

LSC Redbook

Analysis of the Executive Budget Proposal

Department of Mental Health

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March 2011

READER'S GUIDE

The Legislative Service Commission prepares an analysis of the executive budget proposal for each agency. These analyses are commonly called "Redbooks." This brief introduction is intended to help readers navigate the Redbook for the Ohio Department of Mental Health (ODMH), which includes the following four sections.

1. **Overview:** Provides a brief description of ODMH, an appropriation overview, and major new initiatives proposed for ODMH.
2. **Facts and Figures:** Provides some additional data on Medicaid spending, utilization of community mental health services, and utilization of bed days at state psychiatric hospitals.
3. **Analysis of Executive Proposal:** Provides a detailed analysis of the executive budget recommendations for ODMH, including funding for each line item. The line items for ODMH are organized into five categories.
4. **Attachments:** Includes the catalog of budget line items (COBLI) for ODMH, which briefly describes each line item and the LSC budget spreadsheet for ODMH.

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ATTACHMENTS:

- Catalog of Budget Line Items
- Budget Spreadsheet By Line Item

Department of Mental Health

- Funding of \$1.1 billion in FY 2012 and \$544.6 million in FY 2013
- Elevation of Medicaid match to ODMH in FY 2012 and transfer to ODJFS in FY 2013
- By FY 2013, nearly all civil and forensic commitments will be made directly to ODMH

OVERVIEW

Agency Overview

Established in 1954, the Ohio Department of Mental Health (ODMH) is responsible for ensuring that mental health services are available to all Ohioans. ODMH currently operates seven inpatient facilities through six Regional Psychiatric Hospitals (RPHs).¹ ODMH also oversees a statewide mental health service system that consists of 47 community alcohol, drug addiction, and mental health services boards and three community mental health services boards, hereafter referred to collectively as community behavioral health boards.

S.B. 156 of the 117th General Assembly, the Mental Health Act of 1988, established the state's responsibility in providing mental health services through a community-based system. The Act updated and revised many areas of mental health law and clearly defined the roles and responsibilities of the community mental health boards and ODMH. As outlined in the law, ODMH's functions and responsibilities include:

- Developing clinical evaluation and monitoring services;
- Establishing minimum standards for services;
- Maintaining compliance with standards at state hospitals;
- Establishing essential elements of the Community Support Program; and
- Providing training, consultation, and technical assistance to stakeholders in the mental health system.

In FY 2010, ODMH served more than 225,000 adults and 140,000 children through the community behavioral health boards, about 6,700 individuals through inpatient hospitals, and another 748 individuals through outpatient services provided by the Community Support Network.

¹ The Cuyahoga County campus of Northcoast RPH is scheduled to close by July 1, 2011; its patients and bed capacity will be transferred to Northcoast's Summit County campus and some patients may be sent to Heartland RPH in Stark County.

Staffing Levels

As of February 2011, ODMH had a total of 2,346 employees. Eighty-seven percent (2,052) of ODMH employees work in the regional hospital. The remaining 13% (294) work in the central office. The number of staff at the central office and the regional hospitals has decreased from about 3,000 in FY 2001 to about 2,350 in FY 2011. Table 1 below shows the number of employees in the central office by department, and the number of employees in each RPH in FY 2011.

Table 1. FY 2011 Staffing Levels	
Location	Employees
Central Office	
Director's Office and Family & Children First Council	10
Medical Director's Office & Hospital Services	28
Administrative Service	103
Legal Services	15
Office of Support Services	97
Program and Policy Development	27
Human Resources	14
Central Office Total	294
Regional Psychiatric Hospital (Location)	
Appalachian (Athens County)	203
Northcoast* (Summit County & Cuyahoga County)	549
Heartland (Stark County)	235
Summit (Hamilton County)	393
Twin Valley (Franklin County)	484
Northwest (Lucas County)	188
Hospitals Total	2,052
ODMH TOTAL	2,346

*Northcoast RPH's Cuyahoga County campus is scheduled to close by July 1, 2011, and be consolidated with the Summit County campus. This figure includes both the Cuyahoga and Summit county campuses.

Hospital patient profiles and service needs have changed in recent years, which has created a challenge for ODMH to staff its hospitals. As a result of increased short-term admissions, more acute care patients, and an increase in the forensic population, ODMH has raised the staffing standards to include more costly clinical and special services staff. The cost to maintain qualified medical staff has continued to rise.

Appropriation Overview

The executive recommendation for ODMH totals \$1.1 billion for FY 2012, a 10% decrease from FY 2011 estimated expenditures, and \$544.6 million for FY 2013, a 49.4% decrease from FY 2012. The decrease in FY 2012 is largely due to the scheduled end of federal stimulus funding for Medicaid on June 30, 2011, the implementation of utilization controls for Medicaid services, and lower projected sales at the Office of Support Services. The decrease in FY 2013 is attributable to the transfer of financial responsibility for community mental health Medicaid services to ODJFS.

Appropriations by Fund Group

Charts 1 and 2 show ODMH's budget by fund group for FY 2012 and FY 2013, respectively. As seen in Chart 1, in FY 2012, approximately 45% of ODMH's budget comes from the GRF and 39% from the Federal Special Revenue Fund Group. In FY 2013, once the financial responsibility for community mental health Medicaid services transfers to ODJFS, the proportion of funds in ODMH's budget shifts to 54% GRF and 14% Federal Special Revenue. Table 2 summarizes ODMH's appropriations by fund group for FY 2012 and FY 2013, and shows estimated expenditures for FY 2011.

Chart 1: Recommended Appropriations for FY 2012 by Fund Group

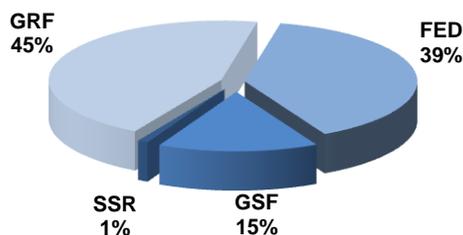


Chart 2: Recommended Appropriations for FY 2013 by Fund Group

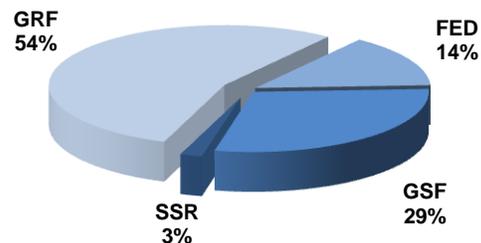


Table 2. ODMH's Budget by Fund Group

Fund Group	FY 2011 (estimate)*	FY 2012 (recommended)	% Change	FY 2013 (recommended)	% Change
General Revenue	\$461,600,697	\$482,066,920	4.4%	\$296,337,344	-38.5%
General Services	\$197,079,140	\$159,703,960	-19.0%	\$159,713,012	0%
State Special Revenue	\$48,039,857	\$13,200,643	-72.5%	\$13,184,554	-0.1%
Federal Special Revenue	\$489,753,037	\$421,571,652	-13.9%	\$75,371,652	-82.1%
TOTAL	\$1,196,472,731	\$1,076,543,175	-10.0%	\$544,606,562	-49.4%

*FY 2011 figures represent estimated expenditures.

Appropriations by Line Item Category

This analysis divides ODMH's programs into five categories according to the purposes of the line items in each category. The executive recommendation includes significant changes to ODMH's program and funding structure in FY 2013. Therefore, appropriations by line item category are shown in Chart 3 for FY 2012 and Chart 4 for FY 2013. The percentage of appropriation for Community Support Services, which included funding for Medicaid, shifts from 58% in FY 2012 to 18% in FY 2013. The shift is due to ODMH no longer receiving appropriations for Medicaid services in FY 2013. In FY 2013, hospital services will account for a much greater share of appropriations than in FY 2012.

Chart 3: Budget Recommendations by Line Item Category for FY 2012

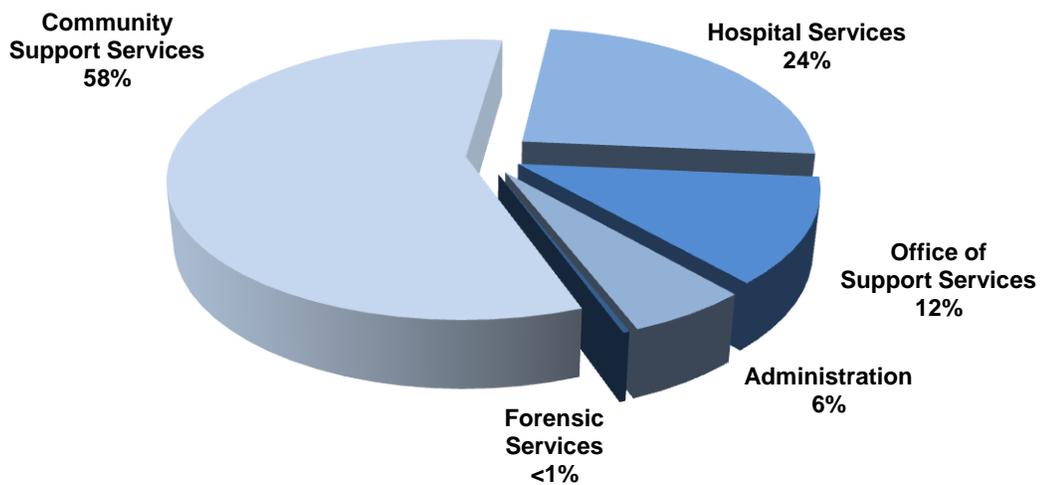
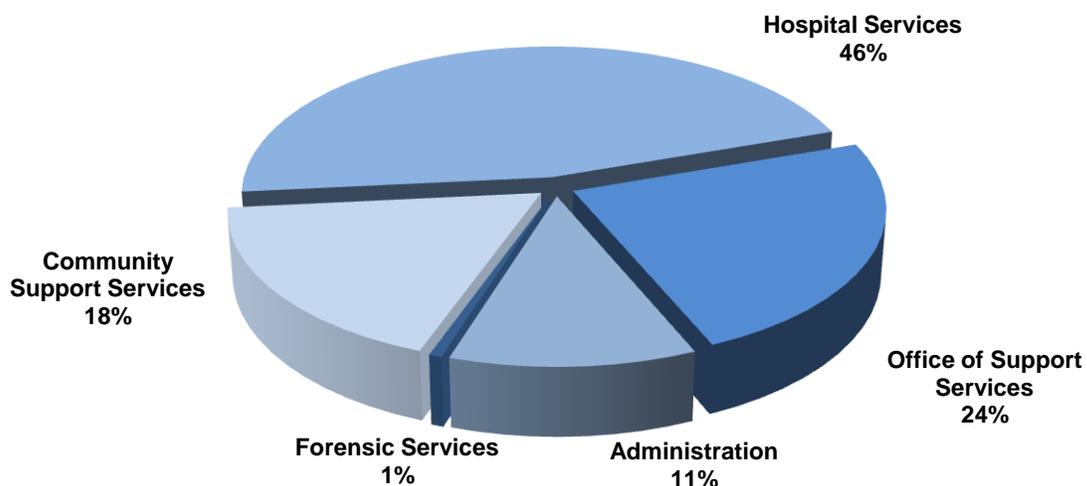


Chart 4: Budget Recommendations by Line Item Category for FY 2013



FY 2012-FY 2013 Initiatives

Medicaid Elevation

The executive proposes to "elevate" the financial responsibility for the nonfederal share of community mental health Medicaid costs from local boards to the state. According to the executive, elevation is the first step toward integrating physical and behavioral health Medicaid benefits. Currently, local boards have the financial responsibility to pay for community mental health Medicaid costs, and may use their state allocations from ODMH and available local levy dollars to meet the obligation of funding the nonfederal share of those costs. In FY 2012, when the financial responsibility shifts to ODMH, boards will continue to perform the administrative function of making payments to providers for Medicaid services on behalf of ODMH. In FY 2013, ODJFS will assume the financial responsibility for community mental health Medicaid services and make payments to providers.

For the upcoming biennium, ODMH had estimated that an increasing amount of local levy dollars would have been required to cover the costs of Medicaid services. Elevation will allow local boards to use behavioral health levy dollars, to the extent these dollars are available, exclusively for services to those who are not eligible for Medicaid.

Utilization of Medicaid Services

ODMH is currently planning to make changes to administrative rules that will affect utilization of mental health Medicaid services. Those changes include establishing basic benefit limits, implementing a tiered rate structure for community psychiatric supportive treatment (CPST), eliminating duplicate payments for mental health Medicaid services provided in long-term care facilities, and limiting the types of situational codes providers can use for submitting Medicaid claims. ODMH estimates these utilization controls could save up to \$146.7 million in FY 2012 and \$96.0 million in FY 2013. The savings figures presented here and below include state and federal funds. The executive recommended appropriations reflect these estimated savings.

Basic Benefit Limits

According to ODMH, implementing basic benefit limits could produce \$135.2 million in savings over the course of the biennium. ODMH has been developing this proposal by working with stakeholders over the past few years. According to ODMH, for many of these services, the benefit limits would affect only a small percentage of clients. Table 3 below shows the proposed benefit limits and the estimated percentage of clients who would be unaffected by those limits.

Table 3. Proposed Benefit Limits and Percentage of Clients Unaffected		
Service	Proposed Limit	Percentage Unaffected
Community psychiatric supportive treatment	104 hours	96%+
Pharmacy management	24 hours	98%+
Counseling	52 hours	97%
Diagnostic assessment by a medical doctor	2 hours	95%
Diagnostic assessment	4 hours	90%+
Partial hospitalization	30 days	50%

Source: Governor's Office of Health Transformation, Medicaid Budget.

Tiered Rates

ODMH is also proposing a tiered rate structure for paying CPST claims. CPST involves working with a client to identify various community resources that are available. Under the proposal, the first hour of CPST for each day would be paid at the full rate, with subsequent hours in the same day paid at 50% of the rate. If a patient were to return the next day for another hour of CPST, it would be paid at the full rate. ODMH estimates that this would save \$60.3 million over the biennium.

Nursing Facility Reimbursement

ODMH is proposing to clarify its policies so that duplicate payments for mental health Medicaid services provided in nursing homes are eliminated. Currently, included in the nursing facilities' Medicaid per diem rate is coverage for mental health services. However, ODMH has seen a large increase in Medicaid claims for community mental health services being provided to residents in long-term care facilities. ODMH estimates this proposal will save \$39.1 million over the biennium. According to ODMH, this policy would not affect individuals who are entering a nursing facility for short-term stays.

Limiting Use of Situational V-Codes

ODMH is proposing limiting the use of situational descriptor V-Codes, which currently allow for providers to bill for individuals without diagnosing that individual's medical condition. Under the new policy, certain V-codes (parent child relationship problem; neglect, physical abuse, or sexual abuse of a child; and bereavement) will only be allowed for crisis intervention and diagnostic assessment. All other claims must be billed using specific medical procedure codes. ODMH estimates that this proposal will save about \$8.1 million over the biennium.

Non-Medicaid Funding Stabilization

Accompanying the elevation of financial responsibility for community mental health Medicaid services in FY 2012, ODMH is seeking to consolidate funding for

non-Medicaid services into one line item: 335505, Local Mental Health Systems of Care. This existing line item is increased in FY 2012 and FY 2013, compared to the FY 2011 estimated expenditure level. The increase is partially attributable to funding previously provided through line item 335404, Behavioral Health Children, which is included in line item 335505. The executive recommendation also provides additional funding to county boards to lessen the impact of the end of federal Medicaid stimulus funding.

Consolidation of Hospitals

By July 1, 2011, ODMH plans to close the Cuyahoga County campus of Northcoast RPH and expand the capacity of its Summit County campus. Most patients from the Cuyahoga County campus will be transferred to the Summit County campus and some may be transferred to the Heartland RPH in Stark County. ODMH estimates this consolidation will save about \$4 million in FY 2012. In addition, ODMH estimates that consolidation will eliminate the need for new capital costs for hospitals during the upcoming biennium. This consolidation will reduce the number of state hospital facilities from seven to six. Previously, on June 30, 2008, ODMH closed the Guernsey County campus of Appalachian RPH and the Montgomery County campus of Twin Valley RPH. According to ODMH, the overall capacity of the state's RPH system has not been affected by the closures.

Civil Bed Days

The executive recommendation includes changes that will affect the utilization of civil bed days at state psychiatric hospitals. In FY 2012, the executive proposal permits ODMH to allow local boards to utilize funds from their projected civil bed day allotment to pay for community services if those funds are not needed to pay for bed days. Beginning in FY 2013, the executive proposal also allows ODMH to take a regional approach to bed day planning.

Commitment and Treatment

Currently, when a court commits an individual with a forensic status for mental health evaluation or treatment, the commitment is to a specific facility.² The executive proposes that beginning in FY 2012, individuals with a forensic status will be committed directly to ODMH. While the court will still determine the security level, ODMH will determine the level of clinical care each individual requires and then send that individual to an appropriate facility.

Currently, when a probate court makes a civil commitment of an individual, the court has options of where to commit that individual. These options include the local behavioral health board (for the board to determine and arrange for appropriate

² Forensic status refers to involvement with the criminal justice system.

placement), a state psychiatric hospital (in limited circumstances), a private hospital, or a community treatment program. Most civil commitments are currently made to behavioral health boards. The executive proposes that beginning in FY 2013, ODMH will take the place of the local boards among the options where a court can commit an individual, and ODMH will determine, provide, or arrange for the appropriate setting to place an individual based on their needed level of care.

In addition, under the executive proposal, ODMH is authorized to contract with private entities to carry out its duties. This provision is designed to give ODMH flexibility to contract with private facility operators for the treatment and evaluation of individuals needing mental health services. According to ODMH, these changes could result in significant cost savings by reducing the number of forensic bed days utilized at state psychiatric hospitals.

Residential State Supplement (RSS)

The executive budget proposes transferring administration of the Residential State Supplement (RSS) program from the Department of Aging to ODMH. Under the proposal, ODMH will assume administrative functions in order to carry out the program. The RSS program provides cash assistance and case management to aged, blind, or disabled adults who meet certain eligibility requirements and reside in an approved living arrangement. About 73% of individuals enrolled are under the age of 60, and of those individuals 75% have a mental health diagnosis.

Adult Care Facilities Licensing

The executive recommends transferring the administration of adult care facilities licensing from the Department of Health to ODMH. In FY 2010, the Department of Health licensed 250 adult group homes and 428 adult family homes.

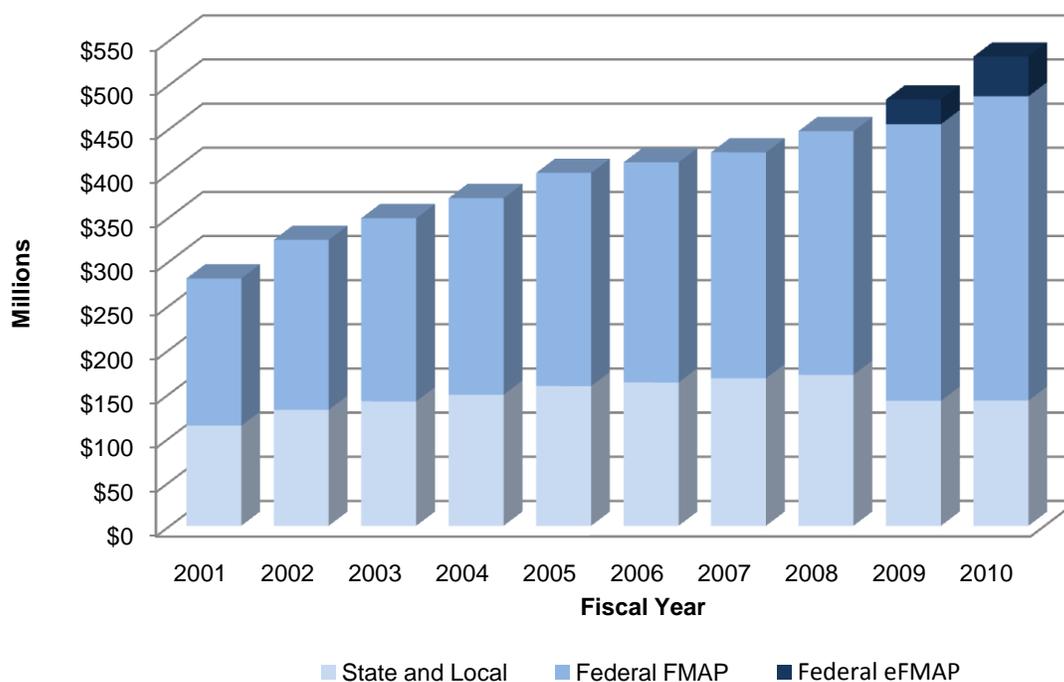
FACTS AND FIGURES

Medicaid Spending

Chart 5 illustrates the trends for community mental health Medicaid costs for the past 10 years. Medicaid costs for mental health services increased an average of 7.4% each year from FY 2001 to FY 2010. In FY 2010, Medicaid costs increased to the highest level of \$531.5 million, of which \$389.7 million was federal reimbursement and \$141.8 million was local and state resources. It is important to note that FY 2010 data is incomplete, as Medicaid providers generally have up to one year to submit a claim.

As a result of the American Recovery and Reinvestment Act of 2009, ODMH received an enhanced FMAP (eFMAP) from FY 2009 through FY 2011. ODMH received \$28.0 million in FY 2009 and \$46.4 million in FY 2010 as a result of eFMAP. ODMH has already received \$37.6 million thus far in FY 2011 (July 1, 2010 through March 2, 2011); eFMAP is scheduled to end on June 30, 2011.

Chart 5: Mental Health Medicaid Costs, FY 2001-FY 2010

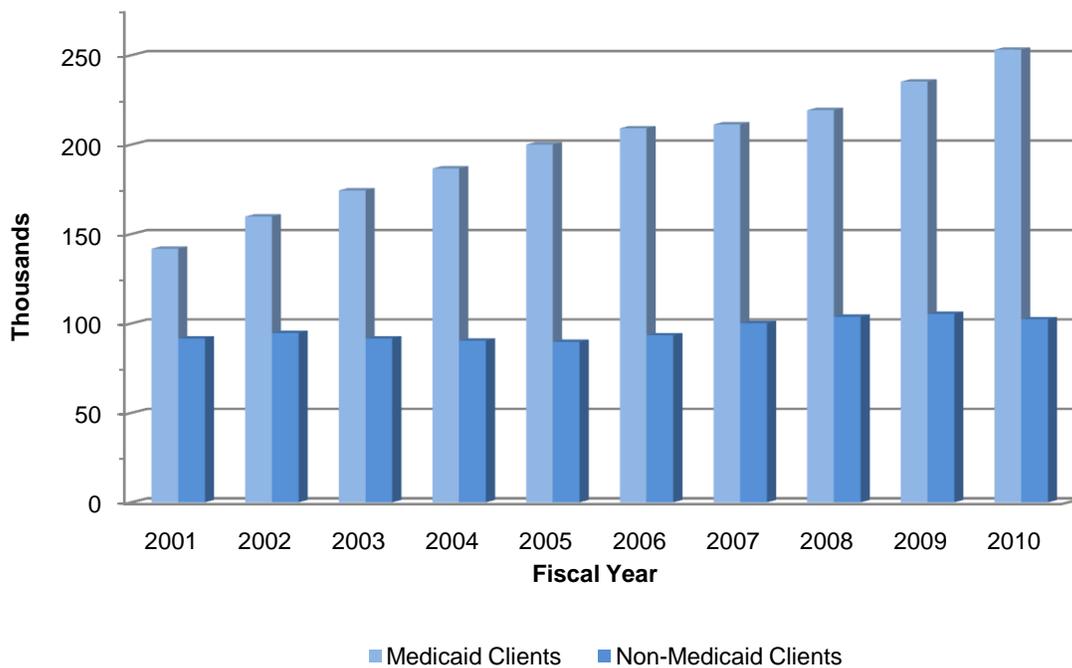


Source: ODMH

Number of Medicaid and non-Medicaid clients

Chart 6 illustrates community mental health service utilization levels from FY 2001 to FY 2010. The chart shows the number of Medicaid and non-Medicaid clients in each year. While the number of non-Medicaid clients has remained fairly constant, the number of Medicaid clients has grown from about 141,700 in FY 2001 to about 253,000 in FY 2010. The proportion of Medicaid clients relative to all community mental health clients has grown consistently. Medicaid clients represented 60.7% of all clients served in FY 2001; that percentage grew to 71.2% in FY 2010.

Chart 6: Number of Clients Served, FY 2001-FY 2010

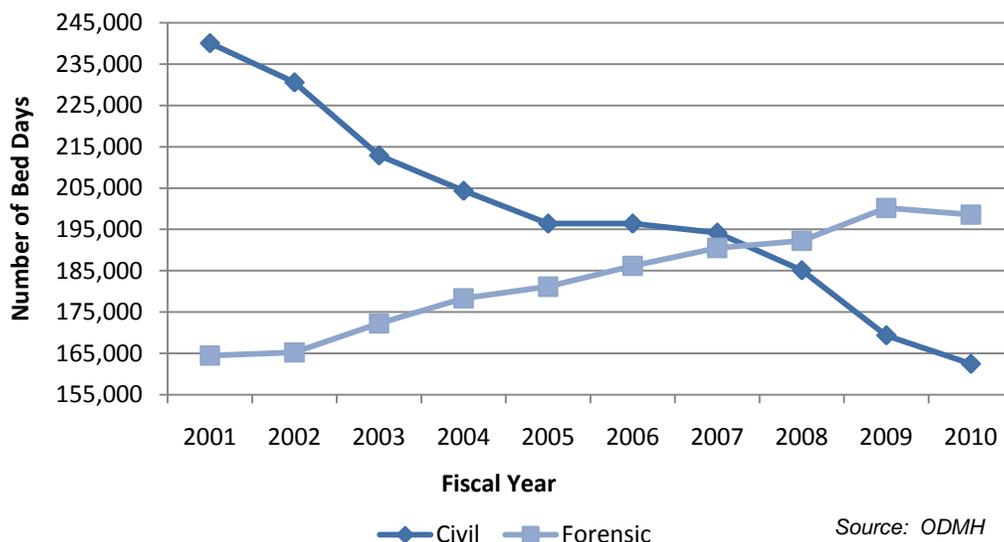


Source: ODMH

Forensic and Civil Bed Days

Chart 7 shows the number of civil and forensic bed days utilized at state Regional Psychiatric Hospitals (RPHs) from FY 2001 to FY 2010. As seen from the chart, the number of civil bed days utilized decreased 32% from about 240,000 in FY 2001 to about 162,500 in FY 2010. Whereas, the number of forensic bed days has increased by 21%, from about 164,500 in FY 2001 to about 198,600 in FY 2010. Civil beds days are used by individuals who are admitted by community behavioral health boards. Forensic bed days are used by those committed through the criminal justice system.

Chart 7: Civil and Forensic Bed Days FY 2001-FY 2010



- Total state hospital costs were \$196.0 million in FY 2010, which includes \$87.4 million for the cost of civil bed days purchased by local boards as well as \$108.6 million for forensic bed days. Currently, hospital rates are \$535 per day for civil bed days and \$599 per day for forensic bed days.
- According to a December 2009 ODMH Forensic Strategies Workgroup report, much of the growth in forensic bed day utilization is due to an increased number of commitments for competency restoration services in order for individuals to stand trial.
- Under the executive proposal, ODMH would be permitted to contract with private facilities in order to carry out its statutory duties, which includes the stabilization, evaluation, and treatment of individuals with a forensic status. ODMH estimates that contracting for these services could reduce the use of forensic bed days at RPHs and lead to considerable cost savings.

ANALYSIS OF EXECUTIVE PROPOSAL

Introduction

This section provides an analysis of the Governor's recommended funding for each line item in ODMH's budget. In this analysis, ODMH's line items are grouped into five categories. For each category a table is provided listing the recommended appropriation in each fiscal year of the biennium. Following the table, a narrative describes how the appropriation is used and any changes affecting the appropriation proposed by the executive. The five categories used in this analysis are as follows:

1. Community Support Services;
2. Hospital Services;
3. Office of Support Services;
4. Forensic Services; and
5. Administration.

To aid the reader in finding each line item in the analysis, Table 4 shows the category in which each appropriation has been placed, listing the line items in order within their respective fund groups and funds. This is the same order that the line items appear in the budget bill. ODMH's line items are generally categorized by prefixes; line items beginning in 332 are for forensic services, 333 for administration, 334 for hospital services, 335 for community support services, and 336 for the Office of Support Services.

Table 4. Categorization of ODMH's Line Items for Analysis of Executive Proposal			
Fund	ALI	ALI Name	Category
General Revenue Fund Group			
GRF	332401	Forensic Services	4: Forensic Services
GRF	333321	Central Administration	5: Administration
GRF	333402	Resident Trainees	5: Administration
GRF	333403	Pre-Admission Screening Expenses	5: Administration
GRF	333415	Lease Rental Payments	5: Administration
GRF	333416	Research Program Evaluation	5: Administration
GRF	334412	Hospital Services	2: Hospital Services
GRF	334506	Court Costs	2: Hospital Services
GRF	335405	Family & Children First	1: Community Support Services
GRF	335419	Community Medication Subsidy	1: Community Support Services
GRF	335501	Mental Health Medicaid Match	1: Community Support Services
GRF	335505	Local Mental Health Systems of Care	1: Community Support Services
GRF	335506	Residential State Supplement	1: Community Support Services

Fund	ALI	ALI Name	Category
General Services Fund Group			
1490	333609	Central Office Operating	5: Administration
1490	334609	Hospital Operating Expenses	2: Hospital Services
1500	334620	Special Education	2: Hospital Services
4P90	335604	Community Mental Health Projects	1: Community Support Services
1510	336601	Office of Support Services	3: Office of Support Services
Federal Special Revenue Fund Group			
3240	333605	Medicaid/Medicare	5: Administration
3A60	333608	Community and Hospital Services	5: Administration
3A70	333612	Social Services Block Grant	5: Administration
3A80	333613	Federal Grant – Administration	5: Administration
3A90	333614	Mental Health Block Grant – Administration	5: Administration
3B10	333635	Community Medicaid Expansion	5: Administration
3240	334605	Medicaid/Medicare	2: Hospital Services
3A60	334608	Federal Miscellaneous	2: Hospital Services
3A80	334613	Federal Letter of Credit	2: Hospital Services
3A60	335608	Federal Miscellaneous	1: Community Support Services
3A70	335612	Social Services Block Grant	1: Community Support Services
3A80	335613	Federal Grant – Community Mental Health Board Subsidy	1: Community Support Services
3A90	335614	Mental Health Block Grant	1: Community Support Services
3B10	335635	Community Medicaid Expansion	1: Community Support Services
State Special Revenue Fund Group			
2320	333621	Family and Children First Administration	5: Administration
4850	333632	Mental Health Operating	5: Administration
4X50	333607	Behavioral Health Medicaid Services	5: Administration
5V20	333611	Nonfederal Miscellaneous	5: Administration
4850	334632	Mental Health Operating	2: Hospital Services
5AU0	335615	Behavioral Healthcare	1: Community Support Services
6320	335616	Community Capital Replacement	1: Community Support Services

Community Support Services

This category of appropriations includes funds distributed to community behavioral health boards. For local mental health subsidies, ODMH distributes funds to the community boards based on need and a per capita basis to provide services in the community. Basic services include crisis intervention, hospital prescreening, counseling-psychotherapy, community support program services, diagnostic assessment, consultation and education, and residential housing. Table 5 shows the line items included in this category and the recommended appropriations.

Table 5. Governor's Recommended Amounts for Community Support Services				
Fund	ALI and Name		FY 2012	FY 2013
General Revenue Fund				
GRF	335405	Family & Children First	\$1,386,000	\$1,386,000
GRF	335419	Community Medication Subsidy	\$8,963,818	\$8,963,818
GRF	335501	Mental Health Medicaid Match	\$186,400,000	\$0
GRF	335505	Local Mental Health Systems of Care	\$38,913,776	\$48,037,955
GRF	335506	Residential State Supplement	\$4,702,875	\$4,702,875
General Revenue Fund Subtotal			\$240,366,469	\$63,090,648
General Services Fund Group				
4P90	335604	Community Mental Health Projects	\$250,000	\$250,000
General Services Fund Group Subtotal			\$250,000	\$250,000
Federal Special Revenue Fund Group				
3A60	335608	Federal Miscellaneous	\$2,170,000	\$2,170,000
3A70	335612	Social Services Block Grant	\$8,400,000	\$8,400,000
3A80	335613	Federal Grant – Community Mental Health Board Subsidy	\$2,500,000	\$2,500,000
3A90	335614	Mental Health Block Grant	\$14,200,000	\$14,200,000
3B10	335635	Community Medicaid Expansion	\$346,200,000	\$0
Federal Special Revenue Fund Group Subtotal			\$373,470,000	\$27,270,000
State Special Revenue Fund Group				
5AU0	335615	Behavioral Healthcare	\$6,690,000	\$6,690,000
6320	335616	Community Capital Replacement	\$350,000	\$350,000
State Special Revenue Fund Group Subtotal			\$7,040,000	\$7,040,000
Total Funding: Community Support Services			\$621,126,469	\$97,650,648

The Mental Health Act of 1988 established the community behavioral health boards as the local mental health authority within their respective areas. Boards contract with service providers to deliver services to consumers in the community consistent with their ODMH-approved community mental health plans. Each plan includes a list of services the board intends to purchase with its annual subsidy, a

projection of needed inpatient and community-based hospital services, and an assessment of the number and types of community residential facilities needed within each local board's area. In the executive proposal, the requirement for community plans is eliminated; however, boards will continue to communicate local needs to ODMH.

Family & Children First (335405)

This GRF line item is used by the Ohio Family and Children First Cabinet Council to allocate funds to county family and children first councils. The executive recommends \$1.4 million for FY 2012 and FY 2013, a 7.7% decrease from FY 2011 estimated expenditures. ODMH acts as the fiscal agent for the Cabinet Council, whose aim is to help families seeking government services. The Cabinet Council is composed of the Superintendent of Public Instruction and the directors of Alcohol and Drug Addiction Services, Developmental Disabilities, Health, Job and Family Services, Mental Health, and Youth Services. During the FY 2010-FY 2011 biennium, the departments of Aging and Rehabilitation and Correction were added to the Cabinet Council, but will not begin contributing funds until the upcoming biennium. The executive proposes adding the Rehabilitation Services Commission as a contributing member to the Cabinet Council.

Given the executive recommendation, each county council will receive \$15,750 each year for operational costs under the executive recommendation, about \$1,300 less than the allocation in FY 2011. Allocated funds may be used to provide a stipend to parent representatives that serve on county councils, pay for audits and technical assistance, or for planning costs. County councils also receive local funding to maintain operations. Considering the executive recommendation along with potential local government funding reductions, county councils may need to make adjustments to current operations to function within available funding.

The executive proposal includes provisions that would allow county family and children first councils to establish and operate a flexible funding pool. Allocations from this line item would be eligible to be deposited into a flexible funding pool. Amounts in a flexible funding pool may be used by county councils to assure access to needed services by families, children, and older adults in need of protective services. Funds deposited into a flexible funding pool may include state general revenue funds allocated to local entities to support the provision of services to families and children, and funds transferred to a flexible funding pool must not limit the objective for which the funds are purposed. The county council must also produce an annual report on the use of pooled funds.

Community Medication Subsidy (335419)

This GRF line item is used to assist community mental health boards with the purchase of psychotropic medication for indigent persons. The goal is to reduce hospitalization caused by a lack of medication and to provide subsidized support for

methadone costs. Boards purchase drugs from Central Pharmacy in ODMH's Office of Support Services and ODMH remits payment from this line item to the Office of Support Services Fund (Fund 1510), and deducts the payment amount from the board's allocation. The executive recommends \$9.0 million for FY 2012 and FY 2013, a 10.0% decrease from FY 2011 estimated expenditures. According to the Director of Mental Health, boards will not be required to switch from purchasing brand name medications to generics and this appropriation level is consistent with recent actual costs for board medication purchases.

Mental Health Medicaid Match (335501)

The executive proposes to "elevate" the financial responsibility for the nonfederal share of community mental health Medicaid costs from local boards to the state. This new GRF line item will be used to distribute the nonfederal share (also referred to as match) to local behavioral health boards in FY 2012. The executive recommends funding of \$186.4 million in FY 2012. In FY 2013, this line item is not funded, as community mental health Medicaid services will be paid for by the Ohio Department of Job and Family Services (ODJFS).

In FY 2012, the financial responsibility shifts from the local boards to ODMH. Boards will continue to perform the administrative function of making payments to providers for Medicaid services on behalf of ODMH. In FY 2013, ODJFS will assume the financial responsibility for community mental health Medicaid and make provider payments through line item 600525, Health Care/Medicaid. According to ODJFS, \$456.1 million (all funds) has been included in line item 600525 to pay for community mental health Medicaid services in FY 2013. The FY 2013 budgeted amount reflects an ODMH estimate that in FY 2013 there would be an alignment of community psychiatric supportive treatment, case management, single case/care manager strategies, and health home strategies, which would lead to decreased costs and increased federal reimbursement. Under the Patient Protection and Affordable Care Act, services delivered in health homes to Medicaid clients are eligible for an enhanced 90% federal reimbursement rate.

Currently, local boards have the financial responsibility to pay for community mental health Medicaid services, and may use their state allocations from ODMH and local levy dollars, if available, to fund the nonfederal share of service costs. For the upcoming biennium, ODMH had estimated that an increasing amount of local levy dollars would have been required to cover the costs of Medicaid services. Elevation will allow local boards to use behavioral health levy dollars exclusively for services to those who are not eligible for Medicaid.

Much of the state funding that may be used for Medicaid match is currently allocated to local boards through GRF line item 334408, Community and Hospital Mental Health Services. In FY 2011, the estimated ODMH allocation from 334408 for

Medicaid match was about \$160.3 million, or about 91% of the total community "flexible" allocation of \$176.7 million. By comparison, ODMH estimates the FY 2012 allocation to local boards for Medicaid to be about \$186.4 million, which accounts for the expiration of federal stimulus funding, which had previously reduced state and local Medicaid costs.

A large portion of current spending for community mental health services is eligible for federal reimbursement under the Medicaid Program. The federal government reimburses allowable expenditures based on a state's current federal medical assistance percentage (FMAP). The U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services determines the FMAP rate annually. For federal fiscal year 2011, Ohio's FMAP rate is about 64%. Federal reimbursement for Medicaid services is passed to local boards from ODMH through line item 335635, Community Medicaid Expansion.

Local Mental Health Systems of Care (335505)

This GRF line item is used to distribute funds to local boards for mental health services that meets locally determined needs. To meet those needs, boards contract with local providers for services to persons suffering from mental illness in their county or multi-county service areas. Basic services include crisis intervention, hospital prescreening, counseling-psychotherapy, community support program services, diagnostic assessment, consultation, education, and residential-housing. Currently, funds provided to boards through this line item may be used to serve Medicaid or non-Medicaid individuals. However, with the creation of line item 335501, Mental Health Medicaid Match (discussed above), this line item will be used to consolidate and stabilize state funding provided to local boards for services to those not eligible for Medicaid.

The executive recommends funding of \$38.9 million for FY 2012, an 88.5% increase over FY 2011 estimated expenditures, and \$48.0 million for FY 2013, a 23.5% increase over FY 2012. There are several factors that account for the increase in funding to this line item. The increase is to partially offset the proposed discontinuance of funding through line item 335404, Behavioral Health Services-Children. The increase is also to partially account for the non-Medicaid portion of the allocation from line item 334408, Community and Hospital Mental Health Services (also to be discontinued) that boards receive currently (estimated at \$16.4 million in FY 2011). In addition, the increase is meant to reduce the impact of the end of enhanced federal Medicaid reimbursement, which had provided an additional source of flexible funding to boards.

In order to determine allocations under this line item for FY 2012, ODMH conducted an analysis of FY 2011 non-Medicaid allocations from this line item, line item 335404, Behavioral Health Services-Children, and line item 334408, Hospital and Community Services. According to the analysis, in order to "hold harmless" local

boards at current non-Medicaid state allocation funding levels, a \$52 million appropriation from this line item would have been needed in FY 2012. Given the executive recommendation, collectively, boards will receive about \$15 million less in FY 2012 than in FY 2011 to provide services for individuals not eligible for Medicaid. In addition, there were four boards that would not receive any state non-Medicaid allocation from this line item.³ For those boards, the number of Medicaid clients served required that they use all of their FY 2011 allocations from the line items mentioned above to pay for Medicaid services. The Director of Mental Health has stated that ODMH is working with those boards individually to determine how the state can assist each with financial support for non-Medicaid community services. Under the executive proposal, boards would receive about \$37.4 million in allocations through this line item in FY 2012. The remaining \$1.5 million would be used to fund a variety of other community programs and partnerships with other agencies.

Residential State Supplement (335506)

This GRF line item will be used to administer the Residential State Supplement (RSS) Program and transfer funds to ODJFS to issue subsidy payments for the program. The RSS Program was previously administered by the Department of Aging and funded through line items 490412, Residential State Supplement, 490610, PASSPORT/Residential State Supplement, and 490623, Long Term Care Budget. In FY 2010, \$8.5 million was expended on the program; about \$5.2 million in GRF, \$2.8 million in State Special Revenue funds, and \$518,000 in Federal Special Revenue funds.

The executive recommends funding of \$4.7 million in FY 2012 and FY 2013. Changes in the executive budget allow ODJFS to use dollars from the Nursing Home Franchise Permit Fee Fund (Fund 5R20), which is renamed by the bill, for the RSS Program. At this time, it is uncertain whether any transfers from this fund to support the RSS Program will take place.

The RSS Program provides cash assistance and case management to aged, blind, or disabled adults who reside in approved living arrangements including group homes, adult care facilities, residential care facilities, and other facilities licensed by the departments of Mental Health and Health. To be eligible for the program, a person must be 18 years of age or older, not need 24-hour supervision, require a protective level of care, require less than 120 days of skilled nursing care, and not have a monthly income greater than \$800 for most individuals. Also, persons may not have more than \$1,500 in assets. Individuals who are eligible for RSS also receive a Medicaid card.

³ The four boards are Adams/Scioto/Lawrence, Ashtabula, Athens/Hocking/Vinton, and Franklin.

Clients receive the supplemental payment directly and then pay the RSS providers themselves. The monthly cash supplement is used together with the individual's personal income to pay for an alternative living arrangement. The monthly supplement makes up the difference between the individual's income and the financial need standard set for the appropriate RSS living arrangement. Approximately 73% of individuals enrolled are under the age of 60 and, of those individuals, 75% have a mental health diagnosis. At the end of December 2010, the RSS caseload was 1,494 and there were 175 individuals on the waiting list.

Community Mental Health Projects (335604)

This line item is used to pay for property maintenance of hospital grounds, particularly those sites no longer in use but still owned by ODMH. Other expenditures may include land surveys and appraisals when ODMH is planning to sell a property. Revenues are generated from the sale of ODMH property. The executive recommends flat funding at the FY 2011 estimated expenditure level of \$250,000 for FY 2012 and FY 2013.

Federal Miscellaneous (335608)

This federally funded line item is used to allocate federal grants for community-based programs that include subsidy payments to community behavioral health boards and other subgrantees. Revenues include federal grants for programs involving crisis counseling, child care quality, and all-hazards preparedness. The executive recommends essentially flat funding at the FY 2011 estimated expenditure level of \$2.2 million for FY 2012 and FY 2013.

Social Services Block Grant (335612)

This federally funded line item is used to distribute Social Services Block Grant (Title XX) funds to community behavioral health boards. Title XX funds are allocated to states on the basis of population. Title XX funds are received by ODJFS, which keeps 72.50% and distributes the remainder to the Department of Developmental Disabilities (14.57%) and to ODMH (12.93%). States are given wide discretion in determining which services will be provided with these funds. In FY 2010, ODMH received \$8.3 million in Title XX funds. The executive recommends funding of \$8.4 million for FY 2012 and FY 2013, a 2.7% decrease from the FY 2011 estimated expenditure level.

Title XX funds are provided to the community behavioral health boards through an allocation process based on each board's total population, the percentage of the population below the federal poverty level, and how each board used the funds in the past. The boards then redistribute the funds to local agencies to provide mental health services to clients in the community. Each fiscal year, boards must report to ODMH details regarding how the grant funds were spent.

Federal Grant – Community Mental Health Board Subsidy (335613)

This federally funded line item is used to distribute federal grant dollars to community behavioral health boards and statewide organizations, such as the National Alliance for Mental Illness of Ohio. The executive recommends funding of \$2.5 million for FY 2012 and FY 2013, a 3.7% decrease from FY 2011 estimated expenditures.

Mental Health Block Grant (335614)

This federally funded line item is used to distribute Mental Health Block Grant funds to community behavioral health boards. A range of services can be provided with these funds through qualified community programs. Services include psychosocial rehabilitation programs, mental health peer-support programs, and primary consumer-directed programs. Community mental health boards contract with providers for acute care services, which include individual and group counseling, residential treatment, crisis intervention, and case management to persons with severe and persistent mental illness. The executive recommends essentially flat funding at the FY 2011 estimated expenditure level of \$14.2 million for FY 2012 and FY 2013.

Community Medicaid Expansion (335635)

This federally funded line item is used to pass through to local boards the federal reimbursement received for community mental health Medicaid services that were paid for by the boards. The executive recommends funding of \$346.2 million for FY 2012, a 15.8% decrease from FY 2011 estimated expenditures. The executive recommendation does not include appropriation for this line item in FY 2013, as the financial responsibility for community mental health Medicaid services will be transferred to ODJFS in that year and paid for through line item 600525, Health Care/Medicaid.

The decrease in this line item in FY 2012 is primarily attributable to the loss of the additional federal Medicaid reimbursement, also known as enhanced FMAP (eFMAP). As a result of the American Recovery and Reinvestment Act of 2009, ODMH received eFMAP from FY 2009 through FY 2011. However, eFMAP is scheduled to end on June 30, 2011. ODMH received \$28.0 million in FY 2009, \$46.4 million in FY 2010, and \$37.6 million thus far in FY 2011 (July 1, 2010 through March 2, 2011) as a result of eFMAP. The decrease is also attributable to utilization controls proposed by ODMH.

In FY 2012, local boards will continue to make payments to providers for community mental health Medicaid services on behalf of ODMH. The bill contains a provision that requires boards to use funds provided through this line before using any other funding source to pay providers for Medicaid services in FY 2012.

Behavioral Healthcare (335615)

This line item funds Family Supports, formerly known as FAST (Family and Systems Team), administered by the county family and children first councils as part of Systems of Care. Family Supports may serve families who would otherwise have to

relinquish custody of their children solely to obtain needed intensive behavioral healthcare services and supports for the children. All Family Supports-funded youth must have a behavioral health diagnosis. ODMH reimburses the county councils with Family Supports dollars for providing formal and informal nonclinical services to children and families. Services may include transportation, mentoring, respite care, and tutoring. Revenue for this line item comes from a combination of funds that include transfers from GRF line item 335505, Local Mental Health Systems of Care, and transfers from the departments of Alcohol and Drug Addiction Services, Job and Family Services, and Youth Services. The executive recommends flat funding at the FY 2011 estimated expenditure level of \$6.7 million for FY 2012 and FY 2013. At the recommended level, county councils will generally maintain current service levels.

Community Capital Replacement (335616)

This line item provides funding to community behavioral health boards and community agencies to purchase residential facilities for people with mental illness. The boards and community agencies that purchase these facilities contract with ODMH for 40 years. To guarantee that the facility is used for the purposes intended, ODMH also places a mortgage on the facility for the same amount of time. If at any time during the contract the recipient of the funds realizes that the facility's use no longer meets the intended purpose, the recipient may request that ODMH sell the facility. Proceeds from the sale are deposited into the Community Capital Replacement Facilities Fund (Fund 6320), which supports this line item, until a new facility is identified. Upon approval from ODMH, the funds are released to purchase a new facility. The executive recommends flat funding at the FY 2011 estimated expenditure level of \$350,000 for FY 2012 and FY 2013.

Hospital Services

This category of appropriations supports the state Regional Psychiatric Hospitals (RPH) system. State hospital services fall into three categories: short-term hospitalization for individuals who experience an acute psychiatric episode, forensic admissions ordered by the criminal justice system, and long-term care for individuals whose needs cannot be met through community mental health services. Table 6 shows the line items included in this category and the recommended amounts.

Table 6. Governor's Recommended Amounts for Hospital Services				
Fund	ALI and Name		FY 2012	FY 2013
General Revenue Fund				
GRF	334412	Hospital Services	\$202,018,888	\$192,051,209
GRF	334506	Court Costs	\$584,210	\$584,210
General Revenue Fund Subtotal			\$202,603,098	\$192,635,419
General Services Fund Group				
1490	334609	Hospital – Operating Expenses	\$28,190,000	\$28,190,000
1500	334620	Special Education	\$150,000	\$150,000
General Services Fund Group Subtotal			\$28,340,000	\$28,340,000
Federal Special Revenue Fund Group				
3240	334605	Medicaid/Medicare	\$28,200,000	\$28,200,000
3A60	334608	Federal Miscellaneous	\$200,000	\$200,000
3A80	334613	Federal Letter of Credit	\$200,000	\$200,000
Federal Special Revenue Fund Group Subtotal			\$28,600,000	\$28,600,000
State Special Revenue Fund Group				
4850	334632	Mental Health Operating	\$2,477,500	\$2,477,500
State Special Revenue Fund Group Subtotal			\$2,477,500	\$2,477,500
Total Funding: Hospital Services			\$262,020,598	\$252,052,919

ODMH currently operates seven inpatient facilities through six RPHs. One facility is scheduled to close by the end of FY 2011. The six RPHs and the campus locations are:

- Appalachian (Athens County)
- Heartland (Stark County)
- Northcoast (Summit County and Cuyahoga County)
- Northwest (Lucas County)
- Summit (Hamilton County)
- Twin Valley (Franklin County)

The Cuyahoga County campus of Northcoast RPH is scheduled to close by July 1, 2011; its patients and bed capacity will be transferred to Northcoast's Summit County campus and some patients may be sent to Heartland RPH in Stark County.

The average daily resident population at state hospitals has decreased from 3,147 in FY 1990 to 989 in FY 2010. Since 1990, ODMH has reduced its hospital workforce by more than 3,000 positions and consolidated its inpatient facilities under the management of six RPHs. Over the last several years, the trend for hospital admissions has been trending toward short-term stabilization (less than 10 days) for acute mental illnesses rather than long-term inpatient stays. The median length of stay for civil patients is about 13 days. The forensic population, those people admitted to state hospitals from the criminal justice system, has increased by 21% since FY 2001 and now accounts for about 55% of all patients served.

Hospital Services (334412)

This new GRF line item will be used to fund the operating budget of ODMH's hospitals, civil bed days purchased by local boards, and forensic bed days utilized by individuals committed through the criminal justice system. Community behavioral health boards project how many civil bed days in ODMH's state hospitals they anticipate using in each fiscal year. Based on those projections, ODMH retains a portion of this line item to pay for the cost of those bed days. In FY 2010, community behavioral health boards utilized about 162,500 bed days and a total of about 5,000 people were admitted to state hospitals through the boards. In addition, state hospitals saw about 700 admissions through the criminal justice system in FY 2010, with the forensic population utilizing about 198,600 bed days.

The executive recommends funding of \$202.0 million in FY 2012 and \$192.1 million in FY 2013, a 4.9% decrease from FY 2012. At the recommended funding level, ODMH will be able to provide care to more than 6,000 individuals each year in state hospitals that have a current average daily resident population of about 1,000 patients. The recommended funding level will allow ODMH to maintain current capacity, patient safety, and sufficient staffing to operate the hospital system. For FY 2011, the hospital rates are \$535 per day for civil bed days and \$599 per day for forensic bed days.

Funding for hospital services was previously paid through GRF line item 334408, Community and Hospital Mental Health Services. Total hospital costs paid from that line item were \$196.0 million in FY 2010, which includes \$87.4 million for the cost of civil bed days purchased by local boards as well as \$108.6 million for forensic bed days. In FY 2012, the executive proposal permits ODMH to allow local boards to use amounts distributed from this line item that are not used on hospital bed days for other community mental health services. Beginning in FY 2013, the executive proposal allows ODMH to take a regional approach to bed day planning.

Commitment and Treatment

The executive proposes a change to how civil and forensic commitments are made. Currently, when a court commits an individual with a forensic status, the commitment is to a specific facility. Beginning in FY 2012, forensic commitments will be made directly to ODMH. For civil commitments, a court currently has options on where to commit an individual, but most civil commitments are made to local boards, which then determine an appropriate placement. Beginning in FY 2013, civil commitments that would have been made to local boards will be made to ODMH. This will allow ODMH to determine the level of clinical care each individual, whether civil or forensic, requires and then send them to an appropriate facility, including state hospitals or contracted facilities.

In addition, under the executive proposal, ODMH is authorized to contract with private entities to carry out its duties. This provision is designed to give ODMH flexibility to contract with private facility operators for the treatment and evaluation of individuals needing mental health services. According to ODMH, these changes could result in significant cost savings by reducing the number of forensic bed days utilized at state hospitals.

Court Costs (334506)

This GRF line item provides reimbursement to county probate courts for commitment hearings for mentally ill individuals. Reimbursable court costs include fees or expenses for police, sheriffs, physicians, witnesses, transportation, conveyance assistants, attorneys, referees, reporters, and court costs. In FY 2010, ODMH reimbursed a total of about \$618,000 to 36 courts that have relationships with the local boards. The executive budget proposes \$584,210 in FY 2012 and FY 2013, a 10.0% decrease from FY 2011 estimated expenditures. At the recommended level, ODMH will likely reduce the reimbursement amount to courts for these services.

Hospital – Operating Expenses (334609)

This line item is used to pay operating expenses for ODMH's hospitals, which may include costs related to the Community Support Network (CSN). CSN services are provided in a community setting by ODMH employees and paid for by the local boards. Revenues are generated from the sale of goods and services provided by ODMH, shared service agreements with other agencies or organizations, and conference and licensure fees. The executive recommends funding of \$28.2 million for FY 2012 and FY 2013, a 21.8% decrease from FY 2011 estimated expenditures.

Special Education (334620)

This line item is used to educate school age residents in state hospitals and for adult education programs and GED classes. ODMH pays teacher salaries, supplies, and equipment to administer special education programs from this line item. Revenue for

this line item comes from reimbursement from the Ohio Department of Education for these expenditures. ODMH did not receive revenue to support this line item during the FY 2010-FY 2011 biennium. The executive recommends \$150,000 for FY 2012 and FY 2013.

Medicaid/Medicare (334605)

This federally funded line item is used to pay operating expenses for ODMH's hospitals. Funding for this line item primarily comes from payments for services to patients whose medical insurance provider is Medicare. The executive recommends funding of \$28.2 million for FY 2012 and FY 2013, a 6.6% decrease from FY 2011 estimated expenditures. According to ODMH, the appropriated amounts closely align with projected revenues for, and cash levels in, the fund that supports this line item.

Federal Miscellaneous (334608)

This federally funded line item is used by ODMH to expend federal grants for individuals with mental illness who receive inpatient services at state hospitals. The executive recommends funding of \$200,000 for FY 2012 and FY 2013, a 65.9% decrease from FY 2011 estimated expenditures. If grant awards exceed the recommended appropriation, ODMH will seek Controlling Board approval for an increase in appropriation.

Federal Letter of Credit (334613)

This federally funded line item is specific to grants for hospital services. Federal grants awarded through a letter of credit allow ODMH to present receipts for expenditures and draw down federal dollars; however, the federal dollars may not be held in the state account for longer than 72 hours. The executive recommends flat funding at the FY 2011 estimated expenditure level of \$200,000 for FY 2012 and FY 2013. If grant awards exceed the recommended appropriation, ODMH will seek Controlling Board approval for an increase in appropriation.

Mental Health Operating (334632)

This line item is used to pay operating expenses for ODMH's hospitals. ODMH deposits revenue from various sources into the Mental Health Operating Fund (Fund 4850), which supports this line item. Those sources include moneys received from private insurance or third-party payers for patients who receive care at a state hospital, monthly reimbursement from a patient's monthly income, reimbursement deposits from patients and liable relatives, workers' compensation reimbursements for patients hospitalized with a work-related injury, and other related revenue. According to ODMH, the cash balance in the fund has decreased over the years due to rising hospital operating costs. The executive recommends \$2.5 million for FY 2012 and FY 2013, a 3.2% increase over FY 2011 estimated expenditures

Office of Support Services

This category of appropriations provides funding for ODMH's Office of Support Services (OSS). Table 7 shows the line item included in this category and the recommended appropriation.

Table 7. Governor's Recommended Amounts for Office of Support Services				
Fund	ALI and Name		FY 2012	FY 2013
General Services Fund				
1510	336601	Office of Support Services	\$129,770,770	\$129,779,822
Total Funding: Office of Support Services			\$129,770,770	\$129,779,822

Office of Support Services (336601)

This line item is used to support the operations of OSS. OSS is self-supporting and captures economies of scale by purchasing raw and prepared bulk food items and wholesale pharmaceuticals on behalf of certain state facilities and community agencies. OSS also provides pharmacy dispensing and delivery services. Consultation in the areas of dietary training, cycle menu planning, pharmacy standards, and drug information is also available. OSS handles the bidding, term contracts, and direct procurement of goods and services. OSS receives revenue by billing state and local departments and agencies for the sale of its goods and services. Participating state agencies include the departments of Rehabilitation and Correction (DRC), Youth Services, Developmental Disabilities, and ODMH itself. The executive recommends funding of \$129.8 million in FY 2012 and FY 2013, an 18.5% decrease from FY 2011 estimated expenditures. According to ODMH, the recommended amounts are consistent with estimated OSS sales.

From FY 2004 to FY 2008, OSS sales have grown from \$91.1 million to more than \$134.5 million. This sales growth is attributable to an increase in DRC's inmate population, implementation of DRC's healthy menus program, the use of two new medications to treat blood disorders, and the introduction of two new antipsychotic medications. OSS sales peaked in FY 2008, but then decreased to \$115.6 million in FY 2010. This decrease is attributable to the conversion of some name brand antipsychotic medications to generics, the use of a different therapy routine to treat blood disorders, the closing of two state hospitals, and a combined effort of both DRC and ODMH to strictly manage formularies and depend primarily on generic medications.

H.B. 1 of the 128th General Assembly included changes in state law to permit, rather than require, ODMH to provide goods and services to DRC; other specified state departments; state, county, and municipal agencies; and ODMH state hospitals and community based mental health providers. According to ODMH, there have been no departments or agencies that have discontinued their contracts with OSS as a result of this provision.

Forensic Services

This category of appropriations provides funding for services related to individuals with mental illness who have also been in, or have been referred from, the criminal justice system for mental health services. Table 8 shows the line item included in this category and the recommended appropriation.

Table 8. Governor's Recommended Amounts for Forensic Services				
Fund	ALI and Name		FY 2012	FY 2013
General Revenue Fund				
GRF	332401	Forensic Services	\$3,244,251	\$3,244,251
Total Funding: Forensic Services			\$3,244,251	\$3,244,251

Forensic Services (332401)

This GRF line item is used to pay costs of providing forensic competency to stand trial and not guilty by reason of insanity evaluations for courts of common pleas provided by ten Certified Community Forensic Psychiatry Centers. In addition, this line item is used to provide second opinion psychiatric evaluations for individuals being released from state hospitals.⁴ This line item is also used to fund the forensic monitoring program. The executive recommends flat funding at the FY 2011 estimated expenditure level of \$3.2 million in FY 2012 and FY 2013.

ODMH is required by state law to fund evaluations for people pending adjudication to determine their competency to stand trial and/or to determine sanity. In FY 2010, ODMH directly funded nearly 2,100 evaluations for courts of common pleas.

Persons found not guilty by reason of insanity or incompetent to stand trial-unrestorable and held under criminal court jurisdiction may be released to the community on conditional release and remain in treatment. ODMH maintains the forensic monitoring program which allows ODMH and local mental health boards to track individuals on conditional release, as required by state law. At the end of FY 2010, 42 forensic monitors across the state were tracking 446 individuals on conditional release. The number of individuals on conditional release currently tracked by forensic monitors ranges from as few as one in rural areas to 50 or 60 in urban areas.

⁴ Costs for bed days at state hospitals utilized by individuals with a forensic status would be paid through new GRF line item 334412, Hospital Services, which is proposed under the executive budget.

Administration

This category of appropriations provides funding for ODMH's central office staff who provide technical assistance and support for all components of the state mental health system, including local boards, statewide agencies, family and consumer groups, state and private hospitals, as well as oversight of ODMH's day-to-day operations. Offices or subprograms under the areas of central office administration include: the Director's office, administrative services, the medical directors office, legal services, hospital services, human resources, and program policy and development. Table 9 shows the line items included in this category and the recommended appropriations.

Table 9. Governor's Recommended Amounts for Administration				
Fund		ALI and Name	FY 2012	FY 2013
General Revenue Fund				
GRF	333321	Central Administration	\$16,074,367	\$16,074,367
GRF	333402	Resident Trainees	\$476,642	\$476,642
GRF	333403	Pre-Admission Screening Expenses	\$486,119	\$486,119
GRF	333415	Lease Rental Payments	\$18,394,250	\$19,907,900
GRF	333416	Research Program Evaluation	\$421,724	\$421,998
General Revenue Fund Subtotal			\$35,853,102	\$37,367,026
General Services Fund Group				
1490	333609	Central Office Operating	\$1,343,190	\$1,343,190
General Services Fund Group Subtotal			\$1,343,190	\$1,343,190
Federal Special Revenue Fund Group				
3240	333605	Medicaid/Medicare	\$154,500	\$154,500
3A60	333608	Community and Hospital Services	\$140,000	\$140,000
3A70	333612	Social Services Block Grant	\$50,000	\$50,000
3A80	333613	Federal Grant – Administration	\$4,717,000	\$4,717,000
3A90	333614	Mental Health Block Grant – Administration	\$748,470	\$748,470
3B10	333635	Community Medicaid Expansion	\$13,691,682	\$13,691,682
Federal Special Revenue Fund Group Subtotal			\$19,501,652	\$19,501,652
State Special Revenue Fund Group				
2320	333621	Family and Children First Administration	\$448,286	\$432,197
4850	333632	Mental Health Operating	\$134,233	\$134,233
4X50	333607	Behavioral Health Medicaid Services	\$3,000,624	\$3,000,624
5V20	333611	Nonfederal Miscellaneous	\$100,000	\$100,000
State Special Revenue Fund Group Subtotal			\$3,683,143	\$3,667,054
Total Funding: Administration			\$60,381,087	\$61,878,922

Central Administration (333321)

This GRF line item is used to pay personal service costs, maintenance, and equipment for ODMH. The executive recommends funding of \$16.1 million for FY 2012 and FY 2013, a 6.6% decrease from FY 2011 estimated expenditures. In the FY 2008-FY 2009 biennium, central office administration was reduced by \$3.5 million, which required ODMH to reduce central office staff by 20%. In the FY 2010-FY 2011 biennium, this line item was further reduced by an additional \$3.0 million. These two funding reductions resulted in 62 fewer full-time positions and the reclassification of seven positions to a lower pay range. Under the executive proposal, ODMH plans to generally maintain current staff levels for the FY 2012-FY 2013 biennium, but some layoffs may be necessary.

Under the executive proposal, licensing of adult care facilities is transferred from the Department of Health to ODMH. According to ODMH, about \$1.1 million in funding has been added to this line item for ODMH to perform these functions in the upcoming biennium. In FY 2010, the Department of Health licensed 248 adult group homes and 428 adult family homes at a total cost of \$1.7 million. Of that amount, \$1.6 million was paid through GRF line item 440453, Health Care Quality Assurance. The remaining \$100,000 was from fee revenue generated through licenses and inspections and was expended through line item 440647, Fee Supported Programs. At the time of this writing, it is uncertain if employees who currently administer this program will move to ODMH, or what fees ODMH will charge for licenses and inspections.

Resident Trainees (333402)

This GRF line item funds residencies and traineeship programs in psychiatry, psychology, nursing, and social work at state universities and teaching hospitals. ODMH, in affiliation with institutions of higher education, provides curricula development, training programs, and tuition reimbursement for mental health professionals. The executive recommends \$476,642 for FY 2012 and FY 2013, a 10.0% decrease from FY 2011 estimated expenditures.

Pre-Admission Screening Expenses (333403)

This GRF line item is used to develop, administer, and deliver screening assessments designed to help insure that only people in need of institutional placement receive hospital services. These screenings take place before a Medicaid-eligible person is admitted to a psychiatric hospital or nursing home, or may be completed after a person enters a facility to determine if continued placement is necessary. ODMH also uses this line item for discharge planning and referral and to adjudicate appeals and grievance procedures. The executive recommends \$486,119 for FY 2012 and FY 2013, a 10.0% decrease from FY 2011 estimated expenditures.

Lease Rental Payments (333415)

This GRF line item is used to make debt service payments on bonds issued for long-term capital construction projects. The Office of Budget and Management calculates the amount needed for each fiscal year to fulfill these obligations. The executive recommends funding of \$18.4 million for FY 2012, a 16.2% decrease from FY 2011 estimated expenditures and \$19.9 million for FY 2013, an 8.2% increase over FY 2012.

Research Program Evaluation (333416)

This GRF line item is used for departmental research projects. The executive recommends \$421,724 for FY 2012, a 27.6% decrease from FY 2011 estimated expenditures, and \$421,998 for FY 2013, a 0.1% increase over FY 2012. ODMH promotes, directs, conducts, and coordinates scientific research concerning the causes and prevention of mental illness for adults and children, the effectiveness of mental health services, and the impact of changes in the public mental health system. Through a grant program, ODMH collaborates with researchers from Ohio colleges, universities, and other for-profit and nonprofit organizations. In FY 2010, ODMH provided seven grants to colleges and universities, and one to a nonprofit. Each grant is classified as regular or small. Regular grants are available to researchers in universities and mental health settings throughout Ohio. Graduate students at colleges and universities in Ohio apply for small grants. In FY 2010, ODMH funded seven regular grants and one small grant, totaling nearly \$300,000.

Central Office Operating (333609)

This line item is used to support central office operating expenses. Revenues consist of payments ODMH receives for goods and services it provides to other governmental and nongovernmental entities, cafeteria receipts, fees for copying services, proceeds from the sale of other personal property under the agency's control, and payments from community mental health boards and agencies for training, seminars, and printed materials provided by ODMH. In addition, this line item is used to pay expenses for the SEARCH grant, which ODMH receives as a transfer from the Department of Health. The executive recommends essentially flat funding at the FY 2011 estimated expenditure level of \$1.3 million for FY 2012 and FY 2013.

Medicaid/Medicare (333605)

This federally funded line is used to pay ODMH administrative costs for administering services to Medicare patients. Funding for this line item primarily comes from payments for services to patients whose medical insurance provider is Medicare. The executive recommends flat funding at the FY 2011 estimated expenditure level of \$154,500 for FY 2012 and FY 2013.

Community and Hospital Services (333608)

This federally funded line item is used to pay costs to administer federal grants. The executive recommends flat funding at the FY 2011 estimated expenditure level of \$140,000 for FY 2012 and FY 2013.

Social Services Block Grant (333612)

This federally funded line item is used to pay for central office expenses related to administering the Title XX Social Services Block Grant Program. The executive recommends funding of \$50,000 for FY 2012 and FY 2013, which is twice as much as FY 2011 estimated expenditures.

Federal Grants – Administration (333613)

This federally funded line item is used to pay for central office expenses to administer federal letter of credit grants. In FY 2010, ODMH spent about \$2.3 million to administer federal letter of credit grants from this line item. These grants include the Transformation State Incentive Grant (TSIG) and the Project Vets Intervention Program Grant, among others. TSIG is funded through October 2011. The executive recommends funding of \$4.7 million for FY 2012 and FY 2013, a 3.5% decrease from FY 2011 estimated expenditures.

Mental Health Block Grant – Administration (333614)

This federally funded line item is used to support the administrative costs of implementing community mental health programs funded by the Community Mental Health Block Grant. The grant is awarded by the federal Substance Abuse and Mental Health Services Administration, often referred to as SAMHSA. In FY 2010, ODMH received about \$700,000 (5% of the total grant allocation) for administration. The executive recommends flat funding at the FY 2011 estimated expenditure level of \$748,470 for FY 2012 and FY 2013.

Community Medicaid Expansion (333635)

This federally funded line item is used to pay central office expenses to administer Medicaid. Funding for this line item comes from federal reimbursement for Medicaid. The federal government reimburses 50% of Medicaid administrative costs. The nonfederal share of Medicaid administrative expenses is paid through GRF line item 333321, Central Administration. The executive recommends flat funding at the FY 2011 estimated expenditure level of \$13.7 million for FY 2012 and FY 2013. In FY 2013, when community mental health Medicaid is transferred to ODJFS, ODMH will continue to be involved with developing Medicaid policy for mental health services and with certain administrative functions.

Family and Children First Administration (333621)

This line item is used to pay operating costs of the Ohio Family and Children First Cabinet Council, including staff member salaries and benefits and day-to-day activities. Including the Executive Director, who is appointed by the Governor, the office has five employees. Funding for this line item currently comes from contributions from each of the seven state agencies represented on the Cabinet Council (departments of Alcohol and Drug Addiction Services, Developmental Disabilities, Education, Job and Family Services, Health, Mental Health, and Youth Services).

In FY 2010, the Cabinet Council was expanded to include the departments of Aging and Rehabilitation and Corrections; however, these two departments will not begin to contribute financially to the Cabinet Council until FY 2012. Under the executive proposal, the Rehabilitation Services Commission is added to the Cabinet Council. The executive recommends funding of \$448,286 in FY 2012, a 38.2% decrease from FY 2011 estimated expenditures, and \$432,197 in FY 2013, a 3.6% decrease from FY 2012. Given the recommended appropriation, one staff position will likely need to be changed to part time instead of full time.

Mental Health Operating (333632)

This line item is used to refund third party payers who unintentionally overpaid for a patient's hospital services at a state-operated hospital. In FY 2010, ODMH refunded a total of about \$5,000 to three third-party payers. ODMH deposits revenue received from private insurance or third-party payers for patients who receive care at a state hospital, monthly reimbursement from a patient's monthly income, reimbursement deposits from patients and/or liable relatives, workers' compensation reimbursements for patients hospitalized with a work-related injury, and other related revenue into the Mental Health Operating Fund (Fund 4850), which supports this line item and line item 334632, also named Mental Health Operating (discussed in the section on Hospital Services). The executive recommends flat funding at the FY 2011 estimated expenditure level of \$134,233 in FY 2012 and FY 2013.

Behavioral Health Medicaid Services (333607)

This line item is used to pay for the private Institutions for Mental Disease (IMD) Program. Beginning in 1996, ODMH assumed this responsibility from ODJFS. This line item provides the nonfederal share of Medicaid covered services provided in IMDs, which are private facilities with less than 16 beds. Funding for this program is provided to ODMH by ODJFS pursuant to an interagency agreement. To provide funding to ODMH, ODJFS uses a portion of the disproportionate share payments it receives from the federal government for uncompensated care provided in state-run and private hospitals. The executive recommends funding of \$3.0 million in FY 2012 and FY 2013, a 91.6% decrease from FY 2011 estimated expenditures. In FY 2011, this line item was used to receive a one-time transfer of federal reimbursement dollars from

ODJFS that resulted from the extension of enhanced federal Medicaid reimbursement through June 30, 2011; these funds, which totaled about \$32.6 million, were then passed on to local boards.

Nonfederal Miscellaneous (333611)

This line item is used to pay central office expenses related to administering nonfederal grants ODMH receives. Revenues include grant moneys from private foundations and any miscellaneous nonfederal funding source. The executive recommends funding of \$100,000 in FY 2012 and FY 2013, an 82.1% decrease from FY 2011 estimated expenditures. If grant awards exceed the recommended appropriation, ODMH will seek Controlling Board approval for an increase in appropriation.

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Department of Mental Health

General Revenue Fund

GRF 332401 Forensic Services

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$4,371,610	\$4,323,287	\$3,117,515	\$3,244,251	\$3,244,251	\$3,244,251
	-1.1%	-27.9%	4.1%	0.0%	0.0%

Source: General Revenue Fund

Legal Basis: Sections 335.10 and 335.10.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by Am Sub. HB 117 of the 121st G.A.)

Purpose: This line item is used to pay costs of providing forensic and second opinion evaluations through community forensic psychiatry centers. ODMH is required to fund evaluations for people pending adjudication to determine their competency to stand trial and/or to determine sanity.

GRF 333321 Central Administration

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$21,693,767	\$19,898,717	\$16,249,073	\$17,204,000	\$16,074,367	\$16,074,367
	-8.3%	-18.3%	5.9%	-6.6%	0.0%

Source: General Revenue Fund

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A.

Purpose: This line item is used to pay central office operating costs, including personal services, maintenance, and equipment.

GRF 333402 Resident Trainees

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$1,416,111	\$1,357,071	\$527,690	\$529,602	\$476,642	\$476,642
	-4.2%	-61.1%	0.4%	-10.0%	0.0%

Source: General Revenue Fund

Legal Basis: ORC 5119.11; Sections 335.10 and 335.20.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by Am. Sub. H.B. 694 of the 114th G.A.)

Purpose: This line item is used to fund the development of curricula and the provision of training programs to support public mental health services for training agreements entered into by the Director of Mental Health.

Department of Mental Health

GRF 333403 Pre-Admission Screening Expenses

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$650,135	\$650,135	\$514,446	\$540,132	\$486,119	\$486,119
	0.0%	-20.9%	5.0%	-10.0%	0.0%

Source: General Revenue Fund

Legal Basis: Sections 335.10 and 335.20.20 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by Am. Sub. H.B. 117 of the 121st G.A.)

Purpose: This line item is used to pay expenses 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 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.

GRF 333415 Lease Rental Payments

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$23,368,304	\$19,581,264	\$20,085,292	\$21,951,800	\$18,394,250	\$19,907,900
	-16.2%	2.6%	9.3%	-16.2%	8.2%

Source: General Revenue Fund

Legal Basis: Sections 335.10 and 335.20.30 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by Am. Sub. H.B. 117 of the 121st G.A.)

Purpose: This line item is used to pay debt service on long-term ODMH capital construction projects. The Office of Budget and Management calculates the amount needed for each fiscal year to fulfill these obligations.

Department of Mental Health

GRF 333416 Research Program Evaluation

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$1,001,788	\$628,882	\$538,273	\$582,462	\$421,724	\$421,998
	-37.2%	-14.4%	8.2%	-27.6%	0.1%

Source: General Revenue Fund

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by Am. Sub. H.B. 694 of the 114th G.A.)

Purpose: This line item is used to fund departmental research projects. ODMH, in collaboration with universities and research institutions, promotes, directs, conducts, and coordinates scientific research concerning the causes and prevention of mental illness for both adults and children, the effectiveness of mental health services, and the impact of changes in the public mental health system.

GRF 334408 Community and Hospital Mental Health Services

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$397,540,684	\$379,374,545	\$371,746,212	\$377,332,336	\$0	\$0
	-4.6%	-2.0%	1.5%	-100%	N/A

Source: General Revenue Fund

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by Am. Sub. H.B. 111 of the 118th G.A.)

Purpose: This line item is used to fund state mental health hospitals' operating costs and mental health services purchased by community mental health boards. Local boards project how many state hospital bed days they anticipate using in each fiscal year. Based on those projections, ODMH retains a portion of this line item to pay for the cost of those bed days. The balance of the line item is allocated to the community mental health board for the purchase of community mental health services for both individuals enrolled in Medicaid and individuals not eligible for Medicaid.

Under H.B. 153, As Introduced, funding for these purposes is provided through GRF line items 334412, Hospital Services; 335501, Mental Health Medicaid Match; and 335505, Local Mental Health Systems of Care.

Department of Mental Health

GRF 334412 Hospital Services

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$0	\$0	\$0	\$0	\$202,018,888	\$192,051,209
	N/A	N/A	N/A	N/A	-4.9%

Source: General Revenue Fund

Legal Basis: Proposed by the Executive Budget

Purpose: This new line item will be used to fund state mental health hospitals' operating costs, mental health hospital services purchased by community mental health boards, and the cost of bed days at state hospitals for forensic patients. Local boards project how many state hospital bed days they anticipate using in each fiscal year. Based on those projections, ODMH makes payments to the hospitals for the cost of those bed days.

H.B. 153, As Introduced, proposes to discontinue line item 334408, Community and Hospital Mental Health Services, and provide funds to carry out the purposes of the discontinued line item through this new line item; new GRF line item 335505, Mental Health Medicaid Match; and GRF line item 335505, Local Mental Health Systems of Care.

GRF 334506 Court Costs

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$1,025,440	\$931,238	\$713,580	\$649,122	\$584,210	\$584,210
	-9.2%	-23.4%	-9.0%	-10.0%	0.0%

Source: General Revenue Fund

Legal Basis: ORC 5122.43; Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A.

Purpose: This line item is used to reimburse county probate courts for expenses associated with commitment proceedings for mentally ill individuals. Reimbursable costs include fees or expenses for police, sheriffs, physicians, witnesses, conveyance assistants, attorneys, referees, reporters, transportation, and court costs.

Department of Mental Health

GRF 335404 Behavioral Health Services-Children

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$7,400,015	\$9,245,825	\$7,495,445	\$7,460,800	\$0	\$0
	24.9%	-18.9%	-0.5%	-100%	N/A

Source: General Revenue Fund

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established in Am. Sub. H.B. 66 of the 126th G.A.)

Purpose: This line item was used to provide funding to local boards for flexible, family-centered community behavioral health treatment and support services. This line item was also used to provide funds to local boards through a competitive grant process for demonstration projects that focus on improving behavioral health services for the child welfare and juvenile justice populations. ODMH distributed funds to local mental health boards based on a distribution formula approved by the Director. These funds were required to be used in accordance with a local board's community mental health plan and in collaboration with the county family and children first council. The Ohio Family and Children First Cabinet Council is required to define a System of Care guidance process, which is to guide the collaborative services provided by the local board and the county family and children first council.

Under H.B. 153, As Introduced, funding previously provided through this line item is included in line item 335505, Local Mental Health Systems of Care.

Department of Mental Health

GRF 335405 Family & Children First

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$2,239,928	\$2,259,928	\$1,430,616	\$1,502,086	\$1,386,000	\$1,386,000
	0.9%	-36.7%	5.0%	-7.7%	0.0%

Source: General Revenue Fund

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established in Am. Sub. H.B. 66 of the 126th G.A.)

Purpose: This line item is used by the Ohio Family and Children First Cabinet Council to allocate funds to county family and children first councils. The Cabinet Council is composed of the Superintendent of Public Instruction and the Departments of Aging, Alcohol and Drug Addiction Services, Developmental Disabilities, Job and Family Services, Health, Mental Health, Rehabilitation and Corrections, and Youth Services. The purpose of the Cabinet Council is to help families seeking government services. ODMH acts as the fiscal agent for the Cabinet Council. The appropriation is equally divided among the 88 county cabinet councils. These allocated funds may be used to provide a stipend to parent representatives that serve on county councils, pay for audits and technical assistance, or for planning costs. Operating costs of the Cabinet Council are paid through line item 333621, Family and Children First Administration, in the State Special Revenue Fund Group.

H.B. 153, As Introduced, proposes adding the Rehabilitation Services Commission as a contributing member to the Cabinet Council.

GRF 335419 Community Medication Subsidy

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$9,959,798	\$9,959,798	\$9,959,798	\$9,959,798	\$8,963,818	\$8,963,818
	0.0%	0.0%	0.0%	-10.0%	0.0%

Source: General Revenue Fund

Legal Basis: Sections 335.10 and 335.40.20 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by Am. Sub. H.B. 171 of the 117th G.A.)

Purpose: This line item is used to assist community mental health boards with the purchase of psychotropic medication for indigent persons. The goal is to reduce hospitalization caused by a lack of medication and to provide subsidized support for methadone costs. If the appropriation level does not fund all the medication costs for indigent persons, local boards must pay the remaining costs.

Department of Mental Health

GRF 335501 Mental Health Medicaid Match

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$0	\$0	\$0	\$0	\$186,400,000	\$0
	N/A	N/A	N/A	N/A	-100%

Source: General Revenue Fund

Legal Basis: Proposed by the Executive Budget

Purpose: This new line item will be used by ODMH to pay for the nonfederal share of community mental health Medicaid services. In FY 2012, ODMH will distribute allocations to community behavioral health boards to pay costs of community mental health for Medicaid services on behalf of ODMH.

H.B. 153, As Introduced, proposes to discontinue the line item that previously served this purpose - 334408, Community and Hospital Mental Health Services.

GRF 335505 Local Mental Health Systems of Care

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$106,511,686	\$63,691,654	\$12,216,678	\$20,644,308	\$38,913,776	\$48,037,955
	-40.2%	-80.8%	69.0%	88.5%	23.4%

Source: General Revenue Fund

Legal Basis: Sections 335.10 and 335.40.30 of Am. Sub. H.B. 1 of the 128th G.A. (originally established in Am. Sub. H.B. 66 of the 126th G.A.)

Purpose: This line item is used to distribute subsidy dollars to the state's 50 community behavioral health boards to provide an integrated system of mental health care that meets locally determined needs. Boards contract with local public and private non-profit agencies to provide services to persons suffering from mental illness in their county or multi-county service areas. The basic services supported include crisis intervention, hospital pre-screening, counseling-psychotherapy, community support program services, diagnostic assessment, consultations, education, and residential-housing.

Under H.B. 153, As Introduced, this line item is used to consolidate funding provided to the local boards for services to those not eligible for Medicaid. Some of this funding was previously provided through line items 334408, Community and Hospital Mental Health Services and 335404, Behavioral Health Services-Children.

Department of Mental Health

GRF 335506 Residential State Supplement

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$0	\$0	\$0	\$0	\$4,702,875	\$4,702,875
	N/A	N/A	N/A	N/A	0.0%

Source: General Revenue Fund

Legal Basis: Proposed by the Executive Budget

Purpose: This new line item will be used to administer the Residential State Supplement (RSS) program and transfer funds to the Department of Job and Family Services to issue subsidy payments to RSS recipients. The RSS Program provides cash assistance and case management to aged, blind, or disabled adults who meet certain eligibility requirements and reside in an approved living arrangement.

H.B. 153, As Introduced, proposes to transfer the RSS program from the Department of Aging. The RSS program was previously funded through line items 490412, Residential State Supplement, 490610, PASSPORT/Residential State Supplement, and 490623, Long Term Care Budget.

General Services Fund Group

1490 333609 Central Office Operating

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$1,280,911	\$1,138,510	\$857,817	\$1,350,000	\$1,343,190	\$1,343,190
	-11.1%	-24.7%	57.4%	-0.5%	0.0%

Source: General Services Fund Group: Payments for goods and services from other governmental and non-governmental entities, cafeteria receipts, fees for copying services, proceeds from the sale of other personal property under the agency's control, conference and licensure fees, and payments from community mental health boards and agencies for training, seminars, and printed materials provided by ODMH

Legal Basis: ORC 5119.161; Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by Controlling Board in FY 1981; subsequently established in ORC 5119.161 by Am. Sub. H.B. 291 of the 115th G.A.)

Purpose: This line item is used to support a portion of central office operating expenses.

Department of Mental Health

1490 334609 Hospital - Operating Expenses

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$24,588,228	\$27,782,657	\$14,276,327	\$36,050,000	\$28,190,000	\$28,190,000
	13.0%	-48.6%	152.5%	-21.8%	0.0%

Source: General Services Fund Group: Sale of goods and services provided by ODMH, shared service agreements with other agencies or organizations, and conference and licensure fees

Legal Basis: ORC 5119.161; Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by Controlling Board in FY 1981; subsequently established in ORC 5119.161 by Am. Sub. H.B. 291 of the 115th G.A.)

Purpose: This line item is used to pay operating expenses of ODMH's state hospitals, which may include costs related to the Community Support Network (CSN). CSN services are provided in a community setting by ODMH employees and paid for by community mental health boards.

1500 334620 Special Education

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$120,930	\$116,601	\$0	\$150,000	\$150,000	\$150,000
	-3.6%	-100%	N/A	0.0%	0.0%

Source: General Services Fund Group: Reimbursement from the Department of Education

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by Controlling Board in October 1976)

Purpose: This line item is used to pay expenses for educating school-age residents in state hospitals and include adult education programs and GED classes.

Department of Mental Health

1510 336601 Office of Support Services

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$114,002,481	\$111,181,138	\$97,630,987	\$159,279,140	\$129,770,770	\$129,779,822
	-2.5%	-12.2%	63.1%	-18.5%	0.0%

Source: General Services Fund Group: Moneys from other entities that purchase goods and services from the Office of Support Services

Legal Basis: ORC 5119.16; Section 335.10 of H.B. 1 of the 128th G.A. (originally established in 1972)

Purpose: This line item is used to fund the Office of Support Services (OSS). This is a self-supporting office that captures economies of scale by purchasing raw and prepared bulk food items and wholesale pharmaceuticals on behalf of state facilities and community agencies. OSS also provides pharmacy dispensing and delivery services. Consultation in the areas of dietary training, cycle menu planning, pharmacy standards, and drug information is also available. Participating state agencies include the Departments of Administrative Services, Developmental Disabilities, Mental Health, Public Safety, Rehabilitation and Correction, Transportation, and Youth Services.

4P90 335604 Community Mental Health Projects

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$0	\$0	\$0	\$250,000	\$250,000	\$250,000
	N/A	N/A	N/A	0.0%	0.0%

Source: General Services Fund Group: Sale of property

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established in Am. Sub. H.B. 66 of the 126th G.A.)

Purpose: This line item is used to pay for property maintenance of hospital grounds, particularly those sites no longer in use but still owned by ODMH. This line item may also be used to pay for land surveys and appraisals when property is being prepared for sale.

Department of Mental Health

Federal Special Revenue Fund Group

3240 333605 Medicaid/Medicare

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$25	\$555,481	\$0	\$154,500	\$154,500	\$154,500
	2221823.4%	-100%	N/A	0.0%	0.0%

Source: Federal Special Revenue Fund Group: Payments for services to patients whose medical insurance provider is Medicare

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established in Am. Sub. H.B. 291 of the 115th G.A.)

Purpose: This line item used to pay ODMH administrative expenses to administer services to Medicare patients.

3240 334605 Medicaid/Medicare

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$29,579,072	\$30,035,376	\$15,794,774	\$30,200,000	\$28,200,000	\$28,200,000
	1.5%	-47.4%	91.2%	-6.6%	0.0%

Source: Federal Special Revenue Fund Group: Payments for services to patients whose medical insurance provider is Medicare

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established in Am. Sub. H.B. 291 of the 115th G.A.)

Purpose: This line is used to pay some of the operating expenses for the state's mental health hospitals.

3A60 333608 Community and Hospital Services

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$13,658	\$497	\$59,885	\$140,000	\$140,000	\$140,000
	-96.4%	11938.2%	133.8%	0.0%	0.0%

Source: Federal Special Revenue Fund Group: Miscellaneous federal grants

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A.

Purpose: This line item is used to pay costs to administer certain federal grants.

Department of Mental Health

3A60 334608 Federal Miscellaneous

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$0	\$5,956	\$0	\$586,224	\$200,000	\$200,000
	N/A	-100%	N/A	-65.9%	0.0%

Source: Federal Special Revenue Fund Group: Miscellaneous federal grants

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established in Am. Sub. H.B. 66 of the 126th G.A)

Purpose: This line item is used to expend federal grants for hospital-based activities for individuals with mental illness who receive inpatient services at state hospitals.

3A60 335608 Federal Miscellaneous

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$2,022,117	\$798,329	\$1,906,020	\$2,178,699	\$2,170,000	\$2,170,000
	-60.5%	138.8%	14.3%	-0.4%	0.0%

Source: Federal Special Revenue Fund Group: Miscellaneous federal grants

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by Controlling Board on December 1, 2000)

Purpose: This line item is used to allocate federal grants for community-based programs that include subsidy payments to community mental health boards and other subgrantees.

3A70 333612 Social Services Block Grant

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$25,000	\$25,000	\$25,000	\$25,000	\$50,000	\$50,000
	0.0%	0.0%	0.0%	100.0%	0.0%

Source: Federal Special Revenue Fund Group: CFDA 93.667, Social Services Block Grant (Title XX)

Legal Basis: ORC 5101.46; Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A.

Purpose: This line item is used to pay central office expenses to administer the Social Services Block Grant.

Department of Mental Health

3A70 335612 Social Services Block Grant

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$8,215,257	\$10,594,693	\$8,129,006	\$8,632,288	\$8,400,000	\$8,400,000
	29.0%	-23.3%	6.2%	-2.7%	0.0%

Source: Federal Special Revenue Fund Group: CFDA 93.667, Social Services Block Grant (Title XX)

Legal Basis: ORC 5101.46; Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A.

Purpose: This line item is used to distribute Social Services Block Grant (Title XX) funds to community mental health boards. Title XX funds are allocated to states on the basis of population. Title XX funds are received by the Department of Job and Family Services, which keeps 72.5% and distributes the remainder; 14.57% goes to the Department of Developmental Disabilities and 12.93% goes to ODMH. States are given wide discretion in determining which services will be provided with these funds. These Title XX funds are provided to the community mental health boards through an allocation process based on each board's total population, the percentage of the population below the federal poverty level, and how each board used the funds in the past. The boards then redistribute the funds to local agencies to provide mental health services to clients in the community. Each fiscal year, the boards must submit an annual report to ODMH detailing how the grant funds were spent.

3A80 333613 Federal Grants-Administration

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$2,379,962	\$3,156,976	\$2,303,098	\$4,888,105	\$4,717,000	\$4,717,000
	32.6%	-27.0%	112.2%	-3.5%	0.0%

Source: Federal Special Revenue Fund Group: Federal letter of credit grants

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by Controlling Board on April 25, 1980)

Purpose: This line item is used to pay central office expenses to administer federal letter of credit grants.

Department of Mental Health

3A80 334613 Federal Letter of Credit

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$0	\$0	\$0	\$200,000	\$200,000	\$200,000
	N/A	N/A	N/A	0.0%	0.0%

Source: Federal Special Revenue Fund Group: Federal letter of credit grants

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A.(originally established in Am. Sub. H.B. 66 of the 126th G.A.)

Purpose: This line item is used to expend federal letter of credit grants specific to hospital services. Federal grants awarded through a letter of credit allow ODMH to present receipts for expenditures and draw down the federal dollars; however, the federal dollars may not be held in the state account for longer than 72 hours.

3A80 335613 Federal Grant - Community Mental Health Board Subsidy

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$1,893,795	\$2,172,306	\$1,956,993	\$2,595,040	\$2,500,000	\$2,500,000
	14.7%	-9.9%	32.6%	-3.7%	0.0%

Source: Federal Special Revenue Fund Group: Federal letter of credit grants

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by Controlling Board on April 25, 1980)

Purpose: This line item is used to distribute federal grants dollars to community mental health services boards and statewide organizations, such as the National Alliance for Mental Illness. Federal grants awarded through a letter of credit allow ODMH to present receipts for expenditures and draw down federal dollars; however, the federal dollars may not be held in the state account for longer than 72 hours.

Department of Mental Health

3A90 333614 Mental Health Block Grant - Administration

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$715,789	\$707,866	\$672,409	\$748,470	\$748,470	\$748,470
	-1.1%	-5.0%	11.3%	0.0%	0.0%

Source: Federal Special Revenue Fund Group: CFDA 93.958, Block Grants for Community Mental Health Services (as authorized by the Public Health Services Act Title XIX Part B, as amended)

Legal Basis: ORC 5119.60; Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by Am. Sub. H.B. 694 of the 114th G.A.)

Purpose: This line item is used to support the administrative costs of implementing community mental health programs funded by the Community Mental Health Block Grant awarded by the Substance Abuse and Mental Health Services Administration, often referred to as SAMHSA.

3A90 335614 Mental Health Block Grant

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$13,278,290	\$13,154,265	\$12,732,745	\$14,220,930	\$14,200,000	\$14,200,000
	-0.9%	-3.2%	11.7%	-0.1%	0.0%

Source: Federal Special Revenue Fund Group: CFDA 93.958, Block Grants for Community Mental Health Services (as authorized by the Public Health Services Act Title XIX Part B, as amended)

Legal Basis: ORC 5119.60; Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by Am. Sub. H.B. 694 of the 114th G.A.)

Purpose: This line item is used to distribute certain grant funds to support community behavioral health boards. A range of services can be provided through qualified community programs. Services include psychosocial rehabilitation programs, mental health peer-support programs, and primary consumer-directed programs. Boards contract with providers for acute care services for persons with severe and persistent mental illness. These services include individual/group counseling, residential treatment, crisis intervention, and case management.

Department of Mental Health

3B00 334617 Elementary/Secondary Education Act

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$163,397	\$95,122	\$0	\$182,334	\$0	\$0
	-41.8%	-100%	N/A	-100%	N/A

Source: Federal Special Revenue Fund Group: CFDA 84.002, Adult Education - Basic Grants to States

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by Controlling Board in 1966)

Purpose: This line item is used to finance additional academic support and learning opportunities that are often required to help disadvantaged students progress along with their classmates.

H.B. 153, As Introduced, does not include appropriations for this line item.

3B10 333635 Community Medicaid Expansion

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$9,695,069	\$11,312,931	\$10,966,580	\$13,691,682	\$13,691,682	\$13,691,682
	16.7%	-3.1%	24.8%	0.0%	0.0%

Source: Federal Special Revenue Fund Group: Federal reimbursement under CFDA 93.778, Medical Assistance Grants (Medicaid)

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by Controlling Board on July 21, 1982)

Purpose: This line item is used to pay central office expenses to administer Medicaid. The nonfederal share of Medicaid administrative expenses is paid through GRF line item 333321, Central Administration. The federal government reimburses 50% of Medicaid administration costs.

Department of Mental Health

3B10 335635 Community Medicaid Expansion

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$270,635,342	\$313,504,610	\$379,598,241	\$411,309,765	\$346,200,000	\$0
	15.8%	21.1%	8.4%	-15.8%	-100%

Source: Federal Special Revenue Fund Group: Federal reimbursement under CFDA 93.778, Medical Assistance Grants (Medicaid)

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by Controlling Board on July 21, 1982)

Purpose: This line item is used to pass through to community mental health boards the federal reimbursement received for Medicaid community mental health services that were paid for by local boards. These services include outpatient mental health care, unscheduled emergency mental health care, partial hospitalization in community facilities, and Medicaid crossovers (services not covered by Medicare).

H.B. 153, As Introduced, proposes that community mental health Medicaid services be paid for by ODJFS through line item 600525, Health Care/Medicaid, beginning in FY 2013, and therefore does not include any funding for this line item in that year.

State Special Revenue Fund Group

2320 333621 Family and Children First Administration

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$665,423	\$615,531	\$452,726	\$725,000	\$448,286	\$432,197
	-7.5%	-26.4%	60.1%	-38.2%	-3.6%

Source: State Special Revenue Fund Group: Pooled funding of participating agencies: Departments of Aging, Alcohol and Drug Addiction Services, Developmental Disabilities, Education, Job and Family Services, Health, Mental Health, Rehabilitation and Corrections, and Youth Services

Legal Basis: ORC 121.37; Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A.

Purpose: This line item is used to pay operating costs of the Ohio Family and Children First Cabinet Council, including employee salaries and benefits and day-to-day activities. The Cabinet Council allocates funds to the county family and children first councils through GRF line item 335405, Family & Children First.

Department of Mental Health

4850 333632 Mental Health Operating

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$30,202	\$15,587	\$5,302	\$134,233	\$134,233	\$134,233
	-48.4%	-66.0%	2431.6%	0.0%	0.0%

Source: State Special Revenue Fund Group: Private insurance and other third-party payments for persons receiving services at state hospitals, monthly reimbursement from a patient's monthly income, reimbursement deposits from patients and/or liable relatives, workers' compensation reimbursements for patients hospitalized with a work-related injury, and other related revenue

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by Controlling Board on July 21, 1982)

Purpose: This line item is used to refund third party payers who unintentionally overpaid for a patient's hospital services at a state mental hospital.

4850 334632 Mental Health Operating

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$1,758,335	\$2,387,193	\$1,250,339	\$2,400,000	\$2,477,500	\$2,477,500
	35.8%	-47.6%	91.9%	3.2%	0.0%

Source: State Special Revenue Fund Group: Private insurance and other third-party payments for persons receiving services at state hospitals, monthly reimbursement from a patient's monthly income, reimbursement deposits from patients and/or liable relatives, workers' compensation reimbursements for patients hospitalized with a work-related injury, and other related revenue

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by Controlling Board on July 21, 1982)

Purpose: This line item is used to pay some of the operating expenses of the state's mental health hospitals.

Department of Mental Health

4X50 333607 Behavioral Health Medicaid Services

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$3,000,624	\$3,000,624	\$3,000,624	\$35,600,624	\$3,000,624	\$3,000,624
	0.0%	0.0%	1086.4%	-91.6%	0.0%

Source: State Special Revenue Fund Group: Transfer from ODJFS - a portion of the disproportionate share payments it receives from the federal government for uncompensated care provided in state-run and private hospitals

Legal Basis: Sections 335.10 and 335.20.40 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by Am. Sub. H.B. 117 of the 121st G.A.)

Purpose: This line item is used to pay for the private Institutions for Mental Disease (IMD) Program. Beginning in 1996, ODMH assumed this responsibility from ODJFS. This line item provides the nonfederal share of Medicaid covered services provided in IMDs, which are private facilities with less than 16 beds. In FY 2011, this line item was used to receive a one-time transfer of federal reimbursement dollars from ODJFS that resulted from the extension of eFMAP through June 30, 2011; these funds, which totaled about \$32.6 million, were then passed on to local boards.

5AU0 335615 Behavioral Healthcare

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$5,065,212	\$4,903,574	\$6,185,948	\$6,690,000	\$6,690,000	\$6,690,000
	-3.2%	26.2%	8.1%	0.0%	0.0%

Source: State Special Revenue Fund Group: Combination of funds that include GRF line item 335505 - Local Mental Health Systems of Care, and moneys from the Departments of Alcohol and Drug Addiction Services, Job and Family Services, and Youth Services.

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established in Am. Sub. H.B. 66 of the 126th G.A.)

Purpose: This line item funds Family Supports, formerly known as FAST (Family and Systems Team), administered by the county family and children first councils as part of Systems of Care. Family Supports serve families who would otherwise have to relinquish custody of their children solely to obtain needed intensive behavioral healthcare services and supports for them. All Family Supports-funded youth must have a behavioral health diagnosis. ODMH reimburses the county councils with Family Supports dollars for providing formal and informal non-clinical services to children and families. Services may include transportation, mentoring, respite care, and tutoring.

Department of Mental Health

5CH0 335622 Residential Support Service

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$1,479,244	\$1,513,256	\$0	\$1,500,000	\$0	\$0
	2.3%	-100%	N/A	-100%	N/A

Source: State Special Revenue Fund Group: Funds provided by the Housing Trust Authority within the Department of Development.

Legal Basis: Discontinued line item (originally established in Section 209.06.06 of Am. Sub. H.B. 66 of the 126th G.A.)

Purpose: This line item was used to provide subsidized support for licensed adult care facilities serving the mentally ill to pay for capital improvements.

5V20 333611 Non-Federal Miscellaneous

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$469,500	\$328,192	\$282,056	\$560,000	\$100,000	\$100,000
	-30.1%	-14.1%	98.5%	-82.1%	0.0%

Source: State Special Revenue Fund Group: Private foundations grants and any miscellaneous other non-federal grants

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by Controlling Board on January 27, 2003)

Purpose: This line item is used to expend private foundation and other nonfederal grants and to pay central office expenses related to administering those grants.

6320 335616 Community Capital Replacement

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$594,469	\$349,849	\$350,000	\$350,000	\$350,000	\$350,000
	-41.1%	0.0%	0.0%	0.0%	0.0%

Source: State Special Revenue Fund Group: Proceeds from the sale of community facilities financed through ODMH

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by Controlling Board on October 30, 2000)

Purpose: This line item provides funding to community mental health boards and community agencies to purchase residential facilities for people with mental illness. The boards and community agencies that purchase these facilities contract with ODMH for 40 years. To guarantee that the facility is used for the purposes intended, ODMH also places a mortgage on the facility for the same amount of time. If at any time during the contract the recipient of the funds realizes that the facility's use no longer meets the intended purpose, the recipient may request that ODMH sell the facility.

Department of Mental Health

6920 334636 Community Mental Health Board Risk Fund

FY 2008	FY 2009	FY 2010	Estimate FY 2011	Introduced FY 2012	Introduced FY 2013
\$0	\$0	\$0	\$80,000	\$0	\$0
	N/A	N/A	N/A	-100%	N/A

Source: State Special Revenue Fund Group: GRF provided seed money when the fund was initially established

Legal Basis: Section 335.10 of Am. Sub. H.B. 1 of the 128th G.A. (originally established by H.B. 111 of the 118th G.A. as required by S.B. 156 of the 117th G.A.)

Purpose: This line item was created to operate a self-insurance fund to cover part of a community mental health board's costs if, during the fiscal year, more bed days are utilized than the board projected.

FY 2012 - FY 2013 Introduced Appropriation Amounts

All Fund Groups

Line Item Detail by Agency			Estimate FY 2010	Estimate FY 2011	Introduced FY 2012	FY 2011 to FY 2012 % Change	Introduced FY 2013	FY 2012 to FY 2013 % Change
Report For Main Operating Appropriations Bill								
Version: As Introduced								
DMH Department of Mental Health								
GRF	332401	Forensic Services	\$ 3,117,515	\$ 3,244,251	\$ 3,244,251	0.00%	\$ 3,244,251	0.00%
GRF	333321	Central Administration	\$ 16,249,073	\$ 17,204,000	\$ 16,074,367	-6.57%	\$ 16,074,367	0.00%
GRF	333402	Resident Trainees	\$ 527,690	\$ 529,602	\$ 476,642	-10.00%	\$ 476,642	0.00%
GRF	333403	Pre-Admission Screening Expenses	\$ 514,446	\$ 540,132	\$ 486,119	-10.00%	\$ 486,119	0.00%
GRF	333415	Lease Rental Payments	\$ 20,085,292	\$ 21,951,800	\$ 18,394,250	-16.21%	\$ 19,907,900	8.23%
GRF	333416	Research Program Evaluation	\$ 538,273	\$ 582,462	\$ 421,724	-27.60%	\$ 421,998	0.06%
GRF	334408	Community and Hospital Mental Health Services	\$ 371,746,212	\$ 377,332,336	\$ 0	-100.00%	\$ 0	N/A
GRF	334412	Hospital Services	\$ 0	\$ 0	\$ 202,018,888	N/A	\$ 192,051,209	-4.93%
GRF	334506	Court Costs	\$ 713,580	\$ 649,122	\$ 584,210	-10.00%	\$ 584,210	0.00%
GRF	335404	Behavioral Health Services-Children	\$ 7,495,445	\$ 7,460,800	\$ 0	-100.00%	\$ 0	N/A
GRF	335405	Family & Children First	\$ 1,430,616	\$ 1,502,086	\$ 1,386,000	-7.73%	\$ 1,386,000	0.00%
GRF	335419	Community Medication Subsidy	\$ 9,959,798	\$ 9,959,798	\$ 8,963,818	-10.00%	\$ 8,963,818	0.00%
GRF	335501	Mental Health Medicaid Match	\$ 0	\$ 0	\$ 186,400,000	N/A	\$ 0	-100.00%
GRF	335505	Local Mental Health Systems of Care	\$ 12,216,678	\$ 20,644,308	\$ 38,913,776	88.50%	\$ 48,037,955	23.45%
GRF	335506	Residential State Supplement	\$ 0	\$ 0	\$ 4,702,875	N/A	\$ 4,702,875	0.00%
General Revenue Fund Total			\$ 444,594,618	\$ 461,600,697	\$ 482,066,920	4.43%	\$ 296,337,344	-38.53%
1490	333609	Central Office Operating	\$ 857,817	\$ 1,350,000	\$ 1,343,190	-0.50%	\$ 1,343,190	0.00%
1490	334609	Hospital - Operating Expenses	\$ 14,276,327	\$ 36,050,000	\$ 28,190,000	-21.80%	\$ 28,190,000	0.00%
1500	334620	Special Education	\$ 0	\$ 150,000	\$ 150,000	0.00%	\$ 150,000	0.00%
4P90	335604	Community Mental Health Projects	\$ 0	\$ 250,000	\$ 250,000	0.00%	\$ 250,000	0.00%
1510	336601	Office of Support Services	\$ 97,630,987	\$ 159,279,140	\$ 129,770,770	-18.53%	\$ 129,779,822	0.01%
General Services Fund Group Total			\$ 112,765,131	\$ 197,079,140	\$ 159,703,960	-18.96%	\$ 159,713,012	0.01%
3240	333605	Medicaid/Medicare	\$ 0	\$ 154,500	\$ 154,500	0.00%	\$ 154,500	0.00%
3A60	333608	Community and Hospital Services	\$ 59,885	\$ 140,000	\$ 140,000	0.00%	\$ 140,000	0.00%
3A70	333612	Social Services Block Grant	\$ 25,000	\$ 25,000	\$ 50,000	100.00%	\$ 50,000	0.00%
3A80	333613	Federal Grants-Administration	\$ 2,303,098	\$ 4,888,105	\$ 4,717,000	-3.50%	\$ 4,717,000	0.00%
3A90	333614	Mental Health Block Grant - Administration	\$ 672,409	\$ 748,470	\$ 748,470	0.00%	\$ 748,470	0.00%
3B10	333635	Community Medicaid Expansion	\$ 10,966,580	\$ 13,691,682	\$ 13,691,682	0.00%	\$ 13,691,682	0.00%

FY 2012 - FY 2013 Introduced Appropriation Amounts

All Fund Groups

Line Item Detail by Agency			FY 2010	Estimate FY 2011	Introduced FY 2012	FY 2011 to FY 2012 % Change	Introduced FY 2013	FY 2012 to FY 2013 % Change
DMH Department of Mental Health								
3240	334605	Medicaid/Medicare	\$ 15,794,774	\$ 30,200,000	\$ 28,200,000	-6.62%	\$ 28,200,000	0.00%
3A60	334608	Federal Miscellaneous	\$ 0	\$ 586,224	\$ 200,000	-65.88%	\$ 200,000	0.00%
3A80	334613	Federal Letter of Credit	\$ 0	\$ 200,000	\$ 200,000	0.00%	\$ 200,000	0.00%
3B00	334617	Elementary/Secondary Education Act	\$ 0	\$ 182,334	\$ 0	-100.00%	\$ 0	N/A
3A60	335608	Federal Miscellaneous	\$ 1,906,020	\$ 2,178,699	\$ 2,170,000	-0.40%	\$ 2,170,000	0.00%
3A70	335612	Social Services Block Grant	\$ 8,129,006	\$ 8,632,288	\$ 8,400,000	-2.69%	\$ 8,400,000	0.00%
3A80	335613	Federal Grant - Community Mental Health Board Subsidy	\$ 1,956,993	\$ 2,595,040	\$ 2,500,000	-3.66%	\$ 2,500,000	0.00%
3A90	335614	Mental Health Block Grant	\$ 12,732,745	\$ 14,220,930	\$ 14,200,000	-0.15%	\$ 14,200,000	0.00%
3B10	335635	Community Medicaid Expansion	\$ 379,598,241	\$ 411,309,765	\$ 346,200,000	-15.83%	\$ 0	-100.00%
Federal Special Revenue Fund Group Total			\$ 434,144,751	\$ 489,753,037	\$ 421,571,652	-13.92%	\$ 75,371,652	-82.12%
2320	333621	Family and Children First Administration	\$ 452,726	\$ 725,000	\$ 448,286	-38.17%	\$ 432,197	-3.59%
4850	333632	Mental Health Operating	\$ 5,302	\$ 134,233	\$ 134,233	0.00%	\$ 134,233	0.00%
4X50	333607	Behavioral Health Medicaid Services	\$ 3,000,624	\$ 35,600,624	\$ 3,000,624	-91.57%	\$ 3,000,624	0.00%
5V20	333611	Non-Federal Miscellaneous	\$ 282,056	\$ 560,000	\$ 100,000	-82.14%	\$ 100,000	0.00%
4850	334632	Mental Health Operating	\$ 1,250,339	\$ 2,400,000	\$ 2,477,500	3.23%	\$ 2,477,500	0.00%
6920	334636	Community Mental Health Board Risk Fund	\$ 0	\$ 80,000	\$ 0	-100.00%	\$ 0	N/A
5AU0	335615	Behavioral Healthcare	\$ 6,185,948	\$ 6,690,000	\$ 6,690,000	0.00%	\$ 6,690,000	0.00%
5CH0	335622	Residential Support Service	\$ 0	\$ 1,500,000	\$ 0	-100.00%	\$ 0	N/A
6320	335616	Community Capital Replacement	\$ 350,000	\$ 350,000	\$ 350,000	0.00%	\$ 350,000	0.00%
State Special Revenue Fund Group Total			\$ 11,526,995	\$ 48,039,857	\$ 13,200,643	-72.52%	\$ 13,184,554	-0.12%
Department of Mental Health Total			\$ 1,003,031,496	\$ 1,196,472,731	\$ 1,076,543,175	-10.02%	\$ 544,606,562	-49.41%