0	-100.0%
632	335-616	Community Capital Replacement	---	\$500,000	\$ 250,000	-50.0%	\$ 250,000	0.0%
692	334-636	Community MH Board Risk Fund	\$ 0	\$598,163	\$ 361,323	-39.6%	\$ 370,356	2.5%
State Special Revenue Fund Group Total			\$ 8,492,532	\$ 8,151,940	\$ 6,493,130	-20.3%	\$ 5,572,886	-14.2%
151	235-601	General Administration	\$ 71,600,298	\$74,161,226	\$ 76,095,310	2.6%	\$ 78,181,973	2.7%
Intragovernmental Service Fund Group Total			\$ 71,600,298	\$ 74,161,226	\$ 76,095,310	2.6%	\$ 78,181,973	2.7%
Total All Budget Fund Groups			\$ 775,956,289	\$ 806,619,053	\$ 815,549,091	1.1%	\$ 822,246,597	0.8%

General Revenue Fund

GRF 332-401 Forensic Services

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$4,423,621	\$3,858,403	\$4,156,383	\$4,395,782	\$4,259,513	\$4,338,858
	-12.8%	7.7%	5.8%	-3.1%	1.9%

Source: GRF

Legal Basis: originally established by Am Sub. HB 117 of the 121st G.A.; replaced the former Personal Services, Maintenance, Equipment, and Volunteer Recruitment line items (332-100, -200, -300, and -409) under the Division of Psychiatric Services to Correctional Facilities, and former appropriation line item 332-503, Community Forensic Services

Purpose: The primary use of this line item was to fund inpatient services to prison inmates at the Oakwood Correctional Facility, consultation and oversight for psychiatric services provided by staff of the Department of Rehabilitation and Correction, and management of forensic services provided in the community and at facilities operated by the Department of Mental Health. Psychiatric services at the Oakwood Correctional Facility have been transferred to the Department of Rehabilitation and Correction.

A portion of this line item is allocated to the Alcohol, Drug Addiction and Mental Health Services/Community Mental Health Services (ADAMHS/CMH) Boards to provide psychiatric services to courts of common pleas. Funds may also be used to provide forensic training to ADAMHS/CMH Boards, evaluations of forensic status patients in facilities operated by the Department of Mental Health, and pilot projects to develop alternatives to institutionalization for non-violent mentally ill offenders or other services to mentally ill offenders on release or probation.

GRF 333-100 Personal Services-Central Administration

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$16,162,044	\$17,125,939	\$18,141,793	\$17,027,859	\$17,024,323	\$16,807,353
	6.0%	5.9%	-6.1%	0.0%	-1.3%

Source: GRF

Legal Basis: ORC Chapter 5119.

Purpose: This line item is used to pay personal service costs for administration of the Department.

GRF 333-200 Maintenance-Central Administration

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$1,939,788	\$1,802,904	\$2,359,408	\$2,348,974	\$2,276,155	\$2,318,555
	-7.1%	30.9%	-0.4%	-3.1%	1.9%

Source: GRF

Legal Basis: ORC Chapter 5119.

Purpose: This line item is used to pay maintenance costs of the Department.

GRF 333-300 Equipment-Central Administration

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$518,084	\$786,257	\$703,232	\$506,598	\$490,894	\$500,038
	51.8%	-10.6%	-28.0%	-3.1%	1.9%

Source: GRF

Legal Basis: ORC Chapter 5119.

Purpose: This line item is used to pay equipment costs for administration of the Department.

GRF 333-402 Resident Trainees

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$1,338,305	\$1,319,337	\$1,365,663	\$1,519,977	\$1,472,858	\$1,500,294
	-1.4%	3.5%	11.3%	-3.1%	1.9%

Source: GRF

Legal Basis: originally established by Am. Sub. H.B. 694 of the 114th General Assembly

Purpose: Funds psychiatry/psychology residencies and traineeship programs in psychology, nursing, and social work at state universities and teaching hospitals. Under division (A)2 of section 5119.06 and sections 5119.10 and 5119.11 of the Revised Code, the Department of Mental Health, in affiliation with institutions of higher education, must provide curricula development, training programs, and tuition reimbursement for mental health professionals.

GRF 333-403 Pre-Admission Screening Expenses

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$915,128	\$645,750	\$645,750	\$658,665	\$638,246	\$650,135
	-29.4%	0.0%	2.0%	-3.1%	1.9%

Source: GRF (receives 50 percent federal match in Medicaid dollars)

Legal Basis: originally established by Am. Sub. H.B. 117 of the 121st General Assembly

Purpose: Expenditures related to the development, administration, and delivery of screening assessments designed to help ensure that only those persons in need of institutional placements receive such services. These screenings will take place before a Medicaid-eligible person is admitted to a psychiatric hospital or nursing home, or may be done after a person has been placed in a facility to determine the appropriateness of continued placement. Moneys in this line item may also be used for discharge planning and referral, and adjudication of appeals and grievance procedures.

Previously the Department of Job and Family Services had been responsible for pre-admission screening for Medicaid-eligible persons admitted to psychiatric units in general hospitals. Medicaid coverage was not provided for persons receiving services in an Institution for the Mentally Disabled (IMD), such as a state operated psychiatric hospital or other free-standing psychiatric facility, but in July, 1995, Ohio was granted a waiver to allow coverage for Medicaid-eligible persons who are under 21 or over 65 years of age and are treated in an IMD. There are roughly 11,000 to 12,000 Medicaid-covered psychiatric admissions per year to the psychiatric units of general hospitals. An additional 1,000 Medicaid admissions per year are anticipated through the IMD waiver for persons under 22 or over 65.

GRF 333-409 Volunteer Recruitment

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$1,999	\$0	\$0	\$0	\$0	\$0
	-100.0%	N/A	N/A	N/A	N/A

Source: GRF

Legal Basis: originally established by Am. Sub. H.B. 191 of the 112th General Assembly

Purpose: To recruit, retain, and recognize volunteers in state mental health institutions. In the biennial appropriations acts through the 1984-1985 biennium, separate appropriations for this item appear under the three divisions: Administration and Statewide Programs, Hospitals, and Psychiatric Services to Correctional Facilities. In FY 1998, the appropriation authority was transferred to appropriation item 333-200, Maintenance - Central Administration. The line item was no longer used after FY 1998.

GRF 333-415 Lease Rental Payments

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$38,355,488	\$31,527,351	\$29,399,997	\$28,600,000	\$24,754,900	\$26,275,300
	-17.8%	-6.7%	-2.7%	-13.4%	6.1%

Source: GRF

Legal Basis: originally established by Am. Sub. H.B. 117 of the 121st General Assembly

Purpose: Funds debt service payments for long-term capital construction projects of the Department of Mental Health.

GRF 333-416 Research Program Evaluation

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$938,689	\$953,202	\$926,270	\$984,933	\$956,224	\$972,178
	1.5%	-2.8%	6.3%	-2.9%	1.7%

Source: GRF

Legal Basis: originally established by Am. Sub. H.B. 694 of the 114th General Assembly

Purpose: Funds departmental research projects.

GRF 333-701 Cambridge Environment Improvement

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$0	\$0	\$0	\$1,000,000	\$0	\$0
	N/A	N/A	N/A	-100.0%	N/A

Source: GRF

Legal Basis: originally established by Controlling Board on September 11, 2000

Purpose: The amount appropriated in this line item was used to cover one-time expenses associated with a clean-up project at the Summit Behavioral Healthcare Organization (formerly Pauline-Warfield Lewis Center).

GRF 334-408 Community & Hospital Mental Health Services

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$322,356,263	\$329,825,597	\$343,537,836	\$349,242,440	\$356,469,071	\$352,719,838
	2.3%	4.2%	1.7%	2.1%	-1.1%

Source: GRF

Legal Basis: originally established by Am. Sub. H.B. 111 of the 118th General Assembly

Purpose: Funds both hospital operating budgets and the services purchased by the community mental health boards. The 408 line item was created to reflect changes to the delivery of mental health services made in S.B. 156, the "Mental Health Act of 1988". These funds were distributed under section 5119.62 (B)(2) to hospitals and to boards which have an approved community mental health plan. However, beginning in FY 2000 all non-forensic funds in this line item will be distributed in accordance with the 408 settlement agreement.

GRF 334-409 Volunteer Recruitment-Hospitals

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$10,027	\$0	\$0	\$0	\$0	\$0
	-100.0%	N/A	N/A	N/A	N/A

Source: GRF

Legal Basis: originally established by Am. Sub. H.B. 191 of the 112th General Assembly

Purpose: To recruit, retain, and recognize volunteers in state mental health institutions. In the biennial appropriations acts through the 1984-1985 biennium, separate appropriations for this item appear under the three divisions: Administration and Statewide Programs, Hospitals, and Psychiatric Services to Correctional Facilities. In FY 1998, the appropriation authority was transferred to appropriation item 334-408, Community and Hospital Mental Health Services. The line item was no longer used after FY 1998.

GRF 334-506 Court Costs

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$943,011	\$992,683	\$1,010,915	\$989,465	\$958,791	\$976,652
	5.3%	1.8%	-2.1%	-3.1%	1.9%

Source: GRF

Legal Basis: ORC section 5122.43 (created to reimburse courts for expenses incurred in meeting the requirements of H.B. 244 of the 111th G.A., which revised institutional admission procedures for voluntary and involuntary commitments of the mentally ill)

Purpose: This line item is used to reimburse county probate courts for expenses associated with commitment proceedings for the noncriminal mentally ill pursuant to ORC section 5122.43. It also pays the attorneys' costs for indigent clients during commitment hearings. For many courts, however, it does not cover the costs of all commitment hearings.

GRF 335-419 Community Medication Subsidy

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$4,960,052	\$6,448,068	\$7,181,673	\$7,701,549	\$7,682,295	\$7,701,549
	30.0%	11.4%	7.2%	-0.3%	0.3%

Source: GRF

Legal Basis: established by Am. Sub. H.B. 171 of the 117th General Assembly (originally established by Am. Sub. H.B. 238 of the 116th General Assembly and funded through the former line item 335-200, Maintenance)

Purpose: Assists community mental health boards with the purchase of psychotropic medication for indigent persons. The goal is to reduce hospitalization that is caused by a lack of medication. The appropriation levels do not, however, fund all the medication costs for indigent persons, and the community mental health boards generally pick up the remaining costs.

GRF 335-502 Community Mental Health Programs

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$36,290,311	\$37,517,778	\$37,294,696	\$38,166,674	\$38,166,674	\$38,166,674
	3.4%	-0.6%	2.3%	0.0%	0.0%

Source: GRF

Legal Basis: ORC 5119.62

Purpose: Pays up to 75 percent of the operating expenses of the state's 50 community mental health boards. The boards contract with local public and private non-profit agencies to provide services to the mentally ill in their county or multi-county service areas. Subsidies are based on the ratio of the population of each service district to the population of the state.

The community board network was established by H.B. 648 of the 107th G.A. in 1967, and its responsibilities are codified in Chapter 340 of the Revised Code. Each county of 50,000 or more persons is authorized to establish a board to provide locally-based planning, evaluation, and coordination services.

GRF 335-508 Services for Severely Mentally Disabled

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$56,875,410	\$57,943,559	\$58,549,469	\$60,405,135	\$60,405,135	\$60,905,135
	1.9%	1.0%	3.2%	0.0%	0.8%

Source: GRF

Legal Basis: originally established by Am. Sub. H.B. 291 of the 115th General Assembly

Purpose: Funds mental health services that maintain severely mentally disabled persons in the community and reduce the need for state mental hospital care. Appropriated funds are distributed to special projects that have replaced state hospital beds, and to community mental health boards. Funding is distributed to the boards by a variety of methodologies including formula and historical distributions. Under Am. Sub. H.B. 111 of the 118th G.A., the purpose of this line item was changed to include new programs for severely emotionally disturbed youth and for housing the mentally disabled.

General Services Fund Group

149 333-609 Central Office Rotary-Operating

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$1,255,502	\$633,744	\$1,435,170	\$2,735,685	\$2,013,823	\$2,037,918
	-49.5%	126.5%	90.6%	-26.4%	1.2%

Source: GSF: payments for goods and services provided by the department to other governmental and non-governmental entities, employee housing and cafeteria receipts, fees for copying service, and the proceeds from the sale of other personal property under the agency's control; beginning in FY 1993, payments from community mental health boards and agencies for training, seminars, and printed materials provided by the department

Legal Basis: ORC 5119.161, (originally established by Am. Sub. H.B. 291 of the 115th G.A. through Controlling Board in FY 1981)

Purpose: These moneys are used to pay the department's central office operating expenses.

149 334-609 Hospital Rotary-Operating Expenses

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$3,237,372	\$2,567,159	\$6,155,814	\$2,196,668	\$10,451,492	\$10,451,492
	-20.7%	139.8%	-64.3%	375.8%	0.0%

Source: GSF: payments for goods and services provided by the department to other governmental and non-governmental entities, employee housing and cafeteria receipts, fees for copying service, and the proceeds from the sale of other personal property under the agency's control; beginning in FY 1993, payments from community mental health boards and agencies for training, seminars, and printed materials provided by the department

Legal Basis: ORC 5119.161, (originally established by Am. Sub. H.B. 291 of the 115th G.A. through Controlling Board in FY 1981); H.B. 111 of the 118th G.A. created line item 332-609 (as of FY 1990) to reflect the transfer of funding for Oakwood Forensic Center from the Division of Hospitals to the Division of Psychiatric Services to Correctional Facilities (line items appear separately under three divisions: Hospitals, Administration and Statewide Services, and Psychiatric Services to Correctional Facilities; the combined amounts are shown in the table)

Purpose: These moneys are used to pay the hospitals operating expenses.

150 334-620 Special Education

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$160,494	\$80,000	\$170,832	\$105,250	\$152,500	\$152,500
	-50.2%	113.5%	-38.4%	44.9%	0.0%

Source: GSF: moneys from the state's Department of Education

Legal Basis: originally established by Controlling Board in October, 1976

Purpose: The Hospitals receive and expend funds from this line item. These funds are used are used for educating school-age residents in mental health institutions (including forensic psychiatric facilities). and include adult education programs and G.E.D. classes. Teachers, supplies, and equipment are paid for out of this fund.

4N8 335-606 Family Stability Incentive

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$5,672,290	\$6,982,646	\$4,934,599	\$7,300,000	\$7,460,600	\$7,647,115
	23.1%	-29.3%	47.9%	2.2%	2.5%

Source: GSF: Title IV-B from the Department of Job and Family Services and \$2.7 million from 335-508 in DMH's budget in each fiscal year of the next biennium.

Legal Basis: originally established by Controlling Board in June 1996

Purpose: Started as a pooled-funding mechanism from several state agencies. Counties can access these funds based on reducing the number of unnecessary out-of-home placements for children. Urban counties began to access these funds during the fiscal year 1998-1999 biennium.

Federal Special Revenue Fund Group

324 333-605 Medicaid/Medicare

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$11,091	\$165,587	\$605,651	\$700,846	\$379,009	\$375,219
	1393.0%	265.8%	15.7%	-45.9%	-1.0%

Source: FED: Medicaid and Medicare revenues (from FY 1981 through FY 1983, revenues for this line item were deposited in the Mental Health Operating line item in the State Special Revenue Fund)

Legal Basis: reestablished in Am. Sub. H.B. 291 of the 115th G.A. (to ensure that federal Medicaid and Medicare moneys were reflected in the Federal Special Revenue Fund)

Purpose: Funds are used for operating expenses of the department's institutions. Since FY 1988, appropriations have been made to two separate line items (in the divisions of Hospitals, and Administration and Statewide Programs).

The vast majority of these moneys are Medicare dollars. Since the 117th G.A., Medicaid reimbursement at state hospitals was received only beds in a small unit for persons who are mentally ill and also mentally retarded, and for 20 percent of the cost of certain types of physician services for Medicare-eligible (over 65) patients. Beginning in FY 1996, freestanding psychiatric hospitals received a federal waiver to become eligible to receive Medicaid coverage for persons under 21 or over 65 years of age. For persons over 65, Medicaid is used to supplement any Medicare coverage. The number of persons under 22 or over 65 who are treated at state psychiatric hospitals is small. Both of the state psychiatric hospitals for youth have closed in order to provide more outpatient services or inpatient services in smaller settings, and many persons over 65 may require treatment in a nursing home instead of a state psychiatric hospital.

324 334-605 Medicaid/Medicare

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$12,667,629	\$13,028,873	\$14,775,824	\$13,350,726	\$8,791,748	\$9,043,700
	2.9%	13.4%	-9.6%	-34.1%	2.9%

Source: FED: Medicaid and Medicare revenues (from FY 1981 through FY 1983, revenues for this line item were deposited in the 632 Mental Health Operating line item in the State Special Revenue Fund)

Legal Basis: reestablished in Am. Sub. H.B. 291 of the 115th G.A. (to ensure that federal Medicaid and Medicare moneys were reflected in the Federal Special Revenue Fund)

Purpose: Funds are used for operating expenses of the department's institutions.

The vast majority of these moneys are Medicare dollars. Since the 117th G.A., Medicaid reimbursement at state hospitals was received only for the sprinkling of beds in a small unit for persons who are mentally ill and also mentally retarded, and for 20 percent of the cost of certain types of physician services for Medicare-eligible (over 65) patients. Beginning in FY 1996, freestanding psychiatric hospitals received a federal waiver to become eligible to receive Medicaid coverage for persons under 21 or over 65 years of age. For persons over 65, Medicaid is used to supplement any Medicare coverage. The number of persons under 22 or over 65 who are treated at state psychiatric hospitals is small. Both of the state psychiatric hospitals for youth have closed in order to provide more outpatient services or inpatient services in smaller settings, and many persons over 65 may require treatment in a nursing home instead of a state psychiatric hospital.

3A6 333-608 Community & Hospital Services

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$0	\$0	\$0	\$928	\$0	\$0
	N/A	N/A	N/A	-100.0%	N/A

Source: FED: Numerous federal grants and contract moneys. Prior to FY 1991, this line item also received Title XX moneys, which have since been deposited in line item 333-612. In the biennial appropriations acts, separate appropriations for this item appear under two divisions: Administration and Statewide Programs, and Hospitals. Figures presented are totals of the two line items, but no appropriations or moneys were received by the Administration and Statewide Programs line item, 333-608, in FY 1994 through FY 1997. In the 1996 and 1997 biennium only the 334-608 line item received an appropriation; this was for CFDA 84.034, Public Library Services.

Legal Basis: ORC 5119.60

Purpose: To support funding for state for programs for the mentally ill.

3A6 334-608 Subsidy for Federal Grants

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$10,011	\$1,447	\$0	\$0	\$0	\$0
	-85.5%	-100.0%	N/A	N/A	N/A

Source: FED: Numerous federal grants and contract moneys.

Legal Basis: ORC 5119.60

Purpose: To support funding for state programs for the mentally ill.

3A6 335-608 Federal Miscellaneous

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$0	\$0	\$0	\$43,474	\$0	\$0
	N/A	N/A	N/A	-100.0%	N/A

Source: FED: miscellaneous federal grants

Legal Basis: originally established by Controlling Board on December 1, 2000

Purpose: The appropriations are used for a variety of grant programs.

3A7 333-612 Social Services Block Grant

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$0	\$0	\$0	\$25,000	\$25,000	\$25,000
	N/A	N/A	N/A	0.0%	0.0%

Source: FED: CFDA 93.667, Social Services Block Grant

Legal Basis: ORC 5119.60

Purpose: These line items are used to receive and disburse the department's Title XX sub-grants. Title XX moneys are "passed through" to DMH from the Ohio Department of Human Services. Community mental health boards receive an annual sub-grant of Title XX funds which they distribute to local agencies to provide services to mentally ill persons. No state match is required.

3A7 335-612 Social Services Block Grant

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$14,653,873	\$8,833,150	\$9,503,475	\$9,250,982	\$9,314,108	\$9,314,108
	-39.7%	7.6%	-2.7%	0.7%	0.0%

Source: FED: CFDA 93.667, Social Services Block Grant

Legal Basis: ORC 5119.60

Purpose: These line items are used to receive and disburse the department's Title XX sub-grants. Title XX moneys are "passed through" to DMH from the Ohio Department of Human Services. Community mental health boards receive an annual sub-grant of Title XX funds which they distribute to local agencies to provide services to mentally ill persons. No state match is required. Prior to FY 1981, Title XX funds allocated for local use were deposited in the department's 608, Federal Miscellaneous, line item.

3A8 333-613 Federal Grant-Administration

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$224,449	\$0	\$7,190	\$202,760	\$87,000	\$58,000
	-100.0%	N/A	2720.0%	-57.1%	-33.3%

Source: FED: Under federal regulations, the department must separate letter of credit funds from all other federal moneys. A letter of credit is the federal mechanism for transferring moneys from the Federal Reserve to the department, and is the procedure for receipt of certain mental health grants. Grants received include CFDA 93.119, Technical Assistance Centers for Evaluation; CFDA 93.125, Mental Health Planning and Demonstration Projects; CFDA 93.128, Mental Health Statistics Improvement Program; CFDA 93.150, Projects for Assistance in Transition from Homelessness (PATH).

Legal Basis: originally established by Controlling Board on April 25, 1980.

Purpose: Moneys disbursed from 333-613 are used for state administration of the grants; moneys through 335-613 go to the local level for implementation of the program or service.

3A8 334-613 Federal Letter of Credit

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$0	\$0	\$30,100	\$34,684	\$9,000	\$0
	N/A	N/A	15.2%	-74.1%	-100.0%

Source: FED: carryover moneys from the ORYX Grant

Legal Basis: originally established by Controlling Board on December 10, 1999

Purpose: The ORYX initiative is the critical link between accreditation and the outcomes of patient care, allowing the Joint Commission of Accreditation to review data trends and patterns nationwide and to work with organizations as they use data to improve patient care. The department will be utilizing the ORYX grant moneys for performance measure data analysis at the Twin Valley Psychiatric System - Columbus Campus. In addition, some of the grant will be used for training, maintenance, and equipment.

3A8 335-613 Federal Grant-Community Mental Health Board Subsidy

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$2,614,979	\$861,616	\$339,272	\$1,308,406	\$960,000	\$960,000
	-67.1%	-60.6%	285.7%	-26.6%	0.0%

Source: FED: Under federal regulations, the department must separate letter of credit funds from all other federal moneys. A letter of credit is the federal mechanism for transferring moneys from the Federal Reserve to the department, and is the procedure for receipt of certain mental health grants. Grants received include CFDA 93.119, Technical Assistance Centers for Evaluation; CFDA 93.125, Mental Health Planning and Demonstration Projects; CFDA 93.128, Mental Health Statistics Improvement Program; CFDA 93.150, Projects for Assistance in Transition from Homelessness (PATH).

Legal Basis: originally established by Controlling Board on April 25, 1980.

Purpose: Moneys disbursed from 333-613 are used for state administration of the grants; moneys through 335-613 go to the local level for implementation of the program or service.

3A9 333-614 Mental Health Block Grant

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$461,405	\$539,049	\$521,177	\$1,044,212	\$642,264	\$642,264
	16.8%	-3.3%	100.4%	-38.5%	0.0%

Source: FED: CFDA 93.958, Block Grants for Community Mental Health Services (as authorized by the Public Health Services Act Title XIX Part B, as amended. Until FY 1990, these line items also received federal Alcohol and Drug Abuse Block Grant funds.

Legal Basis: originally established by Am. Sub. H.B. 694 of the 114th G.A.

Purpose: These block grant funds must be used to support community mental health centers that otherwise would have received direct grants under the Community Mental Health Centers Act. In the biennial appropriation acts, separate appropriations appear in the Division of Administration and Statewide Programs and the Division of Community Support Services.

3A9 335-614 Mental Health Block Grant

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$7,089,829	\$8,898,402	\$15,852,228	\$16,128,136	\$12,754,654	\$12,737,654
	25.5%	78.1%	1.7%	-20.9%	-0.1%

Source: FED: CFDA 93.958, Block Grants for Community Mental Health Services (as authorized by the Public Health Services Act Title XIX Part B, as amended. Until FY 1990, these line items also received federal Alcohol and Drug Abuse Block Grant funds.

Legal Basis: originally established by Am. Sub. H.B. 694 of the 114th G.A.

Purpose: These block grant funds must be used to support community mental health centers that otherwise would have received direct grants under the Community Mental Health Centers Act.

3B0 334-617 Elementary & Secondary Education Act

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$160,510	\$95,795	\$166,653	\$189,215	\$202,774	\$214,340
	-40.3%	74.0%	13.5%	7.2%	5.7%

Source: FED: federal moneys under the Elementary and Secondary Education Act (ESEA) and the Adult Basic Education Act (ABE)

Legal Basis: originally established by Controlling Board in 1966

Purpose: Educating school-age residents in mental health institutions. All moneys are used within mental health institutions and do not fund educational services at the community level.

3B1 333-635 Community Medicaid Expansion

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$2,510,689	\$2,394,878	\$2,148,709	\$4,465,264	\$6,550,000	\$5,550,000
	-4.6%	-10.3%	107.8%	46.7%	-15.3%

Source: FED: federal Department of Health and Human Services

Legal Basis: originally established by Controlling Board action on July 21, 1982

Purpose: These line items receive Medicaid moneys for certain community mental health services provided by mental health professionals. These services include: outpatient mental health care, unscheduled emergency mental health care, and partial hospitalization in community facilities. The funds from these line items are passed through to community mental health boards and agencies for operating expenses based on billed services. In biennial appropriation acts, separate appropriations appear in the Division of Administration and Statewide Programs and the Division of Community Support Services.

3B1 335-635 Community Medicaid Expansion

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$128,945,390	\$118,140,365	\$133,942,288	\$151,424,000	\$157,480,000	\$165,355,000
	-8.4%	13.4%	13.1%	4.0%	5.0%

Source: FED: federal Department of Health and Human Services

Legal Basis: originally established by Controlling Board action on July 21, 1982

Purpose: These line items receive Medicaid moneys for certain community mental health services provided by mental health professionals. These services include: outpatient mental health care, unscheduled emergency mental health care, and partial hospitalization in community facilities. The funds from these line items are passed through to community mental health boards and agencies for operating expenses based on billed services.

5L2 334-619 Health Foundation/Greater Cincinnati

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$0	\$0	\$1,392	\$251,600	\$131,600	\$94,869
	N/A	N/A	17974.7%	-47.7%	-27.9%

Source: FED: Grant from the Health Foundation of Greater Cincinnati

Legal Basis: originally established by Controlling Board on March 6, 2000

Purpose: The line item is for a consumer wellness study in the Greater Cincinnati area. Funds will be used to pay for the salaries of nurse practitioners who are conducting the study at the Summit Behavioral Healthcare Organization (formerly Pauline-Warfield Lewis Center).

State Special Revenue Fund Group

485 333-632 Mental Health Operating

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$31,595	\$37,254	\$4,143	\$127,764	\$130,959	\$134,233
	17.9%	-88.9%	2983.9%	2.5%	2.5%

Source: SSR: private insurance and other third-party payments for persons receiving services at community mental health boards

Legal Basis: originally established by Controlling Board on July 21, 1982

Purpose: This line item receives insurance and other third-party payments for certain community mental health services provided by mental health professionals. These services include: outpatient mental health care, unscheduled emergency mental health care, and partial hospitalization in community mental health facilities. The funds are passed through to community mental health boards and agencies for operating expenses based upon billed services.

485 334-632 Mental Health Operating

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$2,251,855	\$2,445,375	\$1,663,798	\$2,651,013	\$1,991,448	\$1,989,912
	8.6%	-32.0%	59.3%	-24.9%	-0.1%

Source: SSR: : private insurance and other third-party payments for persons receiving services at community mental health boards

Legal Basis: originally established by Controlling Board on July 21, 1982

Purpose: This line item receives insurance and other third-party payments for certain community mental health services provided by mental health professionals. These services include: outpatient mental health care, unscheduled emergency mental health care, and partial hospitalization in community mental health facilities. The funds are passed through to community mental health boards and agencies for operating expenses based upon billed services.

4X5 333-607 Behavioral Health Medicaid Services

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$3,733,614	\$6,155,701	\$6,824,591	\$2,775,000	\$2,759,400	\$2,828,385
	64.9%	10.9%	-59.3%	-0.6%	2.5%

Source: SSR: federal Disproportionate Share (DSH) reimbursement dollars expected to be received from the Department of Human Services for reimbursement for services provided to indigent persons at mental health institutions. The DSH dollars are passed through the Department of Human Services and distributed to the Department of Mental Health and other state agencies. These dollars became available in FY 1996 due to the approval of a federal waiver which allowed psychiatric hospitals to become eligible for reimbursement through the DSH program for services provided to indigent persons.

Legal Basis: originally established by Am. Sub. H.B. 117 of the 121st G.A.

Purpose: To fund a managed care system for the provision of mental health services. Moneys will be used to support a statewide computer network used by local providers, known as MACSIS. Also moneys are used to pay for additional personnel needed to provide fiscal and system support services.

The proposed managed care system has been delayed, because the contract with the administrator has been invalidated by the courts.

5M2 333-602 PWLC Campus Improvement

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$0	\$0	\$0	\$1,500,000	\$1,000,000	\$0
	N/A	N/A	N/A	-33.3%	-100.0%

Source: SSR: City of Cincinnati

Legal Basis: originally established by Controlling Board on October 4, 2000

Purpose: The \$1.0 million appropriated in this line item comes from City of Cincinnati as part of a memorandum of agreement between the City, the United States Postal Service, and the department. These funds will be used to pay architect design and administration fees and will allow the department to accelerate the campus improvement/consolidation project, which will in turn free up approximately 50 acres upon which the U.S. Postal Service will construct a new regional distribution facility. This will maintain approximately 2,300 jobs within the City of Cincinnati.

632 335-616 Community Capital Replacement

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$0	\$0	\$0	\$500,000	\$250,000	\$250,000
	N/A	N/A	N/A	-50.0%	0.0%

Source: SSR: proceeds from the sale of DMH capitolly funded community facilities

Legal Basis: originally established by Controlling Board on October 30, 2000

Purpose: The appropriated funds will be used for local replacement facility projects.

692 334-636 Community MH Board Risk Fund

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$0	\$0	\$0	\$598,163	\$361,323	\$370,356
	N/A	N/A	N/A	-39.6%	2.5%

Source: SSR: GRF provided seed money for the new fund; payments from boards after FY 1990 (due to minimal use of the fund the boards have not had to supply additional funding)

Legal Basis: originally established by H.B. 111 of the 118th G.A., as required by S.B. 156 of the 117th G.A.; S.B. 156 restructured the mental health service delivery system in Ohio, giving the community mental health (648) boards responsibility for determining which services they will provide

Purpose: The purpose of this line item is to function as a self-insurance fund to cover, if necessary, part of the costs of over-utilization of hospital services.

Intragovernmental Service Fund Group

151 235-601 General Administration

1998	1999	2000	2001 Estimate	2002 Executive Proposal	2003 Executive Proposal
\$66,474,377	\$67,343,496	\$71,600,298	\$74,161,226	\$76,095,310	\$78,181,973
	1.3%	6.3%	3.6%	2.6%	2.7%

Source: ISF: moneys from other entities that purchase goods and services from the Division of General Administration (these services include: food management; warehousing and distribution; laboratory services; drugs and pharmaceutical services farm operations; laundry operation and management; vocational horticulture; material stores; and transportation)

Legal Basis: ORC 5119.16 (originally established in 1972)

Purpose: As of FY 1982, the division receives no GRF support but relies on payments received for goods and services provided to mental health institutions, community mental health boards and agencies, the Department of Mental Retardation and Developmental Disabilities, the Department of Rehabilitation and Correction, the Department of Youth Services, other boards and commissions, and community programs.