

**Program #40075 - Choice Model** **FY 2026 Department Requested**

**Department:** Health Department **Program Contact:** Jessica Jacobsen  
**Program Offer Type:** Operating **Program Offer Stage:** Department Requested  
**Related Programs:**  
**Program Characteristics:**

**Program Description**

The Choice Model Program consists of Care Coordination services and contracted services to work with individuals with Severe and Persistent Mental Illness (SPMI). Choice diverts individuals from Oregon State Hospital (OSH); coordinates successful discharge from OSH and acute psychiatric hospitals into appropriate community placements and services; coordinates care for individuals residing primarily in licensed residential facilities in order to move individuals into the least restrictive housing possible; and coordinates care and develops supports to maximize independent living; 701 individuals were served in fiscal year 2024, of whom 31.54% identified as Black, Indigenous or other People of Color (BIPOC). There are two culturally specific staff on the team that were recruited and retained to reflect the communities served. One LGBTQIA2+ clinician and one Black/African American Exceptional Needs Care Coordinator.

The Behavioral Health Division's Choice Model Program works with other Division units, Acute Care Hospitals, OSH, Oregon Health Authority (OHA)/Health Systems Division, Coordinated Care Organizations, and counties to coordinate the placement and transition of individuals primarily within a statewide network of licensed housing providers. The overarching goal of Choice is to assist individuals to achieve the maximum level of independent functioning possible. This goal is achieved by diverting individuals from admission to hospital level of care to community-based resources; supporting timely, safe and appropriate discharges from hospitals into the community; and providing access to appropriate supports (skills training, case management, etc.) to help individuals achieve independent living and self-sufficiency in the least restrictive housing environment. Program includes Exceptional Needs Care Coordination (ENCC), access to peer services, funding for uninsured/underinsured clients for outpatient services, housing supports, rental assistance, etc.

Services offered by Choice can include: supported housing development and rental assistance to increase housing options matched to client need; ENCC to assure access to appropriate housing placements and the development of supports to identify the least restrictive setting where the individual will maintain stability. Care Coordination provides referrals to community mental health programs; supported employment to help move clients towards greater self-sufficiency; and transition planning to assure the most efficient utilization of the licensed residential housing capacity within the community.

The program has increased financial support to community placements and works primarily with Acute Care Hospitals as OSH capacity has become minimal for the civil population within recent years. Choice continues to prioritize and engage in updates to workflows, policies and procedures to clarify access and promote more equitable service delivery.

**Performance Measures**

Measure Type	Performance Measure	FY24 Actual	FY25 Budgeted	FY25 Estimate	FY26 Target
Output	Number of Clients Served in Choice (1)	701	675	695	700
Outcome	% of clients receiving direct client assistance to meet basic needs (2)	28%	25%	30%	30%

**Performance Measures Descriptions**

(1) Program short-staffed majority of FY23 & performed a census clean-up of clients no longer in need of services, resulting in fewer clients served. Program is actively hiring & improving referral sources, to increase FY25 census. (2) Client assistance includes, but is not limited to: housing assistance, guardianship, & secure transportation. In FY23, program developed infrastructure to capture pass-through client assistance data not previously reported, resulting in higher outcome.

## Legal / Contractual Obligation

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

CCO Delegation Agreements with CareOregon and Trillium.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Department Requested General Fund	Department Requested Other Funds
<b>Program Expenses</b>	<b>2025</b>	<b>2025</b>	<b>2026</b>	<b>2026</b>
Personnel	\$0	\$2,486,776	\$0	\$2,396,543
Contractual Services	\$0	\$2,362,522	\$0	\$2,813,978
Materials & Supplies	\$0	\$19,963	\$0	\$19,963
Internal Services	\$0	\$465,503	\$0	\$567,173
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$5,334,764</b>	<b>\$0</b>	<b>\$5,797,657</b>
<b>Program Total:</b>	<b>\$5,334,764</b>		<b>\$5,797,657</b>	
<b>Program FTE</b>	0.00	15.32	0.00	14.32

<b>Program Revenues</b>				
Intergovernmental	\$0	\$5,334,764	\$0	\$5,797,657
<b>Total Revenue</b>	<b>\$0</b>	<b>\$5,334,764</b>	<b>\$0</b>	<b>\$5,797,657</b>

## Explanation of Revenues

This program generates \$234,360 in indirect revenues.

Federal - \$2,019,246 - Unrestricted Medicaid fund through CareOregon (Choice)

State - \$3,778,411 - State Mental Health Grant: CHOICE Model based on 2021 IGA with State of Oregon

## Significant Program Changes

Last Year this program was: FY 2025: 40075 Choice Model

A vacant Mental Health Consultant 1.00 FTE - was eliminated with no impact to program operations.