

Adult Mental Health Residential Standardized Rates – Year 1 Review

Questions and Responses

On September 11, 2020, the Oregon Health Authority (OHA) [announced the Year 1 Review of residential treatment home/facility providers](#).

This document contains OHA's responses to questions about the Year 1 review, [the September 23, 2020 presentation](#) and the [financial template](#).

General:

Are Adult Foster Homes included?

No. The Year 1 review includes mental health residential treatment homes and facilities for adults and Transition Age Youth.

The following facilities are excluded from the Year 1 review because they are not paid according to the standardized residential rates:

- Adult Foster Homes
- Oregon Department of Human Services (ODHS)-licensed facilities
- Residential treatment facilities which are exclusively for crisis respite
- Oregon State Hospital operated and funded cottages and facilities

Membership tab:

Do engagement hours include supervision hours?

No. Engagement hours include only direct staff face-to-face engagement assisting and redirecting individuals, as defined in Oregon Administrative Rule (OAR) 410-172-0705(1)(b). Reporting engagement hours excludes outpatient services billed separately by clinical programs.

Do we include an individual who is hospitalized temporarily during a month, for whom the provider receives a retainer payment (T2033)?

Yes. Include individuals whom OHA has approved for retainer payment and who are expected to return to the facility after a temporary absence. This is not considered an empty bed. OAR 410-172-0705(21).

What if we do not have an LSI from KEPRO or Comagine Health?

If there is no LSI completed by the Independent and Qualified Agent (IQA) leave the applicable column blank. Please reach out to the IQA and request the current LSI.

There is a separate column for provider/other LSI. Enter the CMHP or provider LSI if available.

Staffing tab:

What if staff provide both residential services and rehab billed services?

Split the staff time across the residential services section and the clinical section. For example, a provider employs a QMHA who performs direct residential staff support half days (0.5 FTE in residential services section), and bills for skills training with facility individuals half-day (0.5 FTE in Clinical section).

How do we report temporary staff?

Behavioral health licensing and administrative rules (OAR 309-035-0135, Staffing) require adequate program and direct care staff. Where a program or facility employs qualified non-permanent staff for an interim time, report temporary staff, including temp agency staff as “other.”

OHA’s Year 1 rate review includes review of staff turnover and retention during the period. Report temporary staffing separate from permanent staff so that OHA can calculate staff tenure.

What is the unit of measure for tenure in reporting turnover?

To calculate staff tenure, tenure should be reported in months.

What is meant by a “separate company” or “the CMHP does the clinical services?” Should we submit a separate template?

No, standardized residential rate review addresses residential services only and excludes clinical outpatient program services.

- Where a separate program or CMHP provides no residential services, no reporting template is required, nor should a separate template be completed.
- Where a residential program includes staff, who perform both residential support services and outpatient clinical services, report the person’s full-time equivalent (FTE) split in respective residential and clinical sections.

Expenses tab

Do employment related expenses (ERE) include training and recruitment?

No, ERE include discretionary expenses (e.g., health insurance, retirement, vacation, tuition reimbursement) and non-discretionary expenses (e.g., FICA, FUTA, SUTA). Recruitment is part of general administrative expenses. Training is an expense tied to a current staff member.

Revenue tab

Do we include retainer payments?

Yes, include retainer payments for individuals as approved by OHA.