

MAINE

State SSA Director

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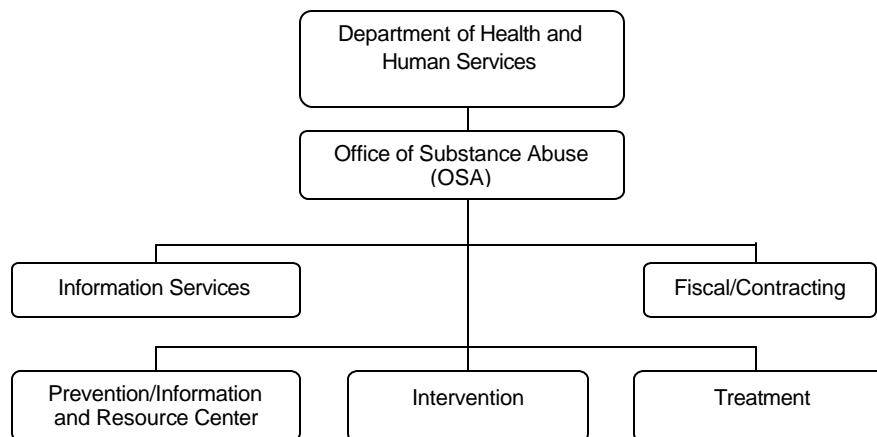
Structure and Function



The Maine Office of Substance Abuse (OSA), part of the State's Department of Health and Human Services is the Single State Agency (SSA) responsible for the planning, development, implementation, regulation, and evaluation of substance abuse services in Maine. OSA provides leadership in substance abuse prevention, intervention, and treatment. Its goal is to enhance the health and safety of Maine citizens through the reduction of the overall impact of substance use, abuse, and dependency.

There are three divisions within the SSA: (1) the Prevention/Information and Resource Center, which oversees prevention contracts in the State, provides prevention research and State planning, manages a State prevention consumer resource center, and liaisons with other State agencies involved with prevention; (2) Intervention, which oversees and administers the Driver Education and Evaluation Program (DEEP) and the Operating Under the Influence (OUI) driver education program; (3) Treatment, which oversees contracted alcohol and drug treatment programs in the State and provides oversight for special populations treatment needs, such as women's specialized services and also serves as the State Methadone Authority (SMA), and works with Department of Corrections to oversee jail-based treatment programs and liaisons with the Maine Judicial Branch for Maine's adult and adolescent drug courts.

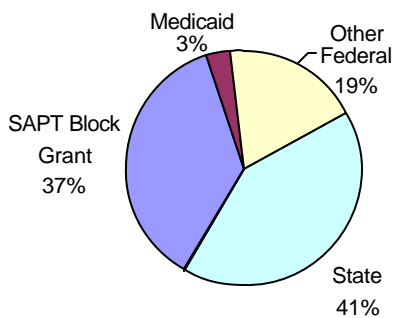
Single State Agency Structure



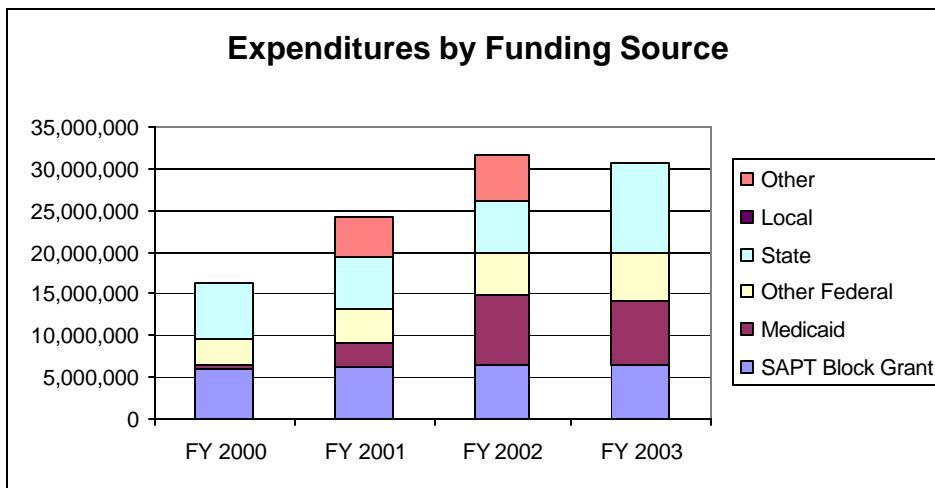
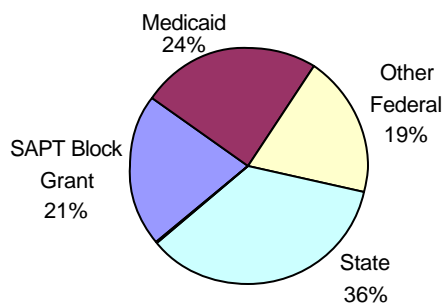
Single State Agency Funding Overview

Total SSA funding in Maine increased sharply between FYs 2000 and 2003—from \$16.2 million to \$30.8 million. While all funding sources increased in dollar value, the most dramatic was Medicaid—which increased from \$500,000 (3 percent of FY 2000 expenditures) to \$7.5 million (24 percent of FY 2003 expenditures).

FY 2000 Expenditures by Funding Source



FY 2003 Expenditures by Funding Source



Single State Agency Expenditures From All Funding Sources

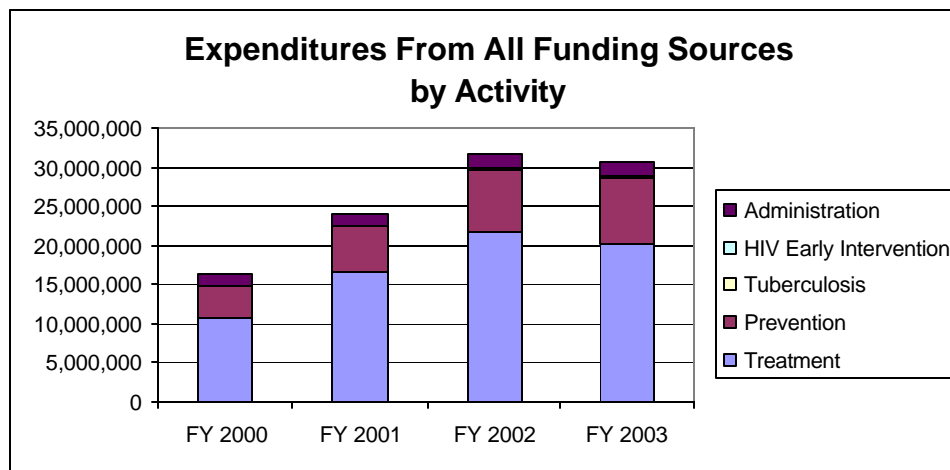
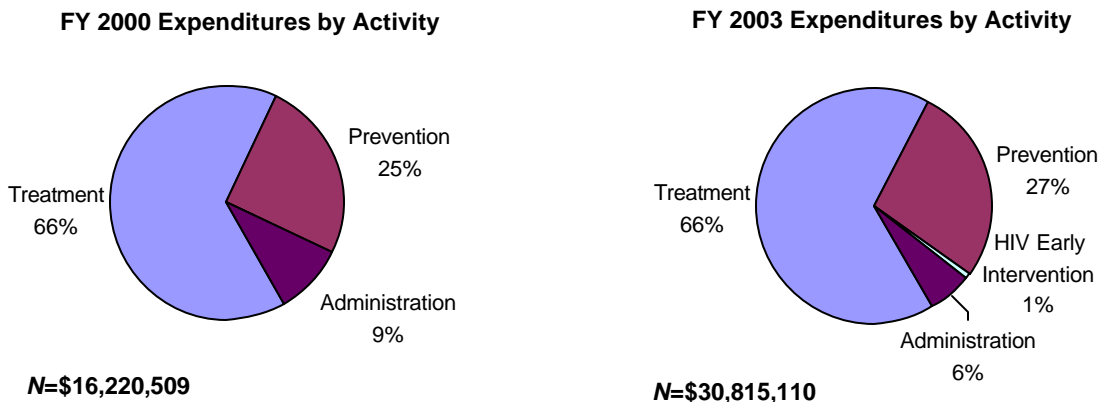
Funding Source	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
SAPT Block Grant	5,943,750	37	6,243,750	26	6,468,749	20	6,462,370	21
Medicaid	500,000	3	2,746,749	11	8,341,561	26	7,535,560	24
Other Federal	3,123,321	19	4,006,844	16	5,082,658	16	5,959,290	19
State	6,653,438	41	6,583,357	27	6,405,159	20	10,857,890	35
Local	0	0	0	0	0	0	0	0
Other	0	0	4,705,920	19	5,477,415	17	0	0
Total*	16,220,509	100	24,286,620	100	31,775,542	100	30,815,110	100

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4

* Totals may not equal 100 percent due to rounding.

Activities and Expenditures From All Funding Sources

The distribution of total SSA funds remained relatively stable between FYs 2000 and 2003. Approximately two-thirds of funds were allocated for treatment and rehabilitation services and a quarter went toward prevention activities.



Single State Agency Expenditures From All Funding Sources by Activity

Activity	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
Treatment and Rehabilitation	6,220,925	38	16,532,608	68	21,693,184	68	20,344,891	66
Alcohol Treatment	2,231,384	14	0	0				
Drug Treatment	2,168,216	13	0	0				
Prevention	4,071,733	25	6,024,516	25	7,869,329	25	8,323,201	27
Tuberculosis	0	0	0	0	0	0	0	0
HIV Early Intervention	0	0	0	0	282,670	1	293,360	1
Administration	1,528,251	9	1,603,977	7	1,930,359	6	1,853,658	6
Total*	16,220,509	100	24,286,620	99	31,775,542	100	30,815,110	100

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4; States were not required to report separate expenditures for alcohol and drug treatment for FYs 2002 and 2003.

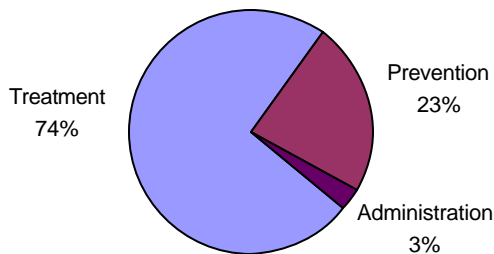
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Expenditures of Block Grant and State Funds

Expenditures of Block Grant Funds

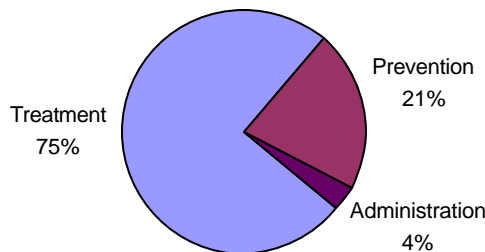
Block Grant expenditures for SSA activities in Maine increased slightly between FYs 2000 and 2003—from \$5.9 to \$6.5 million. The distribution of those funds remained relatively stable over the two periods: about three-quarters of the funds went toward treatment and rehabilitation services, one-fifth to one-quarter went toward prevention services, and the remainder went toward administrative costs.

FY 2000 Block Grant Expenditures by Activity

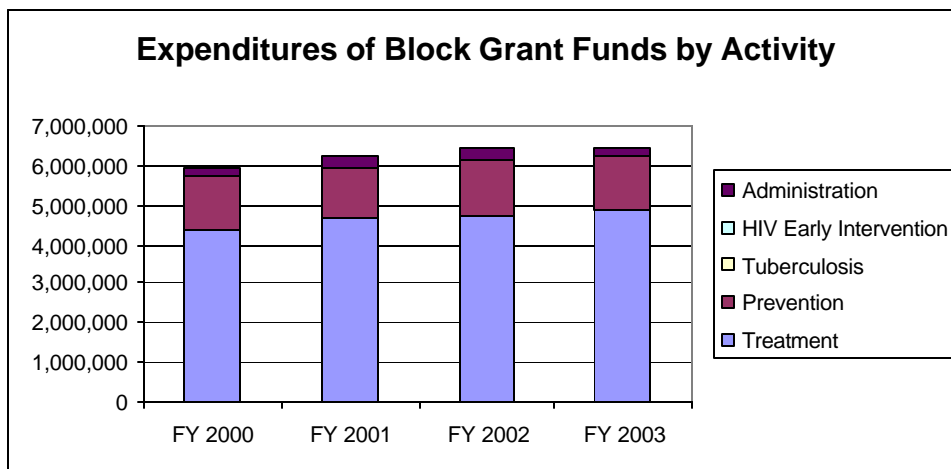


N=\$5,943,750

FY 2003 Block Grant Expenditures by Activity



N=\$6,462,370



Single State Agency Expenditures of Block Grant Funds by Activity

Activity	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
Treatment and Rehabilitation	0	0	4,661,293	75	4,752,911	73	4,870,969	75
Alcohol Treatment	2,231,384	38	0	0				
Drug Treatment	2,168,216	36	0	0				
Prevention	1,338,728	23	1,274,235	20	1,389,802	21	1,363,847	21
Tuberculosis	0	0	0	0	0	0	0	0
HIV Early Intervention	0	0	0	0	0	0	0	0
Administration	205,422	3	308,222	5	326,036	5	227,554	4
Total*	5,943,750	100	6,243,750	100	6,468,749	100	6,462,370	100

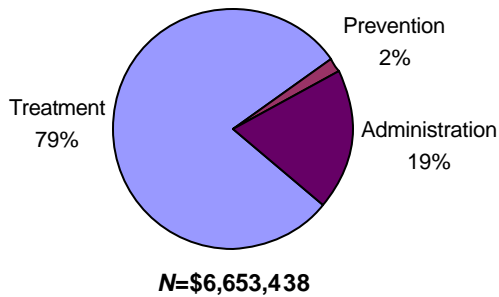
SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4; States were not required to report separate expenditures for alcohol and drug treatment for FYs 2002 and 2003.

* Totals may not equal 100 percent due to rounding.

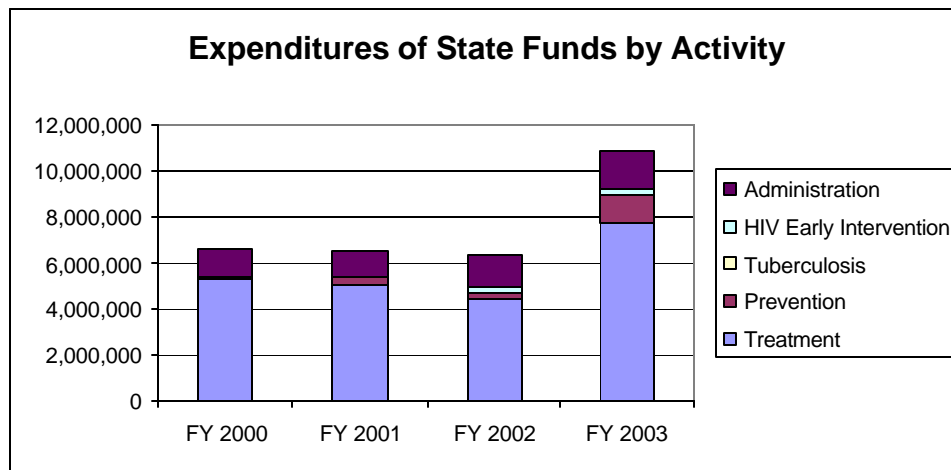
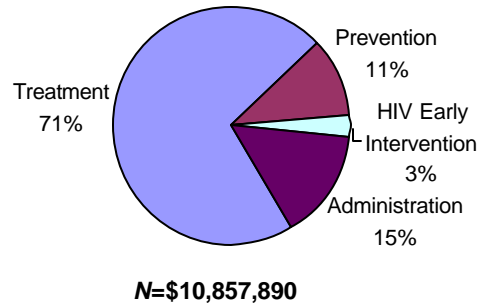
Expenditures of State Funds

State expenditures increased considerably between FYs 2000 and 2003 (from \$6.7 to \$10.9 million). Treatment and rehabilitation activities accounted for a declining majority of those funds (from 79 to 71 percent) between the two periods, while prevention activities increased in proportion (from 2 to 11 percent).

FY 2000 State Expenditures by Activity



FY 2003 State Expenditures by Activity



Single State Agency Expenditures of State Funds by Activity

Activity	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
Treatment and Rehabilitation	5,263,594	79	5,010,037	76	4,421,043	69	7,756,371	71
Alcohol Treatment	0	0	0	0				
Drug Treatment	0	0	0	0				
Prevention	126,322	2	308,988	5	243,055	4	1,183,963	11
Tuberculosis	0	0	0	0	0	0	0	0
HIV Early Intervention	0	0	0	0	282,670	4	293,360	3
Administration	1,263,522	19	1,264,332	19	1,458,391	23	1,624,196	15
Total*	6,653,438	100	6,583,357	100	6,405,159	100	10,857,890	100

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4; States were not required to report separate expenditures for alcohol and drug treatment for FYs 2002 and 2003.

* Totals may not equal 100 percent due to rounding.

Prevention Services

OSA's approach to substance abuse prevention uses research-based concepts, tools, skills, and strategies to reduce the risk of alcohol and other drug-related problems. The Prevention Services System (PSS) administers contracts funded from a variety of sources. These include the Safe and Drug-free Schools and Communities Act (SDFSCA) monies (Title IV-A of the No Child Left Behind Act), the Substance Abuse Prevention and Treatment Block Grant (SAPTBG), Enforcing Underage Drinking Laws (EUDL) monies (Office of Juvenile Justice Delinquency Prevention), One ME--Stand United for Prevention (State Incentive Grant [SIG]), and Fund for Healthy Maine monies (tobacco settlement funding).

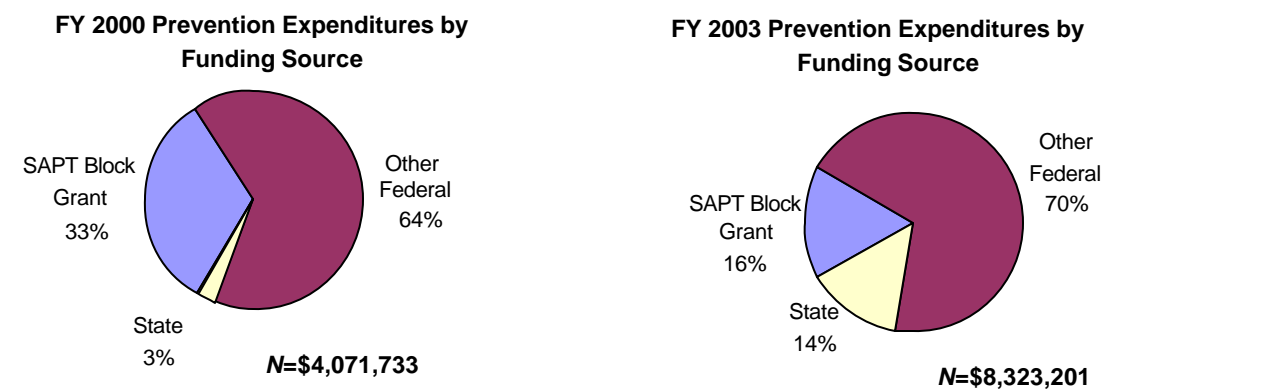
Approximately 170 school systems receive SDFSCA funding through an annual application process. Types of programs funded include substance abuse counselors, bullying prevention, programs, and student assistance teams.

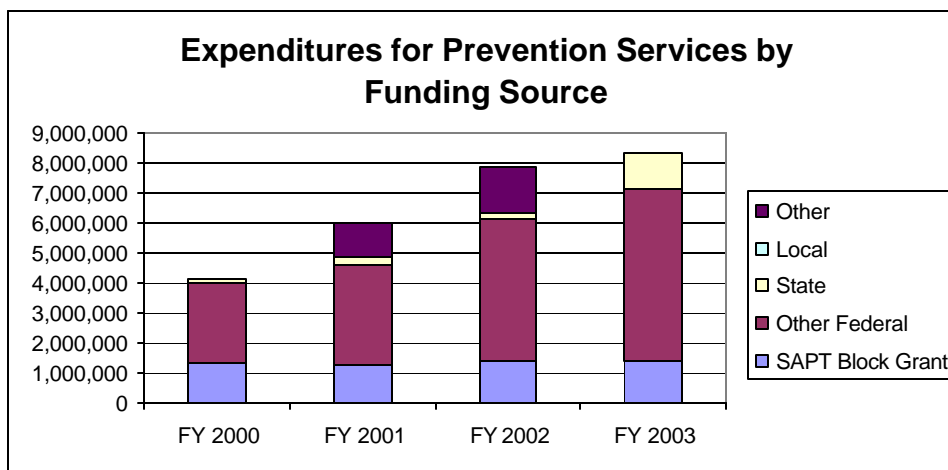
Currently 40 programs are funded using the SAPTBG. All of these programs were selected through a Request for Proposal (RFP) process. Types of programs funded include alternative schools, afterschool, peer leader, service learning, and arts-related programs.

Prevention Funding and Expenditures

Prevention funding more than doubled between FYs 2000 and 2003 (from \$4.1 to \$8.3 million). In particular, Federal funds from sources other than the Block Grant increased sharply and paid for a growing majority of prevention expenditures between those two periods (from 64 percent in FY 2000 to nearly 70 percent in FY 2003). State funding also increased dramatically (from \$126,000 to \$1.2 million, and from 3 percent to 14 percent of prevention expenditures).

Block Grant prevention funds ranged from \$0.99 to \$1.07 per capita between FYs 2000 and 2003.





Single State Agency Expenditures for Prevention Services From All Funding Sources

Funding Source	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
SAPT Block Grant	1,338,728	33	1,274,235	21	1,389,802	18	1,363,847	16
Other Federal	2,606,683	64	3,282,655	54	4,741,662	60	5,775,391	69
State	126,322	3	308,988	5	243,055	3	1,183,963	14
Local	0	0	0	0	0	0	0	0
Other	0	0	1,158,638	19	1,494,810	19	0	0
Total*	4,071,733	100	6,024,516	100	7,869,329	100	8,323,201	100

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4

* Totals may not equal 100 percent due to rounding.

Core Strategies

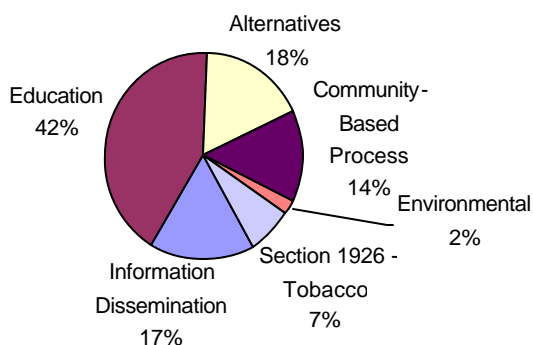
Examples of core prevention strategies supported by Block Grant funds include:

Core Strategy	Examples of Activities
Information Dissemination	Communications strategies include public education, social marketing campaigns, and media advocacy approaches that encourage various media outlets to change the way they portray substance use issues in order to ultimately influence policy changes.
Education	OSA staff provides educational presentations to groups, and contracted agencies deliver curriculum-based programs.
Alternatives	Increasingly, schools and communities are working together to incorporate recreational, enrichment, and leisure activities into their approach to prevention. Drop-in recreation centers, afterschool and weekend programs, dances, community service activities, tutoring, mentoring, and other events are offered in these programs as alternatives to substance abuse, violence, and other dangerous activities.
Community-Based Processes	Coalition development was given a boost using State Incentive Grant (SIG) funding. Many stand-alone programs became connected with a One ME coalition and many One ME coalitions worked with other groups in their area such as Communities for Children, Healthy Maine Partnerships, and Healthy Community coalitions.
Environmental	This strategy continued to be more extensively used primarily by One ME Coalitions. Fourteen of the coalitions adopted either Communities Mobilizing for Change on Alcohol or Community Intervention Trials.
Problem Identification and Referral	Strategies include school surveys and needs assessment.

Expenditures of Block Grant Funds for Core Strategies

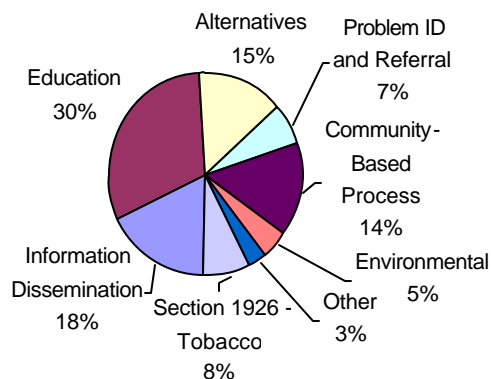
Block Grant funding for prevention core strategies in Maine remained stable between FYs 2000 and 2003, at approximately \$1.3 million. Education was the highest priority during this time, receiving 30 percent of Block Grant prevention funds in FY 2003. The remaining funds were distributed among a wide variety of core strategies, particularly information dissemination, alternative strategies, and community-based process strategies.

FY 2000 Block Grant Expenditures by Core Strategy

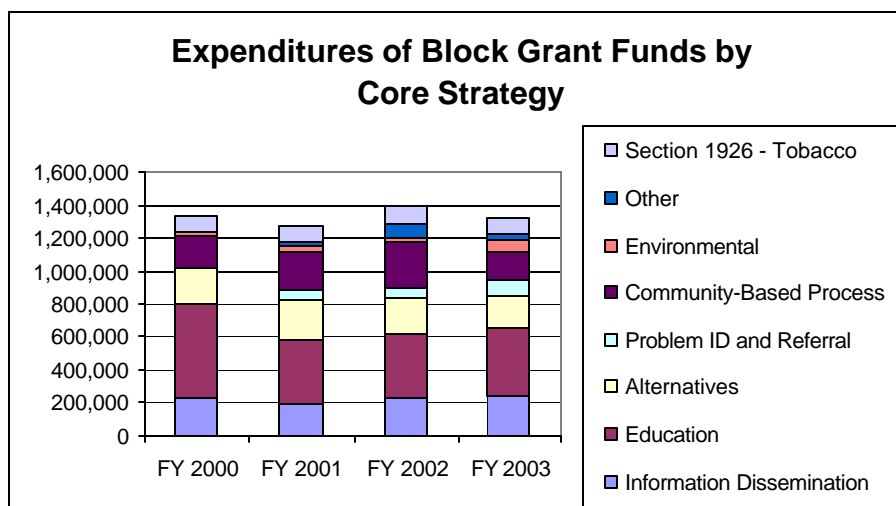


N=\$1,338,728

FY 2003 Block Grant Expenditures by Core Strategy



N=\$1,327,847



Single State Agency Expenditures of Block Grant Funds by Core Strategy

Strategy	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
Information Dissemination	222,971	17	192,540	15	222,621	16	236,339	18
Education	569,815	42	387,314	30	386,083	28	416,419	30
Alternatives	235,358	18	236,184	19	221,339	16	193,098	15
Problem ID and Referral	0	0	58,026	5	60,400	4	87,450	7
Community-Based Process	185,809	14	249,538	20	283,072	20	190,964	14
Environmental	24,775	2	27,550	2	34,471	2	64,035	5
Other	0	0	23,083	2	81,817	6	39,542	3
Section 1926 - Tobacco	100,000	7	100,000	8	100,000	7	100,000	8
Total*	1,338,728	100	1,274,235	100	1,389,803	100	1,327,847	100

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4a
 * Totals may not equal 100 percent due to rounding.

Treatment and Rehabilitation Services

The Treatment Team of the Office of Substance Abuse assists service providers with the coordination, planning, and implementation of alcohol and drug abuse programs. The services provided by the team include technical assistance to providers for program development, content and best practices, financial support to programs through a competitive bid process, participation in planning groups and committees concerned with substance abuse, coexisting disorders of substance abuse and mental illness, and the treatment system.

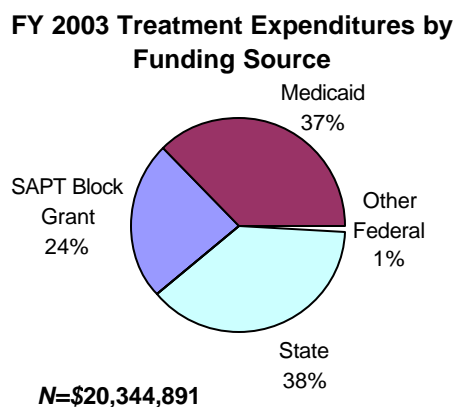
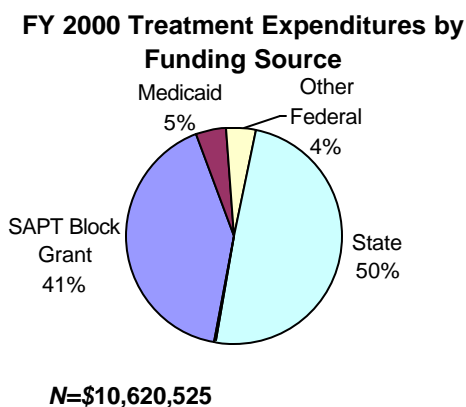
OSA contracts for treatment services throughout the State, which is divided into three regions, with one OSA treatment staff person assigned as a liaison to each region’s OSA-contracted alcohol and drug programs. The treatment section also provides oversight for special populations treatment needs, such as women’s specialized services and also serves as the SMA.

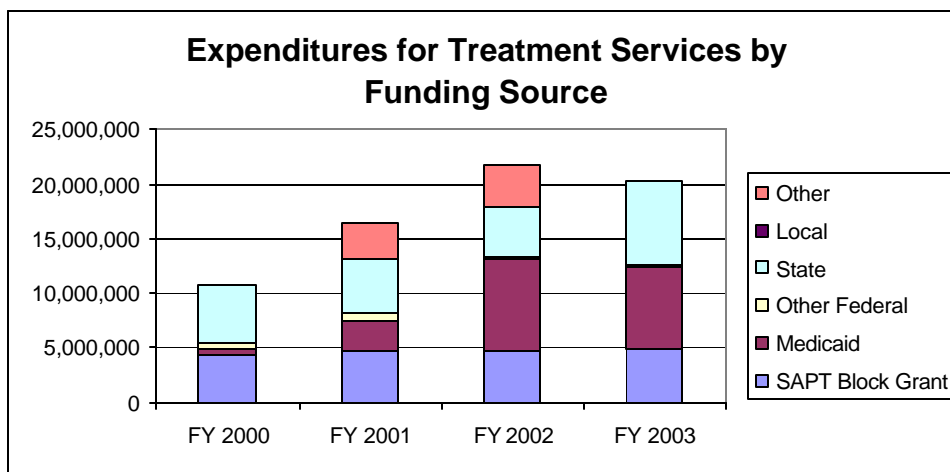
There are approximately 175 licensed adult and adolescent substance abuse treatment facilities in Maine, which offer treatment modalities including the following: overnight shelters, extended shelters, detoxification services, medically monitored and managed inpatient treatment, short- and long-term residential treatment, halfway houses, outpatient treatment, and intensive outpatient treatment.

Treatment Funding and Expenditures

Treatment funding in Maine nearly doubled between FYs 2000 and 2003 (from \$10.6 to \$20.3 million), largely due to a dramatic increase in Medicaid funding. With Medicaid’s increased representation among treatment expenditures (from 5 to 37 percent), all other sources shrank in proportion between the two comparison periods.

Per capita, Block Grant funding for treatment services increased from \$3.44 to \$3.72 between FYs 2000 and 2003.





Single State Agency Expenditures for Treatment Services From All Funding Sources

Funding Source	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
SAPT Block Grant	4,399,600	41	4,661,293	28	4,752,911	22	4,870,969	24
Medicaid	500,000	5	2,746,749	17	8,341,561	38	7,535,560	37
Other Federal	457,331	4	692,766	4	330,870	2	181,991	1
State	5,263,594	50	5,010,037	30	4,421,043	20	7,756,371	38
Local	0	0	0	0	0	0	0	0
Other	0	0	3,421,763	21	3,846,799	18	0	0
Total*	10,620,525	100	16,532,608	100	21,693,184	100	20,344,891	100

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4
 * Totals may not equal 100 percent due to rounding.

Admissions

Maine’s SAPT Block Grant application indicates that over 9,000 persons were admitted to treatment during FY 2002, of which most were admitted for outpatient (non-methadone) treatment services.

Number of Persons Admitted by Type of Treatment Care

Type of Care	Total Number Admissions by Primary Diagnosis (N=9,134)		
	Alcohol Problems	Drug Problems	None Indicated
Detoxification (24-hour care)			
Hospital inpatient	99	124	0
Free-standing residential	610	77	0
Rehabilitation/Residential			
Hospital inpatient (rehabilitation)	10	3	0
Short-term residential	216	220	0
Long-term residential	599	337	0
Ambulatory (Outpatient)			
Outpatient (methadone)	0	974	0
Outpatient (non-methadone)	5,469	2,812	1,036
Intensive outpatient	585	623	0
Detoxification (outpatient)	0	0	0
Total	7,588	5,170	1,036

SOURCE: FY 2005 SAPT Block Grant Application Form 7a; Reported data for State FY 2002

Treatment Episode Data Set (TEDS) data indicate nearly 12,000 admissions (where at least one substance is known). Calculations (with imputation) from TEDS data show that approximately 31 percent of persons admitted to treatment programs reported a psychiatric problem combined with alcohol or drug use. This rate varied when separating out alcohol-only abuse versus abuse of alcohol in combination with other drugs. Approximately 25 percent of persons admitted for abusing alcohol only were diagnosed with a psychiatric problem and 35 percent of persons admitted for abusing alcohol in combination with other drugs were diagnosed as having a psychiatric problem. (For a discussion of the different data sources, see Appendix D: Methodology.)

Percent of Admissions with a Psychiatric Problem by Primary Diagnosis

Admissions	2002	
	Admissions Where at Least One Substance Is Known	% with Psychiatric Problem*
Alcohol only	4,635	24.9
Alcohol in combination with other drugs	7,236	35.3
Total	11,871	31.2

SOURCE: Treatment Episode Data Set, 2002

*Values are imputed for admission records with missing information on other psychiatric diagnoses.

According to the National Survey of Drug Use and Health, 73,000 persons aged 12 and older (6.6 percent of Maine's population) needed, but did not receive, treatment for alcohol use and 32,000 persons (2.8 percent) needed, but did not receive, treatment for illicit drug use in Maine.

Treatment Gap by Age Group

Measure	% 12 and older	% 12-17	% 18-25	% 26 and older
Needing but not receiving treatment for alcohol use	6.59	5.43	17.24	5.15
Needing but not receiving treatment for illicit drug use	2.84	5.35	8.95	1.61

SOURCE: National Survey on Drug Use and Health; combined data for 2002 and 2003

Resource Development Activities

Planning and Needs Assessment

The OSA uses data from its State Treatment Needs Assessment Project (STNAP) to identify and target treatment needs throughout the State. Because each of the three planning regions has a unique client base, the STNAP data allows Maine to be specific to meet the needs of those clients. In Round II of Maine's STNAP, a Treatment System Study and the final Integration Study have provided very useful data and reports. In particular, a series of maps representing Maine's Treatment System, overlaid with the need by ASAM level, has proved to be particularly effective and useful.

Maine also collects data through its Maine Youth Drug and Alcohol Use Survey to guide its planning for prevention and treatment services.

Evaluation

The OSA has performance-based contracting for all its contracts. For treatment contracts, effectiveness and efficiency reports are produced on a regular basis throughout the contract period to enable OSA and the contractor to review its performance. Maine has also implemented a Performance Based Prevention System that allows it to collect performance data on its prevention contracts. All other contracts have performance measures that are monitored periodically through a variety of methods.

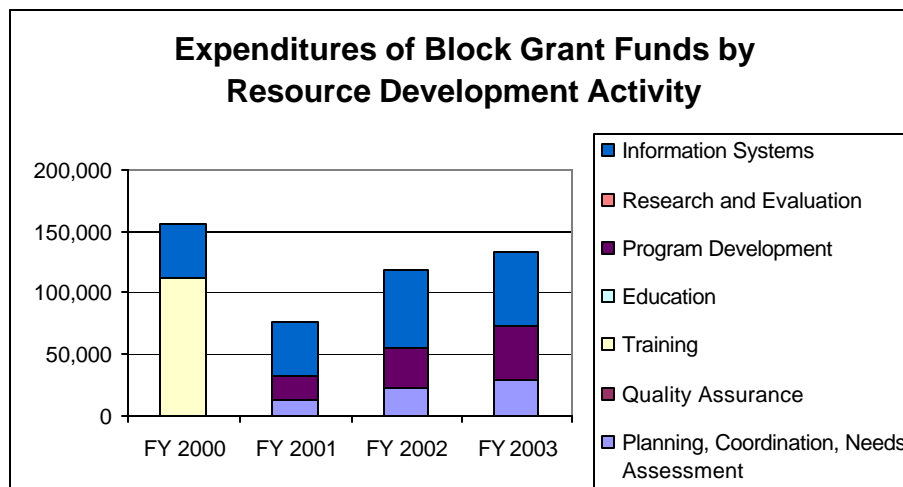
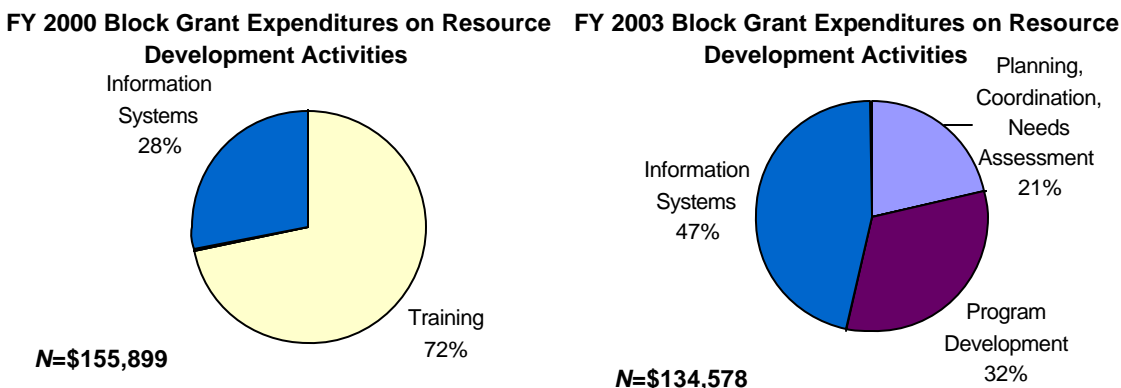
Furthermore, OSA has an advisory body, Maine's Substance Abuse Services Commission. The Commission provides OSA with feedback on its planning process and works with OSA on resource allocation. The Substance Abuse Services Commission holds a public hearing each year to enable the public and interested parties to provide feedback regarding the SAPT Block Grant.

Training and Assistance

OSA provides current information and education to employees of prevention and treatment agencies across the State through a contract with AdCare, a local education and training agency affiliated with New England Institute of Addiction Services (NEIAS), to assist in the planning, development, and delivery of the trainings, seminars, and conferences. Additionally, the Addiction Technology Transfer Center (ATTC) generates opportunities for bringing additional information and resources for workforce development issues.

Expenditures of Block Grant Funds for Resource Development Activities

Block Grant funding for resource development activities in Maine declined between FYs 2000 and 2003, from approximately \$156,000 to \$134,578. Priorities shifted dramatically between the two periods: training activities, previously accounting for nearly three-quarters of the resource development funds, were totally eliminated—to be replaced by a growing focus on information systems (accounting for nearly half of FY 2003 expenditures), program development (32 percent), and planning, coordination, and needs assessment activities (21 percent).



Single State Agency Expenditures of Block Grant Funds by Resource Development Activity

Activity	FY 2000		FY 2001		FY 2002		FY 2003	
	\$ Spent	%	\$ Spent	%	\$ Spent	%	\$ Spent	%
Planning, Coordination, Needs Assessment	0	0	12,516	16	21,785	19	28,843	21
Quality Assurance	0	0	0	0	0	0	0	0
Training	111,653	72	0	0	0	0	0	0
Education	0	0	0	0	0	0	0	0
Program Development	0	0	19,584	26	32,678	28	43,264	32
Research and Evaluation	0	0	0	0	0	0	0	0
Information Systems	44,246	28	43,873	58	63,041	54	62,471	46
Total*	155,899	100	75,973	100	117,504	100	134,578	100

SOURCE: FYs 2003–2006 SAPT Block Grant Applications, Form 4b

* Totals may not equal 100 percent due to rounding.

Discretionary Funding

Center for Substance Abuse Prevention

The Center for Substance Abuse Prevention (CSAP) awarded more than \$3.7 million to Maine in FY 2004 in discretionary funding for prevention. The majority of funds went toward Strategic Prevention Framework State Incentive Grants (SPF SIG).

Center for Substance Abuse Prevention Discretionary Awards for FY 2004

CSAP Discretionary Grant	Number of Awards	Total \$ Amount
Drug Free Communities	8	687,167
HIV/AIDS Cohort 3 Services	1	350,000
Prevention of Methamphetamine and Inhalant Use	1	349,997
Strategic Prevention Framework State Incentive Grants	1	2,350,965
Total	11	3,738,129

SOURCE: www.samhsa.gov

Center for Substance Abuse Treatment

In FY 2004, Center for Substance Abuse Treatment (CSAT) awarded Maine nearly \$750,000 in discretionary funding for treatment. Monies went toward adult, juvenile, and family drug courts; effective adolescent treatment; and State data infrastructure.

Center for Substance Abuse Treatment Discretionary Awards for FY 2004

CSAT Discretionary Grant	Number of Awards	Total \$ Amount
Adult Juvenile and Family Drug Courts	1	394,813
Effective Adolescent Treatment	1	249,997
State Data Infrastructure	1	100,000
Total	3	744,810

SOURCE: www.samhsa.gov