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**MEETING NOTES**  
**Franklin County Mental Health and Addiction Crisis Center**  
**Steering Committee**

November 21, 2019 3:00 PM – 5:00 PM  
North Central Mental Health Services, Inc.

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**Attendees:**

Beth Armstrong, OhioHealth  
Kenton Beachy, Mental Health America of Franklin County  
Gregory Blankenship, Netcare  
Sgt. Scott Blacker, Franklin County Sheriff's Office  
Chris Carson, MD, CXNS  
Karen Cousins, NAMI Franklin County  
Kevin Dixon, Ph.D., ADAMH  
Jackie Dooley, The P.E.E.E. Center  
Annie Gallagher, Gallagher Consulting Group  
Kythryn Carr Harris, ADAMH  
Andy Dorr, OSU  
Pablo Hernandez, MD, Netcare, Inc.  
Mark Hunter Franklin County Facilities Management  
Lt. Dennis Jeffrey, Columbus Police Department

Katrina Kerns, North Central Mental Health Services, Inc.  
Jeff Klingler, Central Ohio Hospital Council  
Gary Krafthefer, The PEER Center  
Mark Lambert, ADAMH  
Amanda Lucas, OSUWMC  
Sgt. Jennifer Mancini, Columbus Police Department  
Andrew Mass, Maryhaven  
Sean McKibben, Mount Carmel  
Joe Niedzwiedski, North Central Mental Health Services, Inc.  
Lt. Matt Parrish, Columbus Fire Department  
Diane Peters, NAMI Franklin County  
Bob Shook, Franklin County  
Brian Stroh, MD, Netcare  
King Stumpp, Netcare

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**I. Welcome**

Kevin Dixon, Co-chair, Interim CEO, ADAMH and Jeff Klingler, Co-chair, President and CEO, Central Ohio Hospital Council opened the meeting and thanked the Steering Committee members for their attendance and commitment to the effort.

They turned the meeting over to Annie Gallagher, facilitator. Gallagher reviewed meeting objectives, i.e.

- Overview of project status
- Brief updates from active workgroups
- Solicit input re: RFP for external consultant

Gallagher said that much of the meeting will be devoted to small group work to solicit their input into the development of a Request for Proposal for a consultant to help develop funding and business model options to ensure that that new center is financially sustainable.

**II. Status Overview**

*Jonathan Thomas, Project Lead, VP Planning and Evaluation, ADAMH*  
*Jeff Klingler, President and CEO, Central Ohio Hospital Council*

Klingler reported that since the last meeting the focus has been on getting the state funding request completed and submitted to the Columbus Partnership. He also said that they have combined with Regulatory workgroup with the Governance and Funding to coordinate and streamline advocacy efforts related to funding. He believes there is good support for the state funding request, as there are

“friends” who are representatives from OhioHealth and Franklin County who serve the approval committee.

Klingler said the hospital’s government relationships professionals are helping with advocacy efforts to garner support. Upcoming meetings are scheduled with Gov. Mike DeWine and the Franklin County delegation. Dixon and Thomas will be meeting with the Department of Development at the City of Columbus with the director of strategic projects. Klingler said that in addition state funding, it will be necessary to approach the philanthropic community for support.

Thomas then explained that the importance and urgency of the meeting to collect the SC’s input in an RFP to select a vendor partner to help with the funding and business model options.

### **III. Workgroup Updates**

Gallagher advanced the agenda to the workgroup updates. She said that leaders are going to brief updates so that attendees have adequate time to work on the RFP input exercise.

#### A. System of Care

*Workgroup leaders: Katrina Kerns, CEO, North Central Mental Health Services, Inc.  
Kythryn Carr Harris, VP Clinical Services, ADAMH*

Harris said that the workgroup has been off to a busy start since its recent launch. The group has met several times and are focused on the following items:

- Mapping system of care
- Determine how to shared/collective impact outcomes
- Future work with payors: working to engage Medicaid, Medicare, and MCOs
  - ü SC attendees agreed that discussions with payors need to start ASAP
  - ü Initial meetings are scheduled to begin in January
  - ü Advocacy efforts are also being elevated to support payor support
- Looking at best practices re: community integration

#### B. Medical and Pharmacy Services Workgroup

*Workgroup Leaders: Amanda Lucas, Executive Director, OSU Neurological Institute & Harding Hospital;  
Delaney Smith, MD, Chief Medical Officer, ADAMH*

Lucas said that the group has been working on pharmacy services. On November 19<sup>th</sup>, Netcare leaders with Bob Weber and Amanda Hafford, OSUWMC Pharmacy Leadership, on Pharmacy planning for new center. They discussed needs in alignment with Joint Commission standards inclusive of space, controls, receiving process, storage, TDD/DEA permit, leadership/oversight and policy and procedures.

The team continues to work on the following decisions for Pharmacy services:

1. Apply for a TDD/DEA permit (who?); one for crisis and one for walk -in
2. Develop a secure crisis space 1500-2500 sq ft. with cameras, access tracking, etc. Storage and tracking a large part of area operations. Additional space for walk-in area
3. Identify a responsible leader
4. Establish a P&T oversight committee
5. Conduct a RN focus group for med organization for pyxis machine
6. Determine Pharmacy volume/units
7. Develop process for CII-V counts

## 8. Explore use of student interns

### C. Data / Technology Workgroup

*Workgroup leaders: Andy Dorr, Strategy and Business Development, OSU Wexner Medical Center  
Jonathan Thomas Project Lead, VP Planning and Evaluation, ADAMH*

Thomas said that the data workgroup has been on hiatus after its initial flurry of activity. They are working on hot spot heat mapping to support site location activities. He encouraged workgroups to send an email if they have any data requests.

### D. Building Design Workgroup

*Workgroup Leaders: Mike MacKay, Director of Design and Construction, OhioHealth  
Jonathan Thomas, Co-chair, VP, ADAMH Board of Franklin County*

Thomas explained that the workgroup has been on hold a bit as the focus is on the funding request. He said one of the important next steps will be fit planning, but they are not quite ready to begin that phase.

The team is working on the following site location activities:

- They are forming a subgroup to launch in December
- Subgroup will build an inventory of potential site locations for the facility
- Potential sites will be evaluated on several criteria, especially hot spot mapping to ensure that it is convenient for the highest number of likely consumers
- They will bring a recommendation back to the group at the January meeting

### E. Governance and Funding/Regulatory and Legislation/Advocacy

*Workgroup Leaders: Kevin Dixon, Co-chair, Interim CEO, ADAMH and Jeff Klingler, President and CEO, Central Ohio Hospital Council*

Klingler said that they submitted the final state capital funding request for \$5 million to the Columbus Partnership. He is optimistic. They received positive feedback that the center proposal was near the top of the 60+ requests submitted.

Current funding commitments:

- Franklin County - \$10 m
- ADAMH – \$8 m
- Central Ohio Hospitals - \$8 m

Klingler said they are ramping up advocacy efforts to help garner funding support. The government relations professionals of the Central Ohio hospitals have met to develop a plan to advance support for the crisis center. They plan to meet with Gov. Mike DeWine and other key leaders (including Medicaid) before the end of the year. They also communicating with House and Senate lawmakers from Franklin County. He emphasized that a strong effort to gain support from the philanthropic community will also be critical for the success of the center.

#### **IV. Input to RFP guidelines for external consultant** *(Breakout Group Exercise)*

Gallagher divided SC attendees into three groups to discuss and record their input regarding the elements needed in an RFP to select a vendor partner to help with financial and business models for the center. The groups were led by Chris Cason - CXNS, Jeff Klingler, and Jonathan Thomas. All of the worksheets were collected and provided to Thomas and ADAMH to support their efforts to develop the RFP. In addition, the following are key points from the plenary discussion at the conclusion of the exercise.

#### **RFP Objectives**

- Develop funding and business model options to ensure that the new center is financially sustainable
- Provide options and recommendations about how to optimize revenue, with an emphasis on reimbursement strategies
- Conduct all necessary analyses to achieve the above objectives

***Please share additional objectives that should be outlined in the RFP.***

- Role of for-profits in the process
- Role of payors
- Customer traffic
- Outsourcing and uses of cost in staffing
- Economies of scale – range of options
- Staffing ratios
- Cost of facility operations
- Sensitivity analysis

#### **Qualifications of Vendor Partner**

- Knowledge and expertise of financial reimbursement models in health care
- Deep understanding of legal requirements of health facilities, e.g., licensure, accreditation, certification
- Experience in behavioral health field
- Successful track record creating pro forma(s)

***What other qualifications should we seek from a vendor partner?***

- Knowledge of Medicaid and managed care (Ohio Medicaid expertise)
- Governance body knowledge / governance
- Internal audit / creating policies

#### **Potential Vendor Partners**

***Do know any specific prospective firms/organizations that we should include in the RFP process?***

- Bricker & Eckler
- Deloitte - (need state/local)
- Vorys, Sater, Seymour and Pease
- HC Advisors
- Battelle
- PwC – (need state/local)
- EY – (need state/local)

## RFP content and guidelines

*What issues do we want the analyses and pro forma(s) to address/answer?*

### Examples

- Pros/Cons and funding ramifications of various organizational, legal structures,
  - Facility classification, licensure, certification, accreditation
  - Crisis stabilization vs inpatient
- Recommendations to maximize reimbursement opportunities
- Utilization of peers and techs
- Potential other (non-reimbursement) revenue sources

**Anticipated core services include:** *Triage, intake and assessment, walk-in clinic, 23-hour observation, inpatient, medical care services, pharmacy, substance use disorder services, community-based provider linkage, family support services, other*

Notes from group:

- Billing
- How to remove an operator
- Ambulatory
- Scope of practice
- State Medicaid models

## V. Schedule and communications

Gallagher shared the following updates about the SC schedule and communications:

- Schedule
  - ü There will be no December SC meeting
  - ü Next meeting: January 30, 2020 @ Mount Carmel Health System 5300 North Meadows Drive, Grove City, OH (Auditorium MCGC 1201)
  - ü The SC will move to a quarterly schedule in 2020 with *ad hoc* meetings as needed (April 30, July 30, October 29)
  - ü Workgroups will continue as needed
- The SC will continue to collaborate with PCES and encourage their help in advocacy efforts as appropriate
- New public website: [www.fcmhacc.com](http://www.fcmhacc.com)
  - ü The word "Addiction" was added to the current name of the effort to convey that it is part of the center's scope = Franklin County Mental Health and Addiction Crisis Center
  - ü There is a new public-facing website at [www.fcmhacc.com](http://www.fcmhacc.com)
  - ü The website portal for SC documents and notes is still active [www.fccrisis.com](http://www.fccrisis.com)  
password: crisis

## VI. Wrap Up Adjourn

Dixon and Klingler thanked participants. Gallagher thanked North Central Mental Health Services, Inc. for hosting the meeting before adjourning.