



Provider Bulletin

for the Adult Mental Health Division

June 2009

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If you have any questions about information in this Provider Bulletin, please contact AMHD Provider Relations at (808) 586-4689.

Aloha!

The purpose of this communication tool is to provide Purchase of Service (POS) providers with up-to-date new or revised information, and to assist us when implementing new Adult Mental Health Division (AMHD) business activities and initiatives. We welcome your ongoing feedback and suggestions for improvement as we work to develop this valuable communication tool. Please contact us if there are any topics you would like to see in the Provider Bulletin.

Hawaii Quality of Life Inventory (QOLI) Surveys

As you are aware, our state's budget shortfall is causing our legislators to look hard at every dollar spent. Although the state budget was recently passed this Fiscal year, the Department of Health and the AMHD in particular will most likely face more scrutiny over its budget in the near future.

For this reason, it is essential that **all providers have at least one Hawaii Quality of Life Inventory (QOLI) survey completed on every consumer served by the end of this Fiscal year (June 30, 2009)**. Failure to do so will decrease the ability of the AMHD to justify existing programs to the Hawaii Legislature, which looks at the resulting service measure outcomes for guidance. Unfortunately, the compliance rates for the QOLI survey required for every consumer receiving case management services is at an all-time low.

We understand that many providers are short-staffed and over-worked at this time, but we urge you to plan for the future and turn in the surveys by the deadline.

Please, ensure that every consumer who has not completed a QOLI within 6 months is given a QOLI before the end of this Fiscal year. In most cases this means almost every consumer at your agency.

Why the QOLI is critical to our system of care:

- Federal and State Requirements:** The QOLI data are required for a variety of reports to funding agencies including Block Grant reporting, the National Association of State Mental Health Program Directors Research Institute (NASMHPD) Report and most importantly, the Legislative Report.
- Program Survival:** In this time of fiscal distress, justification for how funding is being allocated is key to survival of our programs. What is not measured does not get counted.
- Treatment Planning:** The QOLI provides valuable clinical information and the Clinical Feedback Form was designed to help clinicians with their treatment planning regarding 7 key quality of life domains: (a) Health and Level of Functioning (b) Criminal Justice Involvement and Victimization, (c) Finances/Benefits, (d) Relationships/Resources, (e) Hospitalization/Medication, (f) Housing, and (g) Employment/School.

4. **Performance Indicators:** Administrators cannot make informed plans to improve our system of care without knowing about consumers' living situations, their employment, how they feel about their physical and mental health, and whether or not they have appropriate social and financial support.

Reminders:

- The QOLI must be completed at intake, every 6 months, and at discharge.
- The first QOLI must be completed before working on the treatment plan so that QOLI Clinical Feedback Form can be used in developing the treatment plan with the consumer.
- The data must be entered into the ACCESS database provided to you by the MHSRET Program and the data must be uploaded through SharePoint **every month**.
- If you have any questions please contact Dr. Annette Crisanti at 808-895-0440.

Mahalo for your cooperation and understanding!

AMHD Medical Director Corner (Dr. William Sheehan)

I have 3 important topics to share with you this month. All three are things that I've seen this month in our Quality Improvement activities. Please share this with your staff and make plans to address these issues in your agency.

1. Consumers with No Medication: This is the situation in which a consumer has no access to medication. It can happen for a number of reasons, such as being unable to obtain benefits, not having money for co-payments, or changes in their insurance coverage. For an individual with a severe and persistent mental illness, being off medication can be a catastrophe. Fortunately, almost every medication is available for no cost to consumers who have no other means to obtain it. There are several websites available to help. My favorite is www.needymeds.org. If the consumer is eligible for benefits but has not yet obtained them, please ensure the emergency application is completed through the Department of Human Services.

2. Conditional Release Consumer Losing Housing: It is a disaster when a consumer on Conditional Release (CR) loses or is put out of housing. This is almost always a violation in the terms and conditions of their CR, and may result in a Hawaii State Hospital (HSH) admission. It often happens because the consumer is demonstrating behaviors that are very consistent with those seen in individuals who have severe and persistent mental illness. Given how severe the consequences of homelessness are for this population, please make every effort to avoid abrupt removal from housing. Our consumers do have behaviors that are challenging for housing operators, but being put out of housing ought to be the absolutely last step, after multiple treatment team interventions and attempts to assist the consumer stabilize.

3. Conditional Release in General: I see the reality that there is special challenge of working with individuals on CR. I have learned that once an individual goes on CR, life as they knew it is over. The terms and conditions under which they live are structured, and violation of any of them can result in readmission to the HSH. Despite the hospital staff's efforts, many individuals leaving HSH have very little true realization of what it means for them to be on CR. As a consequence, they don't realize or don't especially care that engaging in any of the behaviors (including being without housing) they may have previously engaged in for years will set up a return trip to the HSH.

Please take special care with consumers on CR. Take extra time to help them understand what it means to be on CR. Help them abide by the terms and conditions to which they agreed. Psychiatrists, Case Management Agencies, Housing Providers, and Forensic Coordinators have to be communicating and especially tight in the interventions and assistance to consumers on CR. It will take extra time, extra effort, and extra work, but serving the legally encumbered population is a core function of the AMHD.

AMHD RFI's & RFP's

AMHD plans to release the following Requests for Information (RFI) and Requests for Proposal (RFP) sometime in the near future:

RFI for Bilingual Support Services (Interpretive Services)
RFP for Psychosocial Rehabilitation Services
RFP for Peer Coaching
RFP for Representative Payee Services
RFP for Supported Employment/Micro-Enterprise
RFP for Supported Self-Employment/Micro-Enterprise

If you have any questions regarding upcoming RFI's, RFP's, contracts or modifications, please contact the Contracts Unit at 586-4689.

AMHD Performance Improvement (PI)

The AMHD's early provider monitoring results have found two areas related to the Hawaii Administrative Rules that require your attention. The Hawaii Administrative Rules, §11-98-12, Minimum standards for licensure; services note that individual records shall be kept on each resident which contain the following:

Section No. 3. Information on any necessary special arrangements for emergency medical care; and

Section No. 7. Identification and summary information including resident's name, Social Security number, marital status, veteran's status, date of birth, sex, home address, telephone number of referral agency and next of kin or other legally responsible person.

Concerning **Section No. 3** above, AMHD gives credit in provider monitoring for documentation that no special arrangements for emergency care exist, but the AMHD monitors must be able to find that documentation explicitly. It is different from information pertaining to special diet and the need for medical assistance (such as a walker). Since most providers already gather information pertaining to special diet and medical assistance, an extra question related to special arrangements for medical care could be incorporated into the existing procedures (for example, the nursing assessment).

Concerning **Section No. 7** above, most providers include all the information except for Veteran's status. Since providers are already gathering most of the information on the other areas (found usually on the face sheet), an extra question related to veteran's status could be incorporated into existing procedures.

If you have not incorporated the **two above questions** into your medical records and internal processes already, please do so in the near future. If you have any questions, please call AMHD Performance Improvement at (808) 453-6920.

Psychosocial Rehabilitation Vocational Services

Social Security Eligibility: Social Security has changed its rules regarding the ineligibility of persons with outstanding felony warrants. For SSDI applicants, SSA no longer inquires about outstanding felony warrants and for SSI applicants, SSA will now process their applications UNLESS they have one (or more) of only the following 3 types of felony warrants: Escape (offense code 4901); Flight to Avoid Prosecution/Confinement (offense code 4902); and Flight-Escape (offense code 4999). That means our consumers with outstanding felony warrants for Failure to Appear or Contempt of Court can now apply and be found eligible for Social Security benefits. However, outstanding probation and parole violations (offense codes 5011 and 5012) are still grounds for application denial for both SSI and SSDI benefits. Finally, please follow the SOAR strategies to double your chances and cut in half the time of an SSI/SSDI application being approved. For more information call or email Edward Suarez (Edward.suarez@doh.hawaii.gov) at 453-6941 or check out www.prainc.com/soar.

Offer of Staff Training on Disability Benefits: I would like to schedule a brief training (up to one hour) for your staff on disability benefits and work. I have information regarding work incentives, welfare, and benefits applications that can be of great benefit to your agency. Please contact me at (808) 453-6941 or email edward.suarez@doh.hawaii.gov to arrange a time and date for me to present this information to your staff and/or consumers and answer their questions about disability benefits. Please find below a summary of some of the benefits topics that can be covered and let me know of any particular area you would like me to focus on when I visit.

- New higher 2009 income cutoffs for SSI/SSDI for workers with disabilities
 - See enclosed fact sheet/poster
- New increased DHS income limits for low income health coverage
- New resource coming to your agency or an agency near you
 - Training and employment of 25 Peer Benefits Planners by AMHD/MIG/DVR
- Welfare Cuts and Food Stamps Increases
 - How to restore welfare to \$469/mo. for consumers whose GA was cut to \$234/mo. by qualifying them for ABD welfare.
- SSI/SSDI applicants with felony warrants eligible if not charged with
 - Escape; Flight to Avoid Prosecution/Confinement; or Flight-Escape
- New Pre-Release Agreement between HSH/Kahi and Social Security
 - To secure benefits upon discharge for AMHD consumers
- SSI/SSDI application strategies from the SOAR initiative
 - Help staff spend less time and get more initial approvals from SSA
- Social Security nationwide disability hiring initiative
- Ticket to Work and improved Employment Network VR funding/service opportunities

Homeless Outreach

The new contract for Homeless Outreach will begin August 1, 2009. Providers selected to administer this service include Kalihi Palama Health Care for the Homeless Project (Oahu), Mental Health Kokua (Maui & Kauai) and Office for Social Ministry (Big Island).

Representative Payee

The Representative Payee Quarterly Provider meeting will be held on Monday, June 8, 2009, from 1:00 pm to 3:00 pm, at AMHD; 2385 Waimano Home Road, in Room 10. Video Conferencing will be available on Kaua'i at the District Health Office-Reading Room, 3040 Umi Street.

AMHD Website

We continue to update our AMHD Website and revisions are underway. If you have any questions regarding the AMHD website information, please contact the AMHD Provider Relations Director at (808) 586-4689 or email at dawn.mendiola@doh.hawaii.gov.

Learning Opportunities & Opportunities for Growth

1. **The Language of Suicide** will be held June 2, 2009 in **Maui** at the Cameron Center Auditorium. Sponsored by Mental Health America. Free. For more information call 244-6461.
2. **NAMI Walks for the Mind of America** is a fundraising and mental health awareness program that is being held on August 1, 2009 in **Honolulu**. There is no registration fee for the walk and everyone is invited to join in. For more information, please contact Audrey Chandler at (808) 371-4966 or the NAMI office at (808) 591-1297.
3. **Invisible Children's Project** is being sponsored by Mental Health America (MHA). They are working with service providers to identify those families in which a parent has a mental illness and are developing ways to help them. If you know of a family that may benefit from this initiative, please contact MHA at (808) 521-1846 or email info@mentalhealth-hi.org.