

Substance Use Disorder Services

Policy #	Policy Recommendations	Required Change/ Recommended Action	Due Date	FY18 Progress Report	Progress Clarification
2.a.1.	MDHHS should ensure that citizens are <u>universally screened for substance use disorders problems at all points of health care system</u> encounters using a consistent battery of state- defined screening instruments.	<p>1) MDHHS will continue to evaluate funding opportunities and develop a plan based on available funding. (which may include pursuing funding with the legislature, adopting the SBIRT approach, and leveraging opioid funding).</p> <p>a) Additional SBIRT Training provided to FQHCs will occur until July 2018 funded by FY 18 Block Grant dollars via training contract with Community Mental Health Association of Michigan.</p> <p>b) BHDDA/OROSC will apply for State Targeted Response Grant (STR) continuation application funding for opioid prevention and treatment initiatives by January 30, 2018.</p> <p>c) BHDDA has secured State General Fund and will pursue enhanced Medicaid Match funding via Section 2703 of the ACA to employ Opioid Health Homes (OHH) in the Northern Lower Peninsula region (PIHP Region 2).</p>	<p>SBIRT Training Contract– through July 2018</p> <p>STR Continuation Application – January 30, 2018</p> <p>OHH start date – July 2018 (tentative)</p>	<p>Complete</p> <p>Complete</p> <p>Partially Complete Rvsd 10.1.2018</p>	<p>a) The OHH Policy was approved for October 1, 2018;</p> <p>b) The State Plan Amendment was submitted and is pending approval.</p> <p>c) Additional funds to support OHH services are on track for an October 1, 2018 start date.</p>
2.a.2.	<p>MDHHS should ensure that citizens have <u>on-demand access to the full array of substance use disorder services, supports, and/or treatment</u> delineated in the American Society for Addiction Medicine (ASAM) criteria regardless of where they live in Michigan.</p> <p>Similar item under Uniformity in Service Delivery</p>	<p>2) MDHHS will review also consider needed changes to contract language, additional access to billing codes, addition of related quality measures considered, and any related fiscal implications</p> <p>a) Amend FY 18 contract language, billing codes and quality measures.</p> <p>b) Finalize FY 19 contract language, billing codes, and quality measures.</p>	<p>3.2018</p> <p>6.2018</p>	<p>Complete</p> <p>Complete</p>	Contract modifications have made where indicated.
2.a.3.	Moved to Peer Supports				

Substance Use Disorder Services

Policy #	Policy Recommendations	Required Change/ Recommended Action	Due Date	FY18 Progress Report	Progress Clarification
2.a.4.	The Michigan Legislature and MDHHS should increase the <u>investment in community-based prevention</u> activities.	1) MDHHS will improve monitoring and reporting efforts to more objectively measure and communicate investment in prevention activities (including historical trending). <ul style="list-style-type: none"> Review and provide feedback on semi-annual Block Grant Strategic Prevention Initiatives Reports submitted by PIHPs Review and provide feedback on discretionary grant reports on prevention programs (STR and PFS) Review and provide feedback on PIHP reports on expenditures by prevention strategy Review and provide feedback on PIHP reports on percentage of prevention programming that is evidence-based 	1.30.18 and 9.30.18 Quarterly 4.30.18 12.1.18	Partially Complete	1) Reports for STR and PFS Grants are due September 30, 2018. Percentage of Evidence-based Programs due on December 1, 2018.
		2) MDHHS will improve communication about new opportunities for available funding for expanded prevention services. <ul style="list-style-type: none"> Include new funding opportunities for prevention initiatives on OROSC website: www.michigan.gov/bhrecovery. Report on new funding opportunities in ROSC Transformation Steering Committee, Prevention Workgroup and Behavioral Health Advisory Committee Meetings 	On a quarterly basis – January 30th; April 30th; July 30th; and September 30th	Complete	2) Communications about new funding opportunities for expanding prevention services is ongoing.
		3) MDHHS will work with the legislature to determine appropriate levels of funding.	3.2018	Complete	
		4) MDHHS will define opportunities to increase prevention services and seek funding as indicated. <ul style="list-style-type: none"> The State Epidemiological Outcomes Workgroup (SEOW) will continue to collect and report on epidemiological data essential to determining need and resources for the expansion of prevention services. The State Epidemiological Profile and related reports developed by the SEOW will be employed to leverage, enhance and expand funding from the Federal Substance Abuse Block Grant and discretionary grants for prevention services 	9.1.18	Complete	

Substance Use Disorder Services

Policy #	Policy Recommendations	Required Change/ Recommended Action	Due Date	FY18 Progress Report	Progress Clarification
2.a.5.	Moved to Financial Incentives				
2.a.6	<p>MDHHS should <u>align all health care</u> (broadly defined to include physical health, behavioral health and substance use disorders) services and supports around substance use disorders...</p> <p>Similar item under Uniformity in Service Delivery</p>	<p>1) Assess current performance against the policy recommendation to further clarify current state.</p> <p>2) Recommend contract, policy and practice changes that can improve performance.</p> <p>3) Establish monitoring and communication of results from planned changes.</p>	<p>3.1.18</p> <p>4.1.18</p> <p>4.1.18</p>	<p>Complete</p> <p>Partially Complete</p> <p>Partially Complete</p>	<p>(1) Activity completed; however, cross training with home visitors and nurses around parenting and substance use disorders and participated in a state level training included ACE is ongoing. OROSC will institute community level training entitled: Self-Healing Communities this FY 19. OROSC also provided multiple trainings on SBIRT.</p> <p>(2) Training has been provided for the integration of behavioral and physical health for the implementation of an Opioid Health Home Pilot in Northern Michigan Regional Entity. Training related to this activity is ongoing. OROSC provided funding to MDHHS Children Services Administration to implement home-based intervention to families at risk for child removal from the home due to substance use disorders among parents and/or caregivers. OROSC also provided funding to the MDHHS Population Health for the provision of on site prevention and treatment services at Adolescent School Health Centers at four locations across the state.</p> <p>(3) Each of our projects listed in Item 2 above are in the process of collecting outcome data per programming efforts to evaluate effectiveness.</p>
2.a.7.	Moved to Financial Incentives				