

CMHS/SAMHSA Data Infrastructure Grants/ Uniform Reporting System Regional Conference Call Report

December 10-11, 2009

Group 1 – Northeast, December 11, 2009 at 11AM

Group 2 – Midwest/Southeast, December 10, 2009 at 2PM

Group 3 – Western/Pacific/Territories, December 10, 2009 at 4PM

Meeting Facilitator: Olinda Gonzalez, Ph.D (CMHS)

Meeting Summary Prepared by State Data Infrastructure Coordinating Center (SDICC) at NRI

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Note: No calls were held during October 2009

Agenda:

- 1. DIG Grant Administrative Issues—Roger George, CMHS Grants Management**
- 2. 2009 Reporting of URS Tables**
- 3. Update on the Client Level Data Pilot on mental health NOMS**
- 4. New Veteran’s MH Workgroup**
- 5. Discussion of the use of Federal ARRA Stimulus Health IT Funds by MH Systems**
- 6. DIG Supplement Update**
- 7. 2010 DIG Annual Meeting**
- 8. Next Month’s Regional Call Topics**

- 1. Roger George (CMHS) discussed DIG Grant administrative issues including the required grant cost reports and carryover requests:**

Mr. George briefly discussed the required financial reports due to SAMHSA Grants Management for the state DIG Grants and then answered questions from states about these requirements. The Financial Status Report is due by December 31, 2009.

DIG Grant carryover requests are due by February 1, 2009. States asked if they could request a carry-over of year 1 funds...the answer was “Yes” states can apply to carry over Year 1 funds.

State Submission of the 2009 URS data meets the requirement for states to submit an Annual Progress Report on their DIG Grant.

To accompany the call, Mr. George sent a set of documents related to the DIG administrative reports out via the DIG listserv. States with any questions about the funding of their DIG grant are encouraged to contact Mr. George at: (240)276-1418 or by e-mail at roger.george@samhsa.hhs.gov . Please “cc” Olinda Gonzalez of CMHS (olinda.gonzalez@samhsa.hhs.gov) on any questions to Mr. George.

- 2. December 1, 2009 URS Reporting:** Ted Lutterman and Azeb Berhane from the NRI updated states on the December submission of URS data. All 50 states, the District of Columbia and five territories have submitted URS data and all data has been imported into the URS database. Edit reports are being

generated and states will be receiving follow-up questions within the next few days. States are being requested to respond with any data corrections by January 4, 2010.

Several states commented that they appreciated the timely response in hearing about any data issues and the format of the new edit reports being sent to them. States with any questions about their data submissions are encouraged to contact Azeb Berhane at azeb.berhane@nri-inc.org or by phone at 703-682-7549.

- 3. Client Level Data Pilot Project:** Ted Lutterman updated the progress of the CLDP on Mental health NOMS. The project will be completed by March 2010. A draft Final report is due to CMHS in December 2009. All states have completed two years of data submission: (T1 data submission (12 months of data for all persons served) and T2 data (the next 12 months of data).

On December 2, the Project's Advisory Committee met. Representatives from each of the 9 pilot states also participated in the meeting. The Advisory Committee reviewed the work of the pilot project and discussed recommendations on future steps for SAMHSA if it decides to move forward with Client Level data.

The focus of this project is on the "process study" of the pilot. Were states able to report complete CLD? Where are there gaps and differences in data? What will it take to help states report complete CLD for all persons served? Pilot states documented the work and expenses involved in completing their T1 and T2 data files, as well as what further work and expenses would be required to standardize state and provider information systems to report standardized client level data in the future.

- 4. DIG Returning Veteran's Mental Health Workgroup:** CMHS has asked that a new workgroup be created to explore adding to the DIG/URS effort information states have about Returning Veteran's. CMHS has asked this workgroup review information available and what could be reported and that could ultimately lead to recommending new performance measures related to the mental health services for returning Veterans.

An initial call of the Veteran's Workgroup was held on December 4, 2009. Twelve states participated in the first call. During the call states discussed the extent to which their state mental health information systems include information about Veterans, Active Duty Military, and the families of Veterans and Active Duty Military. While many SMHAs have a data field that identifies if a mental health consumer was a Veteran, very few SMHAs can tell if the Veteran served in the recent Iraq or Afghanistan conflicts. The states then discussed a wide variety of initiatives the states have ongoing to provide screening, referral, training, and other services and supports to returning Veterans and their families. The workgroup discussed focusing its work on identifying a variety of service initiatives and programs that SMHAs may have to meet the needs of returning veterans. The workgroup thought that enabling states to report on various types of programs they have established could provide SAMHSA with information about their work to help meet this need, at a much lower cost and burden than having states and providers modify reporting systems to identify and track returning veterans in their information systems.

States also discussed the need to better receive information about veterans and active duty military who are returning to their states. Several SMHAs would like to be able to receive information about how many veterans are returning to their state, and would like to know when and where they are returning in order to help facilitate services.

The workgroup will meet again in January and hopes to hear from more states about the types of programs and initiatives they have to help meet the mental health needs of returning veterans. The workgroup will then determine if there are a common set of programs and initiatives that could become the basis for compiling information from SMHAs about their activities for Veterans.

5. **SMHA Involvement in Health Information Exchanges:** Ted Lutterman of the NRI discussed the new State Grants for Planning Health Information Exchanges (HIEs) that are part of the federal ARRA stimulus bill. The State HIE grant applications were due to HHS in October 2009 and funding of states is beginning this winter. These HIEs will be critical to sharing Electronic Health Record (EHR) data from health providers. During previous DIG calls, a concern had been raised by some states that the SMHAs were not involved in their state's HIE grant and that mental health providers may not be included in the plans for HIE reporting.

The NRI conducted a brief survey of SMHAs determine which SMHAs are part of their state's HIE grants and what role the SMHA is playing in this work. About half the states have responded and the results show a mixed level of SMHA response. Less than half of responding SMHAs were involved in the preparation of their states HIE Grant Application. Slightly over half the SMHAs anticipate having a role in their state's HIE grant once it is funded. However, only one (1) SMHA expects to receive any staff or funds from the HIE grant.

The Regional Calls discussed using the results of this survey to identify SMHAs that are successfully working with their HIE grants to assure the inclusion of mental health data in the states EHR exchanges. These states could be asked to share their experiences with other states during future DIG Regional Calls.

6. **DIG Supplements -- the PHQ-8 module implementation (depression) for the BRFSS:** Olinda Gonzalez reported that eleven states have been funded by the CDC to implement the PHQ-8 Depression and Anxiety Module in the BRFSS in 2010 (AZ, GA, HI, IN, LA, ME, MI, NJ, NV, SC, and WI.) Additionally DIG Supplements funded for FY '09' are to develop in-depth data analyses from findings of the 2010 BRFSS and the mental health module. These states are IN, WI, MS, HI, DC, SC, NJ, and ME. Three of these states are providing state funds to implement the PH-Q 8 module in 2010.
7. **Annual DIG Meeting and Annual National Conference on the Mental Health Block Grant:** Dr. Gonzalez discussed the planning for the next Annual meeting. CMHS is planning to integrate the DIG Annual Meeting together with the Annual Mental Health Block Grant Conference in June (6/22-6/25, 2010) in Washington, DC. By combining the two meetings, CMHS will reduce the burden of out-of-state travel and costs for the meetings. The plan is for the DIG grant issues to be discussed during a "DIG Business Session" and have a number of DIG/URS data related sessions throughout the conference.
8. **Next Monthly Regional Calls:**
The next set of regional DIG calls will be held during January 2009 (date to be determined).