

**Department:** Health Department

**Program Contact:** Jessica Jacobsen

**Program Offer Type:** Operating

**Program Offer Stage:** Proposed

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

### Program Description

The Care Coordination Unit was formed in 2020 in the Behavioral Health Division as a result of CCO 2.0 and provides care coordination for all ages, including: Wraparound, Youth & Adult Intensive Care Coordination (ICC), Jail Care Coordination (JCC), & 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 and JCC 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.

Wraparound, Youth & Adult ICC, and JCC are funded by Oregon Health Plan via agreements with Coordinated Care Organization(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, Oregon Department of Human Services, 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, community partners, and providers to develop a unified, strengths-based plan addressing 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 remain in their communities. Youth and Adult ICC support individuals (and their families) with complex behavioral health needs to develop individualized care plans meeting 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 (i.e. Primary Care, shelter, etc.) to address client needs.

Programs ensure policies, procedures and services are individualized and culturally/linguistically responsive. Staff are recruited and retained to reflect the communities served, with several bicultural and bilingual staff available to work with LGBTQIA+, Native American, African-American, Latinx and Spanish speaking clients, which is an established best practice for achieving equitable health outcomes. Peer Services are contracted out to qualified providers.

### Performance Measures

Measure Type	Performance Measure	FY24 Actual	FY25 Budgeted	FY25 Estimate	FY26 Target
Output	Number of unique children served in Youth Care Coordination.	382	350	374	375
Outcome	% score measuring family's satisfaction and progress in Wraparound. (1)	81.75%	85%	79.85%	85%
Output	Referrals processed in Youth Care Coordination.	407	350	397	395
Output	Total number of clients served in M-ITT. (2)	589	530	605	575

### Performance Measures Descriptions

(1) Additional administrative support to increase WFI-EZ survey completion rates to help obtain a statistically significant response rate has continued to successfully increase response rates. Program caregiver satisfaction scores surpass the statewide average for Wraparound programs. (2) M-ITT continues to experience increased length of enrollment due to reduced system capacity. M-ITT has initiated a monitoring status to provide light care coordination support when most appropriate which will increase clients served in the future.

## 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	2025	2025	2026	2026
Personnel	\$0	\$9,610,498	\$0	\$9,425,526
Contractual Services	\$0	\$2,804,197	\$0	\$1,958,755
Materials & Supplies	\$0	\$143,346	\$0	\$153,648
Internal Services	\$0	\$2,884,852	\$0	\$3,134,246
<b>Total GF/non-GF</b>	<b>\$0</b>	<b>\$15,442,893</b>	<b>\$0</b>	<b>\$14,672,175</b>
<b>Program Total:</b>	<b>\$15,442,893</b>		<b>\$14,672,175</b>	
<b>Program FTE</b>	0.00	58.68	0.00	54.68

Program Revenues				
Intergovernmental	\$0	\$15,442,893	\$0	\$14,672,175
<b>Total Revenue</b>	<b>\$0</b>	<b>\$15,442,893</b>	<b>\$0</b>	<b>\$14,672,175</b>

## Explanation of Revenues

This program generates \$1,444,205 in indirect revenues.

MHS-05 - Adult MH SVCS - \$355,333

Trillium Peer Svcs contract - \$115,696

Care Oregon Medicaid BH - \$14,201,146

## Significant Program Changes

**Last Year this program was:** FY 2025: 40081 Multnomah County Care Coordination

The Jail Care Coordination team is a new service. 4.00 positions in the American Society Addiction Medicine were eliminated because external funding was eliminated. These were vacant positions that had never been filled.