

Program #40068 - Behavioral Health Quality Management

Program Contact: Jennifer Gulzow

Health Department **Department:**

Program Offer Type: Program Offer Stage: As Requested Support

Related Programs: 40065, 40067 Program Characteristics: In Target

Executive Summary

Quality Management (QM) assures quality of the Behavioral Health Division and contracted providers by: agency audits. investigations, and monitoring mental health contract performance. The Division serves approximately 135,000 Multnomah Mental Health Oregon Health Plan (OHP) members, 52 mental health agencies and 72 residential/foster facilities. QM offer also includes the Decision Support Unit which is responsible for oversight and maintenance of the central Electronic Health Record system, and reporting for the Division Multnomah Mental Health Plan billing support.

Program Summary

Quality Management protects and supports mentally ill adults and children in Multnomah County by providing specific services including; coordinating compliance with Health Insurance Portability and Accountability Act (HIPAA) rules and Multnomah Mental Health contracts; measuring client outcomes; conducting Medicaid compliance audits for community mental health agencies; assuring compliance with grievance procedures; auditing and providing technical support to 52 mental health agencies; coordinating residential quality and tracking approximately 13,000 reportable residential adverse events annually; facilitating Critical Incident Reviews for high risk incidents; assisting the State with licensing visits and Oregon Administrative Rules (OARs) compliance for residential treatment homes and facilities; investigating complaints about residential care; and monitoring progress of providers found to be out of compliance with OARs.

Additionally, QM includes the Decision Support Unit which is responsible for oversight/administration of the Behavioral Health Division central Electronic Health Record (EHR) system, Multnomah Mental Health Plan Billing Support and reporting for the Division.

Performance Measures									
Measure Type	Primary Measure	FY19 Actual	FY20 Budgeted	FY20 Estimate	FY21 Offer				
Output	# of clinical reviews and incident reports reviewed	13,346	13,800	12,050	12,000				
Outcome	Percent of incident reports reviewed that resulted in a Critical Incident Review meeting with the program ¹	3%	2%	3%	3%				
Output	Number of requests managed by Decision Support ²	12,450	12,800	7,925	4,900				

Performance Measures Descriptions

¹Low percentage of critical incident reviews is reflective of incidents being reviewed, tracked and responded to in a timely manner.

²Includes billing support tickets, Evoly project, and support requests and reporting requests. Note: a drastic reduction in current year estimate and next year offer is the result of CCO 2.0 changes and reduction of Medicaid billing work and staffing.

3/4/2020

Legal / Contractual Obligation

1) Each provider of community mental health and developmental disability service must implement and maintain a QA program. Elements of the QA program include maintaining policies and procedures, grievance management, fraud and abuse monitoring, performance measurement, and contract management.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Requested General Fund	Requested Other Funds
Program Expenses	2020	2020	2021	2021
Personnel	\$564,653	\$3,615,318	\$876,423	\$1,753,918
Contractual Services	\$0	\$998,348	\$0	\$210,676
Materials & Supplies	\$946	\$325,938	\$7,206	\$86,484
Internal Services	\$37,487	\$910,960	\$176,583	\$451,446
Total GF/non-GF	\$603,086	\$5,850,564	\$1,060,212	\$2,502,524
Program Total:	\$6,453,650		\$3,562,736	
Program FTE	4.35	27.35	6.31	12.59

Program Revenues								
Intergovernmental	\$0	\$5,730,564	\$0	\$1,313,489				
Beginning Working Capital	\$0	\$120,000	\$0	\$1,189,035				
Total Revenue	\$0	\$5,850,564	\$0	\$2,502,524				

Explanation of Revenues

This program generates \$95,017 in indirect revenues.

- \$ 701,474 Health Share of Oregon (Medicaid): Based on FY20 Medicaid Rates
- \$ 198,147 Health Share Unrestricted Medicaid (Off the top) funding
- \$ 732,012 State Mental Health Grant: LA 01 System Management and Coordination
- \$ 445,376 Beginning Working Capital
- \$ 425,516 Unrestricted Medicaid fund through CareOregon

Significant Program Changes

Last Year this program was: FY 2020: 40068-20 Mental Health Quality Management

APS was removed from Quality Management and added to CMHP in August 2018.