

Provider Resource Sharing and Coordination

FY2002 Request: \$150,000
Reference No: 34039

AP/AL: Appropriation

Project Type: Planning

Category: Health/Human Services

Location: Statewide

Contact: Larry Streuber

House District: Statewide (HD 1-40)

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Estimated Project Dates: 07/01/2001 - 06/30/2006

Brief Summary and Statement of Need:

Provides funds for a five-year capital initiative to reengineer the way the way the State awards funds to providers and the way providers conduct business, including coordination and resource sharing, allowing them to focus on providing services for individuals and families.

Funding:	<u>FY2002</u>	<u>FY2003</u>	<u>FY2004</u>	<u>FY2005</u>	<u>FY2006</u>	<u>FY2007</u>	<u>Total</u>
MHTAAR	\$150,000						\$150,000
Total:	\$150,000	\$0	\$0	\$0	\$0	\$0	\$150,000

<input type="checkbox"/> State Match Required	<input type="checkbox"/> One-Time Project	<input type="checkbox"/> Phased - new	<input type="checkbox"/> Phased - underway	<input checked="" type="checkbox"/> On-Going
0% = Minimum State Match % Required		<input type="checkbox"/> Amendment	<input checked="" type="checkbox"/> Mental Health Bill	

Operating & Maintenance Costs:

	<u>Amount</u>	<u>Staff</u>
Project Development:	0	0
Ongoing Operating:	0	0
One-Time Startup:	0	
Totals:	0	0

Additional Information / Prior Funding History:

In SLA 00, \$100.0 of MHTAAR funds was appropriated for Coordination and Resource Sharing Among Mental Health Services Providers.

Project Description/Justification:

Project

Description:

This initiative is intended to reengineer the way providers conduct business and interact with State granting and funding agencies. Areas of emphasis include billing, agency outsourcing, identification of additional resources, coordination of resources across agencies, case management systems and intake assessments, management information systems, State procurement and the grant structure itself, including the development of outcome-based Requests for Proposals or Calls for Investment and multi-agency grants.

During the first year of the initiative, funds are being used to pull together a Think Tank comprised of representatives of the four Trust boards, individuals with disabilities, family members and providers. Funds will be used to contract with an external evaluator who will conduct an examination of the current systems and processes and make a series of recommendations regarding economies and efficiencies at the State and local levels in the areas outlined above.

During the second through fifth year of the initiative, funds will be used to pilot recommendations at the local or regional provider level and provide resources to make changes at the State level (i.e. regulatory changes). Funds will be used to implement the recommended efficiencies and streamlining and resolve the following major problems:

- ♦ the steadily increasing administrative costs of doing business with the State that is being experienced by providers;
- ♦ duplication of services across providers; and
- ♦ consumer difficulty in accessing needed services.

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Results: This initiative cuts across all of the results areas in that a solid provider infrastructure focused on providing cost-efficient and cost-effective services helps "turn the curve" across results.

Indicators: Provider Business Operations.

Performance Measures:

- ◆ Reduction in provider administrative overhead costs
- ◆ Reduction of provider cash flow problems
- ◆ Extent of resource sharing among providers at the local and regional level
- ◆ Increased economies and efficiencies at the State and local level
- ◆ Shared infrastructures among providers
- ◆ Increased access to needed services by consumers
- ◆ Extent of satisfaction by consumers and families