

ODADAS & DMH Partnership

Update for Behavioral Health
Leadership Group, 5/16/12

Consolidation Plans

- Announced May 4, 2012
- Specific back office functions by July 2012:
 - Fiscal
 - Information technology
 - Legislation
 - Communications
 - Medicaid
 - Legal
- Comprehensive consolidation (new department) with legal authority will be sought for July 2013

Rationale for Consolidation

- Much in common, but recognize and value unique characteristics of both systems
 - Biological brain disorders, stigma
 - Treatment method and services vary
- Better services through integration – breaking down barriers
 - Regulation and billing can be aligned making treatment easier for system partners
- Common sense government
 - Joint fiscal and community plan work, joint teamwork

Focusing Our Team: Goals

- Speak with one voice that recognizes and supports services related to both addiction and mental illness
- Leverage our collective administrative resources, creativity and advocacy to improve upon our previously parallel efforts
- Establish a collective, specific work plan for action that will guide our progress forward

Next Steps

- This is a consolidation of two agencies, not folding one agency into a division of a larger agency.
- Primary goal is better prioritization of both populations; NOT the achievement of cost savings or employee layoffs
- The people served by the agencies must remain at the center of our focus

Organization is Key

- Developing a project charter with Office of Health Transformation
- Basic concept is to manage three related streams of work in a limited period of time
 - 1) Policy, regulatory, process areas
 - 2) Operational framework that supports the work
 - 3) Development of the legislative package, including FY 14/15 budget, ORC changes and OAC rules

Organization, 2

- **Policy, regulatory, process areas**
 - Example areas: licensure & certification, prevention, advocacy & consumer support, etc.
 - A comprehensive DRAFT list will be developed
- For each topic, a specific team will review current requirements and procedures
 - Identify areas of alignment, lack of alignment
 - Identify opportunities for improvement
 - Make recommendations for the new department
- Stakeholders (internal & external) comprise teams

Organization, 3

- **Operational framework**
 - Examples: how we merge data sets for specific areas; staff table of organization; modifications to our provider support functions
 - A comprehensive DRAFT list will be developed, subject to modification based on policy recommendations
- Some logistics will vary based on the topic:
 - Team composition
 - Begin/end dates

Organization, 3

- **Legislative package**
 - FY 14/15 budget bill may be the vehicle, not yet determined
 - Work plan timeline will make that assumption
 - ORC changes – language
 - Appropriation & FY 14/15 budget policy for the new department
 - OAC changes – not in the bill, but will need a companion work plan & time frame

Stakeholder Involvement

- This is absolutely critical to our success
- When charter is finalized, we will broadly communicate specific involvement opportunities
 - Small teams draft work, then everyone can comment
- Will establish a Stakeholder Advisory Team (specific organizations)
- Will establish a core project team (specific people)
- consolidationquestions@mh.ohio.gov
- Web site with info is forthcoming

Questions & Discussion