



3-Year Strategic Plan (2019-2022)

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Chief Executive Officer

Date

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Organizational Overview

We R One Family Health Services, LLC (We R One) was established in 2019 as a for-profit organization. We R One purpose is to help children, families and adults who experience behavioral, and emotional issues live a quality life in their communities. We R One is Incorporated and planning to become a CARF certified and behavioral health care provider that provides mental health services to children, adolescents, adults and families residing primarily in Baltimore, Maryland. We R One will strive to make a positive difference in the overall health of the communities served by focusing on core services, and partnerships; engaging in thoughtful outreach; and managing resources effectively and efficiently. We R One core programs are:

1. Outpatient Treatment (OT)
2. Psychiatric Rehabilitation Program (PRP)

Strategic Planning Process

We R One develop a strategic plan that would be a road map for helping the organization get to where it wants to be. In October 2019, the organization developed its mission, vision, and values (guiding principles) statements. The organization also completed a SWOT analysis and reviewed the demographics and needs in the Baltimore, Maryland area.

The Strategic Plan is designed as a systematic management tool for short-term (3-years) goals and objectives. It establishes a foundation for success through a planning process that focuses on taking advantage of We R One strengths, opportunities and addressing identified weaknesses and threats. Through an extensive assessment of We R One internal and external operating environment, We R One established our key initiatives, Additionally, it articulates a high-level map of the direction to take in order to achieve, sustain, and advance We R One's mission and vision. The result is a document that translates salient environmental factors into tangible planning assumptions. The strategic plan format includes the overall goal, benchmarks, indicators and strategies. The strategic plan also includes an expected completion of timeframes, priorities, and responsible person(s).

The strategic plan is a 3-year plan that will be annually reviewed for achievement of stated goals. A revised and updated strategic plan, based on the outcome of the current plan, will be developed for We R One in 2020, and 2021.

The Strategic Plan Themes

Based on the processes used to develop the strategic plan several themes emerged that help formulate the focus of the organization. They included but were not limited to: Increasing management accountability, aligning the organization's processes with CARF, expanding and growing the organization through persons served enrollment, expanding the delivery of services, and guarding against threats to the organization.

We Are One Health Services, LLC

We R One is a community behavioral health organization that provides mental health services to improve the quality of life for the residents of Baltimore Maryland.

Mission Statement: “To support the recovery of individuals and families with overcoming the negative impact of mental illness and substance abuse.”

Vision: “To be a leader and preferred provider of choice in behavioral health and substance abuse services.”

Values Statement:

- **Respect**-We will demonstrate respect to all stakeholders through our communications and behaviors.
- **Person-Centered**-We will partner with all stakeholders in the planning and delivery of services
- **Services**-All services delivered will be culturally sensitive and individualized to the unique needs of individuals and families.
- **Quality**-We will provide the highest quality of services by exceeding our stakeholders’ expectations
- **Stewardship**-We will demonstrate integrity and accountability in our business practices and service delivery processes

Treatment Philosophy:

- Through a person-centered approach, We R One will collaborate with persons served to deliver behavioral health and alcohol and other drugs (AOD) services that builds resiliency in children and adolescents and facilitate recovery for adults.

Review of Financial Position:

We R One is better able to define success with proactive long-term financial planning measures. We R One recognizes that its future financial position is impacted by the competition, and everchanging marketplace factors such as coding, payment, reimbursement, and costs.

We R One fiscal practices will adhere to established accounting principles and business practices. We R One financial planning and management activities are designed to meet the established outcomes for the person served, and the organizational performance objectives. Management and financial activities will incorporate indicators in areas such as a) effectiveness and efficiency of services, b) service access, c) satisfaction and other feedback from persons served and other stakeholders as applicable.

It is the policy of We R One to develop an annual budget that ensures resources are being appropriately allocated for the mission, goals, objectives, and to ensure outcomes for persons served are achieved. We R One will conduct a monthly review of the actual financial results and compare these results to the budget. Items such as Profit and Loss , as well as monthly cash flow statements, will be reviewed by the CEO. The CEO will assess every month a status report of the financial position of We R One.

Financial Goals:

1. Become Financial Solvency
2. Minimum Cost of Management Staff
3. Increase Revenues
4. Complete Financial Solvency Plan
5. Increase Profits
6. Financially Support Clinical Needs and Services

Two (2) Primary Strategic Initiatives: WE R One has two Strategic Initiatives for the 3-year period, which are supported by the Goals and Objectives listed below

1. Growth & Expansion
2. Efficient and Effective Resource Management

Baltimore, Maryland Population 2019

Baltimore is the largest city in Maryland and the 26th largest city in the United States. The city is located in central Maryland along the Patapsco River. Baltimore is an independent city that is also called Baltimore City.

Baltimore's population is growing very modestly, and growth is nearly flat. The population of Baltimore is estimated at 622,000.

At the 2010 census, Baltimore had a population of 620,560. By 2012, this number had grown to 621,342. The population of Baltimore is believed to have risen to 622,000, a very slight but promising increase for the city, which has lost more than one-third of its population in the last sixty years.

This is the first time Baltimore's population has grown since it reached a peak of 949,700 in 1950. Downtown Baltimore and surrounding areas have seen improvement as more young professionals and immigrants move to the region. There is also growing international migration as well as fewer people leaving Baltimore. Baltimore Mayor Stephanie Rawlings-Blake announced in December 2011 that she would make it her goal to increase Baltimore's population by "10,000 families" within ten years. In 2018, the numbers didn't seem to be cooperating with her goal - the population of Baltimore is currently estimated to be at 611,648. This drop indicates a loss of 1.5% of the city population.

The Baltimore metropolitan area is much larger, however, with a population estimated at 6.7 million. This makes it the 20th largest metro area in the country.

Baltimore Demographics

According to the most recent ACS, the racial composition of Baltimore was:

- Black or African American: 62.80%
- White: 30.29%
- Asian: 2.56%
- Two or more races: 2.32%
- Other race: 1.68%
- Native American: 0.30%
- Native Hawaiian or Pacific Islander: 0.05%

Baltimore Sex Ratio

- **Female Male**
328,419 291,377
52.99% 47.01%

Baltimore Poverty Rate by Race and Sex

Black	376,479	99,663	26.47%
Whites	163,767	20,816	12.71%
Hispanic	29,534	7,602	25.74%
22.43% Overall Poverty Rate			
21.01% Male Poverty Rate			
23.67% Female Poverty Rate			

Baltimore Language

90.52% of Baltimore residents speak only English, while 9.48% speak other languages. The non-English language spoken by the largest group is Spanish, which is spoken by 4.02% of the population.

Maryland Medicaid

Maryland has used Medicaid managed care since 1991. As of July 2017, Medicaid Managed Care Organizations (MCOs) covered more than 89 percent of Maryland's Medicaid population, while the other 11 percent were covered under the Medicaid Fee for Service program (the Medicaid FFS program includes elderly enrollees who are also eligible for Medicare, and those who are in long-term care facilities). Medicaid enrollment in Maryland has grown significantly in the last few years. From September 2013 to December 2017, total enrollment in Maryland's Medicaid/CHIP grew by 53 percent. Much of that growth is due to the state's decision to expand Medicaid through the Affordable Care Act (ACA).

Medicaid Enrollment (39% reduction rate in the uninsured)

As of June 2019, Maryland has enrolled 1,313,070 individuals in Medicaid and CHIP — a net increase of 53.34% since the first Marketplace Open Enrollment Period and related Medicaid program changes in October 2013.

Everyone who enrolls in Medicaid through the state-run exchange (Maryland Health Connection) is enrolled in an MCO. There are currently nine health insurance carriers that participate in Maryland's Medicaid Managed Care program.

The Outlook for Maryland Medicaid

Republican Larry Hogan took over as Maryland's governor in January 2015, replacing Democrat Martin O'Malley. O'Malley faced a term limit and was not running for re-election; Lt. Gov. Anthony Brown vied with Hogan.

While Hogan frequently criticized O'Malley and Brown over Maryland's state-run health insurance exchange, Medicaid expansion was not a campaign issue. In fact, Hogan acknowledged that significant changes to Medicaid were unlikely given Democrats' dominance in the Maryland General Assembly.

Gov. Larry Hogan Signs Bill

When Marylanders file their state tax returns next year, they'll face an extra question: Do you have health insurance? The state will use the answers to guide low-income residents into Medicaid or subsidized health plans — a first-of-its-kind program that health advocates hope to replicate in other states. The bill that created the "Maryland Easy Enrollment Health Program" was among more than 180 pieces of legislation passed by state lawmakers that Gov. Larry Hogan, a Republican, signed into law during a State House ceremony on Monday.

Environmental Scan

The following is We R One’s key strengths, weaknesses, opportunities, and threats:

SWOT Analysis (List)

<p>Strengths:</p> <ul style="list-style-type: none"> • Network and Contacts • CARF Consultants • Committed and educated management team • Location and services in the city and county • Client driven • Quality services 	<p>Weaknesses:</p> <ul style="list-style-type: none"> • Start up • Public awareness of service • Funding • Staffing
<p>Opportunities:</p> <ul style="list-style-type: none"> • Network with community stakeholders • Extend services to target population • Develop good will in the community • Bring on committed qualified staff • Become financially solvent • Opportunity to acquire some market in the city and county • Receive a CARF Preliminary accreditation • Receive 3-year CARF accreditation • Acquire funding streams • Non-profit for a division for the company 	<p>Threats:</p> <ul style="list-style-type: none"> • Competition • Lawsuits • Fraud • Recruiting wrong staff • Change in funding streams • Limited transportation for clients • Bad reputation • Change in Market

Key Strategic Issues

Key strategic issues and goals for the Strategic Plan:

- Achieve a CARF Preliminary Accreditation in 2019
- Achieve a CARF 3-year Accreditation in 2020
- Build a solid staffing to achieve program/service goals.
- Develop and maintain an annual financial budget, which contains reasonable projections of revenue and expenditure
- Growth & Expansion
- Efficient and Effective Resource Management
- Focus on Core Programs

Key Objective and Activities for the Strategic Plan:

- Hire Consultants to help Achieve CARF 3-year Accreditation
- Create high-quality standard of services for person's served.
- Build sustainability
- Recruit staff that's consistent with the organization's values.
- Develop a marketing strategy to increase market share.
- Provide quality services to Medicaid eligible children, adolescents, and adults.
- Provide evidence-based, culturally appropriate services that foster independent living, resiliency, and recovery.
- Manage our resources (fiscal, human, facilities) efficiently and effectively to support the goals and objectives in the strategic plan.
- Become Financially solvent and manage resources efficiently and effectively to support the goals identified above.
- Hire qualified staff and implement an aggressive staff professional development and retention plan.
- Continue to expand and integrate the use of technology in both service delivery and operations.

Competition: (agencies in our area)

Baltimore city and county are saturated with competitors for PRP and outpatient services. Many competitors have an advantage of being in operations for a number of years and they have established themselves.

We R One Competitive Advantage

- Manage Budget Minimize Costs
- Network and Contacts
- CARF Consultants
- Exceeding customer expectations

GOALS, ACTION PLANS and TIMELINES

Goal 1: Service Establishment and Growth

Strategy 1:

We R One will actively explore service establishment and growth opportunities by enrolling clients through personal contacts and marketing strategies.

Action Step 1:

- Implement programmatic and service delivery by: February 1, 2020
- Enroll 50 persons served by: July 1, 2020
- Enroll 100 person served by: January 1, 2021
- Enroll 250 person served by: January 1, 2022
- Create a non-profit division by: July 1, 2022

Success Indicators: Increase persons served

Target Date: January 1, 2022

Lead Person: Melvin Mathis, CEO

Goal 2: Achieve cooperation agreements with county or local boards and CARF Accreditation

Strategy 2: Hire Consultants, complete necessary documentation, achieve accreditations

Action Step 2:

- Develop and operationalize policies and procedures, and organizational plans by: November 1, 2019
- Become a Medicaid provider by: February 1, 2020
- Achieve Agreements and cooperation with local funders by: February 1, 2020
- Achieve CARF Preliminary accreditation by: December 16, 2019
- Achieve 3-year CARF accreditation by: July 30, 2020

Success Indicators: Achieve local agreements, CARF Accreditation at the preliminary and three-year level

Target Date: July 30, 2020

Lead Person: TQVC (consultants)

Goal 3: Workforce Development

Strategy 3: Recruit and maintain culturally competent staff

Action Steps 3:

- Complete Onboard and annual mandate trainings by: March 16, 2020
- Develop employee's appreciation program by: July 1, 2020
- Conduct annual employee satisfaction feedback surveys twice annually by May 1, 2020

- All employees will complete CARF Mandatory training upon hire with yearly updates by March 29, 2020
- Performance Evaluations completed on time by: July 1, 2020
- Achieve an overall retention rate of 70 % of all staff hires within the 1st year of business by: July 1, 2021, and ongoing
- All Employees will have completed files directed by CARF, state, and federal standards by May 1, 2020

Success Indicator: Employee satisfaction rate of > 90%, Retain > 70% of staff

Target Date: July 1, 2020

Lead Person: Melvin Mathis, CEO, TQVCs

Goal 4: Revenue Generation / Finance

Strategy 4: Establish revenue generating programs.

Action Step 4:

- Serve 50 clients by: July 1, 2020
- Increase Medicaid billing and improve overall productivity by July 1, 2021
- Market presenting services and personal contacts to the community by March 29, 2020
- Widely distribute brochures with information about our organization to all stakeholders and potential stakeholders by: March 29, 2020
- Increase Programs/Services by: January 1, 2021
- Become financially solvent through savings or establishing a line of credit that is equivalent to 6 months of expenses by: July 1, 2022
- Establish business cards, website, marketing materials by: February 16, 2020
- Establish a non-profit division by: July 1, 2022

Success Indicator: Yearly in budget revenues is 20% greater than expenses, achieve persons served enrollment goals.

Target Date: July 1, 2022

Lead: Melvin Mathis, CEO

Goal 5: Technological Innovations

Strategy 5:

Maximize opportunities related technological innovations supporting service delivery efficiency, effectiveness, and supporting the organization's business functions.

Action Step 5:

- Develop and Implement Technology Plan by: November 1, 2019
- Research emerging technologies that will positively impact the efficiency of service delivery by: March 1, 2020
- Research electronic medical records and billing system by March 1, 2020
- Complete training to employees on the confidentiality and security on computer equipment by: March 29, 2020 and ongoing
- Develop programs and reports that collect and manage data to ensure effective and efficient services: by July 1, 2020
- Establish backup system to store data by: April 1, 2020

Success Indicator: We R One will have procure adequate office computer systems for efficient billing operations , electronic medical records, and managing program data

Target Date: July 1, 2020

Lead Person: Melvin Mathis, CEO

Goal 6: Risk Management

Strategy 6:

Identify and reduce potential risks to We R One

Action Step 6:

- Develop and implement Risk Management Plan by: November 1, 2019
- Develop Corporate Compliance Plan by : November 1, 2020
- Implement Corporate Compliance Plan by: July 1, 2020
- Train all staff in codes of ethics by: April 1, 2020
- Develop and implement Health and Safety policies and procedures by: November 1, 2019
- QA Audits analyzed, trended and improve chart audit review performances quarterly by: July 1, 2020

Success Indicator: 100% Staff training, 85% QA audit compliance, Corporate Compliance Plan completed

Target Date: July 1, 2020

Lead Person: Melvin Mathis, CEO, TQVCs