**RIDER A**

**SPECIFICATIONS OF WORK TO BE PERFORMED**

**I. AGREEMENT FUNDING SUMMARY**

Funds are provided under this Agreement for the provision of substance abuse treatment services. The level of funding and service descriptions are detailed in Section III Service Specifications and Performance Guidelines and summarized in Budget Form 6 Summary of Services Purchased.

|  |  |  |
| --- | --- | --- |
| **A. State General Fund** | **$** |  |
| Use of funds shall be in accordance with requirements detailed in the Maine Uniform Accounting and Auditing Practices for Community Agencies (CMR 10-144, Chapter 30); and with the terms of this Agreement.**B. Dedicated/Special Revenue** **$** |
|  |  |  |  |
| **C. Federal Funds** | **$** |  |
| Use of funds shall be in accordance with restrictions contained in the appropriate CFDA; with Federal OMB Circulars A-21, A-87, A-102, A-110, A-122, and A-133, as applicable; with CMR 10-144, Chapter 30, as applicable; with CMR 10-144, Chapter 30, as applicable; and with the terms of this Agreement. |
|  |  |  |  |
| [ ]  | CFDA#93.959 Block Grants for Prevention & Treatment of Substance Abuse 2B08TI010025-10. Substance Abuse Treatment and Prevention Block Grant Department of Health and Human Services / Substance Abuse and Mental Health Services Administration  | **$** |
|  |  |
|  |  |  |
| [ ]  | CFDA# & Description (CFDA Title, award name, award no., federal awarding agency): | **$** |
|  |  |
|  |  |  |

**II. GENERAL REQUIREMENTS**

**Reporting**

The Provider shall submit quarterly financial and performance reports in accordance with the specifications of the Department, according to the following schedule:

 A. Quarterly financial reports are accumulative in nature, reflecting income and expenses for the entire contract period to date, and are due October 30th, and January 30th, April 30th, July 30th, ,; with the exception that the final quarterly financial report shall be due within 60 days of contract termination. This report should be sent to the Agreement Administrator.

\_X\_\_ B. A Incentive Financial Close-out Report. is due within 60 days of contract termination in a format required by SAMHS. This report should be sent to the Agreement Administrator.

\_\_\_ C. *Quarterly Narrative Reports* documenting progress relating to program performance during the applicable quarter are due October 30th, January 30th , April 30th and. July 30th,

\_X\_\_ D. Final Narrative Report, documenting programs performance for the entire contract period, is due within 60 days of contract termination in a format required by SAMHS.

\_X\_\_ E. Office of Substance Abuse and Mental Health Services Data Systems (formerly known as OSADS) Treatment Data System (TDS) Forms. All contracted substance abuse treatment service providers must report using electronic submittal methods that are compatible with the Office of Substance Abuse and Mental Health Services. TDS data entry is accessible via the Internet. TDS data must be submitted to the Office of Substance Abuse and Mental Health Services by the 15th of each month for any client admitted or discharged in the prior month. TDS Forms must be completed by a clinical staff person as part of the intake process.

REPORTING NOTE: Data for monitoring performance shall be taken directly from Office of Substance Abuse and Mental Health Services Data Systems (formerly known as OSADS) Treatment Data System. Providers must complete and submit TDS Admissions and Discharge data according to instructions.

Performance-based contracting (PBC) incentive reports will be based on the data submitted within the specified time parameters. Late data may not be reflected on PBC reports.

\_X**\_\_**F. Monthly Outpatient Service Delivery Reports by the 15th of each month for all services provided the previous month.

 \_\_X\_\_G. Waiting List is due by the 15th of each month for the previous month. Programs with multiple sites must report by site.

 X H. Consumer Satisfaction Survey

 \_\_\_ I. Corrective Action Plans and Updates are due:

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 addressing the following points:

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 The Provider understands that the reports are due within the timeframes established and that the Department will not make subsequent payment installments under this Agreement until such reports are received, reviewed and accepted.

 The Provider further agrees to submit such other data and reports as may be requested by the Agreement Administrator. The Provider shall submit all data and reports to the Department in accordance with Section 6 of Rider B of this Agreement.

**III. SERVICE SPECIFICATIONS AND PERFORMANCE GUIDELINES**

**A. DESCRIPTION OF SERVICES**

1. Give a description of all substance abuse treatment services providedby the agency and by this contract. (i.e.: overall continuum of care, including non-SAMHS services, IOP-days and hours, outpatient - # of staff (FTE’s) and program capacity.)

2. **Definition of Specific Treatment Component**

 Specific description of substance abuse services provided under this agreement (service definitions):

a. **INTENSIVE OUTPATIENT** (measured by 1 day)

\_\_ Intensive outpatient treatment is a component that provides an intensive and structured program of substance abuse evaluation, diagnosis, and treatment services in a setting that does not include an overnight stay.

 I. This component shall include both community-based nonresidential rehabilitation and partial capitalization programs. It includes programs generally described as "day treatment" and "intensive outpatient services."

 II. This component shall consist of a structured sequence of multi-hour clinical and educational sessions, scheduled for three or more days per week with a minimum of nine hours per week.

b. **NON-INTENSIVE OUTPATIENT** (measured by 1/4 hour unit)

Outpatient is a component that provides assessment, diagnosis, treatment, and after-care services in a non-residential setting. These services may also be provided to the families of substance abusers and other concerned persons, whether or not the abuser is receiving treatment. Components of outpatient services include:

\_\_ Individual Counseling: A unit is defined as ¼-staff hour of contact between a therapist and a client involving counseling/treatment planning, guidance/support, problem solving assistance, providing relief/assistance in coping, promoting a positive re-orientation toward sobriety.

\_\_ Family Counseling: A unit is defined as ¼-staff hour of contact between a therapist or therapists and a family involving any of the activities described under individual counseling, (above).

\_\_ Group Counseling: A unit is defined ¼-client hour of contact between a therapist or therapists and a group of clients.

\_\_ Evaluation: All evaluation services to be reimbursed under this contract must have the prior written approval of the Office of Substance Abuse and Mental Health Services (SAMHS). Evaluation services may only be delivered to target populations as defined by SAMHS.

**B. PERFORMANCE GUIDELINES**

 The Office of Substance Abuse and Mental Health Services, in consultation with Provider representatives, has established standards and performance requirements relative to the quantity and quality of client service and care, and to administrative and fiscal management. The standards, as described below, represent the performance goals for client services. Administrative and fiscal management standards and requirements are listed in Rider B, C, D and E. Contracts will be on an expense basis. Allocation of resources for the contract year may be affected by agency performance in the previous year.

 **REPORTING NOTE:** Most of the data for performance monitoring is taken directly from the Treatment Data System (TDS). Providers must complete and submit TDS Admission and Discharge data according to policy. For ambulatory services, Outpatient Service Delivery Forms (OSDF) must also be submitted.

 Performance-based contracting (PBC) reports are based on the data submitted within the specified time parameters. Late entry of data and/or form submittal may result in lower than expected results on the PBC reports.

**SERVICE SETTING: OUTPATIENT**

 **OUTPATIENT CARE ASAM LEVEL I**

**REQUIRED EFFECTIVENESS INDICATORS AND MINIMAL STANDARDS**

**INDICATOR**

 Units of Service to be delivered.

**STANDARD**

 Total Program and SAMHS Units are based on a 90% minimal annual delivery of units of service.

 Agencies that exceed 100% of contracted units of service per quarter will receive an incentive payment of 5% of the quarterly payment. Agencies that do not meet 90% of the contracted service units for the quarter will receive a cut in reimbursement of 5% for that quarter.

Program performance must be at or above the minimal level on the following performance indicators (primary clients only), monitored on a quarterly basis:

**INDICATOR MINIMAL STANDARD**

Access to treatment: median time to assessment 5 calendar days

 Agencies that have median time of more than five days will have their payment reduced by 1% Agencies that have a median time of 2 days or less will receive an incentive payment of 1%.

Access to treatment: median time to treatment 14 calendar days

 Agencies that have a median time between assessment and treatment of greater than 14 calendar days will have their payment reduced by 1%. Agencies that have median time between assessment and treatment of less than seven days will receive an incentive payment of 1%.

Treatment Retention: stayed for four sessions minimum standard 50%

 Agencies that have less than 50% of their clients stay for four or more sessions will have their payment reduced by 1%. Agencies that have greater than 65% of their clients stay for four sessions will receive an incentive payment of 1%.

Treatment Retention: stayed for 90 days minimum standard 30%

 Agencies that have less than 30% of clients retained for 90 days will have their payment reduced by 1%. Agencies that exceed 40% retention of 90 days or more will receive an incentive payment of 1%.

**TRACKING ONLY**

The performance indicators below, contained in previous agreements, shall now be used for SAMHS tracking only through the Office of Substance Abuse and Mental Health Services Data Systems (formerly known as OSADS) Treatment Data System.

Abstinence/drug free 30 days prior to discharge

Reduction of use of primary substance abuse problem

Maintaining employment

Employability

Not arrested for any offense

Not arrested for an OUI offense during treatment

Participation in self help during treatment

Completed Treatment

 Referral to Mental Health Services

Average Time in Treatment for Completed clients (Weeks)

**SERVICE SETTING: ADOLESCENT OUTPATIENT**

 **OUTPATIENT CARE ASAM LEVEL I**

**REQUIRED EFFECTIVENESS INDICATORS AND MINIMAL STANDARDS**

**INDICATOR**

 Units of service to be delivered.

**STANDARD**

 Total Program and SAMHS Units are based on a 90% minimal annual delivery standard.

 Agencies that exceed 100% of contracted units of service per quarter will receive an incentive payment of 5% of the quarterly payment. Agencies that do not meet 90% of the contracted service units for the quarter will receive a cut in reimbursement of 5% for that quarter.

Program performance must be at or above the minimal level on the following performance indicators, monitored on a quarterly basis (primary clients only):

**INDICATOR MINIMAL STANDARD**

Access to treatment: median time to assessment 5 calendar days

 Agencies that have median time of more than five days will have their payment reduced by 1%. Agencies that have a median time of 2 days or less will receive an incentive payment of 1%.

Access to treatment: median time to treatment 14 calendar days

 Agencies that have a median time between assessment and treatment of greater than 14 calendar days will have their payment reduced by 1%. Agencies that have median time between assessment and treatment of less than seven days will receive an incentive payment of 1%.

Treatment Retention: stayed for four sessions minimum standard 50%

 Agencies that have less than 50% of their clients stay for four or more sessions will have their payment reduced by 1%. Agencies that have greater than 65% of their clients stay for four sessions will receive an incentive payment of 1%.

Treatment Retention: stayed for 90 days minimum standard 30%

 Agencies that have less than 30% of clients retained for 90 days will have their payment reduced by 1%. Agencies that exceed 40% retention of 90 days or more will receive an incentive payment of 1%.

**TRACKING ONLY**

The performance indicators below, contained in previous agreements, shall now be used for SAMHS tracking only through the Office of Substance Abuse and Mental Health Services Data Systems (formerly known as OSADS), Treatment Data System.

Abstinence/drug free 30 days prior to discharge

Reduction of use of primary substance abuse problem

Not arrested for any offense

Not arrested for an OUI offense during treatment

Participation in self help during treatment

Completed Treatment

 Referral to Mental Health Services

Average Time in Treatment for Completed clients (Weeks)

**SERVICE SETTING: INTENSIVE OUTPATIENT**

 **INTENSIVE OUTPATIENT PROGRAM ASAM LEVEL II.1**

**REQUIRED EFFECTIVENESS INDICATORS AND MINIMAL STANDARDS**

**INDICATOR**

 Number of units of service to be delivered.

**STANDARD**

 Total Program and SAMHS Units are based on a 90% minimal annual delivery standard of the above units of service.

 Agencies that exceed 100% of contracted units of service per quarter will receive an incentive payment of 5% of the quarterly payment. Agencies that do not meet 90% of the contracted service units for the quarter will receive a cut in reimbursement of 5% for that quarter.

Program performance must be at or above the minimal level on the following performance indicators, monitored on a quarterly basis:

**INDICATOR MINIMAL STANDARD**

Access to treatment: median time to assessment 4 calendar days

 Agencies that have median time of more than four days will have their payment reduced by 1%. Agencies that have a median time of two days or less will receive an incentive payment of 1%.

Access to treatment: median time to treatment 7 calendar days

 Agencies that have a median time between assessment and treatment of greater than seven calendar days will have their payment reduced by 1%. Agencies that have median time between assessment and treatment of less than three days will receive an incentive payment of 1%.

Treatment Retention: stayed for four sessions minimum standard 85%

 Agencies that have less than 85% of their clients stay for four or more sessions will have their payment reduced by 1%. Agencies that have greater than 90% of their clients stay for four sessions will receive an incentive payment of 1%.

Completed Treatment: minimum standard 50%

 Agencies that have less than 50% of clients complete treatment will have their payment reduced by 1%. Agencies that have more than 60% of clients complete treatment will receive an incentive payment of 1%.

**TRACKING ONLY**

The performance indicators below, contained in previous agreements, shall now be used for SAMHS tracking only through the Office of Substance Abuse and Mental Health Services Data Systems (formerly known as OSADS), Treatment Data System

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Abstinence/drug free 30 days prior to discharge

Reduction of use of primary substance abuse problem

Maintaining employment

Employability

Not arrested for any offense

Not arrested for an OUI offense during treatment

Participation in self help during treatment

Completed Treatment

Referral in the Continuum of Care

 Referral to Mental Health Services

Average time in treatment for completed clients (weeks)

**SERVICE SETTING: ADOLESCENT INTENSIVE OUTPATIENT**

 **INTENSIVE OUTPATIENT PROGRAM ASAM LEVEL II.1**

**REQUIRED EFFECTIVENESS INDICATORS AND MINIMAL STANDARDS**

**INDICATOR**

 Units of service to be delivered.

**STANDARD**

 Total Program and SAMHS Units are based on a 90% minimal annual delivery standard.

 Agencies that exceed 100% of contracted units of service per quarter will receive an incentive payment of 5% of the quarterly payment. Agencies that do not meet 90% of the contracted service units for the quarter will receive a cut in reimbursement of 5% for that quarter.

Program performance must be at or above the minimal level on the following performance indicators (primary clients only), monitored on a quarterly basis:

**INDICATOR MINIMAL STANDARD**

Access to treatment: median time to assessment 4 calendar days

 Agencies that have median time of more than four days will have their payment reduced by 1%. Agencies that have a median time of two days or less will receive an incentive payment of 1%.

Access to treatment: median time to treatment 7 calendar days

 Agencies that have a median time between assessment and treatment of greater than seven calendar days will have their payment reduced by 1%. Agencies that have median time between assessment and treatment of less than three days will receive an incentive payment of 1%.

Treatment Retention: stayed for four sessions minimum standard 80%

 Agencies that have less than 80% of their clients stay for four or more sessions will have their payment reduced by 1%. Agencies that have greater than 85% of their clients stay for four sessions will receive an incentive payment of 1%.

Completed Treatment: minimum standard 50%

 Agencies that have less than 50% of clients complete treatment will have their payment reduced by 1%. Agencies that have more than 60% of clients complete treatment will receive an incentive payment of 1%.

**TRACKING ONLY**

The performance indicators below, contained in previous agreements, shall now be used for SAMHS tracking only through the Office of Substance Abuse and Mental Health Services Data Systems (formerly known as OSADS), Treatment Data System.

Abstinence/drug free 30 days prior to discharge

Reduction of use of primary substance abuse problem

Not arrested for any offense

Not arrested for an OUI offense during treatment

Participation in self help during treatment

Completed Treatment

Referral in the Continuum of Care

 Referral to Mental Health Services

Average time in treatment for completed clients (weeks)