

**Department:** Health Department

**Program Contact:** Barbara Snow

**Program Offer Type:** Operating

**Program Offer Stage:** Proposed

**Related Programs:**
**Program Characteristics:**
**Program Description**

CATC Subacute is a 24-hour, 7 day a week, short-term stabilization program for individuals requiring a secure alternative to incarceration or hospitalization. The program services adults, 18 years of age and older, who have been diagnosed with a serious mental illness who are residents of Multnomah County. Although length of stay may vary, individuals not under civil commitment statutes cannot exceed 30 days without a variance. Throughout their stay(s) individuals are connected to programmatic internal and external support they need in order to be discharged. The goal is to decrease the likelihood needing higher level of care or experiencing a negative consequence of hospitalization (loss of housing, services, financial stability, etc.). Peer Support Specialists are an integral part of the CATC model and provide comprehensive support to individuals in care. This program offer aims to provide access to CATC service for the uninsured or underinsured.

Multnomah County crisis system strives to exceed OHA requirements, work in line with best practices as outlined by SAMHSA's 2025 National Guidelines for a Behavioral Health Coordinated System of Crisis Care, the 2021 Roadmap to the Ideal Crisis System, and Crisis Now (utilized by OHA as model). The goal is 24/7 accessibility to the following three components: someone to contact, someone to respond, and somewhere to go. Sub-acute is a critical component in a full continuum of mental health services and provides a non-hospital based, secure environment for those at risk of harm to themselves or others. Utilizing principles of recovery orientation and trauma-informed care as well as the recognition of systematic racism and oppression. Service providers aim to be responsive and practice cultural humility. The ultimate goal of CATC services is reduced need for higher levels of care, including hospitalization or incarceration. This program offer seeks to increase access to these services for individuals regardless of insurance.

Access to 1 bed for sub-acute level of care for uninsured/underinsured individuals

Comprehensive wrap-around support include medication management and Peer Support services

**Performance Measures**

Measure Type	Performance Measure	FY24 Actual	FY25 Budgeted	FY25 Estimate	FY26 Target
Output	Number of admissions that are Non-HSO Members (Non-Medicaid members)	16	25	12	15
Outcome	Percentage of individuals discharged from CATC to a lower level of care	93%	95%	100%	95%
Outcome	Percentage of BIPOC community member access to Non-Medicaid "CMHP" admissions.	31%	20%	25%	20%

**Performance Measures Descriptions**

Output and outcome numbers are not being changed with the reduction of beds. Beds are being reduce proportionate to utilization so we do not expect output and outcomes to be impacted.

## Legal / Contractual Obligation

The Multnomah County Community Mental Health Program is contracted with the state to provide a mental health crisis system that meets the needs of the community.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2025	2025	2026	2026
Contractual Services	\$617,425	\$0	\$0	\$317,047
<b>Total GF/non-GF</b>	<b>\$617,425</b>	<b>\$0</b>	<b>\$0</b>	<b>\$317,047</b>
<b>Program Total:</b>	<b>\$617,425</b>		<b>\$317,047</b>	
<b>Program FTE</b>	0.00	0.00	0.00	0.00

Program Revenues				
Beginning Working Capital	\$0	\$0	\$0	\$317,047
<b>Total Revenue</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$317,047</b>

## Explanation of Revenues

\$ 317,047 - OHA CFAA Settlement

## Significant Program Changes

**Last Year this program was:** FY 2025: 40070 Mental Health Crisis Assessment & Treatment Center (CATC)

This program was reduced from two beds, to one bed, for FY 2026. This reduction was due to utilization rates and demonstrated need in the community. This is a reduction of \$317,048. Remaining portion of the contract was moved to Beginning Working Capital for FY 2026.