

# Division of Mental Health & Addiction Services

## wellnessrecoveryprevention

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## Administrative Services Organization (ASO) Procurement

### About this Priority

This priority consists of three major benchmarks:

- DMHAS staff complete all Request for Proposal (RFP) documents required for external agency review and oversees the RFP through the external agency reviews;
- RFP is posted, proposals reviewed and contract awarded;
- Shortly before 'go live' the Department of Human Services (DHS) conducts readiness review of ASO operations, with sufficient time for course corrections in any significant areas.

### Special Areas of Focus

- ◆ RFP Reviewed/Approved by DHS Central Office
- ◆ RFP Reviewed/Approved by Office of Information Technology (OIT), Office of Management and Budget (OMB), and Office of the State Comptroller (OSC)
- ◆ RFP approved and posted by Division of Purchase and Property (DPP)
- ◆ Bid Process completed
- ◆ Contract Awarded

### What is the DMHAS Strategic Plan?

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Strategic Plan, please contact [DMHASWorkplan@dhs.state.nj.us](mailto:DMHASWorkplan@dhs.state.nj.us)

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## ASO Readiness and Implementation

### About this Priority

Implementation of an ASO necessarily brings with it focus areas that must be addressed. This component will provide a design for DMHAS and the Division of Medical Assistance and Health Services (DMAHS) to be proactive, not reactive, to potential and actual readiness issues, to allow DHS to work within the ASO to successfully resolve any problems and to communicate their monitoring efforts to stakeholders. This component will also result in an articulation of the roles and responsibilities for DMHAS and DMAHS in managing the ASO contract, a description of the contract management processes, and assignment of the contract management team.

### Special Areas of Focus

- ◆ Establish functions to be performed by either/both divisions
- ◆ Memorialize Contract Management functions in Memorandum of Understanding (MOU)
- ◆ Create ASO contract management team
- ◆ Readiness Review
- ◆ Define process for briefing senior leadership on issues/problems and for resolving them with the ASO
- ◆ Design a 'committee of advisors' process with well defined roles, structure and processes

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## Centralized Housing Authority

### About this Priority

This priority is to conceptualize, develop and implement a centralized housing authority, including:

- Adjusting provider contracts
- Delineating requirements for providers to demonstrate separation of services from housing
- Procure a consultant group with demonstrated experience in separating housing and services and the fiscal and programmatic considerations to assist NJ in developing the role of the Centralized Housing Authority.

### Special Areas of Focus

- ◆ Define and determine appropriate design for the centralization of the management of housing costs
- ◆ Determine process flow for the management of housing costs, payment to provider organizations, matching of individuals to available housing resources/units.
- ◆ Define included/excluded functions for centralized housing
- ◆ Determine changes in provider responsibilities
- ◆ Develop criteria, application, required documentation for sites/slots that may require additional time for transition
- ◆ Develop an RFP to secure an entity to provide clearinghouse functions

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## Community Integration Services/Processes

### About this Priority

This priority is to increase the provider network and the skill levels within by:

- Infusing prevention and education throughout the system.
- Enhancing and supporting peers throughout the system.
- Identifying opportunities for peer - delivered services

### Special Areas of Focus

- ◆ Increase the number of mental health/substance abuse dually licensed providers and staff
- ◆ Increase the numbers of staff competent in mental health/developmental disabilities as coexisting conditions.
- ◆ Encourage the use of prevention and early intervention throughout the system.
- ◆ Identify and strengthen the use of prevention and early intervention in mental health settings.
- ◆ Examine the current Prevention Certification through APCBNJ to become a more co-occurring certificate.
- ◆ Consider funding mechanisms to support a dual prevention and early intervention certificate.
- ◆ Involve consumers in planning, program development and evaluation of outcomes.
- ◆ Convene ongoing focus and feedback groups with consumers to ask, hear and gain personal perspectives on what consumers want, and to develop realistic action plans to use the information.
- ◆ Increase use of advance directives.

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## Community Support Services Implementation

### About this Priority

Community Support Services (CSS) is a new service to become available in NJ. The Centers for Medicaid and Medicare Services approved NJ's state plan amendment to provide CSS. Consequently, CSS is a new Medicaid service that NJ will implement.

This priority revolves around the separation of housing and services in supportive housing under contract with the DMHAS to serve individuals diagnosed with a mental illness.

### Special Areas of Focus

- ◆ Promulgate CSS regulations.
- ◆ Develop or modify service definitions and requirements for Residential Intensive Support Teams and other services impacted by CSS implementation
- ◆ Modify provider contract to reflect and support the separation of housing and services.
- ◆ Develop monitoring tools and policies to inform providers how to self-monitor compliance with CSS.
- ◆ Coordination across DMHAS program and DMAHS Medicaid regulations to ensure that they are in sync with each other and comport with the requirements of the NJ State Plan Amendment.
- ◆ Determine timeline for licensing and assignment of Medicaid provider numbers for CSS upon promulgation of the regulations.
- ◆ Train providers on regulations and billing.
- ◆ Facilitate CSS provider readiness, training and technical assistance

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## Olmstead Compliance

### About this Priority

This priority is to ensure continued compliance with the Olmstead Settlement, including:

- Pilot a state hospital discharge-planning process (Community Support Planning) that involves employing individuals in recovery to support individuals in their reintegration into the community from the hospital
- Update DMHAS the Home to Recovery Plan (NJ's Olmstead Plan)
- Continue Development of Supportive Housing Beds
- Develop and implement a web-based housing management system

### Special Areas of Focus

- Develop and implement a statewide, web-based housing management system known as BEDS (Bed Enrollment Database System)
- ◆ Issue Request for Proposal to develop Community Support Planning service to serve in one of the state hospital catchment areas.
- ◆ Determine structure for access to beds from hospital
- ◆ Develop housing management approach asking housing authorities for turnover vouchers

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## Rates and Financial Terms/ Financial Impact Analysis

### About this Priority

There are many tasks, including:

- Setting market based rates for Community Support Services, by credential of staff delivering the service and/or a bundled rate if determined to be appropriate.
- Providing sufficient resources to maintain and /or procure adequate housing for consumers, building other related costs such as those for renovations, utilities, security deposits, and all other ongoing property costs.
- Working with the Community Integration Services/ Processes team to determine how best to obtain reimbursement in a fee-for-service environment for peer delivered services.
- Attempting to discern the fiscal impact for providers beyond the program level, down to the physical site location where services are being delivered, and building a “transition” plan to help providers move from cost related reimbursement to fee-for-service with minimal impact on the system and its consumers.

### Special Areas of Focus

- ◆ Quantification of All housing costs
- ◆ Managing resources down to the specific site level
- ◆ Calculating the Federal and State Budget fiscal impacts
- ◆ Setting market based rates

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## Stakeholder Communication

### About this Priority

This priority is to ensure that vital information is conveyed to our stakeholders regarding activities occurring as a result of the Plan itself.

This priority focuses on conveying information to the public to ensure that questions and concerns regarding the Plan and changes to DMHAS functions that ensue are addressed in a timely and easy to understand format. We will also focus on involving stakeholders as concept liaisons to assist DMHAS in making progress on the Plan. We will partner with other groups to raise awareness and education to decrease stigma.

### Special Areas of Focus

- ◆ Monitoring Strategic Plan email address to address questions to DMHAS
- ◆ Updates in DMHAS newsletters on progress
- ◆ Regular communication from Assistant Commissioner with stakeholders
- ◆ Presentations to convened groups
- ◆ Website redevelopment
- ◆ Public information education materials

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## Standard Level of Care Determination

### About this Priority

This priority is to identify, implement, train and track the use of a standardized tool to determine the level of services that would be most appropriate for individuals receiving mental health and/or co-occurring services in our system of care. Once implemented the tool will be used system wide and will make treatment and other service placements consistent, replicable and objective.

Based on a review of available placement tools, the group has chosen the Level of Care Utilization System (LOCUS) as the uniform placement tool to be adopted for use in the system of care.

### Special Areas of Focus

- ◆ Working with DMHAS Fiscal and Information Technology (IT) to assess costs, implementation and procurement issues.
- ◆ Exploring ways in which we can make the tools and/or the process integrated for mental health and addictions

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## Workforce Development

### About this Priority

The priority is to integrate workforce development priorities into all DMHAS areas of focus. That is, workforce development, including training, education, recruitment, and retention will be intertwined through all DMHAS strategic planning initiatives, behavioral healthcare, prevention, early intervention, treatment, and recovery support services.

### Special Areas of Focus

- ◆ Provide and create training opportunities for all staff, all levels and all providers
- ◆ Cross train all providers and system partners in co-occurring competencies
- ◆ Increase the number of dually-licensed providers and staff
- ◆ Foster consumer involvement in the workforce, including training for peer certification
- ◆ Expand availability of specialized topic trainings

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