

Procedure Title:	Stipends for Advisory Council Members				
Procedure Number:	AMH-060-1609-01	Version:	1.0	Effective Date:	01/01/2014


Approved by (authorized signer name)

January 2, 2013
Date approved

Step	Responsible Party	Action
1.	Mental Health Planner	The Mental Health Planner shall make Consumer/Family Member Stipend Invoices available to the eligible advisory councils and their subcommittees at every meeting.
2.	Advisory Council Member	Eligible advisory council members shall complete a Consumer/Family Member Stipend Invoice. A separate invoice for each meeting is required. Invoices may not be submitted in advance of the meeting.
3.	Advisory Council Member	Eligible advisory council members shall submit the Consumer/Family Member Stipend Invoice to the AMH staff liaison for the advisory council or subcommittee. Each Council/subcommittee has an AMH staff person assigned as the liaison.
4.	AMH staff liaison	Upon receipt of the Consumer/Family Member Stipend Invoice, the AMH staff liaison for the council/ subcommittee shall verify that the invoice has been filled out correctly and signed. AMH staff shall then submit the Consumer/Family Member Stipend Invoice to AMH Support staff for processing for payment.
5.	AMH Support Staff	Will document the current Index, PCA and Object code for the appropriate biennium on each Consumer/Family Member Stipend Invoice received for processing.

Policy that applies:

AS-XXX-XX, Stipends for Advisory Council Members

Form(s) that apply:

Consumer/Family Member Stipend Invoice
{will be on AMHPAC website and a hyperlink can be inserted}

Contact(s):

| **Name:** Karen Wheeler, Administrator; **Phone:** 503-945-6191
Email: Karen.wheeler@state.or.us

Procedure History:

- **Version 1.0:**
1-01-2014

Keywords:

Advisory council, stipend, consumer, family member, reimbursement