

Town of East Haven, CT  
East Haven Counseling & Community Services Commission

Minutes

October 16, 2012 – 7:00 p.m.  
595 Thompson Avenue, East Haven, CT 06512

**1. Roll Call.**

Chairman Mr. Matt. Abbott called the meeting to order at 7:10 pm. The following members were present; Chairman Mr. Matt Abbott, Ms. Marianne Cesare, Ms. Sandra Enders, and also in attendance, CCS Director Ms. Beth Trotta. Absent members were Ms. Cynthia Rojas and Ms. Eileen DeMayo.

**2. Introduction of New Commissioner – Ms. Sandra Enders.**

Chairman Mr. Matt Abbott welcomed Ms. Sandra Enders to the board.

**3. To consider and approve minutes from last meeting.**

Mr. Matt Abbott made a motion to approve minutes from last meeting. Ms. Marianne Cesare seconded. Ms. Beth Trotta wanted to make note that the last minutes she stated that the contract was signed on August 1<sup>st</sup> – BH Care. September 1<sup>st</sup> was actually the date that she started full time in the center. Mr. Matt Abbott stated that no revision was needed – just a clarification on the currents minutes. – All in favor – None Opposed – Motion Carries.

**4. Ms. Beth Trotta, Program Manager to update commission on current clinic situation.**

Mr. Matt Abbott stated that he had emailed Ms. Beth Trotta with some questions and concerns and asked that she pull some stuff together for discussion this evening, and seeing that this is a relatively a new board it would be a great opportunity for all of us to be on the same page. Ms. Beth Trotta stated that the first item requested was an organizational chart and that has not be updated yet. Therefore it is still an organizational chart that is under the Mayor and those under him as far as BH Care being

included. The list of staff and their credentials, hours of operation etc. Currently we have 4 clinical staff (LCW - Licensed Clinical Social Worker) and 2 administrative staff – We also have an LMFT (License Family Marriage Therapist) - The only difference with the LMFT – is that Medicare clients – Medicare does not recognize the LMFT License for billing purpose. Our hours of operation are M – F 8:30 – 5:00 when the administrative people are here, and we do evenings M & W till 7pm. Ms. Marianne Cesare asked if the social workers are salary based. Ms. Trotta stated yes. Ms. Marianne Cesare asked if there is a quota of patients a day to be seen. Ms. Trotta states that part of that is under the Union negotiated contract with the town. Mr. Abbott asked to clarify that the 4 clinicians are union employees? Ms. Trotta stated yes as well as the secretary and the bookkeeper. Ms. Marianne Cesare asked what that contract states. Ms. Trotta states there is no quota. Ms. Trotta states that productivity needs to improve, I cannot tell you right now because I do not really know what that is going to look like. It is somewhat easier when dealing with adults vs. children. The same models cannot be used that we use with adults, for children. Ms. Marianne Cesare asked what is the average appointment time. Ms. Trotta stated it should be 45- 50 minutes – and hour appointment time or a 30 minute appointment time. We work in 30 or 60 minute time slots. We should be at 60% productivity and we are at 45%. 60% is the average but I think BH Care just wants it to move up. If you can bear with me I think I can answer your question better through Mr. Matt Abbott's list here. We have two empties and one APRN. Each of these prescribers has their own definitive case load they are busy from the time they walk in to the time they leave. Our no show rate is a different story – Mr. Abbott asked what percentage here see the docs – needing medication management? Ms. Beth Trotta states maybe 95% everyone sees the doctor. The client profile seems to be diagnosed chronic mental illness – access 5 – schizophrenia, bio-polar disorder, anxiety disorders etc. Mr. Matt Abbott do we serve any families or just individuals? Ms. Beth Trotta states that we do not have a multi-family group as of yet – but we are actively looking into that. Ms. Marianne Cesare states you mentioned Medicare – where does the money go? When you bill out Medicare and they pay who do they pay. Ms. Beth Trotta states that all of the money we bill that come in goes into the general fund for the town. We do not have a separate income line. All insurances. I have marked and photo copied the pages from the town

budget for your reference. It will show our income and expenses. Clearly one of the issues are the expenses vs. income are way off. We have expenses of \$637,843 our income does not approach that \$145,000.00 is what is budgeted. That is a big problem that needs to be corrected. Ms. Marianne Cesare stated that that is why I was asking if the docs are fulfilling their case load. Ms. Susan Enders asked who does the billing. Ms. Trotta states the bookkeeper. Ms. Marianne Cesare stated that this is something that is really needs to be fixed, maybe bring expense down or something? Mr. Matt Abbott states that I think with running a facility such as this we are going to be able to bring expense down much – I think the bigger issue is why isn't there more money coming in? I know that we had an issue in the past regarding things that were not be billed for, and the types of individual that we are seeing how are we being reimbursed for that and are we being reimbursed for that fairly? Ms. Beth Trotta – some of that is just how Medicare and Medicaid reimburse – we billed \$100 for a session and we may get back \$56 dollars of that. Mr. Matt Abbott states. Ms. Marianne Cesare states what about private insurance do we take and collect that as well? Ms. Trotta states yes we do – one of the challenges we face is that people who come here have private insurances that we are trying to get the clinicians on the panel so we can bill, the panel is closed so we fill out that application – but in the meantime we are still providing services to that client because we need to serve the needs of the client. Ms. Marianne Cesare asked what about co-pays. Ms. Trotta states yes we have them but a lot of people struggle paying them again do we hire a collection agent? Mr. Matt Abbott states again this is one of the conflicts that you run into to that your town is providing services and do you prevent them from mental health services....Ms. Marianne Cesare interjects and states but this is a business and you need to be able to run it. Mr. Abbott states he understands but this is the conflict that you run into its not a like a dentist and you cannot see a dentist anymore there are a lot of repercussions if you do not get mental health services. Ms. Cesare states that when I go to the doctor they demand a co-pay right then and there or you're not seen. Ms. Enders states but they are a private practice. Ms. Cesare states understandably but the fact of the matter is I do not get through-out the door unless I pay my co-pay. Mr. Abbott states that there has to be other ways such as grants etc. to bring in other income or whether the town will permit you to decline insurance if the doctors cannot

get on the panel or co-pays are not paid. Ms. Enders asks if the department tries to write grants. Ms. Trotta states as of yet no, not the department, that would be the town to write a grant. Mr. Abbott states that they are a lot of grants for mental health. Ms. Enders states that on a community level there is a heavy infiltration Hispanic community member that we have seen issues with maybe if we approach the federal government that is something that we can do. Ms. Trotta states that we are just here to manage things here – the grants would be a town issue. Ms. Enders states that we can say we have increase from 2% to 10% in one decade; we could use that to our advantage. Ms. Trotta states that I think all these are great ideas and we do not know the full story yet, we are still looking, exploring we have not figured out what our capacity is. Mr. Abbott asks what the numbers are right now. Ms. Trotta states (with a hand out) the wait list as of August 31<sup>st</sup> I closed one wait list and started another with the people who have been waiting the longest – as of August 31<sup>st</sup> there were 47 people waiting – 14 children 33 adults – since Sept 1<sup>st</sup> 26 were assigned 7 children 19 adults of that 26 - 12 refused services when contacted or we referred them out – they did not want services from us or found services elsewhere. Concurrently we had in that time period 29 people called and asked for services when the clinician called back 14 either they needed to be refereed out either they were substance abuse or whatever or we could not reach them wrong phone number etc. The clinicians make all the calls. Right now we have a wait list of 36 individual - 21 from the old wait list and so there are 15. In addition I have been assigning intakes. Back when they were getting one a month now they are getting one a week. If I give out an intake and they do not want services the clinician comes to me for another one. We are looking at how we are discharging clients we are trying to re-educate the client here for not termination but graduating from the program – it's getting better. Ms. Enders asks about the medication you mentioned 95% of the patients are on meds what happens when they leave? Ms. Trotta states it depends – we are trying to find providers from them but if they are not complying with their treatment here we are going to say we are going to give them a couple of months then they are on their own. It's about empowerment for their treatment and participates in treatment – we cannot provide medication without treatment. Treatment plans are reviewed every 90 days.

Ms. Trotta states that we have staff meetings every week and have discussions on how to we can me over even faster. Mr. Abbott asks if she had anything else to present. Ms. Trotta states you wanted to know if there are any vacancies, right now no. Even though we have lost a full time and a part-time clinician we are going to use what we have until we figure out what we actually need we are not sure yet. Mr. Abbott states with total current capacity we are at an active 199 clients? Ms. Trotta states yes active 199.

**5. Commission Comments.**

None

**6. Public Comment.**

No Public Present

**7. Discuss and approve any other matters that may come before the commission.**

None

**8. Adjournment.**

Mr. Matt Abbott asks for a motion to adjourn at 7:55 pm. Ms. Marianne Cesare seconds

Temple Smith, Clerk

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