

**Priority:** Safety Net Services  
**Program Offer Type:** Existing Operating  
**Related Programs:** 25045, 25050  
**Frameworks:** Poverty Framework

**Lead Agency:** County Human  
**Program Contact:** Nancy Winters

### Executive Summary

For those who are a danger to themselves or others or are experiencing a mental health crisis, a hospital stay to safely stabilize their symptoms is required. This program is for adults and children who are enrolled in Oregon Health Plan and is paid for almost entirely by the State.

### Program Description

Verity is the Mental Health Organization for Multnomah County residents with Oregon Health Plan insurance. Hospitalization is one of the insurance benefits. We receive State funding for this specific acute level of care. Admission for inpatient psychiatric care is based on medical necessity and clinical criteria. Inpatient psychiatric care is the highest level of psychiatric treatment necessary when community treatment has not been adequate to prevent a crisis or manage severe mental health symptoms. It is also the most costly level of care. The Call Center triages admission to this level of care and ensures that coordination takes place between the hospital and community provider for smooth transition back to the community once an individual is discharged. With this level of care coordination, possible gaps in service are identified and referrals to appropriate service are made reducing the financial risk to the county.

### Program Justification

Inpatient psychiatric care is a necessary service for mentally ill individuals who are at risk to harm themselves and/or others and cannot be kept safe in the community. While hospitalized, the Call Center works to link the individual with community supports and services that will facilitate longer-term stability in the community and prevent another crisis. This program links to the Basic Living Needs strategies through its provision of readily available crisis services to stabilize individuals.

This program fits into the Poverty Elimination Framework by providing acute health care and emergency social services to individuals and families who are experiencing crises and have limited resources.

### Performance Measures

Increase availability of acute care hospital beds in Multnomah County measured by decreased Verity hospital discharges and decreased hospital days.

Verity and other Medicaid Managed Care Plans use Hospital Inpatient Discharges and Hospital Inpatient Days Per 1000 Member Months for managing the total cost of care and gauging whether community systems are able to handle crises and keep people's health more stable. The measure is expressed as a ratio because raw numbers of either hospital admissions or hospital days can be misleading if used alone. Fewer admissions or days may simply reflect a drop in health plan enrollment and not an improvement. Health plans must effectively manage hospitalizations in order to be cost effective and lower financial risk. The measures include all authorized costs for Verity members admitted to the hospital involuntarily through an emergency hold or commitment and those admitted to the hospital voluntarily.

### Summary of last year's program results and this year's expected results

Verity Adult Hospital Discharges Per 1000 Member Months FY04 was 3.2. A decrease of 25% is expected this year.  
Verity Adult Hospital Days Per 1000 Member Months FY04 was 24.1. A decrease of 20% is expected this year.  
Verity Child Hospital Discharges Per 1000 Member Months FY04 was 0.4. A decrease of 20% is expected this year.  
Verity Child Hospital Days Per 1000 Member Months FY04 was 3.4. A decrease of 20% is expected this year.  
Total Hospital Discharges Per 1000 Member Months FY04 was 1.6 and Total Hospital Days Per 1000 Member Months FY04 was 11.7.  
Percent Hospital Discharges Readmitted in 30 days was 16%. A decrease is expected.

**Program Mandate: 3 Program Choice but No Funding/Service Level Choice**

Because the County chooses to operate a Mental Health Organization, Verity, we are required to participate in this program. We receive Oregon Health Plan funds from the State for this purpose. MHO Contract Statement of Work, Part II, Section V (B) (f)

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2005	2005	2006	2006
<b>Program Expenses</b>				
Contracts	\$0	\$4,800,000	\$0	\$4,000,000
<b>Subtotal: Direct Exps:</b>	<b>\$0</b>	<b>\$4,800,000</b>	<b>\$0</b>	<b>\$4,000,000</b>
Administration	\$0	\$0	\$32,392	\$91,671
Program Support	\$0	\$0	\$92,643	\$106,372
<b>Subtotal: Other Exps:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$125,035</b>	<b>\$198,043</b>
<b>Total GF/non-GF:</b>	<b>\$0</b>	<b>\$4,800,000</b>	<b>\$125,035</b>	<b>\$4,198,043</b>
<b>Program Total:</b>	<b>\$4,800,000</b>		<b>\$4,323,078</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$4,800,000	\$0	\$4,000,000
Program Revenue for Admin	\$0	\$0	\$0	\$198,043
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$4,800,000</b>	<b>\$0</b>	<b>\$4,198,043</b>

**Explanation of Revenues**

Almost entirely State funded.

**Significant Program Changes**

The Call Center is building stronger linkages with the regional hospitals and emergency departments to identify opportunities for diversion to community-based care and lower-cost alternatives to psychiatric admissions. The goal is to decrease the number of Verity members using avoidable hospital days.