Division of Mental Health, Developmental Disabilities and Substance Abuse Services

Purpose: To provide people with, or at risk of, mental illness, developmental disabilities and substance abuse problems and their families the necessary, prevention, intervention, treatment, services and supports they need to live successfully in communities of their choice.

Community System Management:

DMH/DD/SAS contracts with twenty-three (23) Local Management Entities (LMEs) to provide critical consumer protection, network management and service authorization functions for all State/Medicaid service dollars expended in their areas. These functions include provider monitoring, addressing consumer complaints, care management for high cost/high risk consumers, community service coordination and the authorization of State (and in some cases Medicaid) services for consumers.

Community Service Continuum:

The vast majority of community service funds appropriated to DMH/DD/SAS are allocated to LMEs to provide an array of community services for individuals with mental heath, developmental disabilities and substance abuse needs. This service array includes the following:

- Crisis services for all age/disability groups to include 24 hour crisis lines, mobile crisis teams and walk-in crisis assessment.
- The development of community alternatives for inpatient psychiatric care—designed to reduce utilization of limited State Hospital beds.
- Day program services to include psycho-social rehabilitation, DD Day Services, supported employment and substance abuse treatment.
- Development of an array of outpatient services for both children and adults that include: Intensive In-Home services for children, medication management and psychiatric assessment, intensive outpatient for substance abuse, targeted case management and outpatient counseling.

Note: This service array (both State/Medicaid funded) is delivered through a contracted provider network endorsed and monitored by LMEs. In developing these service networks LMEs are driven by such values as choice, access, quality and cost-effectiveness.

Major Policy Concerns:

- The need to continue the efforts of DMH/DD/SAS to expand community psychiatric inpatient capacity. During the three years, funding from the General Assembly has resulted in the addition of 142 additional inpatient beds with the capacity to provide almost 39,000 days of care. These beds reduce ER wait times, allow consumers to be treated closer to home, impact wait time and transportation costs for local law enforcement and allow State Hospitals to focus on our most needy citizens.
- Continuation of the Department's efforts to improve the quality of care and use of best practice models in our community system. The Department's recent certification of a limited number of providers as Critical Access Behavioral Health Agencies (CABHA) represents a fundamental commitment to quality care founded in strong clinical leadership.

Division of State Operated Healthcare Facilities (DSOHF)

Purpose: Manage state operated healthcare facilities that treat adults and children with mental illness, developmental disabilities and substance use disorders whose needs exceed the level of care available in the community.

Key Services:

Psychiatric Hospitals (Broughton, Central Regional, Cherry)

Provides inpatient psychiatric services to North Carolinians who cannot be served in the community because of the severity of their symptoms.

Psychiatric Hospitals represent 53% of DSOHF' total budget and 80% of DSOHF' appropriated budget. The SFY 11-12 budget for Psychiatric Hospitals totals \$432.2M of which 51% is supported with receipts and 49% state appropriations.

Alcohol and Drug Abuse Treatment Centers (Julian F. Keith, R.J. Blackley, Walter B. Jones)

Provides treatment to adults with addiction and co-occurring disorders (addiction and mental health diagnoses).

Alcohol and Drug Abuse Treatment Centers represent 5% of DSOHF' total budget and 15% of DSOHF' appropriated budget. The SFY 11-12 budget for Alcohol and Drug Abuse Treatment Centers totals \$43.6M of which 10% is supported with receipts and 90% state appropriations.

Neuro-medical Treatment Centers (Black Mountain, Longleaf, O'Berry)

Provides services to adults with chronic, complex medical conditions that co-exist with neurological conditions often related to a diagnosis of an intellectual and/or developmental disability and individuals with Alzheimer's disease or other related dementias.

Neuro-medical Treatment Centers represent 13% of DSOHF' total budget and 1% of DSOHF' appropriated budget. The SFY 11-12 budget for Neuro-medical Treatment Centers totals \$105.7M of which 97% is supported with receipts and 3% state appropriations.

Schools (Wright, Whitaker)

Wright School serves children with emotional, behavioral, educational, intellectual, social, or neurological needs ages 6-12 in a non-medical, alternative program which emphasizes the re-educational model of services. Whitaker School offers inpatient psychiatric services to children and adolescents aged 13-18 whose mental health needs cannot be met in the community.

The schools represent 1% of DSOHF' total budget and 2% of DSOHF' appropriated budget. The SFY 11/12 budget for Schools totals \$6.0M of which 57% is supported with receipts and 43% state appropriations.

Developmental Disability Centers (Caswell, J. Iverson Riddle, Murdoch)

Provides services and supports to individuals with intellectual and developmental disabilities (IDD), complex behavioral challenges and/or medical conditions whose clinical treatment needs exceed the level of care available in the community.

Developmental Disability Centers represent 28% of DSOHF' total budget and 2% of DSOHF' appropriated budget. The SFY 11-12 budget for Developmental Disability Centers totals \$232.8M of which 98% is supported with receipts and 2% state appropriations.

Division of Public Health

Purpose: Promote, protect and improve the health of people in North Carolina.

Key Services:

State Infrastructure Services

State Laboratory Services\Medical Examiner System

Provide testing, consultation, training and reporting to public and private health provider organizations responsible for the promotion, protection and assurance of the health of people in North Carolina.

State Center for Health Statistics\Vital Records

Responsible for the creation and maintenance of comprehensive health information that is used to inform decision-making and inform health policies.

State Infrastructure Services represents 4% of DPH's total budget and 5% of DPH's appropriated budget. The SFY 11-12 budget for State Infrastructure services totals \$35.9M of which 77% is supported with receipts and 23% state appropriations.

Community Health Services Provided Through Local Health Departments

Community Health Services Include: Children's Preventive Health Services Family Planning Maternal Health School Health Services

Community Health Services Activities represent 14% of DPH's total budget and 24% of DPH's appropriated budget. Of funds supporting these services 71% are allocated to local Health Departments. The SFY 11-12 budget for Community Health Services Provided Through Local Health Departments totals \$110.2M of which 64% is supported with receipts and 36% state appropriations.

Early Intervention

Early Intervention serves children birth to age 3 with, or at risk of developmental delays or developmental disabilities, and their families to determine whether children are eligible for services and provides an Individualized Family Service Plan for eligible children.

Early Intervention services represent 10% of DPH's total budget and 23% of DPH's appropriated budget. The SFY 11-12 budget for Early Intervention totals \$83.0M of which 54% is supported with receipts and 46% state appropriations.

HIV\AIDS Services and Prevention Activities

This service provides pharmaceuticals, treatment and coordination of health care services to people living with HIV or AIDS. Prevention activities include testing, counseling, education and referral services to prevent the spread of HIV and STDs.

HIV\AIDS Services and Prevention Activities represent 11% of DPH's total budget and 20% of DPH's appropriated budget. The SFY 11-12 budget for HIV\AIDS Services and Prevention Activities totals \$88.1M of which 63% is supported with receipts and 37% state appropriations.

Other Federally Funded Access and Prevention Activities

Access and Prevention Activities Include:

Asthma

Breast and Cervical Cancer Control and Comprehensive Cancer WIC, Child and Adult Care Food (CACFP) and Farmer's Market Nutrition Injury and Violence Prevention
Teen Pregnancy Prevention Initiatives (TPPI)

Federally Funded Access and Prevention Activities represent 48% of DPH's total budget and 3% of DPH's appropriated budget. The SFY 11-12 budget for Other Federally Funded Access and Prevention Activities totals \$384.5M of which 99% is supported with receipts and 1% state appropriations.

The Division receives funding from 76 different federal grants which require various matching and maintenance of effort requirements.