

North Carolina Department of Health and Human Services Division of Mental Health, Developmental Disabilities and Substance Abuse Services

Pat McCrory Governor

From:

Aldona Z. Wos, M.D. Ambassador (Ret.) Secretary DHHS

Jim Jarrard Acting Division Director

January 17, 2013

To: Joint Legislative Oversight Committee Members

on HHS

Commission for MH/DD/SAS

Consumer/Family Advisory Committee Chairs

State CFAC

Advocacy Organizations and Groups NC Association of County Commissioners

County Managers County Board Chairs

NC Council of Community Programs

Jim Jarrard 77 1

Re: Communication Bulletin #127

Rebasing of Substance Abuse Prevention and Treatment Block Grant (SAPTBG) Prevention

20% Set-aside Funds

State Facility Directors
LME/MCO Directors
LME/MCO Board Chairs
DHHS Division Directors
Provider Organizations
MH/DD/SAS Professional Organizations and Groups
MH/DD/SAS Stakeholder Organizations and Groups
NC Association of County DSS Directors



As the Division of MH/DD/SAS works with the LME/MCOs to develop a more comprehensive system for prevention, intervention, treatment and recovery supports, we must recognize that our prevention services, currently outside of the UCR system, would benefit from a more structured and performance-based approach. The Prevention and Early Intervention Team, within the Community Policy Management Section, along with LME/MCO prevention services representatives, have been hosting focus group discussions to start the process of rebasing substance abuse prevention funds. The plan is to allocate the SFY 13-14 Substance Abuse Prevention and Treatment Block Grant (SAPTBG) 20% set-aside funds for prevention according to the new LME/MCO structures and taking into account each LME/MCO's regional population base, evidence of need, capacity and performance.

An invitation is being developed to be released February 15, 2013, that will allow LME/MCOs and their network of substance abuse prevention providers to apply for the SAPTBG 20% set-aside prevention funds. The invitation will be specific to a coordinated plan outlining the following elements: (1) identification of appropriate target populations, (2) use of local data to identify priorities for substance abuse prevention (3) applying appropriate evidence based strategies (programs, practices and policies) to address local conditions, and (4) a mechanism in place for training and technical assistance. Responses to the invitation will be announced by April 1, 2013. Effective July 1, 2013, the revised system will be put into place to provide more accountability for substance abuse prevention services.



CB#127 January 17, 2013 Page 2

It is re-emphasized that the Division's policy is to continue to improve and strengthen the current system for substance abuse prevention services under the 20% set-aside funds for the SAPT Block Grant. Data reflecting services implemented from January 1, 2013 to June 30, 2013 is required to be reported by all providers into the Prevention Outcomes Performance System (POPS) and submitted to the Division by LME/MCOs on the SAPTBG Semi-Annual Compliance Report Form.

We urge the LME/MCOs to continue to work with their network of prevention providers to implement quality prevention services, collecting data according to the standards outlined in the federal regulations. Any anticipated changes in the provision of prevention services with the SAPTBG prevention set-aside funds for SFY13 should be specifically submitted in writing and discussed with representatives of the Community Policy Management Section, Spencer Clark, Director of Operations and Clinical Services (spencer.clark@dhhs.nc.gov) and Janice Petersen (Janice.petersen@dhhs.nc.gov) Prevention Director.

Further communication regarding the release of the Invitation to Apply for Substance Abuse Prevention and Treatment Block Grant (SAPTBG), 20% set-aside funds will be available in February.

Thank you for your continuing support, assistance, and recommendations in building a stronger and more comprehensive substance abuse prevention services system with our SAPTBG funding.

Cc: Secretary Aldona Wos, M.D.

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