



COMMISSIONER LORETTA SMITH
Multnomah County, District 2

501 SE Hawthorne Blvd., Suite 600
Portland, Oregon 97214
Phone: 503-988-5219 / Fax: 503-988-5440
district2@multco.us
web.multco.us/district2

October 11, 2011

Oregon Health Policy Board
500 Summer St. NE
Salem, OR 97301

Dear Chair Parsons and Oregon Health Policy Board Members:

I am writing regarding the September 21, 2011, meeting of the Coordinated Care Organization (CCO) Criteria Work Group. As a member of that work group, I was somewhat concerned when reviewing the "CCO Criteria Work Group – September 21, 2011 Meeting Summary" to note that the potential role of counties in the CCO governance structure was not included in the key points for the OHPB to consider.

In the 6-page summary document, very little mention was given to this topic, which was the subject of considerable discussion in my small group (and, from what I have heard, in at least one of the other small groups) – that counties *must* have a role in the governance of CCOs. Not only is it not noted in "Key Points for the Oregon Health Policy Board," it comes up only once under the "Small Group Discussion" heading, which indicates that "some members expressed the importance that essential groups be represented on the governing board, including [...] County governments."

I strongly urge you to actively consider that counties must have a role in the governance structure of CCOs, whether a CCO covers only one county or a geographical area that encompasses more than just one county. If the CCOs fail to provide adequate mental health care, counties will be left to pick up the pieces as the safety net providers for their jurisdictions—both in the mental health and public safety systems. Some individuals will end up in our emergency rooms or in our criminal justice system, both of which result in huge costs to the county and the community.

I appreciate that you have a large number of subjects to discuss and resolve in a very limited amount of time, however, I believe I would be remiss if I did not draw your attention to the importance of a discussion regarding the counties' role in CCO governance.

Thank you for your consideration.

Sincerely,

Commissioner Loretta Smith
Multnomah County, District 2

cc: Bruce Goldberg, Director, Oregon Health Authority
Tina Edlund, Chief of Policy, Oregon Health Authority



Mental Health and Addiction Services

Department of County Human Services

Multnomah County's Mental Health and Addiction Services Division provides a comprehensive system of care to prevent, intervene in, and treat mental illness and addiction in adults and children. Through culturally-appropriate and evidence-based practices, Multnomah County serves low-income, uninsured and homeless people, as well as anyone who is in crisis. Multnomah County serves the largest urban population in Oregon with more than 735,000 residents.

Services

Mental Health and Addiction Services operates the crisis system that is a critical gateway to care. This hub includes a 24-hour call center, mobile outreach team, partnerships to prevent inappropriate incarceration, screening for early psychosis, admissions to in-patient assessment and information about non-crisis resources.

Staff investigate involuntary commitments; manage jail and hospital diversion programs; and coordinate residential care for severe mental illness.

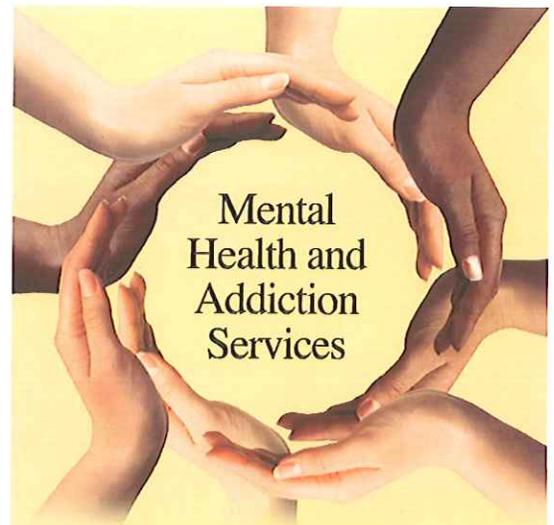
Addiction Services staff coordinate age-appropriate and culturally-specific care through detoxification, treatment and recovery.

The Multnomah County mental health organization, Verity, provides outpatient treatment, crisis respite, and community-based prevention and acute treatment to adults and children enrolled in the Oregon Health Plan.

Governance and Leadership

The Mental Health and Addiction Services Division seeks consumer involvement and oversight through the Adult Mental Health and Substance Abuse Advisory Council, the Children's Mental Health System Advisory Council and the Verity Quality Management Committee.

As a division of the Multnomah County Department of Human Services, Mental Health and Addiction Services is governed by the five-member Board of County Commissioners. The division is led by a team of highly-qualified behavioral health providers and managers. Their strategies reflect a commitment to the mental health needs of Multnomah County including underserved communities of African Americans, Native Americans, Latinos, Eastern Europeans and Asian Americans.



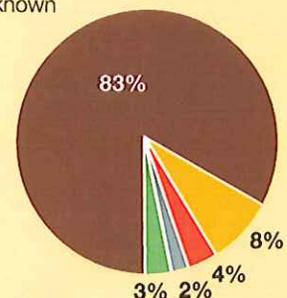
Crisis System of Care

- Available to all residents
- Call center hub operates 24/7
- Dispatches mobile crisis outreach
- 61,000 calls answered each year
- Urgent walk-in clinic serves 350 people a month, 96 percent of whom are diverted from being hospitalized
- Secure transportation
- Partner with police and criminal justice officers
- Links to 911, 211, and Oregon Partnership suicide hotlines
- Bilingual and culturally competent staff
- Child and family specific teams
- Doorway to Crisis Assessment and Treatment Center
- Initial screen for early psychosis intervention program

Client poverty status (2010)

This is reported as a percentage of the 2010 federal poverty level. In Oregon, a family of four earning \$22,050 was at 100% of the poverty threshold.

- 100% and below
- 101-150%
- 151-200%
- Over 200%
- Unknown





Community Mental Health Program

Mental Health and Addiction Services Division

The Multnomah County Community Mental Health program serves people with severe mental illness who are uninsured and without resources. The program focuses on stabilizing individuals leaving hospitals and jails and works to prevent further hospitalization, incarceration, addiction relapse and the loss of custody of children. Through effective services, staff prevent higher-cost alternatives such as hospitalizations.

Commitment Services

Community Mental Health Program staff oversee those people involuntarily committed to psychiatric hospitals. Under Oregon law, Multnomah County investigates commitments to determine whether a person is dangerous to himself. Although just 20 percent of all Oregon residents live in Multnomah County, the county performs 48 percent of all commitment investigations and associated actions. When a client leaving the state hospital lacks a community placement, Multnomah County also covers the cost of continuing the hospital stay.

Adult Residential Services

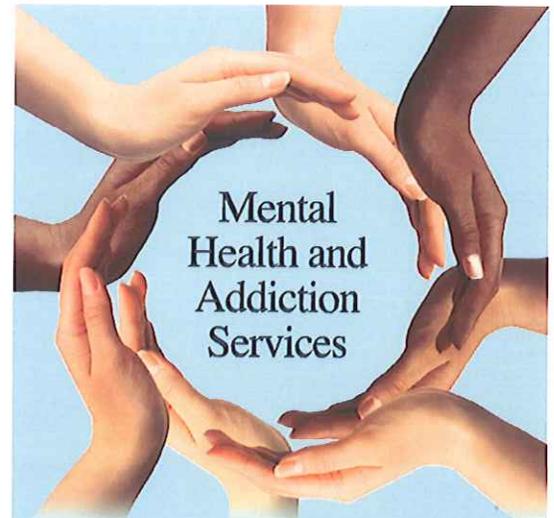
Multnomah County safely moves clients from institutions into the community. The Community Mental Health Program staff screen and place adults with severe mental illness in appropriate homes or facilities.

Jail and Hospital Diversion Programs

Coordinated jail and hospital diversion programs focus on those individuals at risk of being hospitalized or jailed without treatment, support and resources. Community court offers social services as an alternative to jail. Mental health court provides intensive case management to those charged with a crime, ensuring restorative justice while connecting them to community treatment, housing and medical support. Forensic diversion teams provide long-term monitoring.

County General Fund contribution

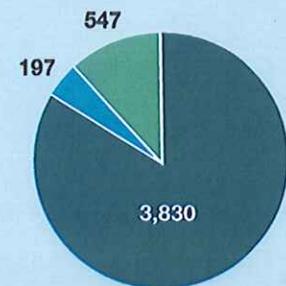
Multnomah County strives to strengthen its system of care with the Multnomah County Treatment Fund. This covers community-based services to those who are uninsured and ineligible for the Oregon Health Plan. The county program concentrates on people being released from jail or psychiatric hospitals and who are at risk of re-hospitalization.



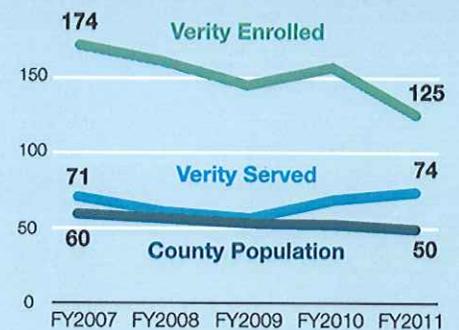
Involuntary Commitment Investigations

FY 2011

- Investigated by Multnomah County
- Released from detention by Multnomah County
- Investigated by other county



Care lowers arrest rates





Addiction Services

Mental Health and Addiction Services Division

Multnomah County staff work to move people with drug and alcohol addictions successfully through treatment to maintaining sobriety. Care includes residential and outpatient treatment, counseling, medication management, relapse prevention, aftercare services for those in recovery and specialized programs for the severely addicted who are homeless. Research shows that for every \$1 spent on treatment, Oregon taxpayers save \$5.60.

Prevention Programs for Youth and Families

Multnomah County collaborates with the Housing Authority of Portland to deliver a structured after-school program for public housing residents. Services include tutoring, mentoring and family-support home visits as well as homework help, socializing and skill building activities to 200 young people whose families live in public housing. Of those young people, 75% showed an improvement in behavior and academic achievement.

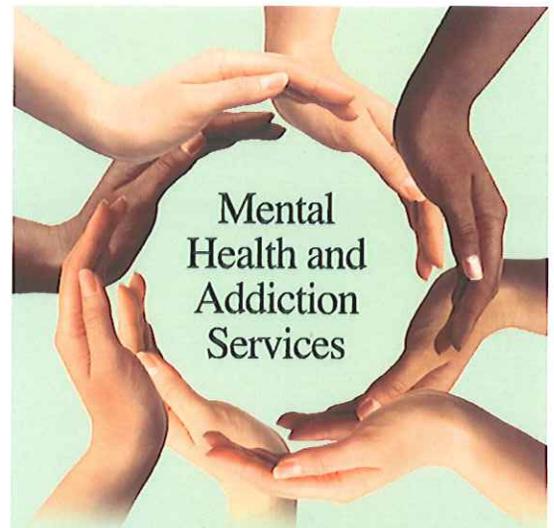
Culturally-specific care includes efforts to reach high-risk Latino youth. Multnomah County collaborates with juvenile services, schools and community partners to support families rebuilding their lives.

Residential Treatment

Through Addiction Services, state-licensed providers offer intensive services in residential settings for those high-risk people who had earlier failed attempts at treatment or who are chronically unemployed. An evidence-based supportive housing strategy offers low-cost alternatives to residential treatment. Community recovery efforts support recovery and sobriety.

Problem Gambling

Multnomah County has one of the highest rate per capita (18 years and older) of lottery sales statewide. About 350 gamblers and families participated in treatment in FY11 and approximately 60% of them successfully completed their treatment.



There are about 2,500 admissions to detoxification annually with an average successful completion rate of 75%.

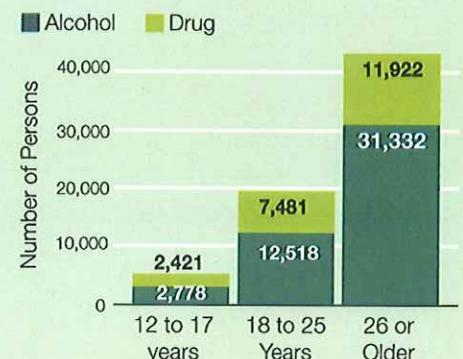
Multnomah County provides medically monitored drug and alcohol detoxification to stabilize a highly vulnerable and diverse population, connecting individuals to medical care to ease withdrawal, receive physical and mental health care, and housing support such as eviction prevention, and economic support such as job training.

An estimated 300,000 Oregonians have a diagnosable substance use disorder.

Roughly 18 percent of those needing addiction services access treatment.

More than 40% of those who try to get help run into barriers related to cost or lack of insurance.

Persons with Addictions Abuse or Dependence in Multnomah County 2006-2008





Verity Mental Health Organization

Mental Health and Addiction Services Division

Multnomah County's mental health organization for individuals enrolled in the Oregon Health Plan is Verity. Care is matched to diagnosis and acuity for more than 8,000 adults annually.

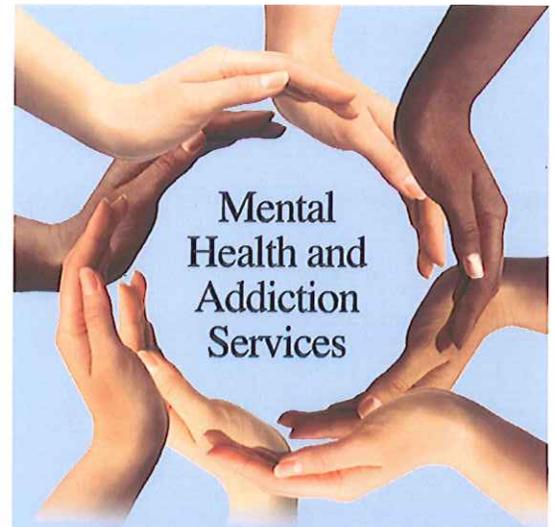
Verity Mental Health Organization Membership

FY11 Membership	119,869
FY11 Unduplicated Members Served	15,183
FY11 Unduplicated Percent of Members Served	12.7%
FY 11 Average Monthly Percent of Members Served	7.1%

Verity Member Race & Ethnicity	Percent of membership	Percent of membership served
Slavic or Eastern European	5.3%	1.9%
White	42.6%	9.6%
Black	15.1%	7%
Native/Alaskan	1.4%	11.7%
Hispanic	18.9%	2.6%
Asian/Pacific Islander	8.7%	5.4%
Other	8.1%	8.5%

Verity's outpatient treatment for adults strives to meet individual needs through individual and group therapy, case management outreach and medication management. Care is matched to diagnosis and acuity for more than 8,000 adults a year served in this level of care.

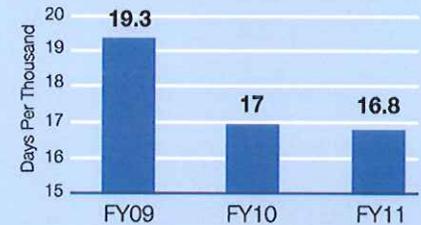
Psychiatric hospitalizations are provided for those at immediate risk to themselves or others. Hospital admissions are carefully monitored to ensure admissions are medically and clinically appropriate. Staff work with hospitals and providers to follow individuals as they return to the community after discharge.



New programs for Verity members saved 334 hospital days in FY10 and 394 hospital days in FY11.

Verity Adult Hospital Days Per Thousand Member Months

(Medicare Dual Members Excluded)



Percentage of Verity Mental Health Clients with Reduced Symptoms

