

Priority: Education **Lead Agency:** County Human Services
Program Offer Type: Innovative/New Program **Program Contact:** Peggy Samolinski
Related Programs: 25076A, 25095, 80003, 25119A, 25143A, 25145A, 25147A, 25149, 25150A, 25151, 25154, 25155, 40024A, 40024B, 25145B

Program Characteristics: One-Time-Only Request, Measure 5 Education

Executive Summary

This scaled offer seeks to add staff capacity to perform administrative functions necessary to meet statutory requirements to allow Touchstone to bill Medicaid for relevant mental health services. Touchstone is a 10 month direct service, school-based, youth-focused program, which provides case management and service linkage to 1600 families annually. Portions of these services are Medicaid billable and can generate revenue to support programming. With increased expertise and capacity, Touchstone can better integrate and align school based services within the department and in Multnomah County's eight school districts. Additionally, integration can assist in early detection of mental health problems, minimize barriers to learning and increase school engagement & success.

Program Description

The primary goal of building a Medicaid billing infrastructure within Touchstone is to generate revenue from eligible services provided. By adding 5 positions, which equal 2.5 FTE, this infrastructure would merge with DCHS's existing infrastructure to support administrative capacity, compliance, consistency, and provide stability to Touchstone. In the first year of conversion, County general funds will be needed to implement the program, refine the Raintree data collection and extraction billing mechanism, and evaluate its effectiveness and efficiency for Touchstone activities. In subsequent years, the level of CGF needed will gradually reduce as the program demonstrates its level of self-sufficiency. An evaluation of revenues generated from billing vs. program costs will determine the levels of reasonable reduction of CGF allocation. Funding is requested to begin October 1, 2007.

Program Justification

This added administrative capacity to Touchstone fulfills core Countywide values and ties to Accountability priorities. Efficiency is accomplished by advancing fundamental, long-term changes that impact County dollars spent. Coordination of services to avoid duplication is maximized through departmental and cross-jurisdictional coordination, collaboration and communication. Developing a billing & compliance infrastructure that can generate the use of federal funds maximizes external resources. This provides flexibility for limited County General Funds.

Creation of the above infrastructure support Master's level Family Intervention Specialist / Touchstone staff who meet the Qualified Mental Health Professional status, a prerequisite for billing Medicaid.

Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY05-06)	Current Year Purchased (FY06-07)	Current Year Estimate (FY06-07)	Next Year Offer (FY07-08)
Output	# of billable Touchstone encounters generated	0	0	0	50
Outcome	% of youth/adults encountered who are referred to mental health	0.0%	0.0%	0.0%	50.0%
Output	% of youth served in skill building groups	0.0%	0.0%	0.0%	30.0%
Output	# of families referred to Touchstone by mental health consultants	0	0	0	50

Performance Measure - Description

Legal/Contractual Obligation

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2007	2007	2008	2008
Personnel	\$0	\$0	\$126,760	\$0
Materials & Supplies	\$0	\$0	\$5,330	\$0
Internal Services	\$0	\$0	\$6,978	\$0
Subtotal: Direct Exps:	\$0	\$0	\$139,068	\$0
Administration	\$0	\$0	\$0	\$0
Program Support	\$0	\$0	\$0	\$0
Subtotal: Other Exps:	\$0	\$0	\$0	\$0
Total GF/non-GF:	\$0	\$0	\$139,068	\$0
Program Total:	\$0		\$139,068	
Program FTE	0.00	0.00	1.90	0.00
Program Revenues				
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$0	\$0

Explanation of Revenues

New County General Fund is being requested to establish this program and fund the "ramp up" phase during FY08. Between July and October 2007 DCHS will assess whether or not Medicaid billing projections will generate enough funds to support the billing costs and create ongoing additional programmatic resources. If they do, we anticipate that in October 2007 staff can begin the Medicaid billing process. It is anticipated that in FY09 County General Fund support would not be necessary to support this billing activity.

Significant Program Changes

Last year this program was: