

# Budget Detail Request - Fiscal Year 2016-17

Your request will not be officially submitted unless all questions and applicable sub parts are answered.

1. Title of Project: : Adult Diversion Pilot, Lakeview Center, Pensacola
2. Date of Submission: 01/08/2016
3. House Member Sponsor(s): Clay Ingram

## 4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? No  
*If answer to 4a is ?NO? skip 4b and 4c and proceed to 4d*
- b. What is the most recent fiscal year the project was funded?
- c. Were the funds provided in the most recent fiscal year subsequently vetoed? No
- d. Complete the following Project Request Worksheet to develop your request (Note that Column E will be the total of Recurring funds requested and Column F will be the total Nonrecurring funds requested, the sum of which is the Total of the Funds you are requesting in Column G):

FY:	Input Prior Year Appropriation for this project for FY 2015-16 (If appropriated in FY 2015-16 enter the appropriated amount, even if vetoed.)			Develop New Funds Request for FY 2016-17 (If no new Recurring or Nonrecurring funding is requested, enter zeros.)			
	Column: A	B	C	D	E	F	G
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated  (Recurring plus Nonrecurring: Column A + Column B)	Recurring Base Budget  (Will equal non-vetoed amounts provided in Column A )	<b>INCREASED or NEW Recurring Requested</b>	<b>TOTAL Nonrecurring Requested</b>  (Nonrecurring is one time funding & must be re-requested every year)	<b>Total Funds Requested Over Base Funding</b>  (Recurring plus Nonrecurring: Column E + Column F)
Input Amounts:					2,000,000	0	2,000,000

- e. New Nonrecurring Funding Requested for FY 16-17 will be used for:  
 Operating Expenses     Fixed Capital Construction     Other one-time costs
- f. New Recurring Funding Requested for FY 16-17 will be used for:  
 Operating Expenses     Fixed Capital Construction     Other one-time costs

5. Requester:

- a. Name: Gary Bembry
- b. Organization: Lakeview Center, Inc., Pensacola
- c. Email: Gbembry@bhcpns.org
- d. Phone #: (850)469-3700

6. Organization or Name of Entity Receiving Funds:

- a. Name: Lakeview Center, Inc., Pensacola
- b. County (County where funds are to be expended) Escambia
- c. Service Area (Counties being served by the service(s) provided with funding) Escambia

7. Write a project description that will serve as a stand-alone summary of the project for legislative review. The description should summarize the entire project's intended purpose, the purpose of the funds requested (if request is a sub-part of the entire project), and most importantly the detail on how the funds requested will be spent - for example how much will be spent on positions and associated salaries, specifics on capital costs, and detail of operational expenses. The summary must list what local, regional or statewide interests or areas are served. It should also document the need for the funds, the community support and expected results when applicable. Be sure to include the type and amount of services as well as the number of the specific target population that will be served (such as number of home health visits to X, # of elderly, # of school aged children to receive mentoring, # of violent crime victims to receive once a week counseling etc.)

There are approximately 5% of mental health patients who represent a disproportionately high cost to treat. These patients use 80% of available resources as compared to the general population seeking behavioral health services. This group tends to access health care services through such high cost venues as emergency rooms, crisis stabilization units, and acute care and/or psychiatric hospital beds. These individuals share common traits of having highly acute and recurrent mental health crises, accompanied by chronic medical conditions, and a tendency to self-medicate and abuse substances. Other common traits include a lack of access to transportation, poverty, homelessness, and a lack of social and/or family supports. Often times these conditions are co-occurring and present in combination with one another. There are tremendous savings by shifting these individuals who may have a serious and persistent mental illness from emergency room and hospital care to outpatient treatment via case management, residential respite, and care management.

The Diversion Project proposes to employ an Intensive Care Management (ICM) Team, providing an array of specialized services, to disrupt the "revolving door" cycle that characterizes this population; thereby diverting them from deep end services to traditional outpatient modalities. The ICM Team is a multidisciplinary team capable of providing immediate and assertive mental health, substance abuse, and care coordination services. Provision of medical care will be accomplished via collaboration with the local Federally Qualified Health Center (FQHC), who has committed to embed physical health care providers in ICM Team. The cost of providing medical care will be absorbed by the FQHC.

The ICM Team will initially engage with individuals presenting for crisis screening at emergency rooms or crisis stabilization units; either voluntarily or accompanied by law enforcement on an involuntary basis. Subsequently, the ICM Team will connect daily with these individuals to monitor physical and behavioral health status, medication adherence, assist with coordination of basic living needs, and engage in disease management and psychosocial rehabilitation, as well as providing crisis support and intervention as needed. Other treatment options available to the ICM Team in managing this population

include secure assessment and observation beds, residential respite beds, short term residential treatment, day programs, and intensive outpatient therapy. The overall objective is to increase ongoing compliance with medical and behavioral health treatment, thereby reducing the number of emergency room visits, crisis stabilization and hospital admission, and incarcerations or interactions with law enforcement.

The anticipated length of time individuals will be engaged with the ICM Team is expected to average approximately 180 days, after which they will transition to community based services. The ICM Team is anticipated to engage with 25-30 individuals per month, with a maximum capacity of 200 patients at any one time. Once fully deployed the program is anticipated to serve approximately 350-400 individuals annually, at a cost of \$2,000,000. Due to the chronic nature of their condition these individuals are typically at or below poverty level and have no insurance or other source of payment.

8. Provide the total cost of the project for FY 2016-17 from all sources of funding:

Federal: 0

State: 0 (Excluding the requested Total Amount in #4d, Column G)

Local: 0

Other: 0

9. Is this a multi-year project requiring funding from the state for more than one year?

Yes