MEMORANDUM OF AGREEMENT

-BETWEEN-

THE OFFICE OF MENTAL HEALTH

-AND-

THE OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES

THIS AGREEMENT is entered into the 31 day of JULY, 2008, by and between the New York State Office of Mental Health (OMH) and the New York State Office of Alcoholism and Substance Abuse Services (OASAS).

WHEREAS, in any given year, 5.6 million adults in the nation have a co-occurring mental illness and substance use disorder (National Survey on Drug Use and Health, 2006); and

WHEREAS, New Yorkers with co-occurring mental health and substance use disorders will benefit from more integrated treatment;

WHEREAS, in many instances, a co-occurring disorder can be treated at either an OMH or OASAS certified site, provided that the individual is otherwise able to participate in treatment at such site; and

WHEREAS, OMH and OASAS are autonomous Offices within the Department of Mental Hygiene; and

WHEREAS, in accordance with Mental Hygiene Law Section 7.07, OMH is charged with the responsibility for assuring the development of comprehensive plans, programs, and services in the areas of research, prevention, and care, treatment, rehabilitation, education, and training of persons with mental illness, and shall cooperate with the other Offices of the Department of Mental Hygiene in the development of such plans, programs, and services; and

WHEREAS, in accordance with Mental Hygiene Law Section 19.07, OASAS is charged with the responsibility for assuring the development of comprehensive plans, programs, and services in the areas of research, prevention, care, treatment, rehabilitation, education, and training of persons who abuse or are dependent on alcohol and/or substances and their families, and shall cooperate with the other Offices of the Department of Mental Hygiene in the development of such plans, programs, and services; and
WHEREAS, in accordance with Mental Hygiene law Section 31.02, no provider of services shall engage in the provision of outpatient services for persons with mental illness without having been issued an operating certificate from OMH; and

WHEREAS, in accordance with Mental Hygiene law Section 32.05, no provider of services shall engage in the provision of outpatient services for persons with chemical dependence without having been issued an operating certificate from OASAS; and

NOW, THEREFORE, the parties hereto hereby agree as follows:

I. Interpretation of Statutory Authority:

1. OMH and OASAS agree that the New York State Mental Hygiene Law and implementing regulations at 14 NYCRR Chapter XIII do not prohibit a provider certified by OMH to provide mental health services from admitting an individual who also has a co-occurring substance use disorder, provided, however, that the individual must meet the admission criteria of the mental health program and is able to participate in the program. OMH and OASAS further agree that if a mental health provider admits an individual under these circumstances, the provider is not providing services that require an operating certificate from OASAS. In this respect, OMH and OASAS agree that the person’s co-occurring substance use disorder is being managed in the course of the provision of mental health services.

2. OMH and OASAS agree that the New York State Mental Hygiene Law and implementing regulations at 14 NYCRR Chapter XXI do not prohibit an outpatient provider certified by OASAS to provide chemical dependence services from admitting an individual who also has a co-occurring mental illness, provided, however, that the individual must meet the admission criteria of the outpatient chemical dependence program and is able to participate in the program. OMH and OASAS further agree that if an outpatient chemical dependence provider admits an individual under these circumstances, the provider is not providing services that require an operating certificate from OMH. In this respect, OMH and OASAS agree that the person’s co-occurring mental illness is being managed in the course of the provision of outpatient chemical dependence services.

3. OMH and OASAS agree to work together and collaborate to facilitate the provision of an integrated treatment model in which traditional chemical dependence and mental health programs seek to manage the multiple symptoms of their presenting patients by incorporating techniques of mental health or addiction screening, assessment, and counseling into their own spectrum of services. However, the primary clinical focus of the program shall remain on the principal diagnosis that was necessary for admission to the program. In this way, each type of program (chemical dependence or mental health) can work within its current certification structure and is not required to seek licensure from the other governing State agency (OASAS or OMH).

II. Identification and Provision of Integrated Treatment Services:

4. OMH and OASAS agree that co-occurring disorders can be revealed in the course of screening and assessment at either an OMH or OASAS certified site.

5. The identification of a diagnosis or functional characteristics of a co-occurring chemical dependence or mental health disorder shall be made utilizing Screening Instruments and Assessment tools that have been approved by both OMH and OASAS.
6. For the purposes of this Agreement, integrated treatment services shall mean OMH and OASAS-defined services for individuals with co-occurring mental health and substance use disorders that are supported by evidence-based practices.

7. OMH and OASAS agree that the diagnosis and treatment of a co-occurring mental health or chemical dependence disorder shall be delivered by staff that are qualified to do so, in accordance with the standards of the Department of Mental Hygiene agency that has jurisdiction of the program. OMH and OASAS further agree that they will consult with each other, as appropriate, to ensure such standards are functionally consistent.

III. Billing for the Provision of Integrated Treatment Services:

8. For purposes of this Agreement, integrated treatment services shall be considered core services included within the mental health program or the outpatient chemical dependence program, as applicable.

9. Nothing in this Agreement shall be deemed to prevent an individual from receiving services from more than one provider of mental health or chemical dependence services, provided, however, that providers of co-occurring disorders services remain responsible for effective treatment planning in accordance with applicable governing regulations.

IV. Roles and Responsibilities:

10. OMH and OASAS agree to collect and share data with respect to the provision of integrated treatment services under this Agreement, in a manner agreed to by both agencies.

11. OMH and OASAS each commit to continuing to work with one another, for the duration of this Agreement, to identify and address limitations and barriers that people with co-occurring mental and chemical dependence disorders, and their families, experience when seeking care in the OMH and OASAS service systems in New York State.

V. Term and Termination:

12. This Agreement shall take effect immediately upon signature by both parties, and shall remain in effect unless terminated by either party.

13. Each party shall have the right to terminate this Agreement upon thirty (30) days written notice to the other party.

14. This Agreement may be modified or amended upon the mutual written consent of both parties.
IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be signed as of the date first set forth above.

Michael F. Hogan, Ph.D.
Commissioner
New York State Office of Mental Health

Date: July 31, 2008

Karen M. Carpenter-Palumbo
Commissioner
New York State Office of Alcoholism and Substance Abuse Services

Date: July 31, 2008