DIVISION OF MENTAL HEALTH AND ADDICTION SERVICES

Strategic Plan 2014-2016

MISSION

DMHAS, in partnership with consumers, family members, providers and other stakeholders, promotes wellness and recovery for individuals managing a mental illness, substance use disorder or co-occurring disorder through a continuum of prevention, early intervention, treatment and recovery services delivered by a culturally competent and well trained workforce.

VISION

- DMHAS envisions an integrated mental health and substance abuse service system that provides a continuum of prevention, treatment and recovery supports to residents of New Jersey who have, or are at risk of, mental health, addictions or co—occurring disorders.
- At any point of entry the service system will provide access to appropriate and effective person-centered, culturally-competent services delivered by a
 welcoming and well trained work force.
- Consumers will be given the tools to achieve wellness and recovery, a sense of personal responsibility and a meaningful role in the community.

STRATEGIC AREA

Move to Managed Care

STRATEGIC GOAL

A mental health and substance abuse system of care that is easy to navigate, responsive, and provides appropriate choice and availability consumer-centered service.

STRATEGIC PRIORITIES FOR 2014-2016

Administrative Service Organization (ASO) Procurement	In Progress	Completed	Rates and Financial Terms/Financial Impact Analysis	In Progress	Completed	ASO Readiness and Implementation	in Progress	Completed
Work with Treasury to publish the ASO Request For Proposal (RFP).	⊠		Establish a uniform, fixed fee-for service (FFS) rates for the majority of mental health and addiction services that are currently funded through cost-related contracts with clinic and hospital-based community care providers.			Identify contract management functions between the Division of Medical Assistance and Health Services and the Division of Mental Health and Addiction Services.	⊠	
Review applications for ASO.			Maintain budget neutrality with appropriations provided by the State; while limiting any impact to consumers and community providers and reimbursing all providers for like services due to the change in funding mechanism from cost to fixed rates.			Create an ASO contract management team.		
Choose a vendor to be ASO.			Finalize all FFS rates and implement most rates concurrent with the transition to an ASO. A subset of rates may be taken live prior to the acquisition of an ASO/MBHO.			Develop ASO specific policies and procedures for contract management.		
Contract with vendor.			Provide appropriate reimbursement to support the system, maintain access, and deliver necessary services and supports to consumers.			Design a stakeholder Quality Assurance committee process with well-defined roles, structure and processes.		
						Develop and implement training for Quality Assurance Committee members on continuous quality improvement tools and data analysis.		
						Complete Readiness Review for Chosen Vendor that includes consumers and other key stakeholders.		