
Addictions and Mental Health Division (AMH) Program Administration & Support March 14-16, 2011

*Program Administration & Support
Madeline Olson, Deputy Assistant Director*



ADDICTIONS AND MENTAL HEALTH DIVISION

Other Reduction Options

- In addition to the reductions in the Governor's Budget, AMH will make additional reductions in community mental health in order to restore funding for the Personal Care 20 client employed provider program. The cost is \$1.4 million in General Fund and \$3.9 million in Total Funds. This program was not eliminated by SPD.
- There are limited reductions to community mental health programs and none to addictions programs in the Governor's Budget. While there are significant reductions in the state hospital budgets, AMH is not recommending alternative reductions in community services to offset the reductions in the hospitals.

Program Support

- AMH Program Administration and Support is responsible for:
- Developing state plans for substance abuse prevention and treatment services and mental health services;
- Implementing state addictions, gambling and mental health programs and laws;
- Directing services for persons with substance use disorders and with problem and pathological gambling;
- Directing services for persons with mental health disorders;
- Directing services for persons with co-occurring mental health and substance use disorders;
- Maintaining custody of persons committed by courts to the state for care and treatment of mental illness; and
- Directing the prevention and early intervention system for A&D and MH.

Program Support

- Program support staff share responsibility with the counties for developing and managing community programs as part of the overall state mental health and addictions system. If a county is unable to operate a program area, AMH is responsible for contracting for services directly with providers. Program support is responsible for protecting the safety of clients and ensuring quality of care, by licensing and certifying 1,021 programs and providers.

Program Support

- Program support staff ensure the efficient and effective functioning of the program office and the necessary supports to the program and policy staff. AMH central administration staff work closely with the department budget staff and contract administration staff to ensure sound financial management of the addictions and mental health services community and state hospital program budgets, and the appropriate implementation of community treatment programs through contractual relationships.

Contracting

- AMH spends 96% of the budget for hospital and community-based services. Services are purchased through financial assistance agreements with counties, tribal governments and contracts with private nonprofit organizations. These services provide treatment in local communities for people with addiction disorders and those with serious mental health disorders.
- In addition AMH contracts with vendors for services such as federally required external quality reviews by an independent medical professional review organization for certain intensive Medicaid reimbursed services, program area experts from nationally acclaimed medical schools, and consumer support services such as Oregon Family Support Network and Dual Diagnosis Anonymous.

Status of Required Reports

Evidence-based Practices

- *ORS 182.525, Mandatory expenditures for evidence-based programs; biennial report rules.*
- The department is required to submit this report no later than September 30 of each even-numbered year to the interim legislative committee dealing with judicial matters. As required, AMH submitted the “Progress Report on the Implementation of Evidence-Based Practices” to the December 2010 Joint Interim Judiciary Committee.

Status of Required Reports

Community Mental Health

- ***ORS 430.640(1)(p), Duties of Department of Human Services in assisting and supervising community mental health and developmental disabilities programs.***
- The department is required to report biennially to the Governor and the Legislature on the progress of the planning process and implementation of local county mental health plans, and the state planning process and performance measures. The report is to be submitted during the Legislative Session. The title of the report is, “Report to the Oregon Legislature on Planning for Mental Health Services.”
- The report is in the reference document appendix – *Status of Required Reports*, following the report on the Community Mental Health Housing Fund trust account.

Community Mental Health Housing Fund

- The 1999 Oregon Legislative Assembly passed a bill creating a Community Mental Health Housing Fund within the Oregon State Treasury with funds from the sale of the former Dammasch State Hospital property in Wilsonville. The bill, codified as ORS 426.502 through 426.508, specifies that 5 percent of the net sale proceeds of Dammasch could be used for community housing (70 percent) and to improve the lives of state hospital patients (30 percent). The interest earned is to be used for community housing for people with serious mental illness .The restricted reserve was opened July 2004. The first housing awards were issued in March 2005.
- The report is in the reference document appendix,– *Status of Required Reports*, starting on page 2.