

MARYLAND STATE DRUG AND ALOCHOL ABUSE COUNCIL

Healthier Maryland Workgroup

Minutes for March 4, 2009 Teleconference Meeting

Present: Peter Cohen, Rebecca Hogamier, Pat Miedusiewski, Greg Schupe, Linda Smith, Suzan Swanton, John Winslow

- I. Call to Order:** The meeting was called to order at 2:05 p.m.
- II. Approval of the Minutes:** The minutes for the February 12, 2009 were approved as written.
- III. Introduction of New Member:** Linda Smith of the College of Southern Maryland in La Plata, Maryland. She is the Coordinator for Drug and Alcohol Education and Director of the Drug Free Communities Support Program.
- IV. Review of Recommendations for “high-end users”:** The workgroup reviewed data on individuals who have 4 or more admissions in a 3-year period to the one of the most expensive levels of care, III.7. This data shows that 85% of these individuals have a co-occurring mental disorder, 45-55% are homeless, 100% are unemployed; 73% list alcohol as a drug of abuse, and 54-67% list heroin. It was noted that whatever services we are supplying is not sufficient. In particular, we need to examine what happens in the gaps between admissions. Further discussion was held concerning policies, programming and clinical protocols that could reduce the number of re-admissions and, thuse, would save both money and human capital.

Peter Cohen will continue to review and analyze the data. The next “slice” of data he wants to review is occurrence by jurisdictions. He will submit the recommendations to us by the next meeting.

- V. Information on the ADAA Incentive Program:** The Alcohol and Drug Abuse Administration’s Incentive Program was explained. At the present time, jurisdictions can receive a monetary incentive award if their adult out-patients programs meet or exceed benchmarks set for retention and successful completion of treatment. Performance contracting is considered a promising practice to increase provider performance and quality of care. Some potential problems were mentioned such as “cherry picking” clients (only admitting those clients likely to meet benchmarks) and retaining patients in a level of care that is not in the patient’s best interest in order to meet benchmarks. It was noted that there were some mechanisms in place to address the last concern. The members would like to know what discharge categories are considers “successful treatment completion.”

- VI. Overdose Issue:** Discussion was held concerning the overdose data received from the medical examiners and the overdose prevention program which is the focus of House Bill 368. The committee decided that it wants to focus its energies and recommendations on what happens before the overdose (intervention, prevention and treatment) in order to prevent more from happening.
- VII. Deadline for Recommendations for the Planning and Coordination Workgroup:** The workgroup was reminded of the May 2009 deadline for recommendations to be submitted to the Planning and Coordination Workgroup for inclusion in the strategic plan.
- VIII. Review of Jurisdictional Plans:** The committee wanted more time to review the one- page summary of each jurisdiction's strategic plan in order to understand the common issues among jurisdictions.
- IX. Five Top Concerns:** A combined list of the five concerns cited by members of the workgroup and other stakeholders was reviewed. A general discussion was held about this list. Concerns were expressed about closing the knowledge and skill gap between substance abuse workers and mental health workers. Both groups need to become competent in assessing and treating populations that have co-morbidity. It was noted that, currently, there is a workgroup with representatives of the training divisions of the Mental Hygiene Administration, the Alcohol and Drug Abuse Administration and the Developmental Disabilities Administration. This workgroup is developing a joint curriculum that addresses co-occurring problems.

Concerns that prevention be addressed by this workgroup and recommendations be made for the strategic plan were voiced. To this end, the Prevention Coordinators in each of the jurisdictions in the state and members of the Maryland Association of Prevention Professionals and Advocates (MAPPA) will be solicited to submit a "5 Top Concerns" list.

Concerns were voiced about current bills in the General Assembly that would change the way we finance substance abuse services in Maryland. A discussion ensued concerning moving toward a recovery-oriented system of care and how some of the services (i.e., case management services) needed would be funded either currently or in the proposed re-structuring. It was noted that mental health services have had a recovery approach for years. Rebecca Hogamier and Pat Miedusiewski will meet with the Director of the Mental Hygiene Administration to find out if and how the mental health service delivery system finances recovery-oriented services.

- X. Potential Recommendations:**
1. A curriculum should be developed and implemented that would cross-train service workers working in the substance abuse field, the mental health field, and the developmentally disabled field.

XI. Follow-Up Issues:

A. Five Top Concerns List

1. Suzan Swanton will email the Prevention Coordinators and ask for their top concerns
2. John Winslow will contact MAPPA members and ask for their top concerns

B. High-End User Recommendations: Peter Cohen will make recommendations on what these should be.

C. Additional members: Pat Miedusiewski and Rebecca Hogamier will meet with the Director of the Mental Hygiene Administration.

D. Incentive Programs: Suzan is to determine what “completion codes” are being used to meet this bench mark

E. Support Documents for New Member: Suzan will send Linda Smith:

1. One Page Summary of Jurisdicaitona plans
2. Dcoument describing the council work group structure

XII. Next Meetings: The next Healthier Maryland Workgroup meeting will be a teleconference on **March 4, 2009, 2:00 p.m. to 4:00 p.m.**

XIII. Adjournment: The meeting was adjourned at 3:45 p.m.