June 15, 2016

Mr. Frank Haines
Legislative Budget and Finance Officer
Office of Legislative Services
State House Annex
P.O. Box 068
Trenton, New Jersey 08625-0068

Dear Mr. Haines:

Please accept the following responses to questions raised by Senator Pou regarding the Child Collaborative Mental Health Care Pilot Program during the hearing before the Senate Budget and Appropriations Committee on April 12, 2016.

1) What geographical areas are served by the program?

The program has been implemented in two phases, serving 11 counties altogether, as detailed below:

Phase I (contract start date 5/1/2015) serves two ‘hubs’: Monmouth/Ocean and Burlington/Camden

Phase II (contract start date 5/1/2016) will serve two ‘hubs’: Mercer/Middlesex and Atlantic/Cape May/Cumberland/Salem/Gloucester

2) How are the geographical areas served by the program selected?

Each Request for Proposal (RFP), for Phase I and for Phase II, required that the applicant propose to provide the program in two regions of New Jersey. These regions were identified by the Department of Children and Families based on geographical proximity and census data, and outlined in ‘Exhibit C’ of the RFP as below:
The applicants were asked to describe the needs justification in the proposed service regions, and were scored by the evaluation committee accordingly. Meridian was awarded the grant for both Phase I and Phase II of the program.

Meridian’s proposal for Phase I cited the American Academy of Child and Adolescent Psychiatry Work Force map which showed in 2012, Ocean County was significantly underserved with a rate of 5-10 child and adolescent psychiatrists per 100,000 children ages 0-17. Monmouth and Camden counties had only a slightly higher rate (10-20).

Meridian’s proposal for Phase II cited that for Mercer and Middlesex counties there are 42 child and adolescent psychiatrists, and in the five-county area consisting of Atlantic/Cape May/Cumberland/Salem/Gloucester counties, there are only 7 board-certified child & adolescent psychiatrists to serve a total child population of 198,851 (ABPN,2015). 91,766 children in those counties are insured under Medicaid and CHIP programs, while 1,443 receive Care Management Organization (CMO) support (NJDCF Dashboard, 2015).

3) In each area, how many primary care physicians are participating in the program? How many mental health specialists are participating in each area?

There are a total of 155 pediatricians participating in Phase I of the program. Phase II has not yet begun.
Mental health specialists are not required to participate in the program. Referrals to such community providers are made when necessary by the child mental health professionals and paraprofessionals of the hub team. The hub team is composed of Child & Adolescent Psychiatrists (CAPs) to provide consultation support to the pediatricians, Licensed Clinical Social Workers (LCSWs) to provide care coordination, and administrative personnel to coordinate program activities. The LCSWs work closely with the hub team CAPs to provide care coordination services for children, youth, and young adults identified with behavioral health disorders in the pediatric medical home setting, including referral to and engagement with specialty care and other services.

Please let me know if you have any additional questions or if DCF can be of any assistance.

Sincerely,

Allison Blake, PhD., L.S.W.
Commissioner

c: J. Ribsam, Deputy Commissioner
S. Alvino, Chief of Staff
H. Bernstein, Chief Financial Officer