

Division of Mental Health & Addiction Services
wellnessrecoveryprevention

laying the foundation for healthy communities, together

NAMI-NJ Annual Conference 12/8/12

DMHAS Update

Lynn A. Kovich
Assistant Commissioner

Agenda

- ▶ Newly Awarded Contracts and Current/Proposed RFP's
- ▶ Update on the ASO/MBHO Process
- ▶ Update on the Merger
- ▶ Supporting Older Adults & Family Members Supporting Adult Children
- ▶ The Effect of the Affordable Care Act on Mental Health Services
- ▶ Essential Health Benefits
- ▶ Exchanges in New Jersey
- ▶ Services Post-Election

Newly Awarded Contracts and Current/Proposed RFP's

Newly Awarded Contracts

- ▶ DMHAS was awarded a Statewide Epidemiological Outcomes Workgroup (SEOW) contract from SAMHSA Center for Substance Abuse Prevention. New Jersey will receive \$190,000 for 11/1/2012 - 8/31/2013 for behavioral health data collection and reporting.
- ▶ DMHAS was awarded \$7.5 million from SAMHSA to implement a five year screening, brief intervention and referral to treatment initiative. DMHAS has made available up to \$5,231,665 for up to 5 years for this initiative. Approximately \$1,047,720 will be available during the first year of implementation.
 - ▶ The award was made to Henry J. Austin Health Center on 11/7/12.
- ▶ DMHAS issued an RFP on 8/1/12 for the development of one Involuntary Outpatient Commitment (IOC) program. This will be the sixth IOC program funded by DMHAS. IOC programs are currently funded in Burlington, Essex, Hudson, Union and Warren Counties.
 - ▶ The final award was made to Ocean Mental Health Services to provide IOC in Ocean County. \$293,766 is available annually for this initiative.

Newly Awarded Contracts

- ▶ DMHAS issued an RFP on August 20 for the creation of new supportive housing opportunities for mental health consumers who are at imminent risk of hospitalization and homelessness for a total annualized amount of \$2,363,121.
 - ▶ Final awards were issued to Bridgeway – Hunterdon, Bridgeway – Union, Bridgeway – Sussex, Jewish Family Services - Atlantic, UMDNJ-UBHC- Essex, Ocean MH Services – Ocean, Newbridge Services, Inc. – Morris, Atlanticare Behavioral Health-Atlantic, Easter Seals-Somerset, Catholic Charities – Diocese of Trenton – Mercer.
- ▶ DMHAS issued an RFP on August 30 for the development of 30 supportive housing beds from existing DMHAS contracted PACT and RIST programs to provide community support for persons on CEPP status discharged from state psychiatric hospitals.
 - ▶ Final awards were issued to Resources for Human Development (Ocean), Bridgeway Rehab (Union), Mental Health Association Morris County, Bridgeway (Warren/Hunterdon/Somerset), Resources for Human Development (Passaic).

Current RFPs

- ▶ **Development of Early Intervention Support Service (EISS) programs that will provide rapid access to short term, recovery-oriented crisis intervention and crisis stabilization services for persons with a serious mental illness**
 - ▶ Issued 10/3/12
 - ▶ Seeking to competitively award programs in Bergen, Cumberland and Mercer Counties and anticipates three separate awards of up to \$1,000,000 each
 - ▶ Due date was extended to 11/16/12, with applicants being notified no later than 12/20/12
- ▶ **Development of supportive housing opportunities for 213 individuals**
 - ▶ Issued 11/20/12
 - ▶ Identifies four different initiatives for a total annualized amount of \$8.4M to be developed to address the housing and community support needs of State Psychiatric Hospital discharge-ready individuals as identified by the DMHAS
 - ▶ Due date is 1/2/13, with applicants being notified no later than 2/14/13

RFPs Not Yet Posted

- ▶ Three Psychiatric Emergency Screening Centers (counties to be determined)
- ▶ Career Services (supported employment and supported education)
- ▶ Outpatient Services (currently doing needs assessment and administered a survey to current licensed outpatient providers)
- ▶ RFP for another EISS program (county to be determined)
- ▶ RFP for the development of a NJ based suicide hotline to be answered by a trained staff member or volunteer and to accept calls that are routed by the National Suicide Prevention Lifeline network

Update on the ASO/MBHO Process

ASO Impact on Services & Contracts

- ▶ Current treatment and recovery services funded by DMHAS will remain funded, but will fall under the ASO/MBHO
- ▶ Cost reimbursement contract methodology does not closely tie reimbursement to service utilization and does not incentivize cost effectiveness at the agency level
- ▶ The managed care arrangement would transform all community cost reimbursement treatment contracts to a fee-for-service (FFS) reimbursement method
- ▶ Prevention services would remain cost reimbursement at the onset of the ASO/MBHO



Current Status of ASO/MBHO Planning

- ▶ The Medicaid Comprehensive Waiver was approved by the Centers for Medicare and Medicaid Services (CMS) on 10/2/12. The approval letter and Standard Terms and Conditions are posted on the DHS Website
- ▶ State staff are working with a consulting firm to assist with the writing of the RFP for the ASO/MBHO
- ▶ State staff are working together to obtain data relevant to the implementation of the ASO/MBHO RFP and the BHHs
- ▶ The I/DD/MI Work Group has been convened and is meeting
- ▶ A consulting firm has been chosen to assist in the rate setting evaluation and the Fiscal Work Group will be reconvened to participate in this process



Standard Terms and Conditions

- ▶ The Special Terms and Conditions (STCs) is the contractual agreement between the State of New Jersey and the Centers for Medicare and Medicaid Services (CMS). The STCs set forth conditions and limitations on waiver and expenditure authorities and describe the nature, character, and extent of Federal involvement in the Demonstration and the State's obligations to CMS during the life of the Demonstration.
- ▶ Section IX of the STCs address the Delivery System for Behavioral Health



Standard Terms and Conditions

- ▶ Effective July 1, 2013 or date thereafter, adults will have their BH coordinated by a Behavioral Health ASO
- ▶ Behavioral Health for Medicaid and CHIP enrollees will be carved-out under a BHO
 - ▶ The BHO will be contracted on a non-risk basis as an ASO.
 - ▶ Exceptions may include: duals eligible' s enrolled in a SNP and individuals in need of LTSS/HCBS services (BH will be coordinated and reimbursed by one of the Medicaid MCOs)
- ▶ Should the State decide to implement an at-risk arrangement for the BHO the State must submit an amendment to CMS



Standard Terms and Conditions

- ▶ **Excluded Adult ASO functions include:**
 - ▶ Adult populations currently enrolled in the 1915(c) programs who are moving to MLTSS program will be excluded from the ASO since their behavioral health care will be managed by the MCO

- ▶ **Children not in a HCBS/MLTSS population will have their BH coordinated by an ASO**
 - ▶ Excluded children ASO functions include:
 - Provider Network Management
 - Claims Payment
 - Rate Setting

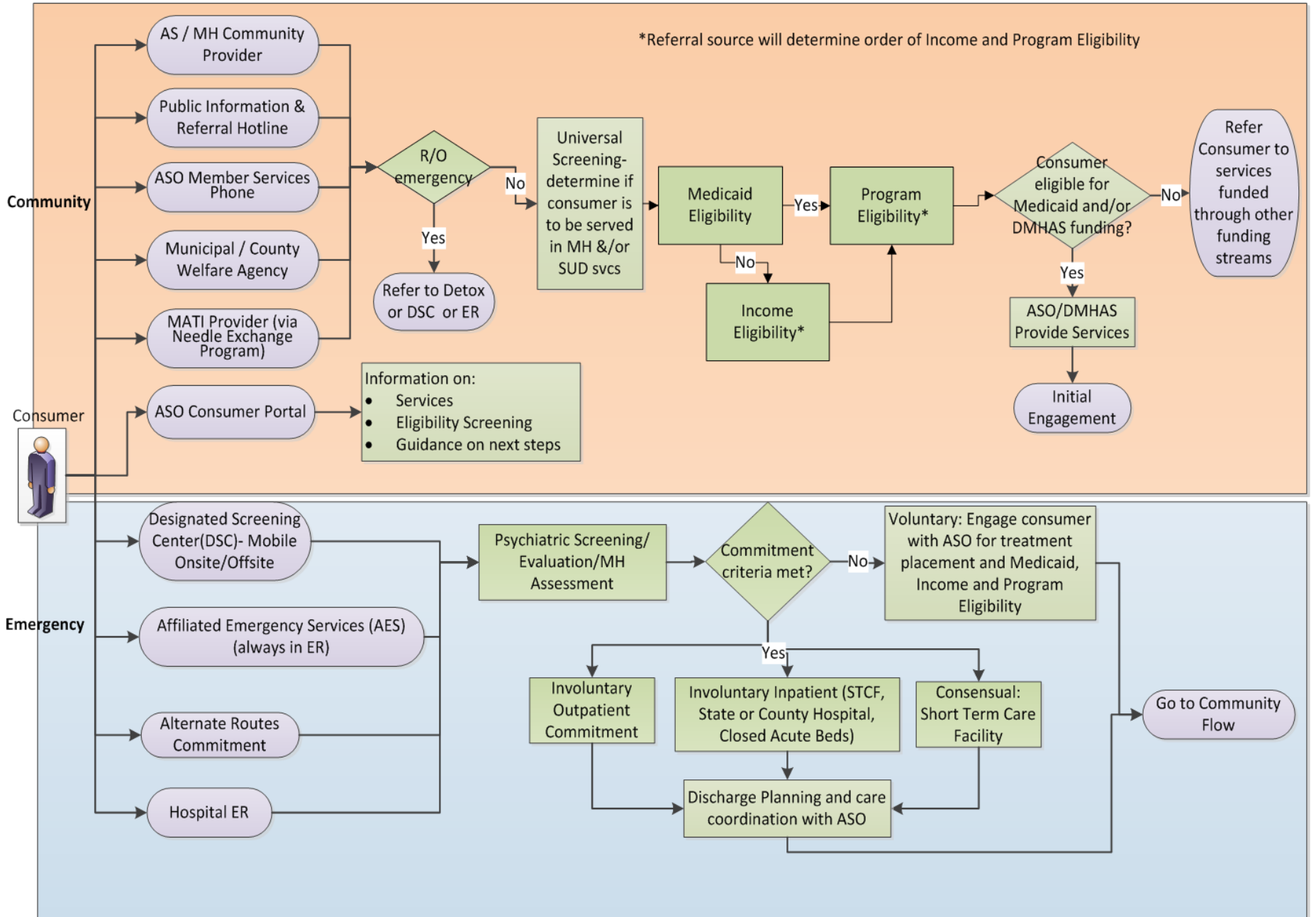


Functions of the Adult ASO as Outlined in the STCs

- ▶ 24/7 Call Center
- ▶ Member services
- ▶ Screening and assessment
- ▶ Prior authorization
- ▶ Network management
- ▶ Utilization management, including level of care determination and continuing care review
- ▶ Care management
- ▶ Medical management
- ▶ Care coordination
- ▶ Quality management
- ▶ Information technology
- ▶ Data submission and reporting requirements
- ▶ Financial management, including claims processing and payment
- ▶ Development of care models and service arrays for consumers with intellectual and developmental disabilities; non-SNP dual eligible (Medicare and Medicaid), and Medicaid expansion populations
- ▶ Coordination with the MCOs regarding high-utilizing consumers and consumers screened with behavioral health/medical conditions



INITIAL ACCESS INTO THE ASO MANAGED CARE MODEL - HIGH LEVEL OVERVIEW



Behavioral Health Homes Update

- ▶ In preparation for submitting a State Plan Amendment for Behavioral Health Home Service, DMHAS is taking the lead in submitting a concept paper to CMS and obtaining the required approval from SAMHSA
- ▶ To determine the target population and the scope of the service, Medicaid claims data is being analyzed and BHH services will be included in the rate rebalancing process
- ▶ There is a 90/10 match for BHH services that begins when the SPA is approved.
- ▶ The BHH service will be administered by the ASO so SPA will be timed to coincide with ASO start up



Relevant Links:

Link to STCs:

http://www.state.nj.us/humanservices/dmahs/home/CMW_STCs.pdf

Link to CMS approval letter:

http://www.state.nj.us/humanservices/dmahs/home/CMW_approval_letter.pdf

Link to DMHAS Managed Behavioral Health Site:

<http://www.state.nj.us/humanservices/dmhs/home/mbho.html>



Update on the Merger

Merger Update

- ▶ **Staff of the division continue to physically co-locate**
 - ▶ On 12/5, addictions research staff and Human Resources moved to 222 South Warren
 - ▶ We now occupy the entire 3rd floor as well as parts of the 4th and 6th floors
 - ▶ Fiscal, IT and the rest of research to move after the new year
- ▶ **Working on aligning regulations and contracting processes between the former divisions**
- ▶ **Will submit a joint block grant application in April**

Merger Update

- ▶ DMHAS' Addiction Counselor Training (ACT) Certificate Program, offered through the Rutgers School of Social Work in collaboration with the Center of Alcohol Studies, primary goal is to educate masters-level clinicians who wish to prepare for a clinical license (MSW, LPC, etc.) while simultaneously completing the requirements to obtain a LCADC
 - ▶ The goal is to prepare 400 dually licensed clinicians over three years
 - ▶ This is the second year of the contract

Merger Update

- ▶ The Northeast and Caribbean Addiction Technology Transfer Center (NECATTC) is designed to enhance the quality of addiction treatment and recovery services within our region, which includes NY, NJ, Puerto Rico and the Virgin Islands, by providing policymakers, providers, consumers and other stakeholders with state-of-the art information through technology translation and transfer activities
 - ▶ An initial conference call with participants from represented states was held where we discussed individual state training needs and the NECATTC shared its mission
 - ▶ National Development & Research Institutes (NDRI) is contracted by SAMHSA to provide the functions of the NECATTC for the 2012-2017 term

Merger Update

- ▶ **The Co-Occurring Disorders Learning Community (CODLC) is a result of recommendations made through the 2008 COD Task Force Report**
 - ▶ This project is one of DMHAS' first initiatives in building a statewide capacity for integrated co-occurring disorders treatment services since the merger
 - ▶ The goal is to increase the capacity of licensed MH agencies and SA treatment providers to address the needs of individuals with COD, and increase capacity to provide integrated treatment from screening and assessment to treatment and recovery support services
 - ▶ The first cohort of participating CODLC Programs were located in the following Central Region Counties: Burlington, Mercer, Middlesex, Somerset, and Union
 - ▶ The establishment of a second CODLC cohort is planned for early 2013

Supporting Older Adults & Family Members Supporting Adult Children

Supporting Older Adults & Family Members Supporting Adult Children

- ▶ S-COPE –a consultation service that is available to NF and other MH service/treatment providers on treating older adults diagnosed with a mental illness
 - ▶ Although this is not a service that would provide services directly to parents supporting their adult loved ones, it is a service that could be of benefit to their older adult children (age 55+) by providing consultation to their treatment provider
- ▶ Upcoming dialogue with NAMI chapters – Bill Chepiga will be reaching out to about ½ dozen NAMI chapters in NJ to discuss with them the type of service they would find beneficial for older parents supporting their adult loved one/including planning for the time when the parent can no longer care for their loved one

Supporting Older Adults & Family Members Supporting Adult Children

- ▶ **DMHAS housing subsidies - DMHAS operates a housing subsidy program**
 - ▶ A handful of subsidies are returned to the DMHAS on a monthly basis and subsequently “recycled” for someone else to use
 - ▶ We do not maintain a waiting list but if there are individuals who are in tenuous living situations (i.e., staying on someone’s couch) or are about to become homeless they can be referred to see if there’s a housing subsidy that can be made available for the consumer
 - ▶ Individuals will need to sign up with a MH provider to receive subsidy and should contact their DMHAS county program analyst

The Effect of the Affordable Care Act

Perspective

- ▶ The Affordable Care Act had potentially two opportunities to be dismantled this year: The Supreme Court and the Presidential election
 - ▶ In both cases, the ACA remains intact

- ▶ The next issues could come from Congressional action to limit ACA and budget restrictions, and from the lack of support at the state level

Perspective

- ▶ The issues of access to and coverage of health insurance will remain major issues for decades
- ▶ As health care costs consume 20 percent or more of economy, the debate about how much is enough versus the outcomes of care and health status of all Americans will be an ongoing struggle between good ideas and straight-out cost savings

Essential Health Benefits

Essential Health Benefits

- ▶ Behavioral Health Homes
- ▶ Case Management
- ▶ Certified Nurse Practitioner
- ▶ Outpatient MH Services
- ▶ Hospital based outpatient
- ▶ Inpatient Psychiatry Services
- ▶ Laboratory
- ▶ Short Term Care Facilities
- ▶ Mental Health Inpatient - Acute Care Hospital
- ▶ Psychiatric Hospital Inpatient - Private Hospital/Other Acute Non-STCF
- ▶ Mental Health Outpatient (Other Licensed Practitioners)
- ▶ Mental Health Rehabilitation Adult (Residential MH Services includes A+, A, B, C, and D housing)
- ▶ Partial Care (MH)
- ▶ PACT
- ▶ Psychiatric Emergency Services & Affiliated Emergency Services (AES)
- ▶ Designated Screening Services
- ▶ Psychiatric Hospital Inpatient - State Hospital
- ▶ Psychiatric Hospital Inpatient - County Hospital
- ▶ Psychiatric Partial Hospital
- ▶ HIV Case Management and Early Intervention
- ▶ Methadone Maintenance
- ▶ Mobile and Fixed Site MAT Services
- ▶ Outpatient SA Services
- ▶ Personal Care Assistant
- ▶ Residential Assisted Substance Abuse Treatment
- ▶ Substance Abuse Day Treatment/Partial Hospitalization
- ▶ SA Halfway House

Exchanges in New Jersey

Exchanges

- ▶ HHS to proceed with implementing the federal exchange in all states without their own exchange
 - ▶ Eight states with no significant activity
 - ▶ Eight states decided not to create a state exchange
- ▶ **Deadline Nov. 16, 2012 for the States extended to December 14, 2012**
 - ▶ HHS will approve or conditionally approve the State-based Exchanges for 2014 by the statutory deadline of January 1, 2013
 - ▶ Governor Christie has not announced a decision on the issue and is scheduled to propose a budget in February
 - ▶ Sixteen states were studying their exchange options
 - ▶ Sixteen have established exchanges
 - ▶ Three states are planning a partnership exchange with HHS

Exchanges Timetable

- ▶ November 26, 2012: HHS published proposed rule outlining exchange and issuer standards related to coverage of essential health benefits and actuarial value
 - ▶ The proposed rule includes a timeline for qualified health plans to be accredited in federally facilitated exchanges
- ▶ Based on the rules, insurers determine the plans to be offered and establish their rates
- ▶ States approve health plans' rates and forms
- ▶ States certify health plans and place these certified qualified plans on their exchanges
- ▶ October 1, 2013: Exchanges begin open enrollment

Services Post Election

Post-Election: the Context

- ▶ **Post-election, the reality of the fiscal cliff and health reform loom large**
 - ▶ The economy is teetering on the brink of slow growth versus a deepening of the crisis
 - ▶ Income inequality is wider than ever
 - ▶ People who are dependent on SSI, Medicaid and federal programs face cutbacks
 - ▶ The post-Sandy Storm costs will severely strain State and local budgets