



Tri-County Board of Recovery and Mental Health Services

Miami | Darke | Shelby

2015 FY Annual Report to the Community

Throughout FY2015, The Tri-County Board continued implementing community priorities as identified in the Three-Year Strategic Plan. Many of these activities involve building system capacity, developing more resources in the communities for prevention and wellness, and addressing gaps in the continuum of care.

Three training events serve as examples:

- Completed the 10th Crisis Intervention Team (CIT) Academy for Law Enforcement Professionals. CIT teaches law enforcement officers (and, through Companion Courses, dispatchers, court personnel, and others) how to recognize and respond to persons in mental health crisis in a manner that promotes safety for both the public and the officers.
- Trainers from the National Organization for Victim Assistance

(NOVA) conducted Crisis Response Team training to prepare volunteers to respond when a community crisis occurs, providing mental health support to victims and witnesses, first responders, schools, and businesses.

- Staff from the Tri-County Board provider agencies became certified Mental Health First Aid trainers, able to offer classes to teach lay people how to recognize the signs of mental health crisis or emerging problems, offer support and reassurance, and refer to appropriate help.

Putting mental health resources into the field, where and when crises occur, can help persons in crisis to get appropriate and timely help, and also builds resiliency in our first responders and our communities.

Board staff have been active in the establishment of coalitions to address

substance abuse and its effects on our young people, our workforce, and the livability of our communities. As these coalitions mature, they will increasingly engage with the general public, and the Tri-County Board will work to ensure the messaging is consistent with evidence-based practices.

As the funding model continues to change, shifting more people into Medicaid coverage or private insurance plans, the Board's focus shifts to building well and resilient communities.

Providing safe supportive housing for persons with severe mental illness or who are in recovery can help those persons be contributing members of society rather than burdens on it. The Board's strategic plan continues to build a complete array of services for prevention, wellness, treatment, and recovery in the three counties we serve.

Board of Directors

(as of June 30, 2015)

- Rod Austin
- Velina Bogart
- Dennis Butts
- Tom DeVault
- Marianne Helmlinger
- Jerry Herbe
- Terrence Holman
- Vicki Hornbeck
- George Lovett
- Mandy Martin
- Robert Menz
- Jason Wagner, Chair
- Roger Welklin
- Marcia Youtz

Mark McDaniel,
Executive Director

Our Mission

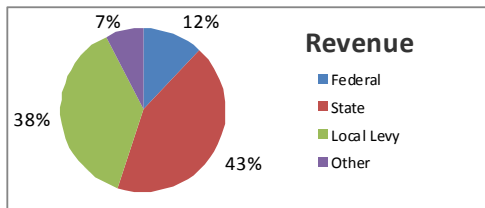
The Tri-County Board of Recovery & Mental Health Services is dedicated to planning, funding, monitoring and evaluating substance abuse and mental health services for Darke, Miami and Shelby counties; working diligently to see that the services are cost effective and of the highest possible quality; informing the community about these services; and ensuring that people have access to them.

Contact Us >>>

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937.335.8816 - fax

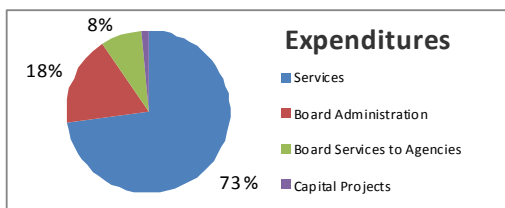
www.tcbmds.org

2015 Fiscal Year in Review (ending 30 June 2015)



Revenue FY15

Category	Amount	Percentage
Federal Funds	\$ 774,150	12.1%
State Funds	2,752,747	42.9%
Local Levy	2,417,566	37.6%
Other	478,274	7.4%
Total	\$6,422,737	



Expenditures FY15

Category	Amount	Percentage
Services	\$3,659,123	72.9%
Board Administration	898,522	17.9%
Board Services to Agencies	396,801	7.9%
Capital Projects	67,911	1.4%
Total	\$5,022,357	
Cash Forward to FY2016**	\$6,281,763	

Note: Revenue and Expenses include Central Pharmacy which is a non-cash item.

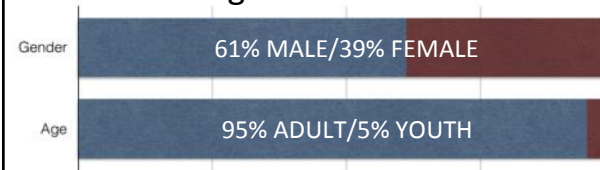
**Cash forward figure includes \$1,118,486 of Board Operating Reserves, \$2,150,303 of Board Capital Reserves, \$70,000 Levy Campaign Reserve, and \$2,942,974 of Unencumbered Reserves, which are available for future Board contractual obligations. Statements are unaudited.

Services At A Glance

Services provided by the Network of Care:

- Counseling
- Education, outreach, and prevention
- Jail and crime victim services
- Services for special populations
- Pharmacy and med management
- Hospitalization
- Respite and access to other affordable housing options
- Consumer support services
- 24-hour crisis services

1631 Non-Medicaid Clients Served in Treatment Programs



992 Male and 639 Female **non-Medicaid** clients were served in treatment programs in FY15. 95% (1557) were over 18. An additional 3101 clients were served in FY15 through prevention programs, including educational, informational, community and environmental assessments. (Medicaid clients are no longer included in this count.)

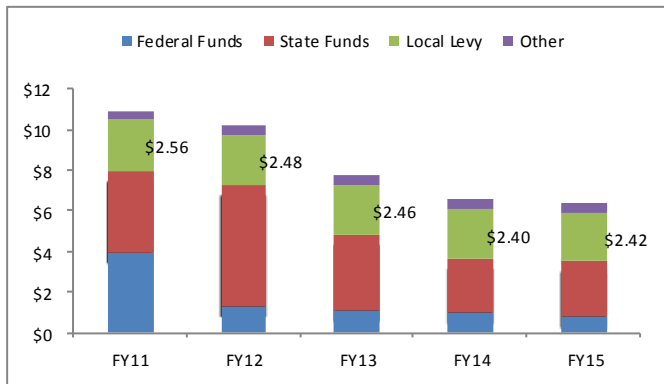
Five-Year Trends

Revenues and Expenditures

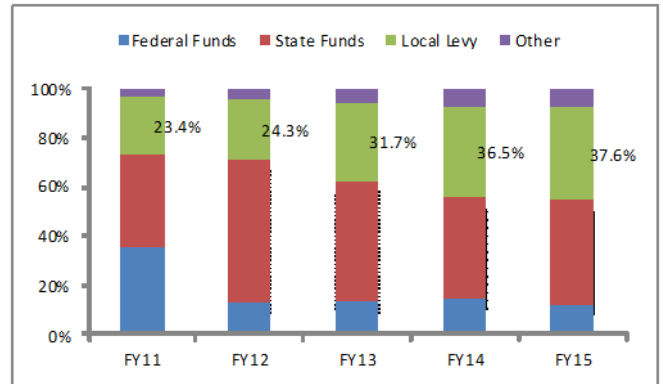
Revenues by Source in Dollars and as a Percentage of Total

Federal funds flowing through the Board continue to shrink as more Medicaid-eligible services are paid directly to providers. Local levy dollars continue to be an increasingly important source of funds, now accounting for more than one-third of revenue; local revenue dollars have stabilized after slight declines in prior years.

Revenue by Source in Dollars FY11-FY15



Revenue by Source in Percentages FY11-FY15



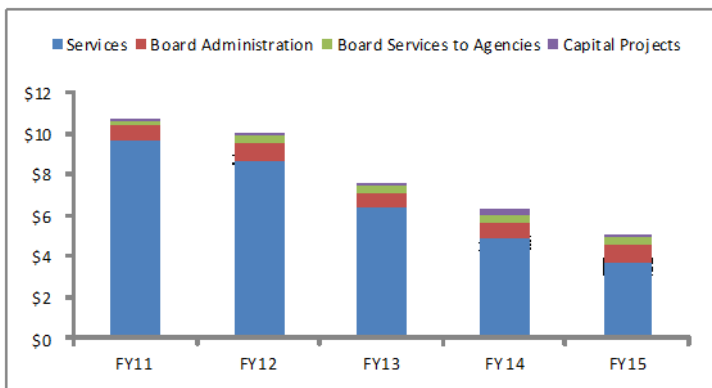
Revenue (Dollars)	FY11	FY12	FY13	FY14	FY15
Federal Funds	\$3,945,634	\$1,322,211	\$1,075,975	\$986,281	\$774,150
State Funds	4,047,574	5,968,403	3,790,441	2,691,803	2,752,747
Local Levy	2,561,091	2,481,408	2,459,494	2,400,835	2,417,566
Other	383,883	440,375	430,622	499,321	478,274
TOTAL	\$10,938,182	\$10,212,397	\$7,756,532	\$6,578,240	\$6,422,737

Revenue (Percentages)	FY11	FY12	FY13	FY14	FY15
Federal Funds	36.1%	12.9%	13.9%	15.0%	12.1%
State Funds	37.0%	58.4%	48.9%	40.9%	42.9%
Local Levy	23.4%	24.3%	31.7%	36.5%	37.6%
Other	3.5%	4.3%	5.6%	7.6%	7.4%
TOTAL	100%	100%	100%	100%	100%

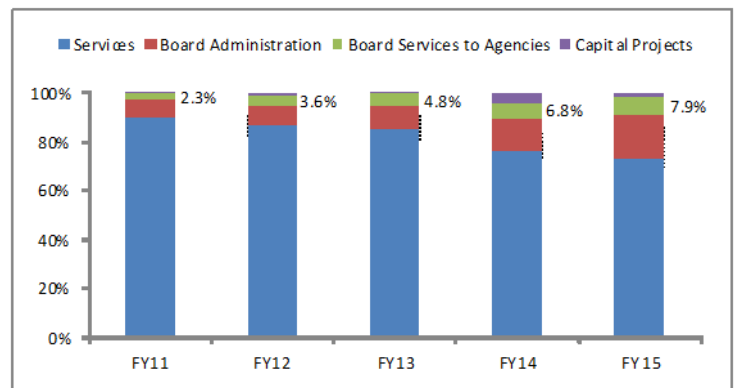
Expenditures by Category in Dollars and as a Percentage of Total

As our service network continues to adjust to Medicaid expansion, more people are covered by insurance or Medicaid, which affects the amounts service providers bill to the Board under their contracts. The Board is redirecting those funds into community-based continuum of care as mandated by the Ohio General Assembly, but more than 70 cents of every dollar is still used to provide services.

Expenditures by Category in Dollars FY11-FY15



Expenditures by Category in Percentages FY11-FY15



Expenditures (Dollars)	FY11	FY12	FY13	FY14	FY15
Services	\$9,634,264	\$8,725,014	\$6,395,317	\$4,851,261	\$3,659,123
Board Administration	767,224	851,009	742,243	813,447	898,522
Board Services to Agencies	244,218	360,787	358,129	427,704	396,801
Capital Projects	13,306	121,575	5,911	238,621	67,911
TOTAL	\$10,659,012	\$10,058,385	\$7,501,600	\$6,331,033	\$5,022,357

Expenditures (Percentages)	FY11	FY12	FY13	FY14	FY15
Services	90.4%	86.7%	85.3%	76.6%	72.9%
Board Administration	7.2%	8.5%	9.9%	12.8%	17.9%
Board Services to Agencies	2.3%	3.6%	4.8%	6.8%	7.9%
Capital Projects	0.1%	1.2%	0.1%	3.8%	1.4%
TOTAL	100%	100%	100%	100%	100%