



Division of Behavioral Health Services

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Implementation of Act 161 of 2015 Report

Below is a report to the Public Health, Welfare, and Labor Committee regarding the implementation of Act 161 of 2015. Based on the Act, the Division of Behavioral Health Services (DBHS) put forth a rule change to remove the existing outcomes assessment tool from the Rehabilitative Services for Persons with Mental Illness (RSPMI) Certification Manual. During the promulgation process, at the request of the Administrative Rules and Regulations Subcommittee of the Arkansas Legislative Council, language was added to policy requiring DBHS to report implementation progress to the combined Public Health, Welfare, and Labor Committees until the requirements of Act 161 are fulfilled.

Implementation of Act 161

- Act 159 of 2007 mandated the implementation of an assessment tool to guide service decisions and outcomes, and authorized an outcomes-based data system to support tracking, accountability, and decision-making for children’s mental health services.
- To fulfil this mandate the Youth Outcome Questionnaire (YOQ) became a requirement for all children and youth receiving services through the Rehabilitative Services for Persons with Mental Illness (RSPMI) program.
- From 2010 through 2014, the implementation and maintenance of the YOQ cost the Department of Human Services \$2,756,067.
- Act 161 of 2015 mandates the selection of a new outcomes measurement tool by September 30, 2015.
- To comply with Act 161, the Division of Behavioral Health Services (DBHS) formed a stakeholder group to select a tool to replace the YOQ. The stakeholder group selected the Ohio Scales, a nationally recognized instrument developed to measure outcomes for youth ages 5 to 18 who receive mental health services.
- To implement an outcomes measurement tool for children receiving outpatient mental health services, the Department of Human Services (DHS) will need to procure digital platform for data collection, data analytics, and provider training.
- DHS estimates the procurement process will take six to nine months. Based on prior experience, full implementation of a new tool will approximately take an additional twelve months.

Steps Towards Implementation

1. Select new tool to replace YOQ (Completed September 2015)
2. Removal of YOQ from necessary policies (Completed November 2015)
3. Solidify process (population, timing, etc.) for utilization of Ohio Scales for Youth
 - DBHS continues to work with stakeholders, legislative branch consultants, and other state agencies to evaluate and make recommendations regarding how assessment and outcome tools will be affected by the impending changes to the Medicaid mental health treatment program.
 - DBHS met with the leadership of the Division of Medical Services (DMS) to discuss The Stephen Group (TSG) recommendations presented on January 20th to the Arkansas Health Care Reform Task Force. Implementation of those recommendations would substantively affect the introduction of the new assessment tool. DBHS has been asked to work with TSG staff in order to develop a projected time frame for the TSG recommendations for implementation of a Managed Fee for Service Medicaid program for Behavioral Health.
 - DBHS met with staff from DMS, TSG, the Medicaid fiscal agent, and the Department of Human Services Office of Chief Council to discuss potential cost savings measures DHS might take in order to reduce expenditures in the Medicaid program and how those measures might affect the planned implementation of the new assessment tool.
 - DBHS held a meeting on February 24, 2016 with the original stakeholder group that had selected the Ohio Scales. After much discussion regarding the two proposals (full risk managed care or partial risk managed fee for service) under consideration by the Health Care Reform Legislative Task Force, the consensus of the group was to advise the Division to:
 - Delay implementation activities related to the assessment instrument as the managed fee for service recommendation listed two other assessments as preferred and the likelihood is that an organization that provided capitated managed care might bring an additional assessment to the process, and;
 - Take every opportunity to remind decision makers of the importance that the assessment and any subsequent treatment is value based, patient centered, family focused, and quality driven.

4. Develop , submit, and gain multiple levels of approval of an Information Technology (IT) plan from:
 - Department of Human Services
 - Division of Medical Services
 - Office of Contract Support
 - Office of Systems and Technology
 - Department of Finance and Administration
 - Office of State Procurement
 - Office of Intergovernmental Services
 - Department of Information Systems
 - Governor’s Office
5. Procure IT platform (process is estimated to take six to nine months)
 - Develop procurement documents
 - Evaluate applications and select top bidder
 - Requires Legislative approval
6. Promulgate policies to implement Ohio Scales for Youth
 - Obtain stakeholder input
 - Public comment period required
 - Requires amendments to the RSPMI Certification Manual
 - Requires amendments to the RSPMI Provider Manual
 - Requires Legislative approval
7. Implementation of Ohio Scales for Youth
 - Customization of IT system
 - Provider training necessary