

Service Targets Summary

The 83rd Legislature appropriated over \$40 million per year to address unmet needs for ongoing mental health services. Funding was provided to:

- bring underserved individuals into an appropriate level of care;
- clear waiting lists; and
- bring new individuals into service with “surge” funding.

This funding came with clear legislative expectations:

- new waitlist and surge funding will be used to bring new people into service; and
- new funds will not supplant existing sources of funding.

Because many LMHAs serve more than the established CARE targets, simply adding to the current CARE targets would not ensure these expectations are met. Therefore, DSHS adopted a new methodology that uses the current numbers served as the baseline. It not only addresses legislative concerns, but also ensures that:

- the number of new clients to be served is proportional to the level of new target funds each LMHA receives; and
- no LMHA will be asked to bring additional persons into service without additional dollars.

The following methodology was used to establish the FY2014 targets.

- Baseline. The baseline is the average numbers served (adults and children) during the first three quarters of FY 2013.
- Target funding. The number of new individuals to be served is based on the total waitlist and surge funds each LMHA received for adults and children. Underserved funds are excluded.
- New individuals to be served. The LBB cost per person was used to determine the number of new individuals to be served.
 - Adults: Total target funds for adults was divided by \$4332.
 - Children: Total target funds for children was divided by \$5400.

DSHS recognizes that it will take time to hire new staff and bring new individuals into service. Therefore, sanctions have been modified to allow for a six-month ramp-up period. Provided the new targets are met by the end of the second quarter, no sanctions will be assessed for the first six months of FY2014. Sanctions will be assessed if the total number of clients in a full level of care at the end of Quarter 2 is less than the target. For the last six month of the FY 2014, the average number served must meet or exceed the target.