

I: State Information

State Information

State DUNS Number

Number

7788008877

Expiration Date

I. State Agency to be the Grantee for the Block Grant

Agency Name

Missouri Department of Mental Health

Organizational Unit

Division of Behavioral Health

Mailing Address

PO Box 687

City

Jefferson City

Zip Code

65102-0687

II. Contact Person for the Grantee of the Block Grant

First Name

Mark

Last Name

Stringer

Agency Name

Missouri Department of Mental Health, Division of Behavioral Health

Mailing Address

PO Box 687

City

Jefferson City

Zip Code

65102-0687

Telephone

573-751-9499

Fax

573-751-7814

Email Address

mark.stringer@dmh.mo.gov

III. State Expenditure Period (Most recent State expenditure period that is closed out)

From

7/1/2012

To

6/30/2013

IV. Date Submitted

NOTE: this field will be automatically populated when the application is submitted.

Submission Date

10/31/2013 3:58:13 PM

Revision Date

V. Contact Person Responsible for Application Submission

First Name

Mark

Last Name

Stringer

Telephone

573-751-9499

Fax

573-751-7814

Email Address

mark.stringer@dmh.mo.gov

Footnotes:

Table 1 - State Priorities

Number	Title	Description
1	Evidence Based Practices	Continue to implement evidenced based practices statewide for adults with SMI and Children with SED
2	Healthcare Homes	Implement Health Care Home Initiative
3	Recovery Oriented Services	Continue to implement recovery oriented services

footnote:

II: Annual Report

Table 2 - Priority Area by Goal, Strategy, and Performance Indicator

Priority:	Evidence Based Practices
Goal of the priority area:	Implement evidence based practices statewide
Strategies to attain the goal:	Adults Continue implementation of six Assertive Community Treatment Teams Continue implementation of Integrated Dual Disorders Treatment in 20 agencies Continue implementation of Supported Employment programs in six agencies Continue implementation of Dialectical Behavior Therapy statewide Continue implementation of Consumer Operated Services Programs to fidelity Children Continue implementation of Treatment Family Homes Continue implementation of System of Care programs
Annual Performance Indicators to measure goal success	
Indicator:	Number of agencies implementing EBP
Description of Collecting and Measuring Changes in Performance Indicator:	Measure number of agencies implementing EBP
Achieved:	Yes
Proposed Changes:	

Reason Not Achieved:

Priority: Healthcare Homes

Goal of the priority area:

Implement Healthcare Homes Initiative

Strategies to attain the goal:

Missouri is playing an important role in the design and implementation of the national health reform strategy. Missouri is the first state to submit a Medicaid State Plan Amendment to Health and Human Services, Centers for Medicare and Medicaid Services for Community Mental Health Center Health Care Homes.

Annual Performance Indicators to measure goal success

Indicator: Implementation of Health Care Homes

Description of Collecting and Measuring Changes in Performance Indicator:

Missouri is working on obtaining approval of the State Plan Amendment. DMH will continue to train leadership and treatment teams on healthcare homes clinical and organization issues.

Achieved: Yes

Proposed Changes:

Reason Not Achieved:

Priority: Recovery Oriented Services

Goal of the priority area:

Partner With Individuals in Recovery

Strategies to attain the goal:

Missouri will continue to partner with individuals in recovery from mental illness and substance abuse disorders to guide the behavioral health system and promote individual, program and system-level approaches that foster health and resilience; increase permanent housing, employment, education, and other necessary supports; and reduce barriers to social inclusion.

Annual Performance Indicators to measure goal success

Indicator: Certified Missouri Peer Specialists; Consumer Operated Services Programs; RESPECT Institute

Description of Collecting and Measuring Changes in Performance Indicator:

DMH will increase the number of Certified Missouri Peer Specialists trained.
DMH will maintain the Consumer Operated Services Programs.
DMH will continue to train individuals as RESPECT speakers.

Achieved: Yes

Proposed Changes:

Reason Not Achieved:

Footnotes:

As of October 2013, the Division of Behavioral Health (DBH) has 6 agencies and 10 teams implementing Assertive Community Treatment (ACT), 19 agencies implementing Integrated Treatment for Co-Occurring Disorders, 9 agencies implementing Supported Employment, and 16 agencies implementing Dialectical Behavior Therapy.

The first 'per member per month' payments for Health Homes were generated in March 2012. In FY 2013, 36,047 individuals participated in the Community Mental Health Centers' Health Homes Program.

As of October 2013, DBH has certified 180 Peer Specialists.

DBH maintains 10 Consumer Operated Services Programs.

The RESPECT Institute (RI) has trained 336 individuals since its inception in 2001. Eight RESPECT Trainings were conducted in FY 2013 - a total of 50 individuals were trained. In FY 2013, RI members had speaking engagements at 376 venues - a total of 10,990 audience members heard RI members speak.

III: State Agency Expenditure Reports

Table 4 (URS Table 7) - Profile of Mental Health Service Expenditures and Sources of Funding

Start Year:

End Year:

Activity	A. SA Block Grant	B. MH Block Grant	C. Medicaid (Federal, State, and Local)	D. Other Federal Funds (e.g., ACF (TANF), CDC, CMS (Medicare) SAMHSA, etc.)	E. State Funds	F. Local Funds (excluding local Medicaid)	G. Other
1. Substance Abuse Prevention and Treatment	\$	\$	\$	\$	\$	\$	\$
2. Primary Prevention	\$	<input type="text" value="79,345"/>	<input type="text"/>	<input type="text" value="731,166"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. Tuberculosis Services	\$	\$	\$	\$	\$	\$	\$
4. HIV Early Intervention Services	\$	\$	\$	\$	\$	\$	\$
5. State Hospital	\$	\$	<input type="text"/>	<input type="text" value="5,619,446"/>	<input type="text" value="213,469,478"/>	<input type="text"/>	<input type="text"/>
6. Other 24 Hour Care	\$	<input type="text"/>	<input type="text"/>	<input type="text" value="8,180,768"/>	<input type="text" value="27,119,548"/>	<input type="text"/>	<input type="text"/>
7. Ambulatory/Community Non-24 Hour Care	\$	<input type="text" value="6,899,320"/>	<input type="text" value="290,717,715"/>	<input type="text" value="30,496,611"/>	<input type="text" value="41,415,989"/>	<input type="text"/>	<input type="text"/>
8. Administration (Excluding Program and Provider Level)	\$	<input type="text" value="330,924"/>	<input type="text"/>	<input type="text" value="720,833"/>	<input type="text" value="729,870"/>	<input type="text"/>	<input type="text"/>
9. Subtotal (Rows 1, 2, 3, 4, and 8)	\$	\$410,269	\$	\$1,451,999	\$729,870	\$	\$
10. Subtotal (Rows 5, 6, 7, and 8)	\$	\$7,230,244	\$290,717,715	\$45,017,658	\$282,734,885	\$	\$
11. Total	\$	\$7,309,589	\$290,717,715	\$45,748,824	\$282,734,885	\$	\$

Please indicate the expenditures are actual or estimated.

Actual Estimated

Footnotes:

Table 5 - MHBG Expenditures By Service

Expenditure Period Start Date: 7/1/2012 Expenditure Period End Date: 6/30/2013

Service	Unduplicated Individuals	Units	Expenditures
Prevention (Including Promotion)			\$
Screening, Brief Intervention and Referral to Treatment			\$
Brief Motivational Interviews			\$
Screening and Brief Intervention for Tobacco Cessation			\$
Parent Training			\$
Facilitated Referrals			\$
Relapse Prevention/Wellness Recovery Support			\$
Warm Line			\$
Engagement Services			\$
Assessment			\$
Specialized Evaluations (Psychological and Neurological)			\$
Service Planning (including crisis planning)			\$
Consumer/Family Education			\$
Outreach			\$
Outpatient Services			\$
Individual evidenced based therapies			\$
Group therapy			\$
Family therapy			\$
Multi-family therapy			\$
Consultation to Caregivers			\$
Medication Services			\$
Medication management			\$

Pharmacotherapy (including MAT)			\$
Laboratory services			\$
Community Support (Rehabilitative)			\$
Parent/Caregiver Support			\$
Skill building (social, daily living, cognitive)			\$
Case management			\$
Continuing Care			\$
Behavior management			\$
Supported employment			\$
Permanent supported housing			\$
Recovery housing			\$
Therapeutic mentoring			\$
Traditional healing services			\$
Recovery Supports			\$
Peer Support			\$
Recovery Support Coaching			\$
Recovery Support Center Services			\$
Supports for Self Directed Care			\$
Other Supports (Habilitative)			\$
Personal care			\$
Homemaker			\$
Respite			\$
Supported Education			\$
Transportation			\$
Assisted living services			\$
Recreational services			\$
Trained behavioral health interpreters			\$

Interactive communication technology devices				\$
Intensive Support Services				\$
Substance abuse intensive outpatient (IOP)				\$
Partial hospital				\$
Assertive Community Treatment				\$
Intensive home based services				\$
Multi-systemic therapy				\$
Intensive Case Management				\$
Out-of-Home Residential Services				\$
Crisis residential/stabilization				\$
Adult Substance Abuse Residential				\$
Adult Mental Health Residential				\$
Youth Substance Abuse Residential Services				\$
Children's Residential Mental Health Services				\$
Therapeutic foster care				\$
Acute Intensive Services				\$
Mobile crisis				\$
Peer based crisis services				\$
Urgent care				\$
23 hr. observation bed				\$
Medically Monitored Intensive Inpatient				\$
24/7 crisis hotline services				\$
Other (please list)				\$

footnote:

Missouri will continue to work on the necessary reports and crosswalks to pull information for this table and report in a future application.

III: State Agency Expenditure Reports

Table 6 - Primary Prevention Expenditures Checklist

Start Year:

End Year:

Strategy	IOM Target	MHBG Block Grant	Other Federal	State	Local	Other
Information Dissemination	Universal	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Information Dissemination	Selective	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Information Dissemination	Indicated	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Information Dissemination	Unspecified	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Information Dissemination	Total	\$	\$	\$	\$	\$
Education	Universal	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Education	Selective	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Education	Indicated	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Education	Unspecified	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Education	Total	\$	\$	\$	\$	\$
Alternatives	Universal	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Alternatives	Selective	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Alternatives	Indicated	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Alternatives	Unspecified	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Alternatives	Total	\$	\$	\$	\$	\$
Problem Identification and Referral	Universal	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Problem Identification and Referral	Selective	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Problem Identification and Referral	Indicated	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Problem Identification and Referral	Unspecified	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Problem Identification and Referral	Total	\$	\$	\$	\$	\$

Community-Based Process	Universal	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Community-Based Process	Selective	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Community-Based Process	Indicated	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Community-Based Process	Unspecified	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Community-Based Process	Total	\$	\$	\$	\$	\$
Environmental	Universal	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Environmental	Selective	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Environmental	Indicated	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Environmental	Unspecified	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Environmental	Total	\$	\$	\$	\$	\$
Section 1926 Tobacco	Universal	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Section 1926 Tobacco	Selective	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Section 1926 Tobacco	Indicated	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Section 1926 Tobacco	Unspecified	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Section 1926 Tobacco	Total	\$	\$	\$	\$	\$
Other	Universal	\$ 75,701	\$ 697,397	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Other	Selective	\$ 3,644	\$ 33,769	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Other	Indicated	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Other	Unspecified	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Other	Total	\$ 79,345	\$ 731,166	\$	\$	\$

Footnotes:

Expenditures are for Suicide Prevention.

Table 9 - Maintenance of Effort for State Expenditures on Mental Health Services

Total Expenditures for SMHA		
Period (A)	Expenditures (B)	<u>B1(2011) + B2(2012)</u> 2 (C)
SFY 2011 (1)	\$129,347,429	
SFY 2012 (2)	\$136,498,469	\$132,922,949
SFY 2013 (3)	\$137,118,285	

Are the expenditure amounts reported in Column B "actual" expenditures for the State fiscal years involved?

SFY 2011 Yes X No _____
 SFY 2012 Yes X No _____
 SFY 2013 Yes X No _____

If estimated expenditures are provided, please indicate when actual expenditure data will be submitted to SAMHSA: _____

footnote:

III: State Agency Expenditure Reports

Table 10 - Report on Set-aside for Children's Mental Health Services

State Expenditures for Mental Health Services		
Actual SFY 2008	Actual SFY 2012	Estimated/Actual SFY 2013
\$24,058,329	\$25,516,701	\$26,058,754

States are required to not spend less than the amount expended in Actual SFY 2008. This is a change from the previous year, when the baseline for the state expenditures was 1994.

Footnotes: