



COMMUNITY  
**MENTAL HEALTH**  
FUND

*Supporting equitable and quality mental health care in Jackson County.*

# Board of Trustees Retreat

Saturday, August 7th, 2021

# Agenda



Introductions

Ice Breaker

2020 Year in Review

Business Session

Value Based Payment Project

# Annual Funding Cycle

September: RFP Safety Net, Children and Family, Review

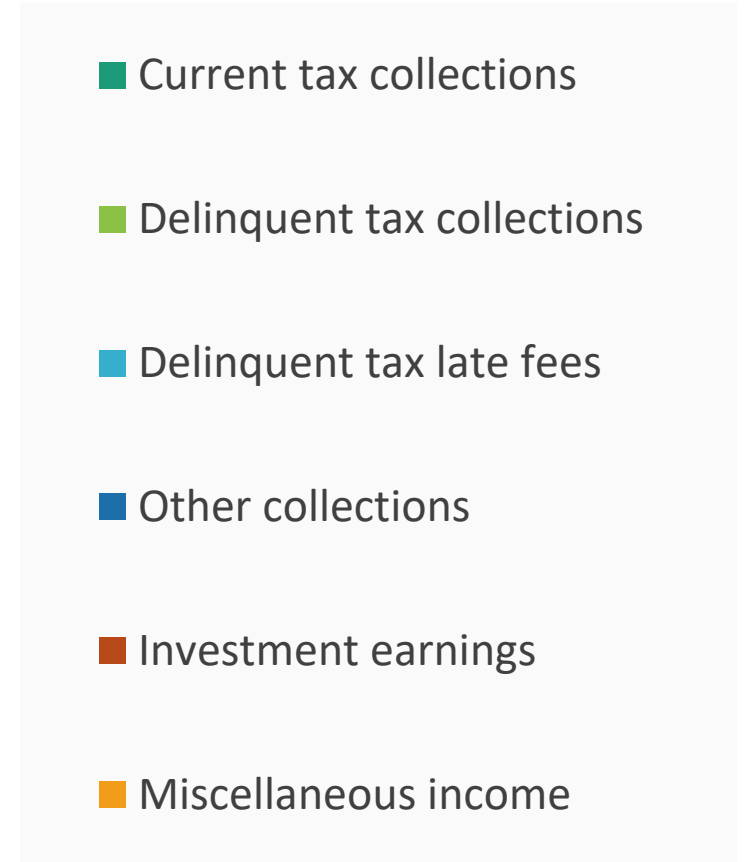
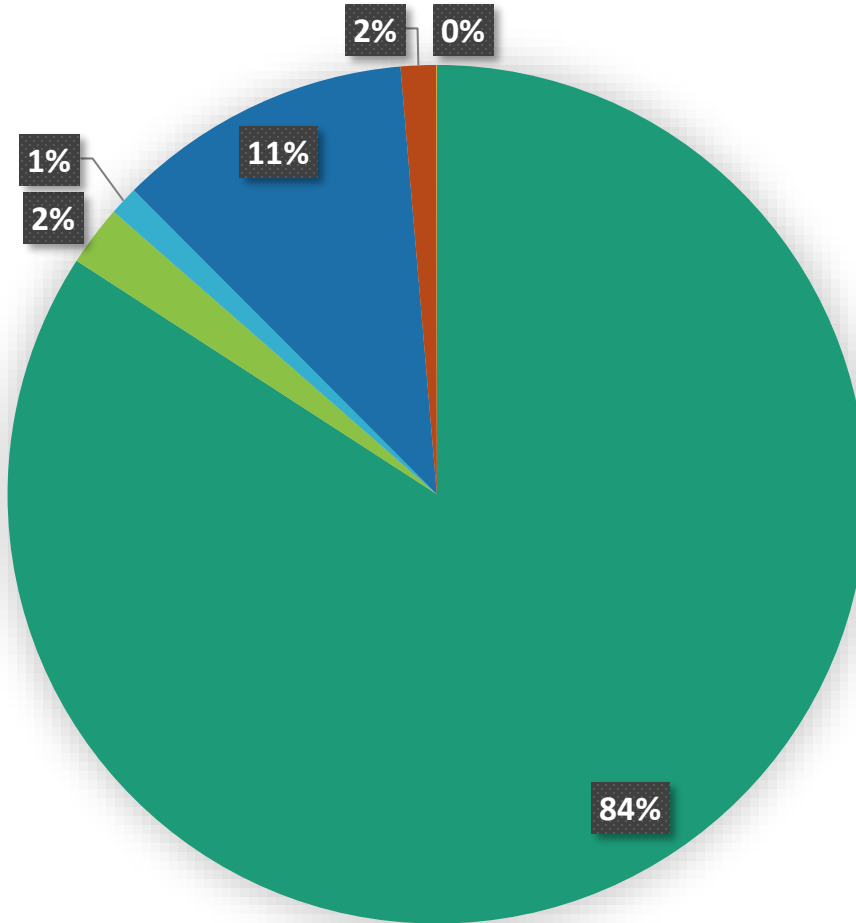
November: Funding For Safety Net, Children and Family

January: RFP Special Populations, Review

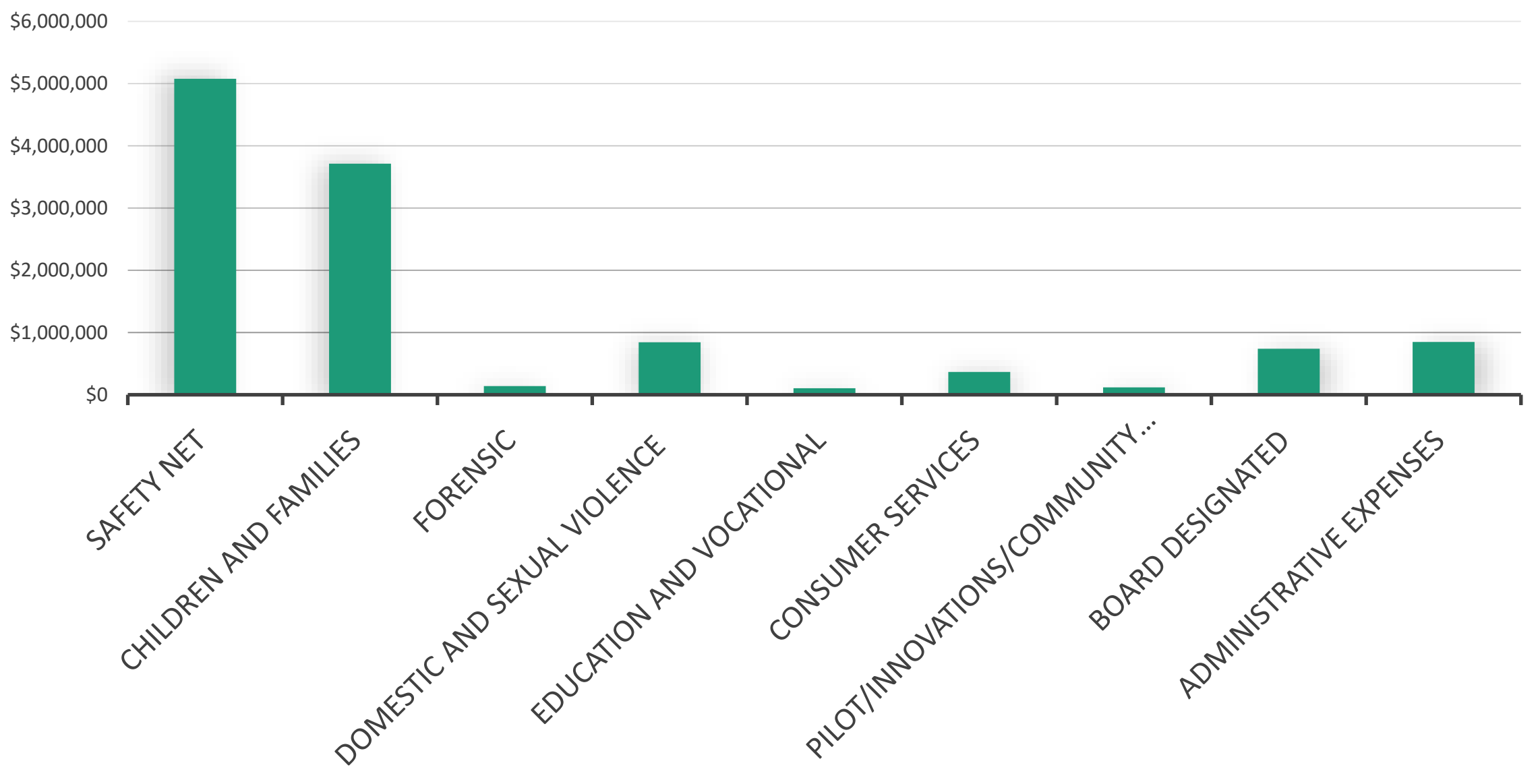
March: Funding Special Populations

Anytime: Innovations, Community Education, Pilot Projects

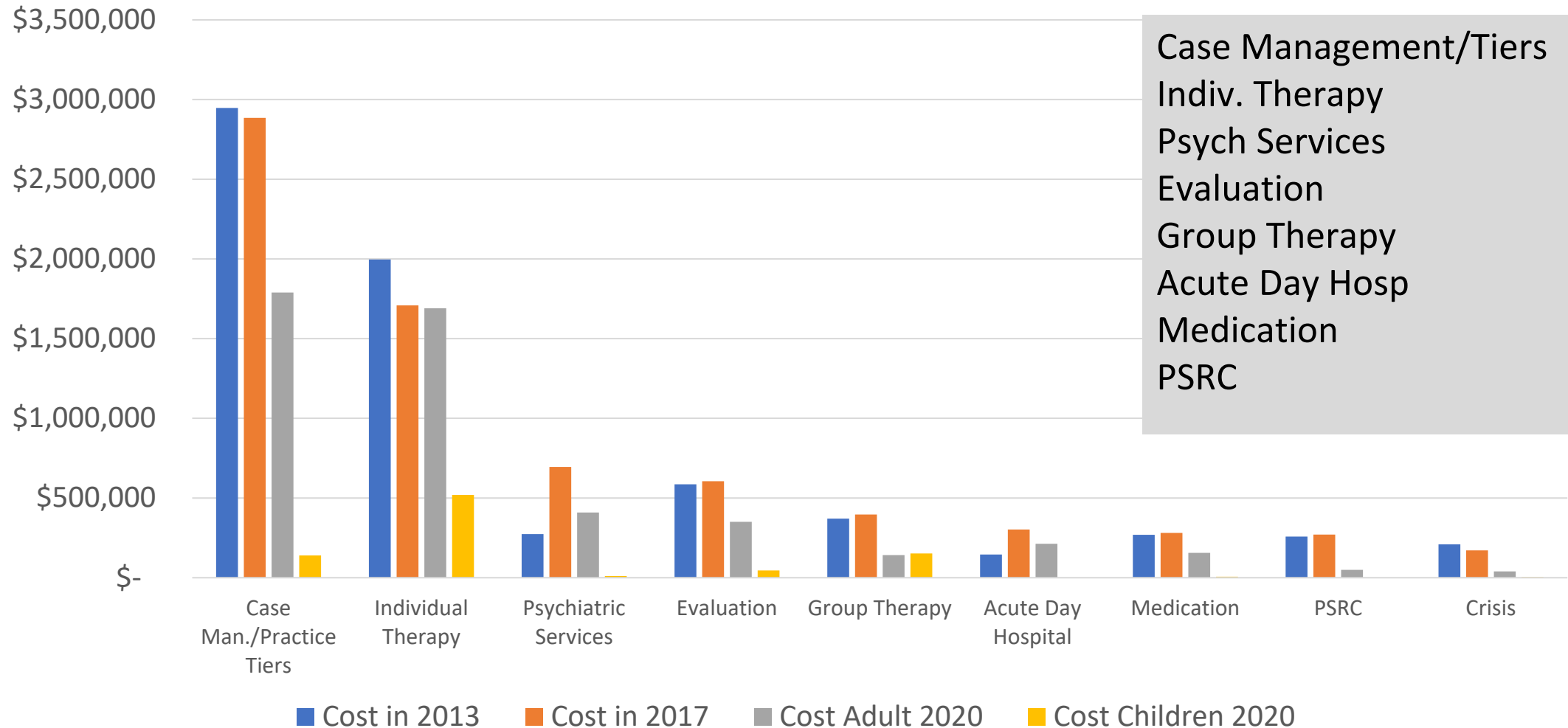
# 2020 Revenue = \$12,720,144



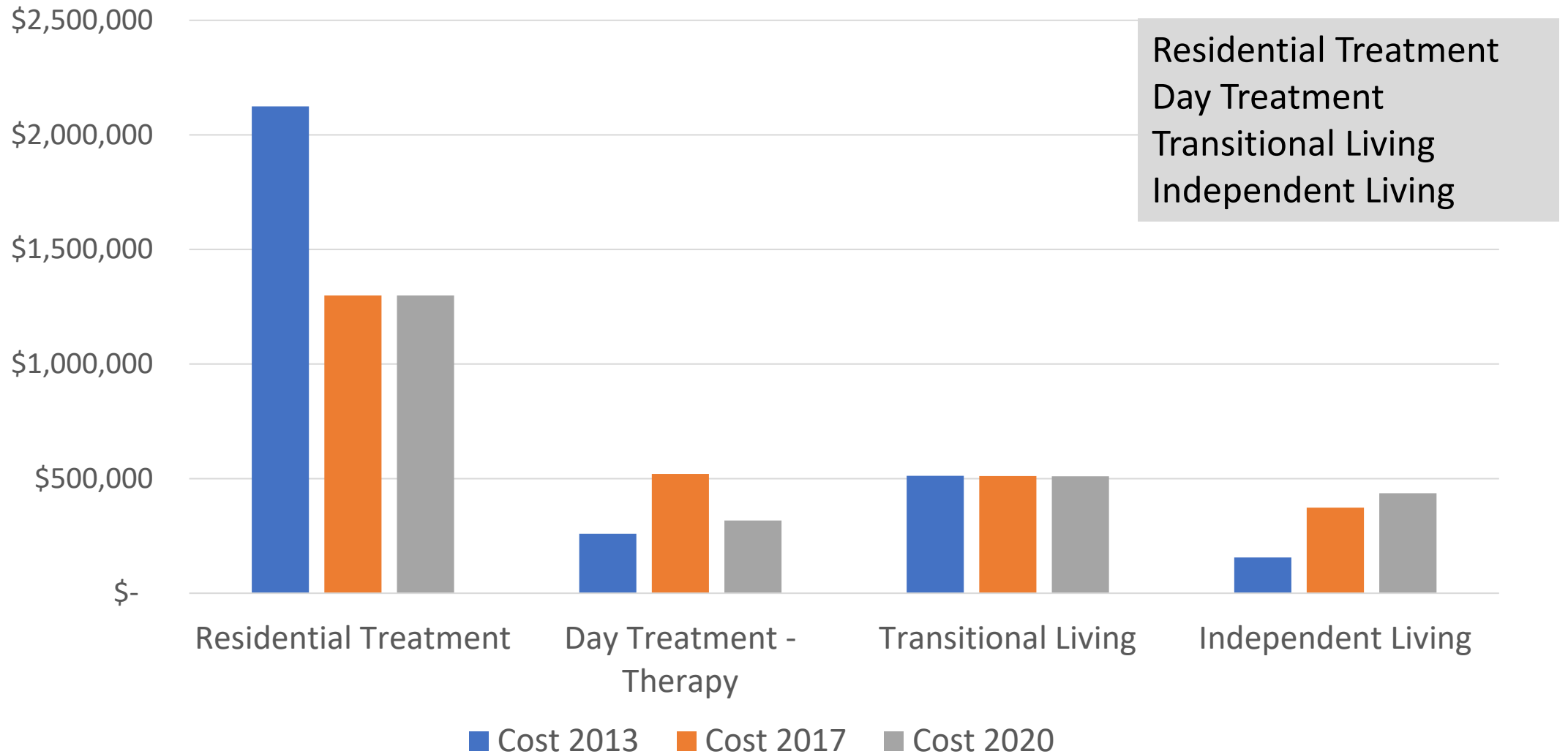
# 2020 Allocations = \$12,005,349



# Service Unit Comparison: Adult and Children

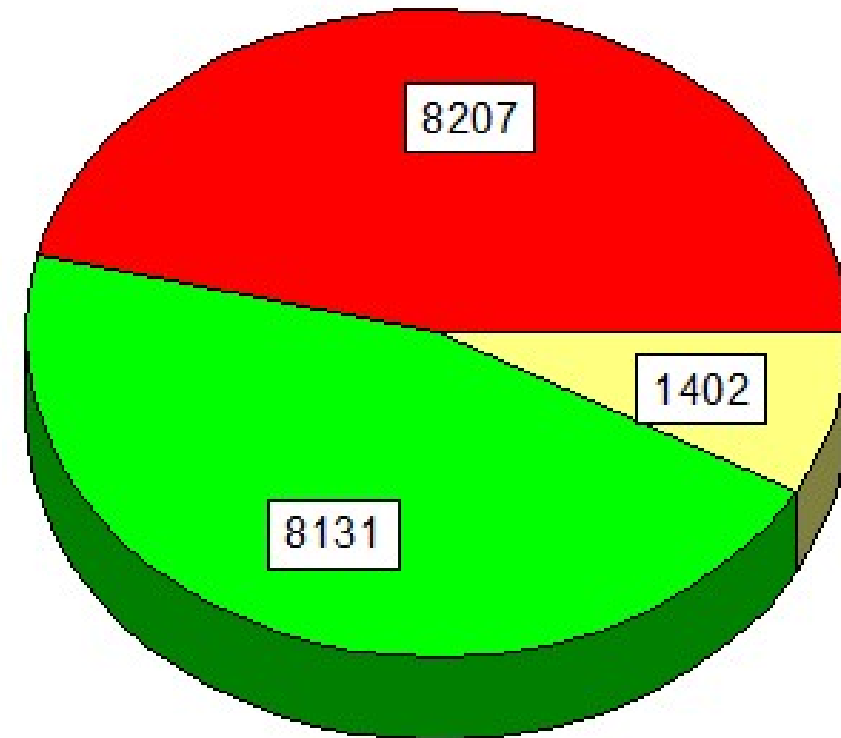


# Service Unit Comparison: Children Only



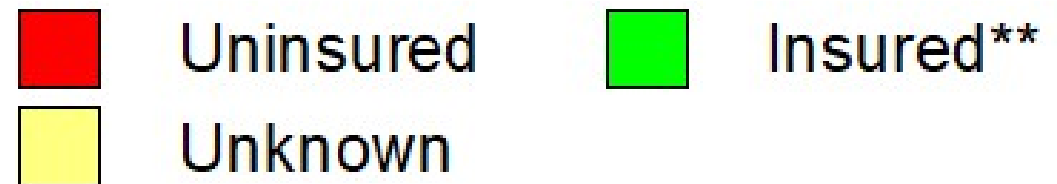
# Insurance Status

N = 17,741 (2019)



Participants  
by  
Insurance  
Status

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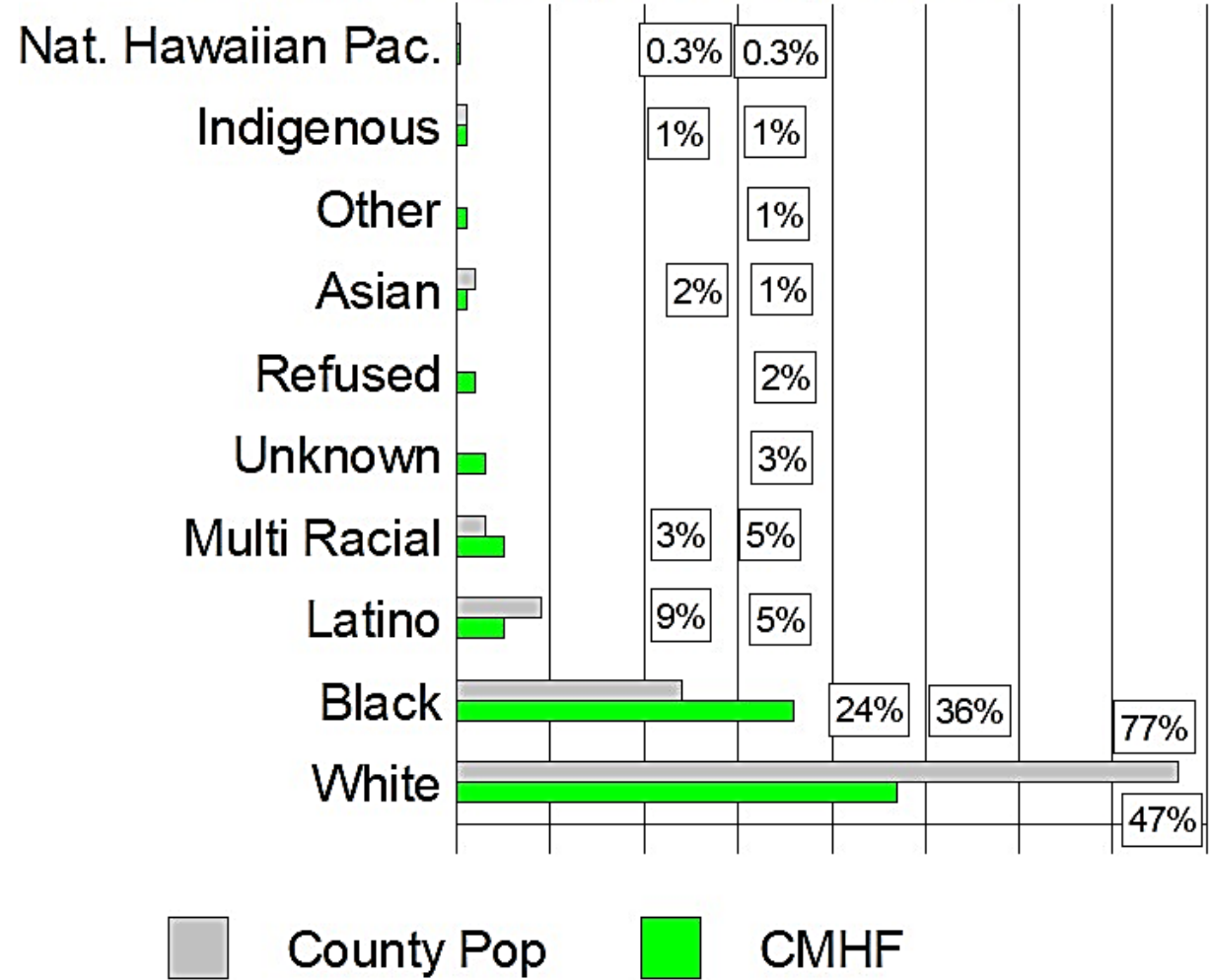




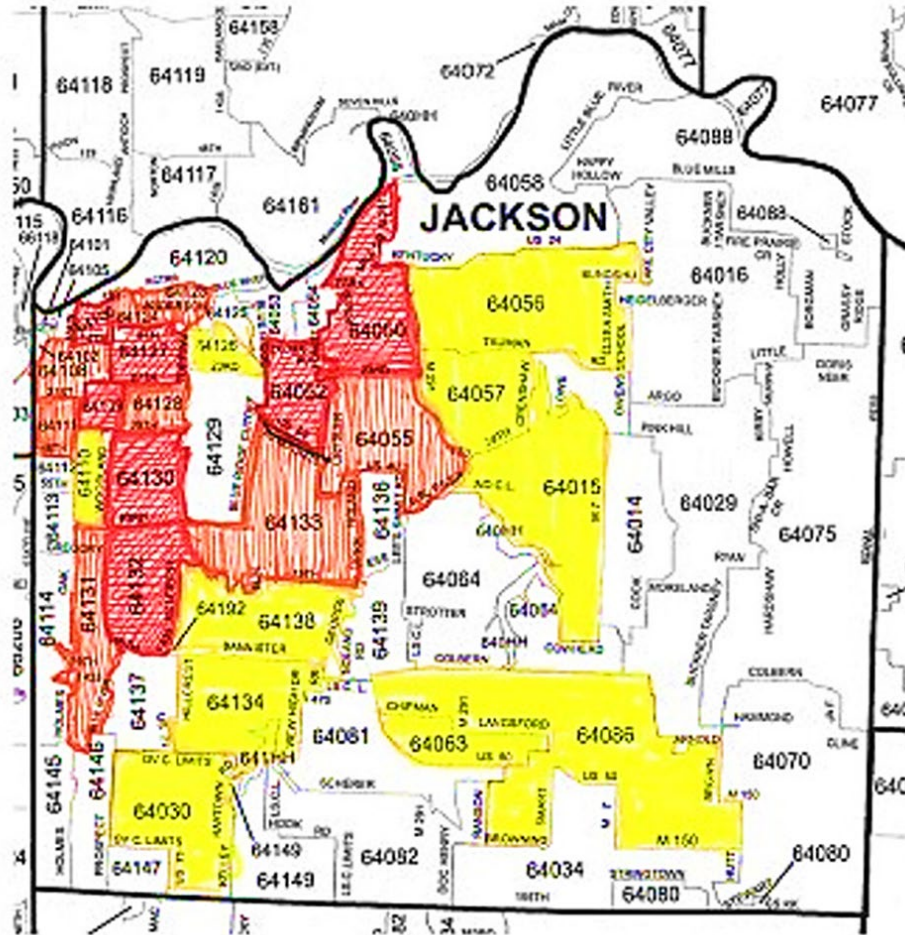
# Participants by Race

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## CMHF Participants by Race



# Participants by Zip Code



Zip Code	# Participants
64130	1271
64127	1050
64106	977
64132	962
64052	900
64109	762
64133	676
64128	635
64111	575
64055	574
64124	572

# Community Impact Goals



Participants receiving mental health services in the CMHF Network will have timely access to care

- Improved engagement of new participants in service
- Reduction in institutional stays
- Minimal disruption of care when going between providers
- Reduction in overall no-show rates
- Non-Medicaid eligible persons getting access to care

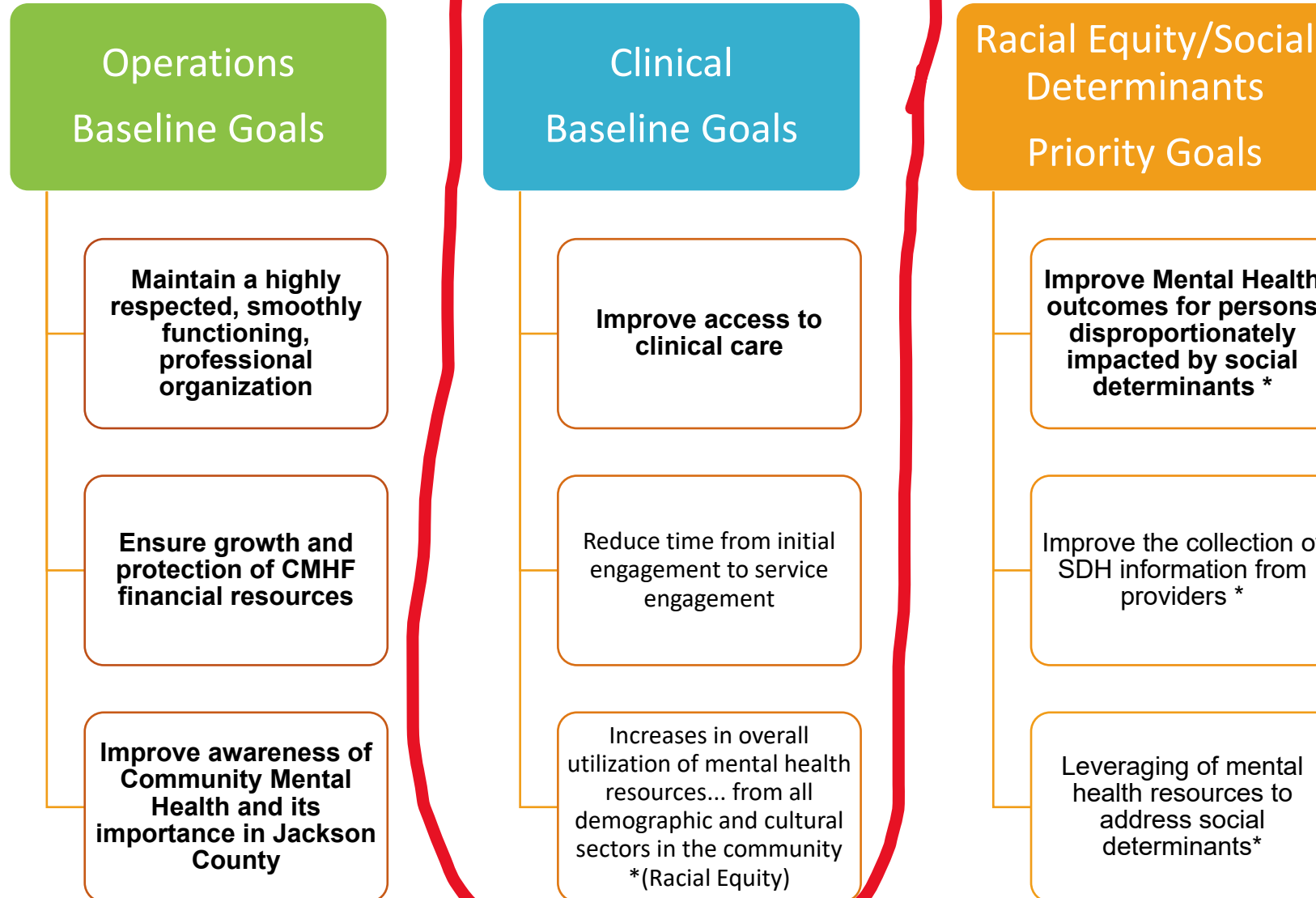
# Community Impact Goals



Providers in the CMHF Network will deliver high-quality services responsive to participant preferences and needs

- Improved access to care for participants who are non-English speaking
- Services being available in the participants' preferred language
- Increased use of Peer Support services
- Participants individual choice being recognized in their care plan, including culture
- Increased number of persons being enrolled in public benefits, beyond mental health
- Use appropriate assessments to plan and monitor care

# CMHF Strategic Goals



# Business Session

Guidelines for School  
Based MH Services

Remaining 2021 Board  
Meeting Change



Break



## Johanna Ferman, M.D

The Principal and Founder of Integrus Health Group, Dr. Ferman's work is centered in the public and non-profit sectors ([www.integrushealth.com](http://www.integrushealth.com)) with specific focus on improved access and outcomes for vulnerable, high-risk populations through system design harnessed to the right technology.

Her early work as a clinical psychiatrist within the Rikers Island Jail System catalyzed her movement into program evaluation, policy and system reform. As Deputy Commissioner for Clinical Programs for New York State's Office of Mental Health and later, the CEO and Medical Director for The Center for Mental Health in the nation's Capital, her work has centered on integration of behavioral and physical health services at the policy and practice levels, value-based payment, and attention to critical policy and operational issues – such as demand and capacity.

Dr. Ferman works with her partner, Tomás Moran, to address value-based payment in the public behavioral health sector in Kansas City. Their work in Puerto Rico is focused on developing technology infrastructure to support managed systems that require cost-effective interoperable solutions in this highly impacted, Medicare-Medicaid system with over two thirds of the Island's 3 million population enrolled in managed care plans.

## Tomás Moran

A national leader in the use and movement of health information, Tomás Moran brings systems engineering together with over 30 years of experience in healthcare, information, and quality. Formerly Senior Director of Quality and Planning at the Palo Alto Medical Foundation (PAMF 1999-2009), one of the nation's premier medical practices and an early member of the American Medical Group Association/AMGA), he became the first non-medical Chair of the AMGA's Quality Council; prior to that, he was the Assistant Director of Quality at Stanford Hospital. While at PAMF, he spearheaded and oversaw the roll-out of value-based payment across hundreds of medical practices, moving from 15% to 85% engagement of medical staff in VBP reimbursement within a two-year period.

The fundamentals of this work were taken into safety net providers (FQHCs) in California and Oregon prior to his being asked to speak on this nationally through the AMGA. With his own roots in Puerto Rico,\* he is deeply committed to seeing a restoration of health equity for the Island and is currently engaged on building interoperable infrastructure for one of Puerto Rico's most successful primary care practices.

With a background in engineering from MIT, he has been responsible for innovative approaches to information extraction, storage and retrieval across non-communicating silos. Among his signature achievements while at PAMF was the building of a training and career development program for front end workers in safety-net/FQHC facilities in the Bay area, for which he garnered several millions of dollars over a six-year period. An outgrowth of this work was the career development of minority staff who became outstanding health administrators with deep skills in the technology he had built. He has been a frequent speaker for the AMGA on the subject of healthcare information systems and quality improvement. \*A native of Cuba, he emigrated to Puerto Rico with his family when he was 7 and it was there that he completed his primary and secondary education with the Jesuits through San Ignacio's





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