

Program # 25069 - MH Outpatient Services

Version 2/14/2005 s

Priority: Safety Net Services
Program Offer Type: Existing Operating
Related Programs: 25046
Frameworks: Poverty Framework

Lead Agency: County Human
Program Contact: Nancy Winters

Executive Summary

For mentally ill adults enrolled in Oregon Health Plan, outpatient mental health services are provided by agencies under contract with Multnomah County. These services include individual and group therapy, care management, and medication management. The types of services provided are determined by the State, who fund this program.

Program Description

Individual Oregon Health Plan members living in Multnomah County are entitled to receive mental health outpatient services when they are in need of treatment. The State of Oregon contracts with Multnomah County to operate Verity, a Mental Health Organization (MHO) managed care plan for Multnomah County residents covered by Oregon Health Plan. This program provides an integrated, comprehensive continuum of service supports including individual and group therapy, care management, medication management, and other outpatient care specified by the MHO contract. The payment mechanism is a pool of money with which we pay certified mental health providers under contract with Multnomah County to serve residents enrolled in Verity. Mental health providers are compensated based on the number of individuals who select to receive services at their agency.

Program Justification

This program links to the Basic Living Needs Priority and Poverty Elimination Framework by providing easy access to adequate healthcare and needed social services by ensuring that individuals in treatment are linked with a primary physical care provider. Through outpatient treatment services, this program allows vulnerable individuals to access the mental health services that prevent them from experiencing a mental health crisis requiring a more costly type of care such as hospitalization. While engaged in outpatient treatment, individuals can be assessed and linked with other community supports and social services.

Performance Measures

Total Unduplicated Adults Using Mental Health Services. Measure shows access to services by unique individual health plan members.

Percent Adults Discharged From Inpatient Hospital and Seen In Outpatient Community-based Mental Health Within Seven Days. There are several clinical reasons for ensuring adequate and timely follow-up care for members after discharge from an institution or hospital for mental illness: 1) preventing readmission, 2) keeping track of those who will eventually require readmission, and 3) providing transitional care from the inpatient to outpatient setting.

Percent Adult Consumers Reporting They Agree or Strongly Agree Their Symptoms Are Not Bothering Them As Much. This outcome directly measures consumers perception of the impact of care on their behavioral health.

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

Total Unduplicated Members Using Mental Health Services FY04 was 6,103.

Percent Adults Discharged From Inpatient Hospital and Seen In Outpatient Mental Health Within Seven Days FY04 was 48.9%. Goal to reach State average 60%.

Percent Adult Consumers Reporting They Agree or Strongly Agree Their Symptoms Are Not Bothering Them As Much FY04 was 69.7%. The level of performance is expected to remain consistent.

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

The funding we receive as the Mental Health Organization is determined by the State.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
	2005	2005	2006	2006
Program Expenses				
Contracts	\$0	\$10,108,492	\$0	\$11,035,381
Subtotal: Direct Exps:	\$0	\$10,108,492	\$0	\$11,035,381
Administration	\$0	\$0	\$89,366	\$252,906
Program Support	\$0	\$0	\$255,587	\$293,465
Subtotal: Other Exps:	\$0	\$0	\$344,953	\$546,371
Total GF/non-GF:	\$0	\$10,108,492	\$344,953	\$11,581,752
Program Total:	\$10,108,492		\$11,926,705	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Intergovernmental	\$0	\$10,108,492	\$0	\$11,035,381
Program Revenue for Admin	\$0	\$0	\$0	\$546,371
Total Revenue:	\$0	\$10,108,492	\$0	\$11,581,752

Explanation of Revenues

This is almost entirely Oregon Health Plan funding received from the State.

Significant Program Changes

None Anticipated.