

Program #40081 - Multnomah County Care Coordination

Program Contact: Jessica Jacobsen

Health Department **Department:**

Program Offer Type: Existing Operating Program Program Offer Stage: As Proposed

Related Programs:

Program Characteristics:

Executive Summary

The Care Coordination Unit was formed in 2020 in the Behavioral Health Division as a result of CCO 2.0 and provides care coordination from early childhood through adulthood, including: Wraparound, Youth & Adult Intensive Care Coordination (ICC), & the Multnomah Intensive Care Coordination Team (M-ITT). Wraparound and Youth ICC provide a broad range of care coordination services and work within the multi-tiered Children System of Care Governance Structure to address cross system barriers for youth and families. Adult ICC provides integrated care coordination to adults with complex behavioral health needs to improve health outcomes and experience. M-ITT provides short term care coordination and case management to support adults during and after a psychiatric hospitalization to connect to community-based services.

Program Summary

Wraparound, Youth & Adult ICC are funded by Oregon Health Plan via a delegation agreement with Coordinated Care Organizations(s), M-ITT is funded by HealthShare as part of the Crisis Services continuum of care, Care Coordinators partner with Primary Care Providers, Community Behavioral Health Providers, Department of Community Justice, Housing Providers, Intellectual Developmental Disabilities (IDD), Oregon Department of Human Services (ODHS), Child Welfare, School Districts, Peer Service Providers, and other stakeholders to improve care and outcomes for clients.

ICC and Wraparound Care Coordinators engage in a team planning process with adults, youth, family and community partners and providers to develop a unified, strengths-based plan to address individualized needs. For youth participating in Wraparound services, their plan of care is youth-driven, family-guided, culturally responsive, multidisciplinary and includes both formal and natural support. The goal is to help youth address mental health needs in order to be healthy, successful in school, and to remain in their communities. Youth and Adult ICC support individuals (and their families) with complex behavioral health needs with developing individualized care plans to: meet physical, oral, behavioral health, substance use, and psychosocial goals. ICC facilitates transitions between mental health services; ensures team communication; and connects with community services and supports. M-ITT provides rapid engagement to adults exiting psychiatric hospitals who are not connected to an outpatient behavioral health provider to provide short term intensive support and connect them to ongoing behavioral health services and other community support services including Primary Care, shelter, and other services to address client needs.

On average approximately 420 youth, adults, and families are served by Youth and Adult ICC, Wraparound, and M-ITT at any given time, of whom approximately 30% identify as BIPOC.

Programs ensure policies, procedures and services are individualized and culturally and linguistically responsive. Staff are recruited and retained to reflect the communities served with several bicultural and bilingual staff available to work with African-American, Latinx and Spanish speaking clients. Peer Services are contracted out to qualified providers.

Measure Type	Primary Measure	FY21 Actual	FY22 Budgeted	FY22 Estimate	FY23 Offer
Output	Number of unique children served in Youth Care Coordination. ¹	382	600	381	380
Outcome	% score measuring family's satisfaction and progress in Wraparound.	87.5%	85%	85.8%	85%
Output	Referrals processed in Youth Care Coordination. ²	294	350	265	300
Output	Total number of clients served in M-ITT. ³	584	650	584	575

Performance Measures Descriptions

The scope of work changed significantly in 2020 with transition to CCO 2.0 which reduced the number of children served in YCC. These changes were not captured in FY22 budgeted numbers. ²Referrals decreased with CCO 2.0 transition. ³M-ITT saw increased length of enrollment due to COVID and system capacity which decreased total number served.

5/2/2022

Legal / Contractual Obligation

Delegation Agreement with Coordinated Care Organization(s) to provide Wraparound and Intensive Care Coordination.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2022	2022	2023	2023
Personnel	\$295,862	\$5,908,194	\$148,401	\$7,014,367
Contractual Services	\$0	\$1,526,053	\$0	\$874,878
Materials & Supplies	\$1,352	\$53,944	\$511	\$77,679
Internal Services	\$0	\$1,655,292	\$9,200	\$1,958,797
Total GF/non-GF	\$297,214	\$9,143,483	\$158,112	\$9,925,721
Program Total:	\$9,440,697		\$10,083,833	
Program FTE	2.00	43.25	1.00	48.41

Program Revenues						
Intergovernmental	\$0	\$9,143,483	\$0	\$9,925,721		
Total Revenue	\$0	\$9,143,483	\$0	\$9,925,721		

Explanation of Revenues

This program generates \$941,184 in indirect revenues.

- \$ 2,682,601 Health Share Unrestricted Medicaid (Off the top) funding
- \$ 7,230,202 Unrestricted Medicaid fund through CareOregon
- \$ 12,918 State Mental Health Grant IGA with State of Oregon

Significant Program Changes

Last Year this program was: FY 2022: 40081 Multnomah County Care Coordination

M-ITT length of enrollment increased due to decreased outpatient system capacity during COVID which resulted in fewer total clients being served by the MITT program. For FY23 Program is adding 2.00 FTE to MITT to increase services and fully utilize investment from HSO.