

**ADAMH BOARD OF FRANKLIN COUNTY
FISCAL POLICIES**

POLICY F.02.010: DEFINITION OF SERVICE PROVIDER

1. ADAMH will conduct business with providers where services and/or programs are certified and/or licensed by the Ohio Department of Mental Health and Addiction Services as applicable by state law.
2. Programs and services not requiring state certification will be conducted with providers at the discretion of the CEO.
3. ADAMH will conduct its business with providers in accordance with its provider services contract or special service contract.

POLICY F.02.020: SERVICE PROVIDER CONTRACTS

1. The contract between the Alcohol, Drug and Mental Health Board of Franklin County and the provider governs the relationship between the parties.
2. The ADAMH Board provider contract covers a calendar year (January 1 through December 31).
3. The contract is reviewed with the Provider Leadership Association (PLA) or any other contract provider biennially.
4. The ADAMH Board may solicit feedback from the Consumer and Family Advocacy Council (CFAC) during biennial contract development.
5. Feedback from all parties will be incorporated into the contract at the discretion of the ADAMH Board CEO.
6. The contract is extended with addenda to cover the second annual contract period. ADAMH will make a good faith effort to limit material changes in requirements in the second period.
7. Allocations are authorized by the board of trustees annually, based on availability of funds and performance.
8. The draft and final contract will be reviewed by the Franklin County Prosecutor's Office prior to execution.
9. The ADAMH Board will comply with ORC 340 and its contractual requirements to issue a 120-day notice of substantial changes in contract terms to providers prior to the beginning of a new contract year.

POLICY F.02.030: SERVICE PROVIDER ALLOCATIONS

1. Annual provider service allocations will be approved by ADAMH's board of trustees 120 days prior to the beginning of each fiscal year. Any subsequent changes to allocations must be approved by ADAMH's board of trustees or CEO.
2. ADAMH will develop an allocation for each provider to be an attachment to the contract and to offer the provider a plan of funding that will be made available to the provider through ADAMH for federal, state, local and levy funds.

POLICY F.02.040: SERVICE PROVIDER BUDGETS

1. Contract service providers will have an approved annual budget prior to executing a contract with the ADAMH Board.
2. ADAMH will have a fiscal and programmatic understanding of costs and services being purchased annually from each provider. ADAMH fiscal and business operations, enterprise services and provider relations staff work together to complete the agency service plan/budget approval process.

POLICY F.02.060: SERVICE PROVIDER BUDGET/ASP REVIEW

1. Providers' annual budgets and agency service plans will be reviewed for technical accuracy and to evaluate if the proposed purchase services align with ADAMH's priorities.

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2. A two-tier review process will be used to approve a contract service provider's annual budget and agency service plan prior to executing a contract.

POLICY F.02.070: TECHNICAL REVIEW OF PROVIDER BUDGETS

1. ADAMH fiscal staff will review and approve all contract service provider budgets.

POLICY F.02.110: BLOCK GRANT PAYMENTS

1. Block grant funds are paid to providers on receipt of a valid payment request per the ADAMH production reimbursement schedule.
2. If a block grant requires encounter claims and is not exempt from the minimum 90% encounter claim threshold, providers will be required to submit encounter claim that meet these minimum benchmarks based on the schedule below before receiving additional reimbursement.
 - a. July request – 20% of block grant allocation
 - b. August request – 30% of block grant allocation
 - c. September request – 40% of block grant allocation
 - d. October request – 50% of block grant allocation
 - e. November request – 60% of block grant allocation
 - f. December request – 70% of block grant allocation
 - g. Final block grant funding request (submitting on or before January 31st of the subsequent year) – 90% of block grant allocation

A provider may request reimbursement up to the lesser of the annual allocation or actual annual block grant expense as long as the reimbursement request is substantiated by the minimum accepted encounter claim threshold.

Providers may request an exemption from the minimum values listed in 11.2.3 for select block grants that have seasonal service delivery.

POLICY F.02.120: ADVANCE PAYMENTS

1. The ADAMH Board of Franklin County may provide advance funding to assist providers with cash flow management.
2. An advance may be made to a contract provider who has completed all reporting requirements and has been regularly billing claims and block grants. The advance shall be limited to no more than one-twelfth of the provider's discretionary ADAMH services allocation and will only be made when funds are available in the provider's current year's contract allocation. The advance amount may exceed this provision with approval of the CEO.
3. The ADAMH Board shall authorize the ADAMH CEO to approve an appropriate provider request by signing a provider agreement, which defines the funding amount, terms of repayment, and that the provider's finances may be subject to further review.
4. If the provider requests an advance two or more times in a contract year, ADAMH staff shall notify the ADAMH Board and may recommend a program and fiscal review of the provider's operations.
5. Advances are restricted to agencies that execute an ADAMH provider contract.
6. Providers who receive advance payments must provide monthly financial statements (including cash flow statements) to the ADAMH Board before advances are approved and for each month while the advance is outstanding.
7. The ADAMH Board shall deduct the amount of the advance payment from providers' non-Medicaid claims allocation to repay the advance payment. All advances must be earned within the same fiscal year in which it was given. Unearned advance payments will be billed to providers after annual payment/expenditure reconciliation.

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8. Advances will be approved based on the discretion of ADAMH's CEO.

POLICY F.02.130: CENTRAL PHARMACY

1. The ADAMH Board of Franklin County maintains two allocations to select providers for central pharmacy:
 - a. OhioMHAS line-of-credit
 - b. Levy funds.
2. Throughout the contract year, ADAMH pays the OhioMHAS for all central pharmacy charges in excess of the line-of-credit.
3. In order to serve clients in a timely and clinically appropriate fashion, contract service providers may exceed ADAMH approved allocations during the contract year.
4. ADAMH reconciles central pharmacy with providers at the end of the contract year.
 - a. Unrealized claim allocations can be shifted to compensate for psychotropic or medically assisted treatment charges in excess of annual central pharmacy allocations.
 - b. Central pharmacy charges in excess of the allocation will result in the contract service provider making full restitution to ADAMH.
5. Central pharmacy risk pool: The ADAMH Board of Trustees may allocate a set-aside contingency for central pharmacy purchases. If one or more of the providers that have access to central pharmacy exceed their allocation, the ADAMH Board will automatically increase their allocation up to the contingency amount. In the event that there are insufficient contingency central pharmacy allocations, providers will receive a prorated share based on central pharmacy charges.

POLICY F.02.230: SERVICE PROVIDER PAYMENT RECONCILIATION

1. ADAMH will annually reconcile all payments with providers. The results will establish a provider payable or receivable. Payables will be made by ADAMH within 60 days. Provider receivables will be collected within 60 days unless the provider requests and is approved for an extended payment plan.

POLICY F.02.250: SERVICE PROVIDER COMPLIANCE

1. Pursuant to section 340.03 (A)(6) of the Ohio Revised Code, ADAMH Board policies, and ADAMH/provider services contract, ADAMH will monitor providers' compliance with law and regulations regarding quality service delivery, cost effectiveness, sound fiscal management and client rights.
2. ADAMH will track compliance with submission of contractually required reports and documents. Providers who are out of compliance with these submissions will have ADAMH service funds held and/or forfeited until compliance is met.
3. ADAMH will monitor compliance through its provider performance monitoring platform. (See below.)

POLICY F.03.140: PROVIDER CONTRACT PAYABLES: BLOCK GRANTS

1. The ADAMH Board will pay providers monthly in accordance with block-grant draw-down procedures.