

## PROGRAM DESCRIPTION

Department: Mental Health

HB Section(s): 10.100

Program Name: ADA Administration

Program is found in the following core budget(s): ADA Administration

**1a. What strategic priority does this program address?**

We will support recovery, independence, and self-sufficiency of Missourians with mental illness, substance use disorders, and developmental disabilities.

**1b. What does this program do?**

The Division of Behavioral Health (DBH) has the responsibility of ensuring prevention, treatment, and recovery services are accessible to persons with substance use disorders, those at risk of substance misuse, and compulsive gamblers. DBH's administrative responsibilities include, but are not limited to: funding treatment services, providing technical assistance and training, standard setting to ensure quality services, research, public information dissemination, review and oversight of the Division's budget, and program planning and policy development for prevention, treatment, and recovery services.

Division administrative responsibilities include:

- Development and implementation of administrative standards and operating policies for all program areas. Standards and policies include guidelines for quality of care and quality improvement processes as well as client safety and clinical appropriateness.
- Development of curricula and implementation of training modules for substance use disorder practitioners to ensure current evidence-based practices are implemented in Division programming.
- Monitoring, evaluating and providing technical assistance to its provider network to ensure services maintain the highest levels of quality programming.
- Maintaining research and literature for dissemination to its provider network and the general public on treatment and prevention practices.
- Cooperation and collaboration with other state and federal agencies to ensure coordination of evidence-based prevention programming.
- Applying standardized management, fiscal, and personnel procedures and practices. Administrative oversight is provided for the budget, provider allocations, fiscal notes, and research and evaluation support. DBH applies appropriate financial procedures and provides the necessary data to support federal requirements necessary for maintaining funding.

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**2a. Provide an activity measure(s) for the program.**

	Consumers Served		
	FY 2018	FY 2019	FY 2020
	Actual	Actual	Actual
Treatment	40,215	40,420	38,183
Recovery Supports	3,235	2,818	4,181
SATOP	22,374	22,038	19,858
Gambling	110	118	90
<b>Unduplicated Total</b>	<b>63,755</b>	<b>63,258</b>	<b>59,750</b>

**Notes:**

- 1) Consumers who receive more than one category of service are counted once for each category.
- 2) SATOP includes individuals receiving only an assessment. Decrease in consumers is a result of decreased arrests for impaired driving offenses.

**2b. Provide a measure(s) of the program's quality.**

N/A

**2c. Provide a measure(s) of the program's impact.**

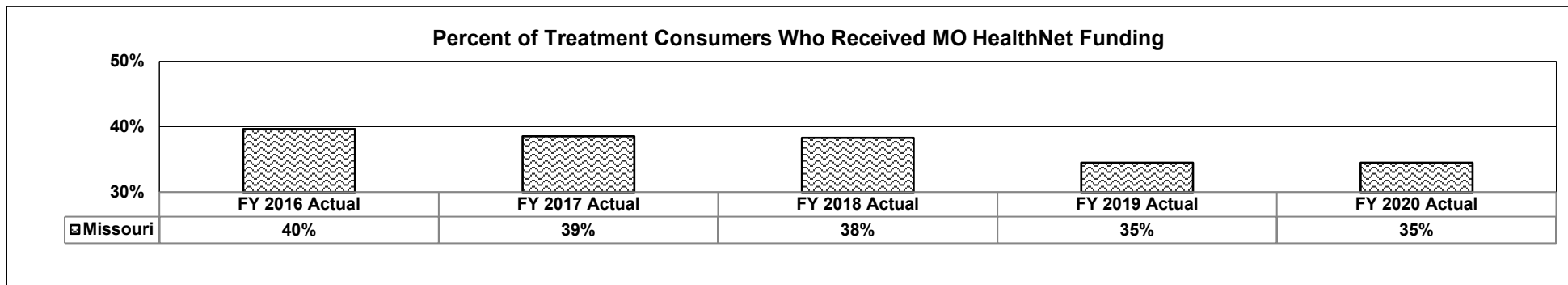
Administrative Staff to Program Funding			
	FY 2018 Actual	FY 2019 Actual	FY 2020 Actual
Total Revenue (in Millions)	\$153.0	\$156.0	\$158.3
Amount Spent in Administration (in Millions)	\$1.8	\$2.5	\$2.5
% of Administration to Total ADA Programs	1.15%	1.60%	1.58%

**Note:** Of the \$203 million appropriated to DBH for substance use disorders for FY 2021, only 1.73% will be spent on administrative costs leaving 98.27% for prevention, treatment, and recovery services.

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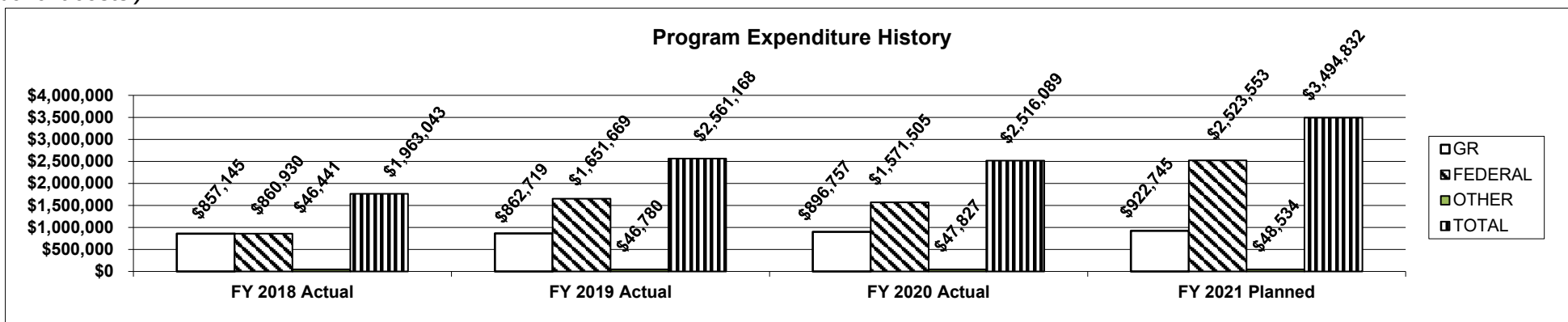
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2d. Provide a measure(s) of the program's efficiency.



**Note:** This graph represents the proportion of consumers who have services paid for by MO HealthNet Division (MHD) in Missouri.  
*Significance:* DBH continues to maximize state general revenue by ensuring each consumer's Medicaid eligibility is established in a timely manner and that Medicaid reimbursable services/programs are accessible.

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



**Note:** Additional authority was appropriated in FY 2018 for the State Targeted Response to the Opioid Crisis Grant. Expenditures were lower in FY 2018 due to the late start-up of the grant. As a continuation to the State Targeted Response Grant, the Division was awarded the State Opioid Response Grant. Additional authority was appropriated in FY 2020 as well as supplemental authority in FY 2019.

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**4. What are the sources of the "Other " funds?**

For FY 2021, Other includes Health Initiatives Fund (HIF) (0275) \$48,534.

**5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)**

Sections 631.010 and 313.842, RSMo.

**6. Are there federal matching requirements? If yes, please explain.**

Yes. The federal Substance Abuse Prevention and Treatment Block Grant requires that the state maintain an aggregate level of general revenue spending for substance use disorders that is greater than or equal to the average of the past two years. (This is called the "Maintenance of Effort," or MOE, requirement.)

**7. Is this a federally mandated program? If yes, please explain.**

No. However, the Substance Abuse Prevention and Treatment Block Grant requires that up to 5% be expended for administration.