

# Action Plan for State of Maine

Vision: Every person in Maine who struggles with co-occurring disorders is recognized and supported on their path to healing and wellness.

Mission: Maine provides a welcoming, integrated statewide system where partnerships among people, services, access and payment are aligned to maximize prevention and recovery for every individual.

Maine Goals:

1. To maintain planning on the state, regional and local levels to advance the vision.
2. To align policies, regulations, reimbursement and procedures to support integrated services.
3. To adapt existing data systems to identify need, service utilization, outcomes and costs within and across systems.
4. To realign existing and obtain new funding sources to support cost effective quality care.
5. To have a trained workforce that meets the needs of providing Co-Occurring Disorder (COD) services across the state of Maine.

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PRIORITY ONE: Maintain Planning						
Strategy(-ies)	Action(s)	Manager Individual responsible for coordinating each action.	Implementer Individual (or entity) responsible for carrying-out each action.	Expected Outcomes	Benchmarks	Completion Date (Estimated)
Strategy 1.1 Structure for development and maintenance of COD capacity in state of Maine	Action 1.1.1 Implementation of state advisory and subcommittee structure that shall consist of state, regional and local stakeholders.	Kimberly Johnson, Director, Office of Substance Abuse & Claire Harrison, Region I Director Service Integration DHHS	Claudia Bepko, COSIG Project Coordinator	Structure will be defined and committees established	Established Committees: <ul style="list-style-type: none"> <li>• Steering</li> <li>• Advisory</li> <li>• Screening &amp; Assessment</li> <li>• Data/Outcomes</li> <li>• Licensure</li> <li>• Reimbursement</li> <li>• Workforce Development/EBP</li> </ul>	Established and ongoing
	Action 1.1. 2 Commissioner will identify key boundary spanner position(s) for COD in the merged DHHS Department	Brenda Harvey, Acting Commissioner of DHHS	Kimberly Johnson, Director, Office of Substance Abuse & Claire Harrison, Region I Director, Service Integration DHHS	Boundary spanning person(s) identified	Structural issues discussed within executive management	4/05 and on-going Currently COSIG Project Coordinator & CCSME Executive Director

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<p>Strategy 1.2.1 Enhance consumer involvement at every level</p>	<p>Action 1.2.1 Seek input/feedback from existing consumer groups re: status of COD services and ways to support participation in the process of change.</p>	<p>Kimberly Johnson, Director, Office of Substance Abuse &amp; Claire Harrison, Acting Integration Director, Region I, DHHS</p>	<p>Claudia Bepko, COSIG Project Coordinator</p>	<p>Input/feedback gathered</p>	<ul style="list-style-type: none"> <li>• Five focus groups to be held</li> <li>• Consumers included on COSIG committees</li> <li>• Outreach to existing consumer and advocacy groups for input</li> <li>• Consumer survey in pilots</li> <li>• DHHS &amp; OSA Consumer surveys</li> </ul>	<p>3/06 and on-going</p>
<p>Strategy 1.4 Develop a marketing, public relations plan</p>	<p>Action 1.4.1 Request that the Office of Health Policy and Finance include COD in the State Health Plan</p>	<p>Governor's Office representative</p>	<p>Governor's Office representative</p>			<p>Completed</p>
	<p>Action 1.4.2 Managed Care plan will include COD</p>	<p>Chris Zukas-Lessard</p>	<p>Advisory Group</p>	<p>Managed Care policies shall support COD enhancements</p>	<p>Advisory committee review drafts and submit recommendations</p>	<p>7/06</p>
	<p>Action 1.4.3 Conference(s) on COD implementation (State and Regional)</p>	<p>Steering Committee</p>	<p>Catherine Chichester, CCSME; AdCare</p>	<p>Conference on COD is held during April 06 &amp; Regional Conference Fall 06</p>	<p>Conference planning is established</p>	<p>4/06 &amp; 10/06</p>
	<p>Action 1.4.4 State web site to provide information on COD initiative</p>	<p>Claudia Bepko, COSIG Project Coordinator</p>	<p>Pat Coffin, OSA, Public Relations</p>	<p>COD information on State Web site</p>	<p>Communication plan developed</p>	<p>3/06</p>
<p>Progress to Date</p>		<p>Barriers and/or Situational Changes</p>			<p>Immediate Next Steps (including potential technical assistance needs)</p>	

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PRIORITY TWO: Align Policies, regulations, reimbursement and procedures						
Strategy(-ies)	Action(s)	Manager	Implementer	Expected Outcomes	Benchmarks	Completion Date (Estimated)
Strategy 2.1 Revise licensing Regulations to include COD	Action 2.1.1 Develop module for COD enhanced substance abuse services/COD enhanced mental health services	Peter Mauro, Assistant Director of DHHS Licensing	Licensing staff, Claudia Bepko, COSIG licensing committee	<ul style="list-style-type: none"> <li>Develop Substance Abuse regulations</li> <li>Review Mental Health regulations</li> </ul>	Meeting dates established to initiate development of core standards	6/06
	Action 2.1.2 Define in Regulation- COD capable	Peter Mauro, Assistant Director of DHHS Licensing	Licensing staff, Claudia Bepko, COSIG licensing committee	Substance abuse capable defined in regulations and Mental Health capable language drafted	Substance abuse capable language is defined. Mental Health capable language defined	6/06
	Action 2.1.3 Provide training on new licensing regulations & language for providers in implementing COD services	Substance abuse treatment staff, CCSME and licensing staff	Catherine Chichester, CCSME	COD providers are able to demonstrate integrated record keeping, screening, assessment and treatment planning	Dates set and agenda developed for training	Ongoing trainings scheduled through 06.
	Action 2.1.4 Develop QI auditing process in agency licensure reviews	Peter Mauro, Assistant Director of DHHS Licensing, COSIG Licensing Committee	Licensing staff; COSIG Licensing Committee; Claudia Bepko, COSIG Project Coordinator	QI audit process developed	Audit form implemented	1/07
Strategy 2.2 Revise MaineCare Rules to align with revised licensing COD regulations	Action 2.2.1 Collaborate with Bureau of Medical Services to ensure alignment and develop new COD regulations	Chris Zukas-Lessard Acting Director Bureau of Medical Services	Claudia Bepko, COSIG Project Coordinator Ginger Roberts, MaineCare Policy Specialist	MaineCare rules for COD adopted or rules that merge appropriate billing codes under MH and SA are adopted to accomplish same outcome	Draft COD rules developed or rules that merge appropriate billing codes under MH and SA are adopted to accomplish same outcome	6/07

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Strategy 2.3 Reflect COD language and expectations in contracts and all departmental initiatives	Action 2.3.1 Include welcoming expectation and language in Rider E of all contracts	Directors of Substance Abuse, Adult Mental Health and Children's Mental Health	Regional Mental Health Team Leaders and Linda Frazier, OSA Treatment Manager	Language and performance indicators that define agency expectation of welcoming for individuals with COD in contract Rider E		Welcoming language included for FY05 contracts- MH & SA; FY07 contracts to increase specificity
	Action 2.3.2 Include expectation of COD capability in all contracts (COD capable)	Kimberly Johnson, Director, Office of Substance Abuse; Claire Harrison, Acting Integration Director, Region I, DHHS	Regional Mental Health Team Leaders and OSA Service Manager	COD capable language in FY07 contracts	COD capable defined by MH/OSA	7/06
	Action 2.3.3 Department of Quality Improvement will address COD in their work plan	Jay Yoe, Director of Quality Improvement, BDS; Marya Faust, Special Initiatives, BDS	Jay Yoe, Director of Quality Improvement, BDS; Mary Henderson, Manager of Data and Research, OSA	COD included in State QI workplan	Planning meeting held	7/06
Progress to Date		Barriers and/or Situational Changes		Immediate Next Steps (including potential technical assistance needs)		

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PRIORITY THREE: To adapt existing data systems to identify need, service utilization, outcomes and costs within and across systems.						
Strategy(-ies)	Action(s)	Manager <sup>1</sup>	Implementer <sup>2</sup>	Expected Outcomes	Benchmarks	Completion Date (Estimated)
Strategy 3.1 Develop screening and assessment to identify COD in all mental health and substance abuse contract agencies	Action 3.1.1 Implementation of LOCUS screening in mental health agencies	Kimberly Johnson, Director, Office of Substance Abuse; Claire Harrison, Region I, Director of Service Integration, DHHS	Provider agencies	Documentation that the LOCUS is being done by providers.	Data of completion is tied to enrollment data	7/1/04 Completed
	Action 3.1.2 Identification of screening and assessment process, outcome measures and tool(s) for COD in all agencies	Claudia Bepko, COSIG Project Coordinator	COSIG Screening and Assessment subcommittee	Define process and identify possible tool(s)	Implementation task force subcommittee formed	6/07
Strategy 3.2 Develop data bases that will identify COD data	Action 3.2.1 Investigate the feasibility of integrating multiple data sets to obtain accurate information on COD prevalence and treatment	Craig Hitchings, Director of Office of Information Services, DHHS; Brenda Harvey, Acting Commissioner of Department of Behavioral and Developmental Services	Claudia Bepko, COSIG Project Coordinator; Jay Yoe, Director of Quality Improvement, BDS; Mary Henderson, Manager of Data and Research, OSA; COSIG Data Subcommittee	Analysis of multiple data sets and feasibility of integration data	Commitment to undertake this process	6/06

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	Action 3.2.2 Develop warehouse mechanism for data	Craig Hitchings, Director of Office of Information Services, DHHS; Kimberly Johnson, Director, Office of Substance Abuse; Claire Harrison, Region I, Director of Service Integration, DHHS	COSIG Data Subcommittee	Data warehouse developed	Planning timeline developed	6/07
	Action 3.2.3 Develop data set expectations for MH & SA	Kimberly Johnson, Director, Office of Substance Abuse; Claire Harrison, Region I Director of Service Integration	Claudia Bepko, COSIG Project Coordinator; Jay Yoe, Director of Quality Improvement, BDS; Mary Henderson, Manager of Data and Research, OSA; COSIG Data Subcommittee	Data set for COD defined	COSIG Subcommittee defined and TA obtained Data Sets developed	1/07
	Action 3.2.4 Define what we want to know, how to get it and how to bridge the difference	Kimberly Johnson, Director, Office of Substance Abuse; Claire Harrison, Region I Director of Service Integration	Jay Yoe, Director of Quality Improvement, BDS; Mary Henderson, Manager of Data and Research, OSA; COSIG Data Committee	Contract language will include COD data set requirements	Develop mechanism to obtain data on COD from all providers	7/07
	Action 3.2.5 Submit COSIG to support development of infra structure for COD data collection	Joanne Ogden, Treatment Manager, OSA Marya Faust, Special Initiatives, BDS	Helaine Hornby, Hornby Zeller Associates	COSIG submitted		Completed
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PRIORITY FOUR: Realign existing and obtain new funding						
Strategy(-ies)	Action(s)	Manager <sup>1</sup>	Implementer <sup>2</sup>	Expected Outcomes	Benchmarks	Completion Date (Estimated)
Strategy 4.1 Realign MaineCare reimbursement with other goals for treating individuals and families with COD	Action 4.1.1 Determine impact on rate setting of new Managed Care Initiative for COD	Brenda Harvey, Acting Director DHHS	Kimberly Johnson, Director of Office of Substance Abuse; Claire Harrison, Region I Director of Service Integration; Claudia Bepko, COSIG Project Coordinator; Chris Zukas-Lessard	Managed Care Committee in discussion of reimbursement	Discussion occurs  Preliminary rates set for COD treatment by managed care vendor	7/07
	Action 4.1.2 Research existing cost analysis studies from other states Reimbursement structures and how they arrive at a pricing structure	Claudia Bepko, COSIG Project Coordinator	Reimbursement Subcommittee	National information on cost analysis of COD available to Maine Cost structures	TA request supported by SAMHSA	9/07
	Action 4.1.3 Cost-benefit analysis of COD vs separate funding for mental health/substance abuse	Geoff Green, Deputy Commissioner of Operations and Support, Department of Health and Human Services; Kimberly Johnson, Director, Office of Substance Abuse	Hornby Zeller Associates  COSIG Reimbursement Subcommittee	Analysis completed	Method for analysis defined	12/06
	Action 4.1.4 Work with stakeholders, Bureau of Medical Services, Managed Care Company to develop new reimbursement rate based upon cost/benefit analysis	Brenda Harvey, Acting Commissioner of DHHS	Manager care committee	Rate determined and set	Rate setting process initiated	7/07
	Action 4.1.5 MeHAF/COSIG award for cost	Catherine Chichester, CCSME	Catherine Chichester, CCSME	Grant award for cost study	MeHAF concept paper submitted 1/05	Completed 9/05

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	study				COSIG grant submitted 6/04	
Strategy 4.2 Apply for COSIG Grant and other grants	Action 4.2.1 Organize all data on existing practices and Academy Planning/leverage current MeHAF funding	Joanne Ogden, Treatment Manager, OSA Kimberly Johnson	Helaine Hornby, Hornby Zeller Associates	COSIG grant submission		Completed 6/9/04
	Action 4.2.2 Evaluate joint grant proposals with MPCA (Brief screen and Intervention Health Disc)	Brenda Harvey, Acting Commissioner, BDS Kimberly Johnson, Director, OSA Kevin Lewis	Kevin Lewis Catherine Chichester, CCSME	Proposal(s) submitted	Develop list of possible funding sources	3/05  Women's Health Project funded
Strategy 4.3 Include COD benefit in Dirigo	Action 4.3.1 Request that the Office of Health Policy and Finance include COD in the State Health Plan	Brenda Harvey, Acting Commissioner of DHHS	Governor's Office of Health Policy and Finance	COD included in state health plan	HHS committee to include COD in draft plan (completed)	parity benefits offered completed
Strategy 4.3 Identify and implement use of incentives to support EB Practices in all funding streams	Action 4.3.1 Identify core set of EBP for COD across the continuum of services	Chris Robinson, Adult MH Training Director, Catherine Chichester, CCSME	COSIG Workforce Development Committee	List developed	Subcommittee defined	7/07
	Action 4.3.2 Identify effective incentives	Kimberly Johnson, Director, OSA; Claire Harrison, Region I Director of Service Integration	COSIG Workforce Development Committee	List developed	Subcommittee defined	7/07
	Action 4.3.3 Implement incentive strategies	Brenda Harvey, Acting Commissioner, DHHS; Kimberly Johnson, Director, OSA; Sharon Sprague Acting Director of Adult Mental Health	Geoff Greene, Deputy Commissioner Operations & Support	Incentives implemented	Incentives defined	1/08
	Action 4.3.4 Evaluate implications of insurance	Brenda Harvey, Acting Commissioner	COSIG Reimbursement	Evaluation completed	Health planning policy group reviews	7/07

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	parity in relationship to COD	of DHHS; Kimberly Johnson, Director, OSA	Committee		issue of parity	
Progress to Date		Barriers and/or Situational Changes			Immediate Next Steps (including potential technical assistance needs)	

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## TRAINING OBJECTIVE TO BE DISCUSSED/REVIEWED

PRIORITY FIVE: To Have a Trained Workforce that Meets the Needs of Providing Co-Occurring Disorder (COD) Services Across the State of Maine						
Strategy(-ies)	Action(s)	Manager <sup>1</sup>	Implementer <sup>2</sup>	Expected Outcomes	Benchmarks	Completion Date (Estimated)
Strategy 5.1 Create benchmarks for accountability for workforce competencies	Action 5.1.1 Convene a consensus forum to define workforce competencies	Claire Harrison, Region I Director Service Integration Kimberly Johnson, Director, OSA	COSIG Workforce Development	COD workforce competencies defined	Subcommittee participants define; forum held	4/07
	Action 5.1.2 Develop training expectations in contracts, and licensing	Kimberly Johnson, Director, OSA; Claire Harrison, Region I Director Service Integration	Linda Frazier, OSA Treatment Manager, Mike Menzel, DHHS	Standards set in contracts and licensure	Contract and licensure language developed	4/07
Strategy 5.2 Infusing the COD training in everyday opportunities	Action 5.2.1 Include COD opportunities in existing diverse training opportunities within organizations	Kimberly Johnson, Director, OSA; Claire Harrison, Region I Director Service Integration	COSIG Workforce Development Committee Catherine Chichester, CCSME	Behavioral Health workers at all levels have access to planned COD training	Commitment of agencies and Regional Behavioral health teams to provide access to training	On-going
Strategy 5.3 Physical Care/Public Health engagement in COD	Action 5.3.1 Need to identify MD champions.	Kimberly Johnson, Director, OSA; Claire Harrison, Region I Director Service Integration; DHHS Medical Director	Claudia Bepko, COSIG Project Coordinator; Kevin Lewis, Executive Director Maine Primary Care Association; Ann Conway, Educator and Training Coordinator, Maine Turning Point Project Director, Maine Center of Public Health		Names of physicians identified	11/06

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	Action 5.3.2 Bring Primary Care (MPCA) to sign on to Maine's COD charter document	Kimberly Johnson, Director, OSA; Claire Harrison, Region I Director Service Integration; DHHS Medical Director	Claudia Bepko, COSIG Project Coordinator	Maine Primary Care Association signs Maine's COD charter document	MOU sent to Executive Director of MPCA	4/06
	Action 5.3.3 Expand competence in COD and use of COD EBP in NPs and PAs in community health centers	Kevin Lewis, Executive Director, Maine Primary Care Association Ann Conway, Maine Center of Public Health	Catherine Chichester, CCSME	Trained workforce	Training plan developed	On-going
	Action 5.3.4 Create more effective process for screening for COD in physical health care	Kimberly Johnson, Director, OSA; Claire Harrison, Region I Director Service Integration; DHHS Medical Director	COSIG screening and assessment committee	Screening process and possible tools identified for COD screening in physical health care settings.	Committee meets	4/06
	Action 5.3.5 Engage appropriate primary care associations and societies	Kimberly Johnson, Director, OSA; Claire Harrison, Region I Director Service Integration; DHHS Medical Director	Kevin Lewis, Executive Director, Maine Primary Care Association Ann Conway, Maine Center of Public Health Andrew Cook, MD, Medical Director, Children's Services, BDS	Additional signatories to MOU	Identification of potential associations/societies to engage	11/06
Progress to Date		Barriers and/or Situational Changes		Immediate Next Steps (including potential technical assistance needs)		