

**Lead Agency:** County Human Services  
**Program Offer Type:** Existing Operating  
**Related Programs:** 25115, 25063B

**Program Contact:** Len Lomash

**Program Characteristics:**

**Executive Summary**

The Multnomah Treatment Fund (MTF) prioritizes community-based services to severely mentally ill individuals who have been released from jail or psychiatric hospitals and/or are at risk of hospitalization or significant decompensation but are uninsured and ineligible for Oregon Health Plan (OHP). MTF addresses immediate health and safety concerns until insurance or OHP coverage is obtained. The program will provide mental health services to 500 adults (decrease due to reduction in funds to keep program in target).

**Program Description**

Multnomah Treatment Fund will support an array of services for 500 severely mentally ill individuals who are uninsured and without financial resources. The Mental Health and Addiction Services Division (MHASD) provides funds to the network of providers to treat these uninsured persons during periods for aggravated symptoms in acute stages of illness. The goal is to stabilize these persons and prevent more drastic consequences including hospitalization, incarceration, addiction relapse, and loss of custody of children. If these services are effective, the client is spared a prolonged period of instability and the county preserves funds that would otherwise be lost to high-cost alternatives such as hospitalization.

Since these funds are limited, a designated adult system of care coordinator reviews each event for clinical necessity, choice of intervention, and financial eligibility. Services can include individual and group therapy, intensive case management, community outreach, housing assistance, medication management, dual diagnosis treatment, care coordination and crisis intervention. While the person is receiving services, he/she can be linked to other supports and acquire assistance in securing OHP benefits through the Department of Community Services' Benefits Recovery Project and health care through the Multnomah County Health Department or other clinics serving indigent clients.

**Performance Measures**

Measure Type	Primary Measure	Previous Year Actual (FY08-09)	Current Year Purchased (FY09-10)	Current Year Estimate (FY09-10)	Next Year Offer (FY10-11)
Output	Total # of adults who received County funded outpatient services or medication <sup>1</sup>	822	845	758	500
Outcome	Average emergency hold hospitalizations per uninsured adult served <sup>2</sup>	1	4	1	0
Outcome	Percent of adults who received county funded services with one or more e-holds	21.9%	0.0%	20.7%	21.0%

**Performance Measure - Description**

<sup>1</sup> Unduplicated uninsured adults who received at least one county funded outpatient mental health service or at least one county funded medication during the measurement period.

<sup>2</sup> This outcome is being discontinued as we have a more accurate measure of hospitalizations for clients served.

**Legal/Contractual Obligation**

**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
<b>Program Expenses</b>	2010	2010	2011	2011
Contracts	\$1,537,976	\$0	\$1,177,976	\$260,000
<b>Total GF/non-GF:</b>	<b>\$1,537,976</b>	<b>\$0</b>	<b>\$1,177,976</b>	<b>\$260,000</b>
<b>Program Total:</b>	<b>\$1,537,976</b>		<b>\$1,437,976</b>	
Program FTE	0.00	0.00	0.00	0.00
<b>Program Revenues</b>				
Intergovernmental	\$0	\$0	\$0	\$260,000
<b>Total Revenue:</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$260,000</b>

**Explanation of Revenues**

\$260,000 - State Mental Health Grant Non-Residential Mental Health Services MHS 20\$1,177,976 - County General Fund

**Significant Program Changes**

✔ **Significantly Changed**

**Last year this program was:** #25063A, MH Treatment & Medication for Uninsured/Indigent

The decrease in FY 09-10 total served (758) is due to changes in clinical criteria intended allow us to pay for more costly services for higher-need clients involved in more intensive programs - i.e, Intensive Case Management (ICM) and Assertive Community Treatment (ACT). The decrease in numbers for FY10-11 is due to the \$600,000 decrease in funding for this program.