

**DEPARTMENT OF ALCOHOL AND DRUG PROGRAMS**

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**ADP BULLETIN**

Title

California Outcomes Measurement System (CalOMS) Treatment

Deputy Director Approval

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**PURPOSE**

This bulletin provides direction and guidance to counties, direct contract providers, and licensed narcotic treatment providers (NTP) on the California Outcomes Measurement System (CalOMS) - Treatment. The attached document details requirements, policy, and processes counties, private NTPs, and direct providers will need to successfully implement CalOMS Treatment. This bulletin also provides a summary of the history and development of service improvement resulting in CalOMS Treatment. The CalOMS Treatment design was developed in collaboration with the County Alcohol and Drug Program Administrators Association of California (CADPAAC) and the CalOMS Implementation Workgroup (IWG).

**DISCUSSION**

A key priority of the Department of Alcohol and Drug Programs' (ADP) strategic plan is implementing a statewide outcomes measurement system that provides information for administering and improving prevention and treatment services. CalOMS Treatment is a statewide, client-based data collection and outcomes measurement system. The overall CalOMS system consists of the two aspects of Prevention and Treatment. Due to the differences between CalOMS Prevention and Treatment, this bulletin only addresses CalOMS Treatment implementation and requirements. Information on CalOMS Prevention is provided in separate communications and ADP bulletins.

CalOMS Treatment will enable State ADP, counties and providers to more effectively manage and improve the provision of alcohol and other drug (AOD) services at all levels. The Health and Safety Code Sections 11755-11756 authorizes ADP to collect treatment client data and to evaluate alcohol and other drug programs.

The intent and purpose of CalOMS Treatment is to generate treatment data needed to:

- Meet federal outcomes reporting requirements.
- Document treatment population demographics.
- Identify AOD trends and risks.
- Demonstrate service effectiveness.
- Evaluate service system and program effectiveness.
- Identify the most effective/best practices to improve service delivery.
- Engage in continuous quality improvement.

CalOMS Treatment replaces both the California Alcohol and Drug Data System (CADDs) and the California Treatment Outcome Project (CalTOP) systems.

Counties, NTPs, and direct providers were required to begin collecting CalOMS Treatment data no later than January 1, 2006. Counties, private NTPs, and direct providers are required to pass certification testing with ADP and begin submitting data by March 15, 2006 on an ongoing basis.

Given the variety and complexity of organizational structures and business and technology needs, the counties, NTPs, and direct providers expressed the need to establish their own automated information systems that are typically integrated with other county or provider systems. Counties, private NTPs, and direct providers will therefore build systems or contract for data services to collect CalOMS Treatment data and transmit this data electronically to ADP's CalOMS Treatment system. Counties and providers may collect additional data they individually deem important including client tracking, assessment, and billing information. Therefore, each county, private NTP, and direct provider must determine and implement their own solution to meet the CalOMS Treatment requirement to submit data electronically.

Compliance with CalOMS is mandated for counties and direct providers in the Negotiated Net Amount (NNA)/Drug Medi-Cal (DMC) and Direct Provider DMC contracts. Implementation of CalOMS Treatment is determined to be part of the counties' and direct providers ongoing responsibility for program evaluation and to account for the use of public AOD funds. SAPT Block Grant and AOD State General Funds allocated by ADP can be used to cover the cost of implementing CalOMS Treatment. For Drug Medi-Cal (DMC) services, costs must be included within the DMC rate. For more information about appropriate cost determination, refer to Office of Management and Budget's Circular A-87, available at [www.whitehouse.gov/omb/circulars](http://www.whitehouse.gov/omb/circulars).

## **BACKGROUND**

The CalOMS Treatment System is a collaborative result between ADP and the AOD field in the ongoing effort to continually improve treatment services. The following are some of the foundational factors that have shaped CalOMS.

### **Managed Care Policy Advisory Committee (MCPAC) 1996**

MCPAC was formed to analyze the existing AOD services delivery system and make recommendations to increase service effectiveness for clients, improve utilization of scarce resources, improve access to services, and increase accountability for outcomes and data. Recommendations from the MCPAC report included developing an ADP and stakeholders workgroup to implement the MCPAC Strategic Implementation Proposal.

### **System of Care Redesign (SOCR) 1997**

The SOCR workgroup, which flowed from MCPAC recommendations, was formed with broad representation from the AOD field and ADP staff. SOCR was established as a long-term effort to plan, develop, implement, and evaluate a comprehensive statewide AOD prevention, recovery, and treatment services delivery system. As this workgroup was formed, the Department and the SOCR workgroup supported the plan to participate in the Federal Treatment Outcomes Pilot Project.

### **California Treatment Outcomes Project (CalTOP) 1998 - 2002**

CalTOP, a federally funded pilot project, was developed and designed by ADP and the SOCR workgroup to track client movement through AOD treatment programs via an automated system. CalTOP was designed to assess client service needs, record service utilization, assess treatment outcomes and client satisfaction, and determine whether AOD treatment produces cost-offsets in other statewide service systems. CalTOP was piloted in 13 counties.

### **CalOMS 2002 - Present**

Based on lessons learned from CalTOP, CalOMS Treatment was developed to implement a statewide AOD client data collection and outcomes measurement system to meet the information needs of the State, federal government, counties, providers, and counselors. During the early developmental stage, ADP recognized the importance of close collaboration with the AOD community to ensure that the final system was designed to most effectively meet the data collection and outcomes measurement needs at all levels. In December 2003, Director Kathryn P. Jett convened the CalOMS Implementation Workgroup (IWG) comprised of AOD administrators, treatment and prevention services providers, provider associations, and researchers. The purpose of the IWG is to provide advice, expertise, guidance, and recommendations regarding the

successful development and implementation of CalOMS. The IWG met over a period of seven months to develop and approve the CalOMS Treatment data set, requirements, and timeline described in the attached document. The CalOMS Treatment data set was approved by CADPAAC in May 2004, and the CalOMS IWG continues to meet to address the various implementation issues.

## REFERENCES

County NNA/DMC and Direct Provider DMC Contracts

The following CalOMS Treatment documents, along with other resources, are available on the ADP website: [www.adp.ca.gov/CalOMS/CalOMSmain.shtml](http://www.adp.ca.gov/CalOMS/CalOMSmain.shtml)

- CalOMS Treatment Data Collection Guide
- Data Dictionary
- IT File Format
- IT System Requirements
- Data Quality Standards

## QUESTIONS/MAINTENANCE

If you have questions regarding this bulletin, please contact: Marjorie McKisson, CalOMS Treatment Project Director, Program Services Division, at (916) 327-4178 or [mmckisson@adp.state.ca.us](mailto:mmckisson@adp.state.ca.us). An additional copy of this document may be requested through the ADP Resource Center at (800) 879-2772. This bulletin is also available on the ADP Web page at [www.adp.ca.gov](http://www.adp.ca.gov)

## EXHIBITS

[“Implementing the California Outcomes Measurement System \(CalOMS\) – Treatment”, May 2006.](#)

## DISTRIBUTION

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