

Lead Agency: County Human Services

Program Contact: David Hidalgo

Program Offer Type: Existing Operating

Related Programs:

Program Characteristics:

Executive Summary

The Mental Health and Addiction Services Division (MHASD) has identified alternatives to inpatient hospitalization as an essential service in the continuum of care. The Crisis Assessment and Treatment Center, CATC, offers 16 beds of short-term mental health treatment in a secure locked environment as a lower cost alternative to hospitalization for over 500 clients per year. Facility staffing includes physical and mental health professionals and peer support specialists.

Program Description

Sub-acute is a short-term stabilization program for those individuals in a mental health crisis who require a secure alternative to incarceration or hospitalization. It is a critical component in a full continuum of mental health services. Although it works with other community agencies that provide long term-care, the mission of the sub-acute facility is brief intervention when a person becomes a danger to themselves or others due to his/her mental illness. The target length of stay is 6 days. Since the individual remains linked to the community, length-of-stay is minimized and the person is less likely to lose critical recovery supports including Medicaid eligibility and housing. Sub-acute care is less expensive than hospitalization. As part of a best practice model for facilities of this type, the treatment team includes consumer positions on staff (Peer Support Specialists) to provide mentoring and linkage to services in the community. These positions are salaried members of the treatment team and a part of MHASD's goal to integrate peer delivered services into the system of care.

Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	# of admissions that are Verity members ¹	0	0	306	306
Outcome	Number of Verity inpatient (hospital) bed days per thousand members ²	0	0	140	130
Output	# of admissions that are indigent and/or Medicare ¹	0	0	238	238
Output	Number of inpatient days for uninsured/indigent/Medicare adults ²	0	0	4,544	4,544

Performance Measure - Description

 **Measure Changed**

¹Last year's offer was a projection for a program that opened in June 2011. Since the program has opened, the measure needed to be revised. The previous output, "# persons admitted who would otherwise have been hospitalized or jailed" was broken into two populations, Verity members, and Indigent/Medicare clients.

² Inpatient days refers to hospital stays- a lower number indicates a reduction in use of this highest and most expensive level of care.

Legal/Contractual Obligation**Revenue/Expense Detail**

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2012	2012	2013	2013
Contracts	\$597,500	\$2,646,295	\$597,500	\$2,546,295
Internal Services	\$0	\$256,253	\$0	\$276,199
Total GF/non-GF:	\$597,500	\$2,902,548	\$597,500	\$2,822,494
Program Total:	\$3,500,048		\$3,419,994	
Program FTE	0.00	0.00	0.00	0.00
Program Revenues				
Indirect for dep't Admin	\$44,287	\$0	\$41,973	\$0
Intergovernmental	\$0	\$2,902,548	\$0	\$2,822,494
Total Revenue:	\$44,287	\$2,902,548	\$41,973	\$2,822,494

Explanation of Revenues

\$405,173 - State Mental Health Grant Regional Acute Inpatient Facility: Based on FY12 grant award
 \$1,819,821 - Oregon Health Plan Premium: Based on FY12 Rate per Client times number of clients as of 12/31/11
 \$597,500 - City of Portland: Based on FY12 budget
 \$597,500 - County General Fund

Significant Program Changes

Last year this program was: #25056, Mental Health Subacute Facility - Operating