

# Department of Health and Human Services – State of Maine

December 2013

## 2013-2015 DHHS Strategic Plan

### Maine People Living Safe, Healthy and Productive Lives



Department of Health  
and Human Services

Maine People Living  
Safe, Healthy and Productive Lives

Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

## A Message from the DHHS Executive Team

The Department of Health and Human Services (DHHS) is the largest agency in Maine state government. DHHS accounts for thirty-five percent of all state spending and provides social services to hundreds of thousands of needy Maine residents.

DHHS has a dedicated staff of more than 3,400 employees statewide. Every day, these public servants are helping Maine people to be more independent and lead safer and healthier lives. Many of the people we serve face very difficult circumstances. On a day-to-day basis, the Department assists individuals with extreme medical needs, poverty, mental illness, intellectual disabilities, behavioral health problems, domestic violence, elder abuse, and child abuse.

Recent economic challenges have brought about intense needs in our state. As our economy recovers, there are still so many who need a helping hand. At the same time, budget constraints at the state and federal levels have made access to resources difficult. In particular, reductions in federal funding have caused a need for more state resources to fill the gap. Since 2008, DHHS has seen staffing reduced by nine percent while programs, caseloads and member needs have grown. The need for efficient and disciplined use of these scarce resources is vital to meeting needs in our communities and securing our safety net for the most vulnerable.

In the face of these challenges, DHHS has made progress and is well-positioned to continue with innovation and reform that improve the delivery of services and make the most efficient use of resources. In the past two years, we have successfully combined several offices within the Department to break down barriers, promote teamwork and provide integrated service to individuals. We recognize that the needs of those we serve span across many programs and that integrated care provides the best option to maximize resources and achieve good outcomes.

We have instituted performance-based contracting, where all agencies that have contracts with the Department now have measures in place that will help DHHS assess their success and will help direct their work. This effort for transparency and accountability includes similar measures for our own goals and initiatives that you see within this plan.

The Department is working with our partners in the community, other state agencies and within our organizational structure to build a Department that coordinates services and provides social and medical assistance with a holistic approach. We are striving to put patients and clients at the center of our work and focus on quality outcomes brought about in the most efficient manner possible. We are measuring this approach every step of the way to fine tune and improve the process where necessary.

Our leadership is committed to the mission of the Department, our employees and the people we serve. We strive to clearly communicate our direction, support our employees and maximize every resource we have in a shifting economic landscape. This plan will serve as the roadmap to guide our organization forward to best serve Maine's most vulnerable citizens.

## DHHS Offices, Leadership and Major Functions

Office	Director	Major Functions
Commissioner's Office	<p>Commissioner <i>Mary Mayhew</i></p> <p>Chief Operating Officer <i>Bill Boeschstein</i></p> <p>Deputy Commissioner, Programs <i>Ricker Hamilton</i></p> <p>Deputy Commissioner of Finance <i>Sam Adolphsen</i></p>	<ul style="list-style-type: none"> <li>✓ Oversight and Management of the Department of Health and Human Services</li> </ul>
Office of Aging and Disability Services (OADS)	<i>James Martin</i>	<ul style="list-style-type: none"> <li>✓ Adult protective services</li> <li>✓ Aging Services</li> <li>✓ Long-term care services and supports</li> <li>✓ Physical &amp; Developmental Disabilities Services</li> <li>✓ Brain Injury Services</li> </ul>
Maine Center for Disease Control and Prevention (CDC)	<i>Dr. Sheila Pinette</i>	<ul style="list-style-type: none"> <li>✓ Woman, Infants and Children (WIC) food and nutrition program</li> <li>✓ Infectious disease prevention</li> <li>✓ Immunizations</li> <li>✓ Health safety inspections</li> </ul>
Office of Child and Family Services (OCFS)	<i>Therese Cahill-Low</i>	<ul style="list-style-type: none"> <li>✓ Early childhood services</li> <li>✓ Child safety and well-being</li> <li>✓ Children's behavioral health services</li> <li>✓ Community partnerships</li> </ul>
Dorothea Dix Psychiatric Center (DDPC)	<i>Sharon Sprague</i>	<ul style="list-style-type: none"> <li>✓ State psychiatric hospital – located in Bangor</li> </ul>
Office for Family Independence (OFI)	<i>Bethany Hamm</i>	<ul style="list-style-type: none"> <li>✓ Temporary Assistance for Needy Families (TANF)</li> <li>✓ Supplemental Nutrition Assistance Program</li> <li>✓ Additional Support for People in Retraining and Employment (ASPIRE)</li> <li>✓ Child support enforcement</li> <li>✓ General Assistance</li> <li>✓ Disability Determination Services for SSA</li> <li>✓ MaineCare eligibility services</li> </ul>
Division of Licensing and Regulatory Services (DLRS)	<i>Ken Albert</i>	<ul style="list-style-type: none"> <li>✓ Licensing health facilities</li> <li>✓ Regulatory standards</li> </ul>
Office of MaineCare Services (OMS)	<i>Stefanie Nadeau</i>	<ul style="list-style-type: none"> <li>✓ MaineCare program administration</li> <li>✓ Maine Rx program</li> <li>✓ Drugs for the Elderly and Disabled</li> </ul>
Riverview Psychiatric Center (RPC)	<i>Jay Harper</i>	<ul style="list-style-type: none"> <li>✓ State psychiatric hospital – located in Augusta</li> </ul>
Office of Substance Abuse and Mental Health Services (SAMHS)	<i>Guy Cousins</i>	<ul style="list-style-type: none"> <li>✓ Mental health services</li> <li>✓ Substance abuse services – prevention, treatment and intervention</li> </ul>

# Strategic Plan 2013-2015

*The overriding theme for the Maine Department of Health and Human Services is to improve the health and independence of Maine people in an environment that measures progress, holds all areas of the health system accountable and stresses independent living.*

**DHHS promotes safe, healthy and independent lives for all, while ensuring efficient and effective use of resources for Maine’s most vulnerable residents.**

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# Department of Health and Human Services Strategic Plan 2013-2015

## MISSION

To promote safe, healthy, independent lives for all, while ensuring efficient and effective use of resources for Maine's most vulnerable.



# Introduction

October 2013

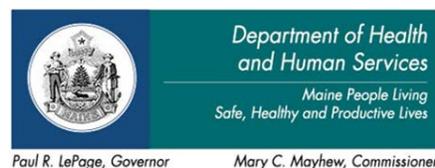
At the Maine Department of Health and Human Services, we have a vision of Maine people leading healthy, safe and productive lives in the most independent way possible. This vision has been in place since the Department of Health and Human Services was formed in 2004 with the merging of the Department of Behavioral Health and Developmental Services and the Department of Human Services. Now, we want to support that vision with a focused set of tangible, measurable goals.

Well-managed, effective organizations consistently take three key steps to achieving success. They establish strategic goals; establish meaningful measures; and report on how they are measuring up. The Department of Health and Human Services Strategic Plan for 2013-2015 will serve as the tool to carry out these critical steps to success.

These goals, over time, become rooted in the agency's culture and the measures and goals guide daily activities, needed changes and improvement. They hold each employee accountable and guide the prioritization of both the work that we do and the resources dedicated to producing successful outcomes in our communities and in the lives of the people we serve.

This document outlines six major goals, the areas of focus and key initiatives that support these goals and how we as a Department will measure progress and success. You will find key measures of performance on page 12. These measures include benchmark figures and the direction we are working to move. Additional performance measures are also being developed to ensure that clear and comprehensive data is driving improvement and continued innovation in our programs and services.

As we continue the work of establishing and finalizing performance measures, we will share them with employees, the public, stakeholders, community partners, legislators, clients and other interested parties. Each year, we will produce an annual report that tracks the results of our performance measures related to our strategic goals that can be found at [www.maine.gov/dhhs/stratplan](http://www.maine.gov/dhhs/stratplan).



## Improve individual and public health

We are focused on improving the health of Mainers by using services that research and experience have shown to be effective. We recognize the need to reduce the gaps in policy and practice in order to integrate physical and behavioral health.

### Strategies

- Increase the use of primary care in the Medicaid program
- Use prevention, intervention, treatment and recovery model for mental health and substance abuse services
- Integrate Long Term Services and Supports (LTSS) with primary and acute care
- Detect, monitor and respond to threats to the public's health, including infectious disease
- Provide quality medical and psychiatric care and treatment to people with severe mental illness
- Improve the prevention and treatment of Maine's chronic health concerns – cancer, stroke, obesity, diabetes, tobacco use, asthma, heart disease, mental health and substance abuse

### Key Initiatives

1. Implementation of Value Based Purchasing through Health Homes, Accountable Care Organizations and Payment Reform that rewards Primary Care use and Primary Prevention.
2. Targeted Care Management for high utilizers in the MaineCare program to ensure the use of primary care in place of Emergency Department use when clinically warranted and available.
3. Support Maine people in the nine public health districts with tools that encourage increased physical activity, healthy eating, a tobacco free lifestyle and promote overall wellness.
4. Work with school districts to implement a brain injury/concussion management plan.
5. Streamline the health risk assessment and referral process for families.
6. Supplemental Nutrition Assistance Program (SNAP) Education to assist individuals on SNAP in ways to eat healthy and budget for efficient use of SNAP benefit.

### Quick Facts

**Health Homes** are medical providers who will integrate and coordinate all primary, acute, behavioral health, and long-term services and supports to treat the whole person.

**Accountable Care Organizations** are groups of doctors, hospitals, and other health care providers, who come together voluntarily to give coordinated, high quality care to their patients.

## Goal #2

# Improve self-sufficiency of individuals and families

### *Our mission for Goal 2:*

*Help get Maine people back to work and supporting themselves and their families whenever possible.*

We want Maine people to be self-sufficient and able to support themselves and their families. The funds we are entrusted with will be used to promote independence and financial stability for Mainers, with a focus on employment first for those who are able to work.

## Strategies

- Identify barriers to employment and resources to improve work rates
- Improve and strengthen the job skills of people receiving Temporary Assistance for Needy Families (TANF)
- Work with Department of Labor (DOL), the Department of Education (DOE), the Department of Corrections (DOC), private businesses and other community partners, to ensure that resources are being used to increase employment among the individuals that DHHS serves
- Hold TANF participants accountable to meeting work and training requirements

## Key Initiatives

1. Development of Vocational Assessment Services and Work Site Development Services for Additional Support for People in Retraining and Employment (ASPIRE) participants.
2. Development of pilot program aimed at offering job search assistance to Able Bodied Adults without Dependents (ABAWDS) within the SNAP, or Food Supplement population.
3. Implementation of the Pathways to Employment model to assist TANF recipients in finding employment.
4. Initiatives, including increased use of adaptive technology, to provide increased access to employment opportunities for people with mental illness, the elderly and disabled adults.
5. Continue initiative to partner and align efforts across agencies in state government to create a more effective and efficient effort to train people for employment.

## Quick Facts

**Temporary Assistance for Needy Families (TANF)** is financial assistance to keep children in their homes while the family is temporarily unable to support themselves. While receiving assistance, parents or caretaker relatives work on an employment plan to become self-supporting.

**Supplemental Nutrition Assistance Program (SNAP)** is called the Food Supplement Program. This program helps low-income people buy the food they need for good health.

## Goal #3

# Improve safety of individuals and communities

### ***Our mission for Goal 3:***

***Improve protection of the most vulnerable Maine people from violence, abuse and neglect.***

We must do everything in our power to protect the most vulnerable Mainers among us. Domestic violence, adult abuse, neglect and financial exploitation, and child abuse and neglect are problems that we have committed to tackling head-on. Reducing the number of incidents of abuse and neglect, and making sure the neediest among us are protected is a key priority.

## Strategies

- Increase public education and awareness of the signs of family violence, including physical and sexual abuse of children and adults with disabilities and the elderly, and how to act to stop it
- Improve response times to reports of abuse
- Collaborate with Department of Licensing and Regulatory Services and the Department of Public Safety to support efforts to prevent abuse and neglect
- Ensure accountability of mandated reporters
- Coordinate crisis services across the DHHS spectrum and throughout Maine's hospitals

## Key Initiatives

1. Implementation of the Family Stabilization Program to provide assistance for parents and children at risk for abuse and neglect, with a focus on Maine's youngest and most vulnerable children.
2. Continued support of programs around the state to end domestic violence and sexual assaults and support for statewide hotline for domestic violence and sexual assault reports.
3. Protect the rights of aging and disabled adults through enhanced response to adult abuse, neglect and exploitation.
4. Address the behavioral health needs through more integrated assessments that identify mental health and substance abuse issues when determining individual and public safety.

## Quick Facts

**The Department of Licensing and Regulatory Services (DLRS)** at the Department of Health and Human Services oversees the licensing and regulation of long-term care facilities, like nursing homes.

**The Family Stabilization Program** is an initiative in the Office of Child and Family Services (OCFS) to address the tremendous need in the community by using proven prevention methods to help families avoid abuse and neglect. This program includes support for families, including foster families, like parenting education, support phone lines and peer-to-peer community supports.

## Improve school-aged children's ability to succeed

Evidence shows that a young child's brain develops most quickly from birth to age three. The young children we are responsible for are the future of our state, and we must ensure that they are receiving the care and support they need to develop strong learning skills at a young age. This will place Maine children in a position to succeed in the classroom and into the future.

### Strategies

- Continue to support an environment that rewards child care providers for achieving higher levels of training through the Quality for ME program
- Partnership with the Department of Education through the State Agencies Interdepartmental Early Learning Team (SAIEL)
- Ensure child wellness by active involvement with families who are a part of the child welfare system
- Prioritize delivery of medically-necessary services to pre-school aged children

### Key Initiatives

1. Renewed focus on supports for foster families and children, including the use of prevention and early intervention to promote mental health wellness.
2. Ensure continuing excellence in early childhood care and education through the Quality for ME program.
3. Integrated work to avoid disruptions in education for youth through Keeping Maine's Children Connected program.
4. Develop an early learning Comprehensive Assessment Framework (CAF) that includes a formative assessment protocol to inform kindergarten teachers of the developmental status of entering children.

### Quick Facts

**Quality for ME** is a four-step program designed to increase awareness of the basic standards of early care and education, to recognize and support providers who are providing care above and beyond those standards, and to educate the community of the benefits of higher quality care.

**The State Agencies Interdepartmental Early Learning Team (SAIEL)** is a unified system that shares a common definition of quality and allow for greater sharing of resources – including funding, professional development and best practices – so children across the state with high needs will get the skills they need to be successful in kindergarten.

# Ensure efficient use of resources to achieve quality outcomes

Maine is facing challenging economic times. To ensure that those who are truly in need are provided for and that our safety net is secure, we must safeguard our limited resources. We will prioritize services, manage resources effectively and hold all members of the delivery system accountable to make sure resources are used in the most efficient manner to provide high-quality assistance for Mainers in need.

### Our mission for Goal 5:

*Ensure that management practices and use of public resources are transparent and produce quality outcomes for Maine.*

## Strategies

- Establish measureable outcomes for all DHHS goals
- Establish measureable outcomes for all contracted providers – share risk and success
- Strengthen front-end fraud detection throughout all DHHS programs
- Improve the ability to use data analysis to anticipate areas of concern
- Provide transparent access to financial data and performance measurements

## Key Initiatives

1. Continued support of the toll-free fraud hotline at 1-866-348-1129 and the Fraud Reporting Form at [www.maine.gov/dhhs/fraud](http://www.maine.gov/dhhs/fraud) where the public can assist DHHS in stopping fraud.
2. Medicaid reform projects including partnerships with Health Information Technology providers, to measure and analyze key health provider data.
3. Performance based measurements included in provider contracts.
4. Increased number of fraud investigators with a primary focus on fraud prevention and recovery.
5. Modernization of eligibility services to increase efficiency and program integrity.

## Quick Facts

*Performance-based contracting is part of a Department wide effort to move to **Value-Based purchasing (VBP)** to focus on outcomes and accountability. The goal of performance-based contracting and value-based purchasing is to reward high-quality and efficient services, and quality outcomes instead of simply paying more money for more services.*

*The Performance Measures section (page 12) shows that the Department now includes performance measures in 67% of all contracts with providers who deliver client services. Our goal is to have performance measures in 100% of these contracts.*

*This is an exciting new direction for the Department, and a critical change that will help safeguard each and every tax dollar and ensure quality outcomes for all services provided through DHHS.*

## Increase quality and access to Long-Term Care Services and Supports

Research shows that Maine has the highest average age in the nation and the elder wave has yet to crest. We also have a growing rate of Autism in the state. It's critical that we review our current system of care and adjust where necessary to ensure that appropriate services are delivered to those who need long-term support. We must focus on improving access to these supports while increasing the level of efficiency and quality.

### Strategies

- Improve the assessment process including an independent single assessing agency
- Improve effectiveness of care transitions between facility and community
- Improve access to home and community based services, particularly for those individuals on waiting lists for these services
- Formalize quality measures and promote continuous quality improvement

### Key Initiatives

1. Commitment to increase the use of non-institutional home and community based services –provided through the Balancing Incentive Payment Program (BIPP).
2. Implementation of the core standardized assessment instrument to efficiently determine eligibility for long-term care and services.
3. Conflict-free case management services will monitor ongoing care to ensure quality and efficiency of services provided.
4. Continue to utilize Money Follows the Person, Maine's "Homeward Bound" program to transition individuals from facilities into home-based setting.
5. Increased access, including increased use of adaptive technology, to the least restrictive environment that promotes the highest level of independent living.

### Quick Facts

**Home and Community Based Services (HCBS)** provide opportunities for Medicaid beneficiaries to receive services in their own home or community. These programs serve a variety of targeted populations groups, such as people with mental illnesses, intellectual disabilities, and/or physical disabilities. The Department is undergoing several initiatives to make sure we deliver services in a Home and Community based setting where possible.

*There are thousands of Maine individuals on waitlists for these services. The Department is committed to reducing the number of individuals on the waitlist, and providing these services.*

## Performance Measures

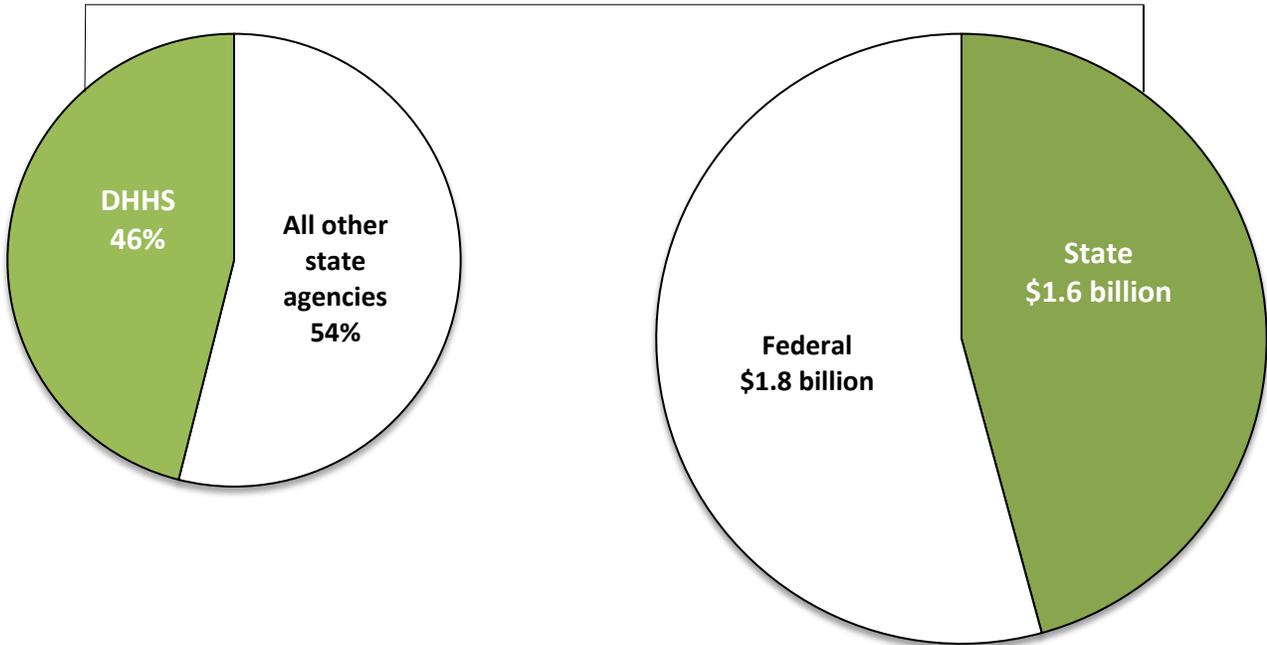
The Department of Health and Human Services is dedicated to measuring the performance of the Department and holding all areas of our work accountable. Below are several key measures the Department tracks, including the benchmark (most recent data) and the targets DHHS aims to achieve by 2015 (goal 4 target to be achieved by 2016). Additional measures are in development and will be published, along with updates to the data below, in an annual report available to the public.

Goal	Performance Measure	Benchmark	Target
<b>Goal #1</b> Increase individual and public health	Increase the percentage of Medicaid recipients who are members of a Health Home	<b>16.3%</b>	<b>30%</b>
	Decrease the percentage of Maine adults who are obese	<b>27.8%</b>	<b>25.4%</b>
	Decrease the percentage of Maine adults with diabetes	<b>9.6%</b>	<b>8.5%</b>
<b>Goal #2</b> Improve self-sufficiency of individuals and families	Increase the percentage of TANF participating adults who are placed in employment over a 12 month period	<b>39.1%</b>	<b>50%</b>
	Increase the percentage of adults with Severe Mental Illness employed in competitive jobs	<b>6.0%</b>	<b>10%</b>
<b>Goal #3</b> Improve safety of individuals and communities	Increase the percentage of instances where contact is made within 72 hours of intake receiving an allegation of neglect or abuse	<b>83.5%</b>	<b>90%</b>
	Increase the percentage of children in state custody achieving permanency (reunification or adoption) before “aging out” at age 18	<b>85%</b>	<b>99%</b>
<b>Goal #4</b> Improve school-aged children’s ability to succeed	Increase the number of MaineCare children who receive a general developmental screening by age 1, age 2, and age 3	<b>age 1 – 2.1%</b> <b>age 2 – 3.4%</b> <b>age 3 – 0.5%</b>	<b>1 – 11.1%</b> <b>2 – 12.4%</b> <b>3 – 9.5%</b>
<b>Goal #5</b> Ensure efficient use of resources to achieve quality outcomes	Increase the percentage of client service contracts with established performance metrics	<b>67.8%</b>	<b>100%</b>
<b>Goal #6</b> Increase access and quality for long-term care	Decrease the number of individuals on waitlists for home and community based services	<b>3,100</b>	<b>0</b>
	Increase the percentage of long term care services funding spent on non-institutional home and community based services	<b>49.6%</b>	<b>59.5%</b>

# DHHS Overview – Budget Statistics

## Fiscal Year 2013 Budget (All Funds)

DHHS total budget FY 2013 - \$3.4 Billion



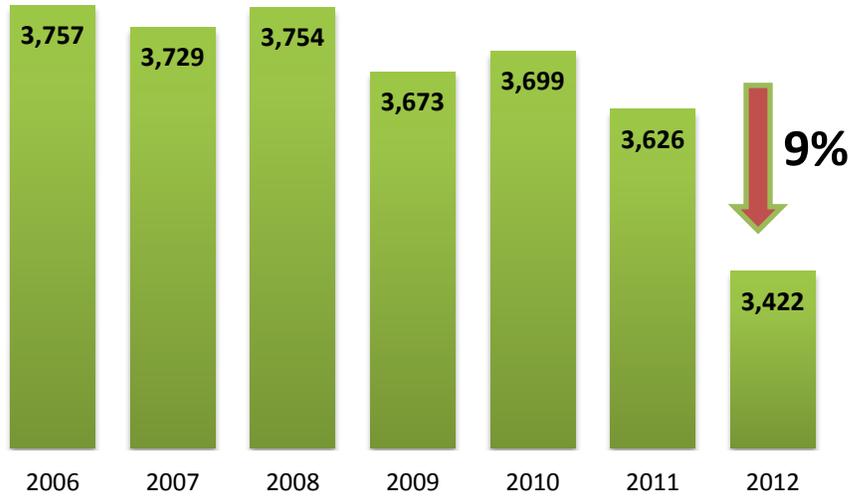
## Fiscal Year 2013 Budget (by Department)

Office	Total Dollars	State Funds or Earned Funds*	Federal Funds
Aging and Disability Services	\$56,479,192	\$46,171,693	\$10,307,499
Child and Family Services	\$163,356,581	\$108,170,640	\$55,185,941
Maine Center for Disease Control and Prevention	\$109,384,077	\$45,746,869	\$63,637,208
Dorothea Dix & Riverview Psychiatric Centers	\$32,686,517	\$32,686,517	\$0
Division of Licensing and Regulatory Services	\$8,411,438	\$7,985,332	\$426,106
Family Independence	\$255,129,216	\$181,351,553	\$73,777,663
Multicultural Affairs	\$1,205,349	\$60,329	\$1,145,020
Substance Abuse and Mental Health	\$56,710,900	\$41,887,478	\$14,823,422
Administrative Services	\$39,441,246	\$38,786,684	\$645,562
MaineCare	\$2,659,056,881	\$1,047,021,772	\$1,613,761,496
<b>Total</b>	<b>\$3,383,137,130</b>	<b>\$1,549,868,867</b>	<b>\$1,833,718,917</b>

\*includes Other Special Revenue (fees, dedicated revenue, etc...)

# DHHS Overview – Staff Statistics

## DHHS Total Staff by Year



There has been a 9% reduction in staff at DHHS since 2008.

**In the same time period, DHHS programs have grown by 11%**

## DHHS Staff by Department – Percentage of Total DHHS Staff

