

**Department:** Health Department

**Program Contact:** Anthony Jordan

**Program Offer Type:** Operating

**Program Offer Stage:** Proposed

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

### Program Description

As the Community Mental Health Program (CMHP), we are responsible for supporting a system of locally available, effective safety net services. The Adult Addiction Treatment Continuum is part of those services and serves over 3,000 individuals per year and includes adult Substance Use Disorder (SUD) treatment and recovery support services for adult Multnomah County residents living at or below 200% poverty who are uninsured or underinsured (high copays or deductibles that create a fiscal burden to access) for the services. Services include: residential treatment, intensive outpatient treatment with supported housing, outpatient treatment, outreach/engagement, recovery mentoring, and recovery support (including linkages to housing support, prosocial/drug-free activities, basic needs support, etc).

The overarching goal of Substance Use Disorder treatment and recovery support services is to establish a path to recovery and well-being for those experiencing SUD. SUD treatment and recovery supports also have broader impact across our county systems and services, including in criminal justice, child welfare, and healthcare. Positive impacts are experienced at the interpersonal, family, and community levels, such as: reduced jail recidivism rates, reduced infectious disease transmission rates, reduced crisis system utilization, and strengthening of family bonds and reunification.

Our adult continuum supports treatment engagement, recovery, and a return to a healthy lifestyle. Treatment and recovery services address the negative consequences of problematic alcohol and other drug use; target specific barriers to recovery; and teach prosocial/drug-free alternatives to addictive behaviors through clinical therapy (individual and group), skill building, and peer-delivered services. Treatment and recovery service providers also address self-sufficiency needs through support with parenting skills, stress and anger management, housing issues, independent living skills, referrals for physical and mental health issues, employment services, and pro-social activities that build community and support for a drug-free lifestyle.

Treatment and recovery support services are delivered throughout the County by a network of state-licensed community providers and peer-run agencies. The continuum of treatment and recovery support includes culturally responsive programming for specific populations, including: communities of color, people living with HIV, LGBTQIA2S+ individuals, women, and parents whose children live with them while they are in residential treatment. As part of the Behavioral Health Department's commitment to equity, the Addiction Unit strives to identify, develop, and increase funding to providers who work to provide culturally responsive or culturally specific treatment and recovery services facilitated by individuals with lived experience, who speak the same language, and reflect the diverse populations being served. The Addictions Unit remains committed to supporting peer run and culturally specific organizations.

### Performance Measures

Measure Type	Performance Measure	FY24 Actual	FY25 Budgeted	FY25 Estimate	FY26 Target
Output	Number served in treatment and recovery support services	2,899	4,200	2,943	3,000
Outcome	Percentage of clients who successfully complete outpatient treatment*	50%	45%	45%	50%

### Performance Measures Descriptions

"Successful completion of treatment" is defined as the completion of at least two thirds of an individual's treatment plan goals and demonstrating 30 days of abstinence.

## Legal / Contractual Obligation

Funding is a combination of Federal substance abuse prevention/treatment, Ryan White federal grant funds, state general funds and state-federal pass through funds through the State Oregon Health Authority, and Local 2145 Beer and Wine tax and Marijuana tax revenue. Program planning is based on State Mental Health Grant Award requirements and submitted in the "Biennial Implementation Plan." Multnomah County accepts the State Mental Health Grant and spends these funds in accordance with State Service Elements. Local 2145 Beer and Wine tax and Marijuana tax revenues are provided to counties on a formula basis and are restricted to alcohol and drug treatment/ recovery support services.

## Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2025	2025	2026	2026
Personnel	\$542,906	\$526,974	\$575,887	\$420,720
Contractual Services	\$1,709,839	\$10,919,932	\$1,731,384	\$9,813,044
Materials & Supplies	\$14,773	\$8,889	\$2,871	\$610
Internal Services	\$134,598	\$39,090	\$154,946	\$36,880
<b>Total GF/non-GF</b>	<b>\$2,402,116</b>	<b>\$11,494,885</b>	<b>\$2,465,088</b>	<b>\$10,271,254</b>
<b>Program Total:</b>	<b>\$13,897,001</b>		<b>\$12,736,342</b>	
<b>Program FTE</b>	3.00	3.40	3.00	2.40

Program Revenues				
Intergovernmental	\$0	\$9,236,196	\$0	\$8,255,389
<b>Total Revenue</b>	<b>\$0</b>	<b>\$9,236,196</b>	<b>\$0</b>	<b>\$8,255,389</b>

## Explanation of Revenues

This program generates \$2,418 in indirect revenues.

Fed - OHA Ryan White - MH, \$178,100 Recovery Support - Local 2145 \$641,884

Fed - A&D-62 Drug Residential-Children \$305,812, Fed - A&D-66: Addic Outpat Serv-SAPT \$2,274,290 ,

A&D-67 Addictions Res \$1,265,400, A&D-66 Addictions/Opiate/Outpatient Tx \$2,188,483

A&D-63 Peer Delivered Svcs \$835,994, A&D-62 Drug Residential \$355,426

A&D-61 Adult SUD Res Tx \$210,000,

Adult Addictions Treatment Continuum (AATC)- SHS \$2,015,865. Supportive Housing Services Fund 1521. Tax revenues are budgeted in the Homeless Services Department in program 30999.

## Significant Program Changes

**Last Year this program was:** FY 2025: 40085A Adult Addictions Treatment Continuum

Program Offer 40085B was added to this program offer for FY 2026. Due to SHS constraints, this program offer was reduced by \$500,000 for FY 2026. This reduction will not impact beds within the system. Impacts will be mitigated through increased billable revenue and updates to the contract.