

**Kentucky Mental Health Planning & Advisory Council**  
**Finance Committee**  
**April 9, 2009 1:00 - 4:00 p.m.**  
**DMHDDAS 100 Fair Oaks Lane, 4<sup>th</sup> Floor, Small Conference Room**  
**Frankfort, Kentucky**

**Members Present:** Ron Ashton, John Basham (via teleconference), Rita Brooks, Robert Hicks, Steve Liles, Mary Sue Klusman, Steve Lyons, Betty Jo Moss, Mary Singleton, Joy Varney

**Staff Present:** Hope Barrett, Michele Blevins, Christie Penn, Melissa Runyon

Topic	Discussion	Next Steps
Call to Order and Introductions	Betty Jo Moss, Chair, called the meeting to order at 1:12 p.m. Members and staff introduced themselves.	
Approval of January Meeting Summary	Ron Ashton made a motion to approve the January 15 <sup>th</sup> meeting summary. Mary Sue Klusman seconded and motion carried.	
FY 2009 Council Expenditures	<p>Betty Jo reviewed the SFY 2009 YTD Council expenses. So far the Council has spent \$10,259.17 to hold 9 meetings, at an average cost of \$1,139.91 per meeting.</p> <p>Betty Jo then reviewed the proposed meeting costs for calendar year 2009. Scheduled for calendar year 2009 there are 4 Council meetings, 6 committee meetings and one member orientation. The total estimated cost for these meetings is \$18,450.</p>	Staff will begin scheduling meetings and recording meeting costs on a fiscal year basis so that Council expenses correspond with the fiscal year.
Plan and Budget Process Overview	<p>Michele Blevins thanked members for their participation in the federal site visit. Michele said that during the exit interview, the reviewers praised Kentucky for having a strong Council.</p> <p>Michele began the plan and budget overview by clarifying that the plan and budget process is used by the Department for the allocation of all funds, including state general funds, federal funds, and other grant funds for all programs (MH, MR, SA treatment and prevention). MHBG funds are flexible, but must be used to provide/support community-based services for the SMI &amp; SED population. The FFY 2009 allocation is \$5,358,519, representing a 0.2% decrease from FFY 2008. (↓ \$11,000)</p> <p>State general funds from the legislature are allocated to the department on a biennial basis. We generally</p>	

	<p>spend mental health block grant (MHBG) funds in the subsequent fiscal year because we receive them so late. We have 2 years to spend MHBG funds.</p> <p>Currently, about 80% of the MHBG funds are allocated to the CMHCs and they account for about 3% of the CMHCs' revenues, collectively.</p> <p>The 14 CMHCs are private non-profit organizations with whom the Department contracts to provide services. CMHC staff are agency employees, not state employees. The CMHCs are just one part of the total public mental health system.</p> <p>Around February 1<sup>st</sup>, the CMHCs receive a <i>Notice of Available Funding</i> (NARF) and by mid to late February, the funding applications are available on line for the Centers to respond to and these are due back to the Dept. on April 1<sup>st</sup>. The CMHC and department then negotiate and in June contracts are delivered and signed.</p> <p>Michele also shared a compilation created from the submitted spending (financial) plans showing CMHC allocations for adults and children.</p>	
<p>Recommendations Based on Review Regional Boards' SFY 2010 Plan and Budget Applications</p>	<p>Members divided into groups to review the regional boards' plan and budget applications, specifically the adult plan, the children's plan and the spending plan. Several regional applications were unavailable as of the date of the meeting.</p> <p>The Department has determined that there will likely be "Carryover" funds available this year (to be used for SFY 2010).</p> <p>Members were asked to make recommendations for the allocation of the carryover funds and where to take the \$11,000 reduction and were given a form on which to document suggestions &amp; comments.</p>	<p>A compilation of members' comments is attached.</p> <p>Notice attached.</p>
<p>Co-occurring Disorders (COD) Talking Points</p>	<p>Hope Barrett reminded members of past discussion about incorporating data into "talking points" so that the Council can fill their advocacy role with a unified message. Members did not have ideas with them today about data needs for co-occurring disorders (the priority topic previously chosen) so Hope distributed and reviewed resources with some national statistics re: COD that may help members generate ideas. One member recommended the Committee begin locating Kentucky-specific data in addition to national data.</p> <p>Rita Brooks made a <b>motion</b> for the Committee to spend at least half of its next meeting creating talking</p>	<p>Members will bring drafted talking points to the next meeting.</p> <p>Staff and members will locate Kentucky-specific data re: COD but will rely on the committee to decide what specific data is needed.</p> <p>At least half of the next</p>

	<p>points that highlight the mission of the Council regarding serving clients with co-occurring mental health and substance use disorders. Steve Liles seconded and motion carried.</p> <p>John Basham recommended the Council have members who can represent individuals affected by COD.</p>	<p>meeting will be devoted to creating the COD talking points.</p> <p>This recommendation would be one for the Membership Committee to consider.</p>
Wrap Up	<p>Members stated that they found the plan and budget applications very interesting and stated they would like more time to review the applications next year.</p> <p>Hope asked permission, and all agreed, for her to share Council's activities of data gathering to support advocacy role, at a national <i>Data Infrastructure Grant</i> meeting.</p>	<p>Staff will consider ways to extend the time available for review of applications.</p>
Adjourn	<p>Ron Ashton made a motion to adjourn at 4:01 p.m. Mary Singleton seconded and motion carried.</p>	<p><u>Next Meeting</u>  Thursday, October 15th  1:00 – 4:00 p.m.  Small Conference Room  DMHDDAS, Frankfort</p>