



Application for Maternal Opiate Medical Supports

MHA-19-MEDDIR-MOMS-40

Funding period SFY 2019: July 1, 2018 - April 30, 2019

John R. Kasich, Governor

Tracy J. Plouck, Director

RFA PURPOSE

The 21st Century Cures Act was passed by Congress and signed into law in late 2016. It is designed to modernize health care through enhanced innovation, research and communication, leading to better patient outcomes. The Act also makes available to states new funding through the Substance Abuse and Mental Health Services Administration to combat the prescription opioid and heroin crisis. SAMHSA's State Targeted Response (STR) project funding will provide over \$970 million to states and territories over the next two years, beginning in fiscal year 2017. Ohio has received over \$26 million dollars in FY 2017 and is eligible for additional funding in FY 2018.

Ohio's Opioid STR project goals focus on building a community system of care (prevention, early intervention, treatment and recovery support) that emphasizes service integration between physical health care, emergency health care, behavioral health care, criminal justice, and child welfare. Strategies and activities undertaken for this effort build upon Ohio's on-going efforts to address the opioid epidemic and are designed to reduce overdose deaths and enhance the ability of individuals with opioid use disorder to receive treatment using evidence-based approaches. This focus represents a high-impact opportunity to strengthen Ohio's comprehensive response to the state's opioid issues.

OhioMHAS seeks to award funding to support three federally licensed opioid treatment program (OTP) providers and/or OhioMHAS licensed behavioral health providers with co-located MAT to implement and provide Maternal Opiate Medical Supports services (MOMS; <http://momsohio.org/moms/>) to pregnant women with opioid use disorder. Awardees will develop an integrated maternal care home model of care utilizing the MOMS toolkit to support clinical practices for this population. Awardees will be responsible for participating in training and technical assistance events, learning communities, co-locating OB/GYN services, and coordinating with managed care plans and other entities (e.g., accountable care organizations (ACOs), comprehensive primary care centers (CPCs), and federally qualified health centers (FQHCs)) to encourage program sustainability. Additionally, awardees will participate in an evaluation of MOMS services.

OHIO MOMS Goals

MOMS Implementation

Awardees will utilize the MOMS toolkit to develop a maternal care home that provides timely access to appropriate addiction and mental health services during pregnancy that extends postpartum, including intensive home-based or residential treatment. Awardees are expected to develop an administrative oversight team in the pre-planning period. This team is expected to follow the site readiness process that recommends the best administrative and clinical pathways to deliver care (http://momsohio.org/healthcare-providers/decision-trees/decisiontree-attributes/MOMS%20Decision%20Tree_F4_6-27-16.pdf). Awardees and any sub-contractors should adopt the treatment recommendations and clinical pathways from the decision tree during the implementation period. Any deviations from the clinical recommendations outlined in the decision tree should be reported to the MOMS trainer and OhioMHAS.

Awardees are expected to recruit pregnant women with opioid use disorder to be part of the MOMS maternal care home. While there are no exclusion criteria for these women to be part of the MOMS program (e.g., trimester), pregnant women are required to adhere to awardee policies and procedures to

maintain membership in the program. Awardees are expected to expand their census of pregnant women served at their agency by at least 55 women during the grant.

Care coordination should involve establishing relationships between the awardee and women's healthcare and social service providers including primary care physicians, child welfare caseworkers, pediatric healthcare professionals, and legal caseworkers. If women do not have a primary care provider, they will be referred to one that can easily bill for care coordination (e.g., one who is associated with an ACO, CPC, or FQHC). Awardees are also expected to co-locate OB/GYN services within their facilities through formal or informal contracts. Women participating in MOMS shall not be mandated to use this OB/GYN services; however, they may want to use these services even if they have an existing OB/GYN for increased pregnancy monitoring. Finally, all awardees will be expected to work closely with Medicaid managed care programs and other insurance providers to place participating women in high-risk case management caseloads.

MOMS Learning Community Participation

Awardees are required to participate in a MOMS learning community that will be developed and facilitated by earlier OTP adopters of the MOMS program (MOMS trainers). The purpose of the MOMS learning community will be to disseminate best practices for treating opioid dependent pregnant women and their children. Trainings will involve group skill building trainings (with all participating awardee sites in attendance) as well as individual trainings tailored to the individual awardees. Group trainings will be held monthly throughout the project through face-to-face meetings, calls/webinars, and on-site consultation. Individual site-trainings will be held at least three times a month for the first six months, and at least once a month thereafter. Awardees will be asked to coordinate with trainers and present on at least one topic during technical assistance calls over the course of two years. Awardees will have access to the MOMS trainers for technical assistance through phone calls and email.

MOMS Evaluation

Awardees are required to provide data needed for evaluation of the project by OhioMHAS. Department staff will submit an Internal Review Board (IRB) application to the Ohio Department of Health, so that patient and infant outcomes can be monitored throughout the project. Upon IRB approval, all women who want to join the program will be offered forms that allow participating organizations to release the woman's information. Women that refuse to sign the release of information form may still participate in the MOMS program. Site data collection generally will include program metrics (e.g., housing status and retention), information on the participants (e.g., patient demographics and medication routine), and information on the infants and their health outcomes (e.g., infant demographics, including Medicaid ID).

Other General Expectations of MOMS Services

Service Provision – Program will provide or utilize:

- Services in the woman's preferred language and cultural context that is most appropriate, and a service location that is readily accessible to the population served;
- Gender specific substance abuse treatment and other therapeutic series, including trauma-informed care when appropriate;
- Therapeutic interventions for children in custody of women in treatment which may address, among other things, their developmental needs and trauma;
- Sufficient treatment support and care coordination (case management), to include all necessary support activities to insure that women and their children have access to the services listed above;
- Clinical approaches that support managed care (improved utilization management systems, such as,

enhanced engagement, step down provisions for consumers in residential settings, aftercare and/or linkage to other services);

- Enhanced collaboration with children's services, the criminal justice system, vocational rehabilitation and employment services and other entities serving Medicaid eligible consumers;
- Identification and tracking methods of service utilization for all participants; and
- Tobacco cessation programs, or referrals to tobacco cessation programs for women who use tobacco products (e.g., cigarettes and e-cigarettes).

Case Management /Maternal Opiate Support – Program will provide:

- Coordination and integration of services, and support with navigating systems of care to implement the individualized and family service plans;
- Assessment and monitoring of the extent to which required services are appropriate for women, children, and the family members of the women and children;
- Assistance with community reintegration, before and after discharge, including referrals to appropriate services and resources;
- Assistance in accessing resources from Federal, State, and local programs that provide a range of treatment and support services, including substance abuse, health, mental health, housing, employment, education and training; and
- Connection to safe, stable, and affordable housing that can be sustained over time.

DATA COLLECTION AND REPORTING

As authorized in Ohio Revised Code Section 5119.61, the Ohio Department of Mental Health and Addiction Services (OhioMHAS) will collect information and data from awardees. This information and data are outlined in the Reporting Requirements, which will be distributed with all the Notices of Award. These Reporting Requirements will be available on the OhioMHAS website. Reporting requirements, such as expenditure reports and quarterly program summary reports, will be reviewed by OhioMHAS staff. Failure to comply with reporting requirements may be considered a breach of the funding award and shall result in further action by OhioMHAS.

Additional Data Collection

Data collected and reported by awardees will include, but may not be limited to:

Program metrics

- Housing status (assessment at every visit)
- Whether your agency offered or referred to stable housing
- Employment status
- Whether your agency offered or referred to educational or vocational services
- Patient retention (e.g., admission dates, discharge dates, number of no shows)
- Criminal justice involvement
- Tobacco Use
- Whether your agency offered or referred to tobacco cessation classes

Other Information on the participants

- Patient demographics (e.g., age, race, ethnicity, Medicaid ID, AOD diagnoses, tobacco use and frequency of use)

- Medication information (e.g., MAT type and dosage)
- Expected date of delivery
- Number of negative and positive toxicology screens
- Number of positive toxicology screens with an unexpected outcome (i.e., outcome not due to a prescribed drug)
- Drug(s) found in each positive toxicology screen
- Number of and type of behavioral health services received
- Service satisfaction scores on a questionnaire to be developed by the Department
- Participation in a CPS-approved safety plan
- Participation in early-intervention services

Information on the infants

- Infant demographics (e.g., sex, race, ethnicity, Medicaid ID, social security number)
- Birth outcomes (i.e., live birth, miscarriage, stillbirth, termination)
- Breast feeding participation

Other information will be collected by the Department through Medicaid databases, including variables such as infant diagnosis of NAS, infant NICU length of stay, infant date of delivery, infant pediatric visits, infant health outcomes (e.g., gestational age, birth weight, feeding difficulties, respiratory conditions, and other complications) mother's prenatal care attendance, mother's behavioral healthcare attendance during prenatal and postnatal periods.

Performance Assessment

Awardees are expected to participate in a performance assessment as needed, including monthly reviews with OhioMHAS staff.

PROGRAM OPERATIONS AND MANAGEMENT

Eligible Applicants

Applications will be accepted only from federally licensed opioid treatment programs or OhioMHAS licensed behavioral health providers with co-located MAT. All applicants must accept Medicaid. Applicants must have served a minimum of 15 pregnant women with opioid use disorder during 2017 or an average of 15 pregnant women with opioid use disorder between 2015 and 2017. Programs that are awarded the Maternal Opiate Medical Supports (MOMS) Trainer Grant are not eligible for this grant.

Special Requirements

Applicants must be able to demonstrate a minimum of two years of experience in treating opioid dependent pregnant women, including the use of FDA-approved medications for pregnant opioid dependent women, as well as other addiction services. Applicants must provide effective controls and procedures to guard against tampering and diversion of controlled substances. Applicants must adhere to all federal and state guidelines for opioid treatment programs, and must be in good standing with state and federal entities. Applicants must commit to ongoing communication and collaboration with the local Alcohol, Drug Addiction and Mental Health Services Board, law enforcement, the local public children services agency and the justice systems.

Permissible Use of Funds: Costs may be related to the organization and management of the MOMS project, salary for one clinical care coordinator, contracting with one or more obstetric physicians,

purchasing new obstetric equipment (e.g., examination table and/or ultrasound), participation of staff in MOMS technical assistance calls/webinars/in-person events, provision of child care during behavioral health appointments, and programs for women to participate in prenatal care, behavioral healthcare, physical healthcare, and pediatric care.

Any use of funds for equipment other than the obstetric equipment noted above (including electronic devices such as computers, tablets and cell phones), furniture or computer software (including licenses) must be justified in terms of the relationship of the equipment, furniture or computer software to the program or activity. Justification to purchase equipment, furniture, computer software must be submitted to OhioMHAS for prior approval and include consideration of how the equipment, furniture or computer software will be used, why the purchase is necessary, what alternatives were considered, how the cost was determined and why the program considers the cost reasonable. Funds cannot be expended for equipment, furniture or computer software until approved by the Department.

Equipment, furniture or computer software purchased under a grant is the property of OhioMHAS, except for equipment related to the obstetric care of women. A list of equipment, furniture and computer software, including serial numbers must be submitted to the Community Funding unit through an equipment itemization form obtained from the 21st Century CURES Project Director post-award. See Item #10 in the general Agreement and Assurances in the event of termination or non-renewal.

APPLICATION GUIDELINES

Application page limit is eight, single-spaced pages in 12-point Times New Roman font. This page limit does NOT include the face sheet (Attachment 2), the budget narrative, or budget expenditure form (Appendices 1 and 2). Applications must include the following:

A. Scope of Work

1. Face sheet (Attachment 2)
2. Abstract - Summary of how all MOMS services will be implemented and total amount of funding requested. (300 words or less)
3. Project Description- Provide a description of the proposed project that includes the following:
 - a. Demonstration that applicant meets the minimum requirements to apply for the grant
 - b. Strategies for MOMS project planning using the site readiness process tool
 - c. Plans for participating in MOMS learning community
 - d. Strategies to recruit participants as early as possible. If you will be partnering with other organizations or providers in your recruitment efforts, describe how you will establish and maintain relationships with these organizations or providers.
 - e. Plans for implementing the maternal care home model, including plans to coordinate relationships between the awardee and women's healthcare providers. Applicants should also mention plans to meet all of the service provision and case management expectations.
 - f. Business plans to sustain the MOMS project after the discontinuation of funding
 - g. Plan for coordination of collection and reporting of data, including submitting monthly reports to OhioMHAS
 - h. Budget Expenditure Form (Appendix 1) and Budget Narrative (Appendix 2) documenting implementation period funds. Proposals must include a budget and budget narrative that

identifies all costs to complete the project as described in the proposal, as well as how OhioMHAS funds, and other resources will be used.

B. RFA Questions and Updates

1. The Request for Application, accompanying documents and all questions and answers will be posted on the OhioMHAS website at: <http://mha.ohio.gov/http://mha.ohio.gov/Default.aspx?tabid=725>
2. All questions must be submitted electronically no later than **June 8th, 2018 by 5:30PM** to OhioMHAS at: CURESTREATMENT@mha.ohio.gov
3. No questions will be answered after the deadline. You may **NOT** contact any OhioMHAS staff member directly with questions regarding this RFA. Contacting staff directly with questions could result in disqualification of an application.
4. Responses to all frequently asked questions (FAQ) will be posted to the OhioMHAS website at <http://mha.ohio.gov/http://mha.ohio.gov/Default.aspx?tabid=725> and will be updated frequently.

C. Application Submission

1. All applications must be submitted electronically to: CURESTREATMENT@mha.ohio.gov by **Friday, June 22nd, 2018 at 5:30PM EDT.**
2. No faxed, mailed or hand carried applications will be accepted.

D. Award

1. Awards are expected to be announced in July for project implementation to begin no later than July 31, 2018.
2. All state fiscal year 2019 funds should be obligated by April 30, 2019. No cost extensions are permissible with prior approval from the Department.
3. Grant awards will not exceed \$175,000.

Review Criterion	Points Possible
Scope of Work	
Abstract: Overall plan for implementation of MOMS services and funding requested reflect a clear understanding of the 21 st Century CURES MOMS project	5
Project description components:	
a. Demonstration that applicant meets the minimum requirements to apply for the grant	5
b. Reasonable strategies for MOMS project planning using the site readiness process tool	10 10
c. Reasonable plans for participating in MOMS learning community	10
d. Reasonable strategies to recruit participants as early as possible. Includes plans for establishing and maintaining relationships with partner organizations or providers.	
e. Reasonable plans for implementing the maternal care home model, including plans to coordinate relationships between the awardee and women's healthcare providers.	20

Reasonable plans to meet all of the service provision and case management expectations. g. Reasonable plan for coordination of collection and reporting of data, including submitting monthly reports to OhioMHAS	10										
Technical Score	70										
Budget: Program cost is reasonable and realistic	30										
Total Score	100										
<table border="1"> <thead> <tr> <th>Rating</th> <th>Explanation</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>Is Not Addressed. Proposal does not comply with the requirement and/or does not address expectations.</td> </tr> <tr> <td>1-2</td> <td>Weak. Proposal does not substantially meet the requirement and/or does not substantially meet expectations.</td> </tr> <tr> <td>3-4</td> <td>Meets. Proposal meets the requirement, and meets expectations.</td> </tr> <tr> <td>5</td> <td>Exceeds. Proposal exceeds the requirement and exceeds expectations.</td> </tr> </tbody> </table>		Rating	Explanation	0	Is Not Addressed. Proposal does not comply with the requirement and/or does not address expectations.	1-2	Weak. Proposal does not substantially meet the requirement and/or does not substantially meet expectations.	3-4	Meets. Proposal meets the requirement, and meets expectations.	5	Exceeds. Proposal exceeds the requirement and exceeds expectations.
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Conditions of Award

- Awardee will work with OhioMHAS and MOMS trainers on all aspects of the 21st Century CURES MOMS project throughout the duration of this grant period.
- Awardee will attend required training, technical assistance and/or meetings as per SAMHSA and/or OhioMHAS request including monthly status meetings with the OhioMHAS project director.
- As authorized in Ohio Revised Code Section 5119.61, OhioMHAS will collect information and data from awardee. Awardee will provide required information and data electronically, through online reporting systems. All information and data will be reviewed by project staff. Failure to comply with reporting requirements shall result in further action by OhioMHAS, which may include withholding of funds.
- The Department reserves the right to make no award, make an award for a lesser amount, make an alternative award for the specified project or make an award for a shorter duration. The Department reserves the right to ask clarifying questions, issue conditional awards, and negotiate a best and final proposal with one or more applicants(s). The Department reserves the right to waive errors and omissions that do not materially affect the application. Errors and omissions may result in lower evaluation scores or rejection of the application.
- Awardee will be solely responsible for reporting, withholding, and paying all employment related taxes, payments, and withholdings for his/her self and any personnel, including but not limited to: Federal, State, and local income taxes, social security, unemployment or disability deductions, withholdings, and payments.
- Awardee must execute OhioMHAS Agreement and Assurances upon notice of award. (For reference, a copy of the Agreement and Assurances can be found in Attachment 1).
- The Department reserves the right to change the conditions of the grant or discontinue the grant if money is not allocated to the states as expected or if the federal government changes the conditions of the federal grant, or if the awardees performance is not adequate.

**Deadline for submission of all proposals is Friday, June 22nd, 2018 by 5:30PM
Eastern Daylight Savings Time to:
CURESTREATMENT@mha.ohio.gov**