Commonwealth of Massachusetts Executive Office of Health and Human Services



Update: Services for Individuals with ASD and Mental Illness

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- Autism Omnibus Bill August 2014
- Agreement (ISA) between DDS/DMH December 2015
- Progress to date
 - Trainings
 - Fellowships
 - Risk Consultations
 - Dually Eligible
 - Service development
 - RFI and ARPA funding



Autism Omnibus Bill – August 2014



- Established a 35-member Commission on Autism within EHS and chaired by the Secretary
- Expands DDS mission to include those with intellectual disabilities as well as developmental disabilities
- Requires DMH and DDS to provide services to individuals with both MI and DD and who are eligible for services from both agencies
 - Protocols to determine which services shall be provided by which department
 - Ways to ensure that an individual who is eligible for services from both departments receives all services for which they are eligible



- Recognizes DDS as lead Agency for ASD
- Acknowledges both co-morbid mental illness with ASD and that some individuals are eligible for both DDS and DMH services
- Acknowledges the differences between DDS and DMH around service authorization/eligibility criteria and service resources available
- Establishes training to understand and work with these differences



- Affirms the complexity and variety of ASD presentations and needs
- Requires collaboration across state agencies, the multiple funding agencies (state, managed care organizations, health plans, school systems), families, consumers, and community-based organizations to provide the range of services and supports needed by individuals and their families



DDS/DMH ISA Content



- Agency structural collaboration
- **■** DDS/DMH Autism Committee
- Eligibility and Service Authorization guidelines
- Plan for Training and Professional Consultation
- **■** Risk Assessment Services
- **■** Service Provision
- Service Design





- DDS Regional and DMH Area work groups
 - Increase mutual understanding of Agency's structures, service array, delivery models and resources
 - Provide coordinated service delivery to individuals with ASD who meet service criteria for both agencies
- DDS and DMH Central Office Leadership Autism Committee
 - Provides policy and procedure development & oversight and monitoring of services needed by those who are dually eligible
 - Monthly meetings





- Allows for Dual Eligibility
- Universal consent form developed by both agencies to use in order to share an individual's information between agencies
- **■** Provides for a dispute resolution process
- **■** Establishes determination of shared costs
- Piloted an expedited eligibility process for DDS (those hospitalized)



- Recognize the need to increase expertise about individuals with ASD and mental health issues
- DDS funding of ASD Fellowships through DMH Training Grant started July 2016
- Training of DDS and DMH Staff funded primarily by DDS with DMH collaboration (site, logistics)
- DMH's Research COEs to help train as well as guide the development of new services



- DDS will purchase from DMH access to specialized risk assessment and treatment planning consultation
 - ASD and MIPSB
 - Dangerousness risk assessment
- DDS Central Risk Manager will provide access to its Risk Managers and Risk Management System to assist in this process
- Coordinated through Janet George and Kathy Sanders



- DDS and DMH are committed to provide the needed services for those dually eligible for both DDS and DMH together
- DDS Area Offices and DMH Site Offices agree to work together to access each other's resources in the most person-centered approach to service planning
- DMH/DDS Autism Committee will review individuals currently receiving services in only one Agency who may be better served by the other agency or both agencies together



- DDS and DMH will explore how to best use the existing services for the needs of those with ASD
- DDS and DMH will jointly identify the need for new services and will consider funding demonstration/pilot projects to develop new service arrangements
- This new service design will be done through the DDS/DMH Autism Committee





- Develop an Intensive Wrap Around Case management program
- Explore developing an Integrated Employment program with Clinical Supports
- Consider whether the DDS rate structure supports a specialized Autism specific program
- Explore how best to develop a peer mentoring network
- Better coordination and transition activities to prepare both young adults with ASD and their families into adult agency life.
- Consider the Development of a Center of Autism Excellence
- Use of Telehealth options for service delivery
- Increase skilled therapists in CBT and Trauma informed care
- Improve ESP response to needs of medical and behavioral issues
 - July 2020: start of MCPAP for ASD in EDs



- Housing pilot in MetroBoston 2018
- Fellowship skill training efforts and consultations
- Project for individuals with ASD to engage and receive services in the community
- Ongoing collaboration at Region/Area level and Central Office
- ARPA funding projects
 - Specialized DDS/DMH housing for those with ASD
 - Plan for 5 housing units for each of the MA Areas





- Co-occurring ASD and mental illness
 - Even mild mental illness may not be as impairing but in combination with ASD, functional impairment is amplified
- Risk behaviors and mitigation efforts
 - Engagement strategies very individualized
 - Voluntary treatment health care system
- Independent functioning goals may require significant support
- Family/caregiver burden





Discussion & Questions