

Program #40065 - Behavioral Health Division Administration

FY 2025 Proposed

Department: Health Department Program Contact: Heather Mirasol

Program Offer Type: Administration Program Offer Stage: Proposed

Related Programs: 40067, 40068

Program Characteristics:

Executive Summary

Multnomah County's Behavioral Health Division (BHD) Administration manages a recovery-focused, comprehensive system of care to prevent, intervene in, and treat mental illness and addiction in children and adults. The Division is grounded in values of racial and social equity, consumer driven services and trauma informed principles. Through culturally responsive and evidence-based practices, BHD serves low-income, uninsured, and individuals who are homeless, as well as any of the over 800,000 county residents experiencing a behavioral health crisis. BHD provides a continuum of services directly and through a provider network. These programs serve approximately 56,000 individuals annually.

Program Description

The Board of County Commissioners is the Local Mental Health Authority. Through that authority, BHD oversees and manages all publicly-funded behavioral health programs in the system of care, whether provided directly or through contracted agencies. BHD is organized into 6 units. The Community Mental Health Program (CMHP) provides safety net and basic services to the adult population of the entire county. Direct Clinical Services (DCS), encompasses programs for children, youth, and families delivered directly by DCS staff. These services may be reimbursed by the local Coordinated Care Organization (CCO), by the state, or by another funding source. Care Coordination for adults and children who are Medicaid members - funded by federal dollars through the local CCO as well as Choice, funded by the state. Addictions and Prevention includes the Providing Access to Hope (PATH) team, substance use, gambling, and suicide prevention, and contract management funded through the CCO, grants, and the state. Quality Management includes compliance, quality improvement, reporting, billing and Evolv, the Electronic Health Record for BHD direct services. The Office of Consumer Engagement is a team of peers, including culturally specific engagement specialists who ensure that BHD programs and practices are consumer driven, trauma informed, and equitable. This office also oversees peer expansion contracts for peer outreach through our community providers to improve relationships and services through the engagement of culturally and population specific Peer Support Specialists, Peer Wellness Specialists and Certified Recovery Mentors. BHD continuously assesses its continuum of services to respond to the changing needs and demographics of the County. All changes are shaped by the input of consumers, advocates, providers and stakeholders. The division ensures the system and services provided are consumer-driven by prioritizing consumer voice through the Office of Consumer Engagement, frequent provider feedback, adult system and child system advisory meetings, focus groups and ad hoc meetings. BHD is also responsible for ensuring contracted providers deliver evidence-based and culturally responsive services to consumers and monitors contracts for regulatory and clinical compliance. To ensure good stewardship, BHD business and clinical decisions ensure that finite resources are targeted to serve the most vulnerable populations. BHD management participates in planning at the state level to influence the policy decisions that affect the community we serve. BHD values our community partners, with whom we work collaboratively to create a system of care responsive to the needs of our community.

Performance Measures								
Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target			
Output	Total Behavioral Health Advisory Meetings	23	23	23	23			
Outcome	Advisors agree with the statement, "Overall, BHD does its iob well"	93.7%	85%	N/A*	85%			

Performance Measures Descriptions

*Rather than survey council members for FY24, BHD leadership held listening sessions during the November General Council & Committee Workgroup meetings to gather feedback on division/council communication and process improvements. OCE will be redrafting a new council assessment of satisfaction to be used once changes are implemented in FY25.

Legal / Contractual Obligation

Oregon Administrative Rule, Standards for Management of Community Mental Health and Developmental Disability Programs, 309-014-0020, 309-014-0035, 309-14-0040.

Oregon Health Authority Intergovernmental Agreement for the Financing of Community Addictions and Mental Health Services.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$1,342,413	\$1,362,210	\$1,986,414	\$1,274,537
Contractual Services	\$524,571	\$450,000	\$343,266	\$170,049
Materials & Supplies	\$37,726	\$3,317	\$24,241	\$13,196
Internal Services	\$229,259	\$206,939	\$261,415	\$237,403
Total GF/non-GF	\$2,133,969	\$2,022,466	\$2,615,336	\$1,695,185
Program Total:	\$4,156,435		\$4,310,521	
Program FTE	7.77	5.31	10.60	4.98

Program Revenues								
Intergovernmental	\$0	\$1,268,888	\$0	\$931,036				
Beginning Working Capital	\$0	\$753,578	\$0	\$764,149				
Total Revenue	\$0	\$2,022,466	\$0	\$1,695,185				

Explanation of Revenues

This program generates \$153,942 in indirect revenues.

State: \$369,095 - MHS-01: Division Administration CY23 \$388,769 - CareOregon - Administrative Support

State: \$ 173,172 - OHA Behavioral Health Community Mental Health Programs & Capital - MH Admin

\$ 764,149 - MA Division Admin BWC

Significant Program Changes

Last Year this program was: FY 2024: 40065 Behavioral Health Division Administration