

Janet T. Mills
Governor

Jeanne M. Lambrew, Ph.D.
Commissioner



Maine Department of Health and Human Services
Office of MaineCare Services - Value-Based Purchasing
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Augusta, Maine 04333-0011
Toll Free: (866) 796-2463; TTY: Dial 711 (Maine Relay)
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Meeting name:	MaineMOM Advisory Group Meeting (#1)		
Date of meeting:	March 10, 2020	Time:	8:15am
Minutes prepared by:	Maya Cates-Carney & Liz Remillard, Office of MaineCare Services	Location:	MaineGeneral
Meeting Objective			
First gathering of the MaineMOM Advisory Group; provide an overview of the award, Maine's model, locations of all the Care Delivery Partner (CDP) sites, and who is involved in decision making; collect feedback on where we may currently have gaps, and discuss better strategies for communication			
Attendees			
Aroostook County Action Program: Addy Beck-Bell; <i>MaineGeneral</i> : Leeanna Lavoie, Alane O'Connor; <i>MaineHealth</i> : Caroline Zimmerman; <i>MidCoast Health</i> : Catherine McConnell; <i>Northern Light/Mercy</i> : Melissa Skahan; <i>Penobscot Community Health Center</i> : Noah Nesin (zoom); <i>Tribal Council, Passamaquoddy Tribe</i> : Elizabeth Neptune (Zoom); <i>Maine DHHS</i> : Lisa Letourneau (Zoom); Amy Belisle; <i>Office of MaineCare Services</i> : Olivia Alford; Maya Cates-Carney; Michelle Probert; Liz Remillard; <i>Office of Behavioral Health</i> : Katherine Coutu; Stephanie Kallio; <i>Maine CDC</i> : Kelley Bowden, Dara Fruchter; <i>Office of Child and Family Services</i> : Bobbi Johnson (Zoom)			
Notes, Decisions, Issues			
Topic	Discussion	Follow-up	
Shared Opportunities of the MaineMOM Advisory Group Members	State opportunities from the MaineMOM Advisory Group Members: <ul style="list-style-type: none"> • Focus on early intervention • Integrated care • Statewide partnership • Sharing best practices and information • Supporting interdisciplinary care • Restorative justice/relationships with the health care system and families • Better system navigation • Increased resources to do this work • Reduction in stigma • Increased access to services 		
Overview of the MaineMOM Award and Partners	See MaineMOM overview document on website . <ul style="list-style-type: none"> • Group discussed overview with representation of Care Delivery Partners, MaineMOM Clinical Committee members, Advisory Group members, and the internal Department of Education (DOE) and DHHS 	MaineMOM Program team will reach out to New Hampshire and learn about their approach	

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	<p>Workgroup members, a subset of the DHHS Substance Exposed Infant Steering Committee</p>	
<p>MaineMOM: Planning, Engaging Providers and People, and Disseminating Information</p>	<p>Discussion on how to reach providers and disseminate information:</p> <ul style="list-style-type: none"> • The State Opioid Clinical Advisory Committee could be an avenue to distribute information <ul style="list-style-type: none"> ○ There is minimal engagement of maternity providers on this committee • Private Maternity Provides (OBs) are easy to miss in this communication and need to develop an outreach strategy <p>Ideas:</p> <ul style="list-style-type: none"> • Proposed using the MaineMOM public webpage to house information and connection links to additional information and best practices <ul style="list-style-type: none"> • The NH/Dartmouth webpage was suggested as a good model for sharing information: https://www.dartmouth-hitchcock.org/psychiatry/moms-in-recovery.html • The Support for ME grant has issued an RFP for an Substance Use Disorder Learning Community, proposals due April 15 • Align with the infrastructure created by Qualidigm/MaineCare collaboration to roll-out Rapid Induction of Buprenorphine in the Emergency Room. Materials were produced and experts were available to support dissemination 	<p>MaineMOM Program team will incorporate ideas into planning</p>
<p>Advisory Group Mtgs/ Engaging in broader involvement</p>	<p>Discussion:</p> <ul style="list-style-type: none"> • Group considered options for the Advisory Group meeting: <ul style="list-style-type: none"> ○ Quarterly Public Advisory meeting with Q&A for non-advisory members after the meeting 	<p>MaineMOM Program team will review membership and send additional invitations</p>

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	<ul style="list-style-type: none">▪ If the Advisory Group needs to meet in private:<ul style="list-style-type: none">• After the public meeting (as needed)• Monthly virtual calls• Group discussed how to engage women in recovery as advisors:<ul style="list-style-type: none">○ Invite a few women as representatives of the recovery community – group acknowledged the potential barriers caused by the perceived power dynamic with providers in the room and the effects on participation○ Engage a group of women in recovery to serve as a representative voice, with separate group meetings. Considerations for this option include:<ul style="list-style-type: none">▪ Provide facilitation, food, support for transportation and childcare▪ Convene these groups regionally○ Find representation from women who are in non-integrated treatment, engaged in methadone treatment, have been incarcerated, etc.○ In the MaineMOM contract, require each Care Delivery Partner to have a patient/member board for ongoing input. This is aligned with existing Health Home requirements.• Expanding membership of the Advisory Group, recommendations:<ul style="list-style-type: none">○ Maine Pharmacy Association○ Child Development Services○ Private OBs, Midwives, Maine Family Planning○ Department of Corrections	<p>prior to the next meeting</p> <p>MaineMOM Program team will recommend formal structure for Advisory Group at next meeting.</p>
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	<ul style="list-style-type: none"> ○ Stand-alone licensed Substance Use Disorder agencies, including but not limited to, Opioid Health Homes 	
Review of Additional Funding Opportunities	<p>Discussion on the Substance Abuse and Mental Health Services Administration (SAMHSA) State Pilot Grant Program for Treatment for Pregnant and Postpartum Women</p> <ul style="list-style-type: none"> ● Group discussed potential ways this funding could support and expand MaineMOM work. 	Office of Behavioral Health will determine whether to apply
Outreach & Communication	<p>Discussion on considerations for MaineMOM Outreach Vendor deliverables:</p> <ul style="list-style-type: none"> ● Understand the diversity of community partners to outreach and how to best communicate with each (e.g. treatment providers, moms in recovery, hospitals, police, EMS) ● Ability to solicit and incorporate feedback from community partners ● Reinforce CradleME connection in communication ● Coordinate efforts with other efforts – for example the ED induction program (mentioned above) ● Representative Roberts is available to support review of RFP or applications as needed 	
Resources Discussed during Meeting	<ul style="list-style-type: none"> ● March of Dimes: Stigma Toolkit: https://beyondlabels.marchofdimes.org/ ● Cradleme.org ● Opioid Clinical Advisory Committee on Combination Buprenorphine/Naloxone for Pregnant Women (attached) ● Touchpoints approach (SAMHSA Grant Opportunity to provide Training Support: https://www.brazeltontouchpoints.org/about/evidence-based-research/ 	

Next MaineMOM Advisory Group Meeting: TBD

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