

IV: Narrative Plan

H. Service Management Strategies

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Narrative Question:

SAMHSA, similar to other public and private payers of behavioral health services, seeks to ensure that services purchased under the Block Grants are provided to individuals in the right scope, amount and duration. These payers have employed a variety of methods to assure appropriate utilization of services. These strategies include using data to identify trends in over and underutilization that would benefit from service management strategies. These strategies also include using empirically based clinical criteria and staff for admission, continuing stay and discharge decisions for certain services. While some Block Grant funded services and activities are not amenable (e.g. prevention activities or crisis services), many direct services are managed by other purchasers.

In the space below, please describe:

1. The processes that your State will employ over the next planning period to identify trends in over/underutilization of SABG or MHBG funded services
2. The strategies that your State will deploy to address these utilization issues
3. The intended results of your State's utilization management strategies
4. The resources needed to implement utilization management strategies
5. The proposed timeframes for implementing these strategies

Footnotes:

Office of Adult Mental Health Services

Service Management Strategies

Children's Services, Substance Abuse Services, and Adult Mental Health Services have jointly coordinated service management strategies by consolidating: utilization review, prior authorization, retrospective review, quality management and improvement functions, as well as appeals and grievances through a contract with APS Health Care.

APS submits monthly service data that we compare and contrast with our service encounter data. This process allows us to measure, manage, and adjust provider utilization of both Medicaid and grant funded services. We will employ the same process as last year, hopefully with additional resources from the block grant for more granular reporting regarding capacity to identify the specific grant source within the utilization reports.

OAMHS will be incorporating peer review of these utilization issues to include Block Grant provider monitoring as well as question and answer sessions.

Resources needed have been identified in Section E, which specifically include an allocation from the Block Grant to support enhanced reporting capacity within our IT System which includes our Service Encounter Data Base. With this enhancement, we will be able to positively identify the grant funding source and individuals served. With support of Block Grant funds we will have this functionality within 6 to 12 months.

H. Service Management Strategies

Community Mental Health Services Block Grant (CMHBG) fund received by Children's Behavioral Health Services (CBHS) are used to fund community services. Distribution of federal funds under the CMHS Block Grant is implemented through decisions made by the Department through the Director of Children's Behavioral Health Services, in consultation with the Statewide QIC Children's Committee.

Block Grant distribution among specific contracts are made at the central office level, using rationale that identify programs that serve children that are not covered by MaineCare and those which provide services to children who are not eligible for MaineCare funding. More recently, a third consideration is to use mental health block grant funds for initiatives that are transformational in nature and directly benefit children with serious emotional and behavioral issues and their families.

The Department contracts for services which are funded entirely or in part through the Block Grant. The Children's Behavioral Health Services Program issues contracts with specifications for all services, including conformance with all PHS Act requirements and applicable service conditions of the CMHS Block Grant. DHHS Purchased Services Administrators monitor contracts through quarterly and year end fiscal and narrative reports from service providers. Regionally based CBHS Team Leaders and Resource Coordinators monitor services by regularly scheduled meetings with providers. The Children's Committee of the QIC also will receive these reports in FY12.

Maine dedicates more than three quarters (75%) of its Center for Mental Health Services Block Grant funds to address the needs of children who have serious emotional disturbance and their families. The allocation of FY11 Children's Behavioral Health Services Block Grant funds, including unallocated funds follows:

CHILDREN'S MENTAL HEALTH BLOCK GRANT FY12			
Distribution by Region/Service Type			
Agency	Service Funded	Amount	Estimated # Total Served
REGION I			
Community Counseling Center	Peer Support for Youth	33,000	75
S. Maine Parent Awareness	Family Support/I&R	44,000	500
Region I Total		\$77,000	575
REGION II			
Community Concepts	Family Support	11,000	20
Region II Total		\$11,000	80

REGION III			
Helping Hands	Family Support/I&R	50,000	500
Region III Total		\$50,000	500
STATEWIDE			
Crisis & Counseling – GEAR	Family Support	212,000	962
Crisis & Counseling - GEAR	Parent Advocacy FACES	60,000	750
Maine Parent Federation	Information & Referral	32,000	NA*
Maine Parent Federation	Starting POINTS Media	60,000	3,500
Maine Parent Federation	QIC Support	5,000	N/A*
NAMI Maine	Information & Referral	18,500	230
NAMI Maine	School based +Primary Care workshops	60,000	
TCMHS – Youth MOVE	Youth Transformation	106,378	80
	Youth Transformation	60,000	60
Statewide Total		613,878	
Total Allocated 7/1/11		751,878	7,850
BG FY11 Award Available	To expend by 9/30/11	136,678	
BG FY12 Award Available	To expend by 9/30/12	824,521	
Total Available		961,199	
Unallocated to Expend FY11		209,321	

* Information & Referral data contain substantial duplication and therefore are not added to the regional subtotals or the state total for number served. **BOLD = Transformation Activities funded by the Block Grant in FY12.**

OIC Children's Committee Commitment to Transformation

In June, 2007 the Director, Children's Behavioral Health Services, and members of the Children's Committee of the Quality Improvement Council discussed possible investments in focused activities using Block Grant funds in the FY08 fiscal year. There was a mutual interest in doing significant work with family organizations in 2007, in addition to the family support work of various types and focus that these organizations have typically done in the course of carrying out their unique missions. Accordingly, each organization was asked to submit a proposal to the Director that would capture the spirit, intent and focus of transformation that would benefit and support families with children and youth with serious emotional disturbance. These proposals, each in the amount of \$60,000, were reviewed by Children's Behavioral Health Services and subsequently recommended for consideration by the Children's Committee of the QIC for one year funding.

Children's Committee Recommendations for 2012/2013 Plan

This year the Children's Committee worked on standardizing the content of the Transformation Award proposals.

The Children's Committee discussed in detail recommendations for the award of block grant funds for new initiatives and for continuing support of funding for programs. The committee expressed a strong commitment to transformation in considering funding with block grant dollars, accountability for programs that have received block grant funds, and certainty that funding would be used for children with high emotional/ behavioral needs. The committee discussed some examples of transformational priorities such as new and innovative approaches to reaching these children and youth, family driven care, youth development and evidence-based practices.

On several occasions in July 2011 the Children's Committee met to review the four transformation initiatives seeking continuation of support or for a new initiative using FY12 Block Grant funding. As in the previous year, each applicant presented its accomplishments, progress and goals and measurable objectives for the coming year. The Children's Committee reviewed and voted to approve or disapprove the proposal. If a proposal was disapproved and opportunity was given to the applicant to meet with the committee and discuss the reasons why the proposal was rejected. An opportunity to revise and resubmit the proposal was given. Two proposals were rejected and revised to meet the requirements that the services be transformational in nature.

After committee discussion with each presenter, and specific suggestions for change, emphasis or addition, all three proposals were recommended for funding.

The committee approved the proposals outlined below:

Allocation of Children's FY12 Block Grant Funds for Transformation Activities

Provider	Transformation Initiative	NFC Goal	Block Grant \$
Maine Parent Federation (MPF)	<i>Starting POINTS for Maine Families</i> delivers online access to information, support and networking that will make knowledge of children's mental health more available to families statewide. Web page connects families to a variety of short presentations and allow for easy, personal feedback that will be used to tailor topics of interest as the initiative is implemented over time. Focus this year will be on building the content, usability, evaluation and outreach for Starting POINTS, Facebook and	2	60,000

	<p>trainings, peer-to-peer partnerships, anti-stigma campaign and youth training and provide technical assistance</p> <p>Relevant SAMHSA strategic initiatives: Public Awareness and Support, Recovery Support, Trauma and Justice</p>		
	<p>FY12 Mental Health Block Grant Transformation Funding</p>		<p>\$240,000</p>