



Health Department FY 2026 Approved Budget Behavioral Health

Presented to the
Board of County Commissioners

Multnomah County
May 21, 2025

Located at: www.multco.us/budget

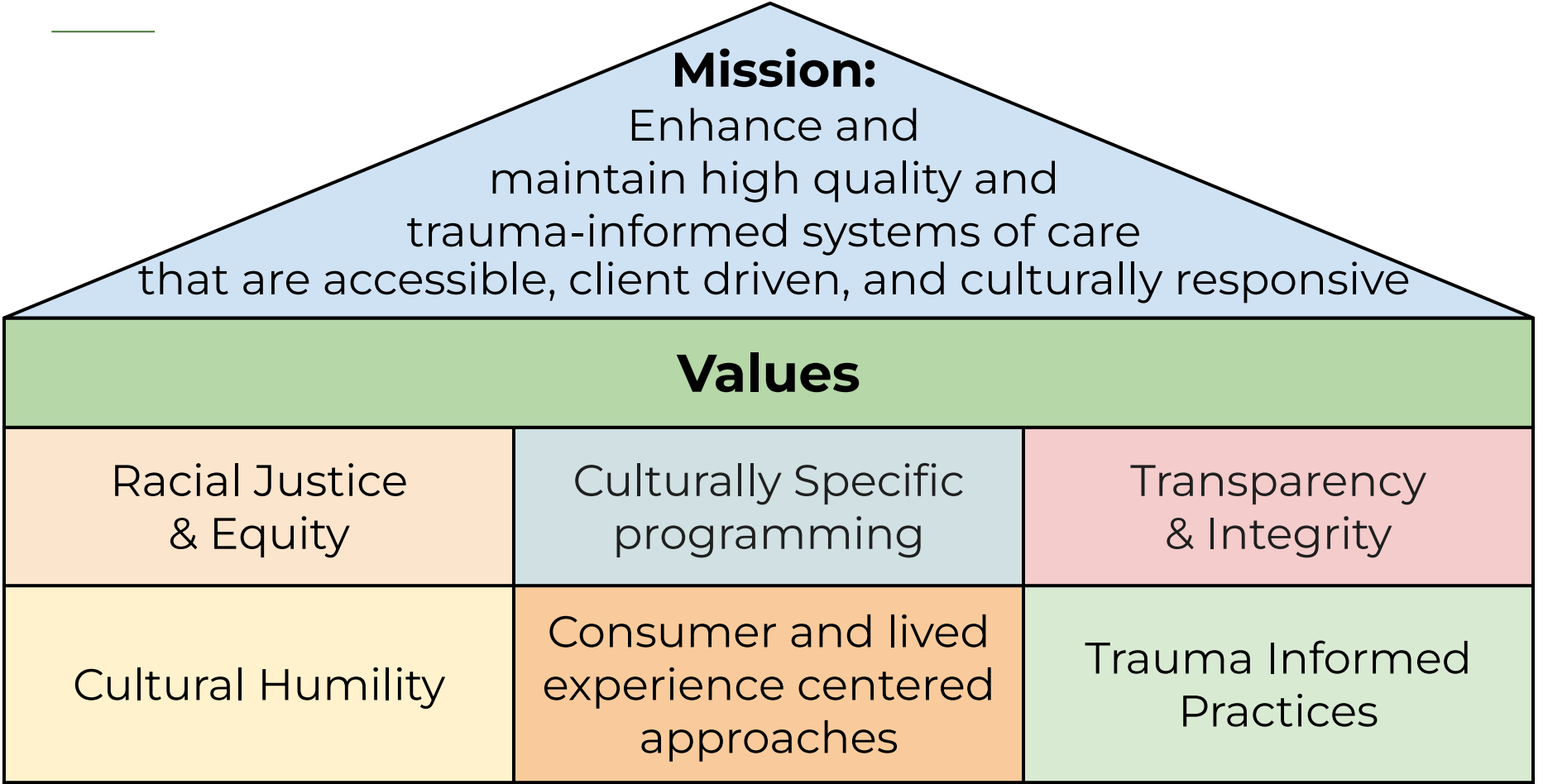
Agenda

- 1 Introduction
- 2 Mission & Values
- 3 What We Do
- 4 Who We Serve
- 5 Programs and Services
- 6 Homelessness Response Action Plan
- 7 Decision Making and the Numbers
- 8 Additional Factors

A photograph of a group of diverse women at an outdoor community event. In the foreground, a woman wearing a purple hijab and a patterned blue and white dress is smiling. Behind her, several other women are visible, some in green shirts and others in casual attire. A table with an orange tablecloth and various items like a hat and a green container is in the lower part of the image. A semi-transparent blue banner with white text is overlaid across the middle.

Why We Do This Work

Behavioral Health: Our Mission & Values

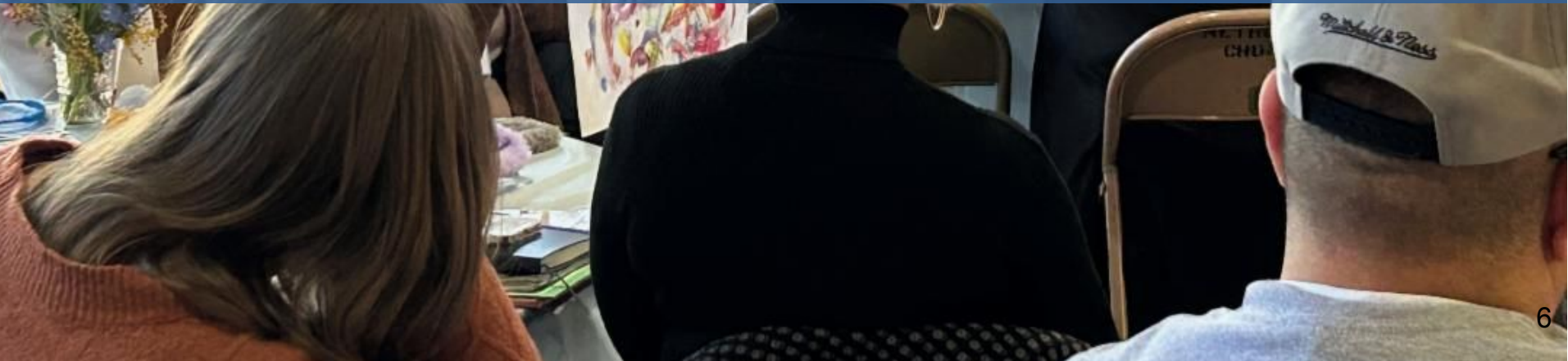


Community Mental Health Program Statutory Responsibilities

- BHD administers the County's **Community Mental Health Program (CMHP)** under the direction of the Board of County Commissioners, which serves as the **Local Mental Health Authority (LMHA)**.
- The CMHP ensures there exists a broad array of **safety net behavioral health services** for children, families, adults, and older adults. CMHPs are required to create a **Comprehensive Local Plan (CLP)** describing mandated functions for service delivery



What We Do



Behavioral Health: What We Do

We carry out our work across many programs, both direct service and partner provided.



Our partner and direct service work is supported by cross-divisional infrastructure.

Addictions & Prevention Services

Behavioral Health Wellness and Prevention Team

- **1,152** individuals trained on Mental Health First Aid, Applied Suicide Intervention Skills (ASIST), Question, Persuade, Refer (QPR), and/or Counseling on Access to Lethal Means (CALM) and safeTalk programs
- **91%** reported greater understanding of mental illness and/or suicide prevention
- **14,580** individuals served at substance use prevention activities and/or programs, almost **91%** reported greater awareness afterward
- **38** problem gambling prevention activities delivered



Substance Use Disorder Housing



Deflection Program

Coordinated Care Pathway Center



Exterior of Coordinated Care Pathway Center located at 980 SE Pine St.



Sobering recliners at Coordinated Care Pathway Center

Office of Consumer Engagement

The input of consumers, advocates, providers, and stakeholders shapes the decision making of the Behavioral Health division.

The Office of Consumer Engagement (OCE) is made up of people with lived experience who are:

- **Advisors** to increase awareness and engagement of consumers into all levels of strategy planning and implementation
- **Subject matter experts** in expanding and integrating peer delivered services
- **Liaisons** to community providers and system partners
- **Conduits** for individuals with lived experience to provide input and feedback to the Behavioral Health Division

Behavioral Health Resource Center



Peers and client alumni connect at the Behavioral Health Resource Center Day Center

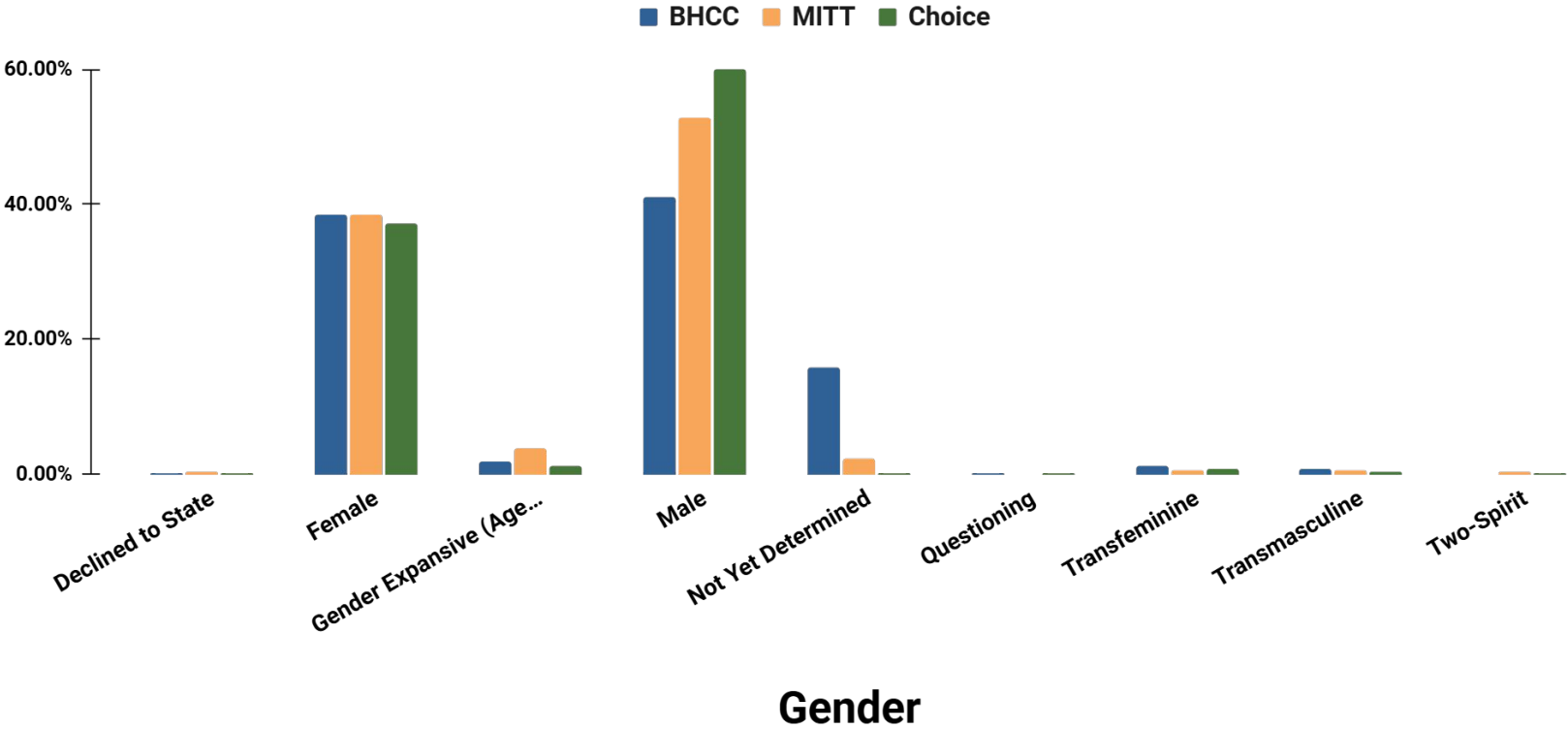
Behavioral Health Resource Center



Behavioral Health Resource Center Referral Van at 6th and Glisan in Old Town-Chinatown

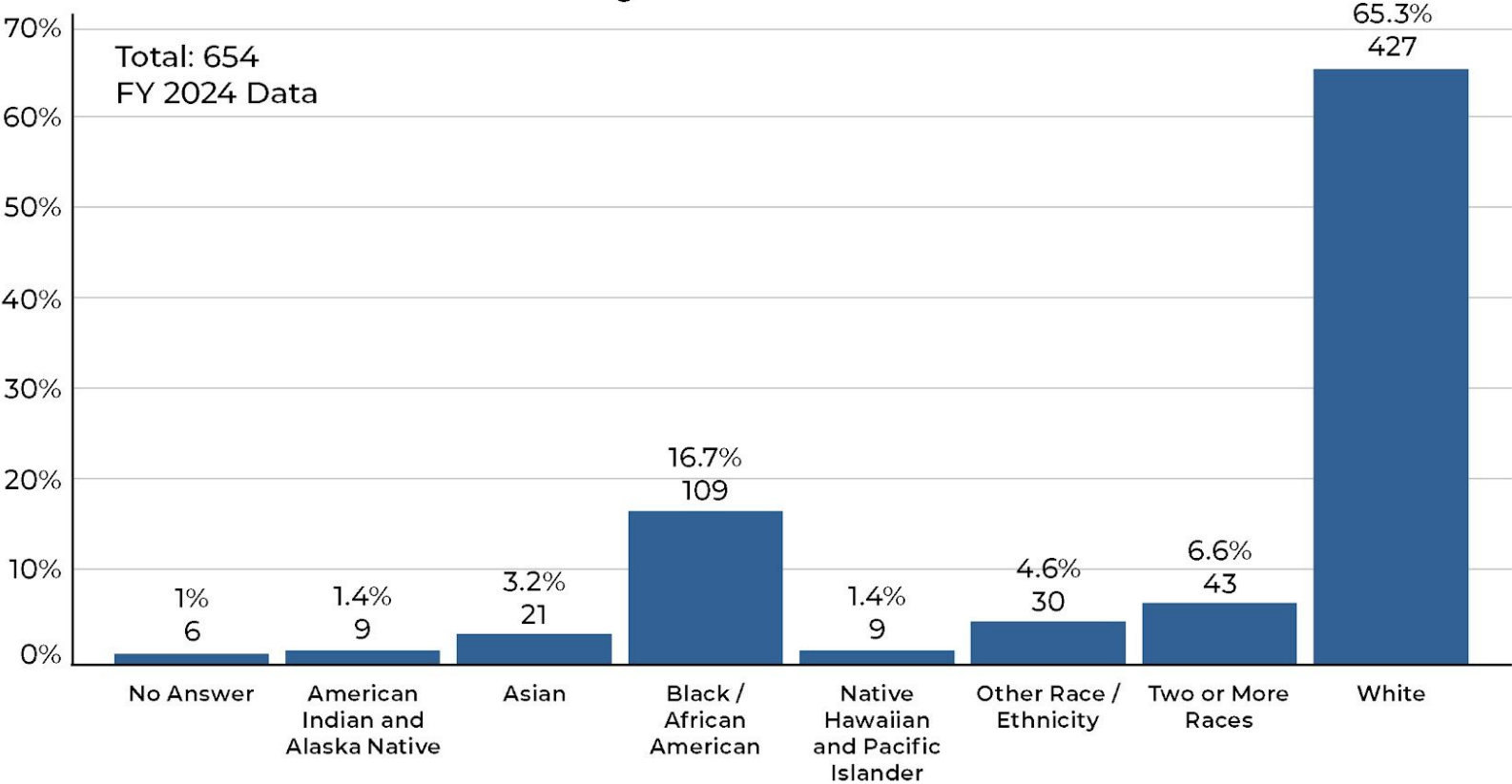
Behavioral Health Division: Who We Serve

BHCC, Choice and MITT



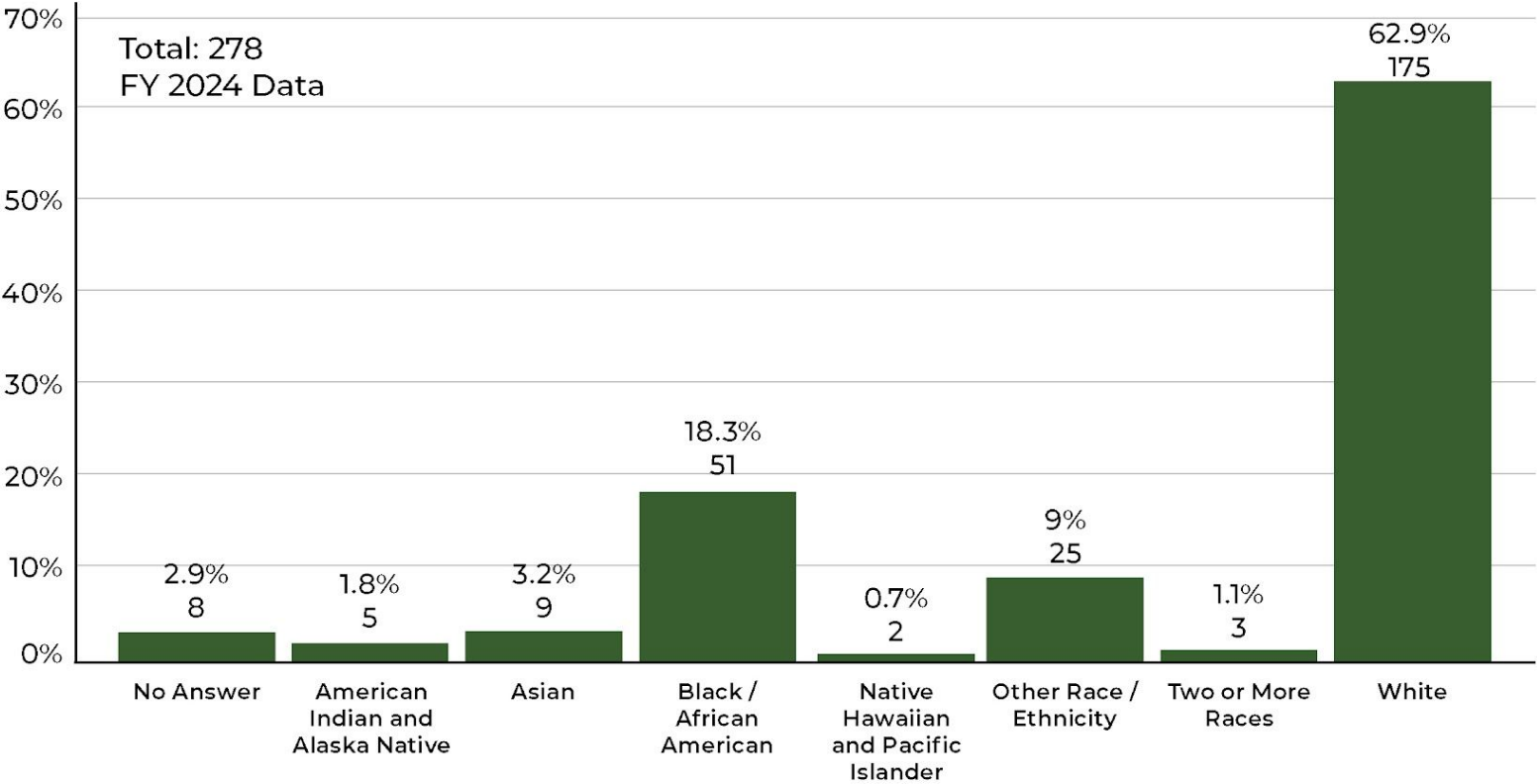
Behavioral Health Division: Who We Serve

Choice Enrollment by Race



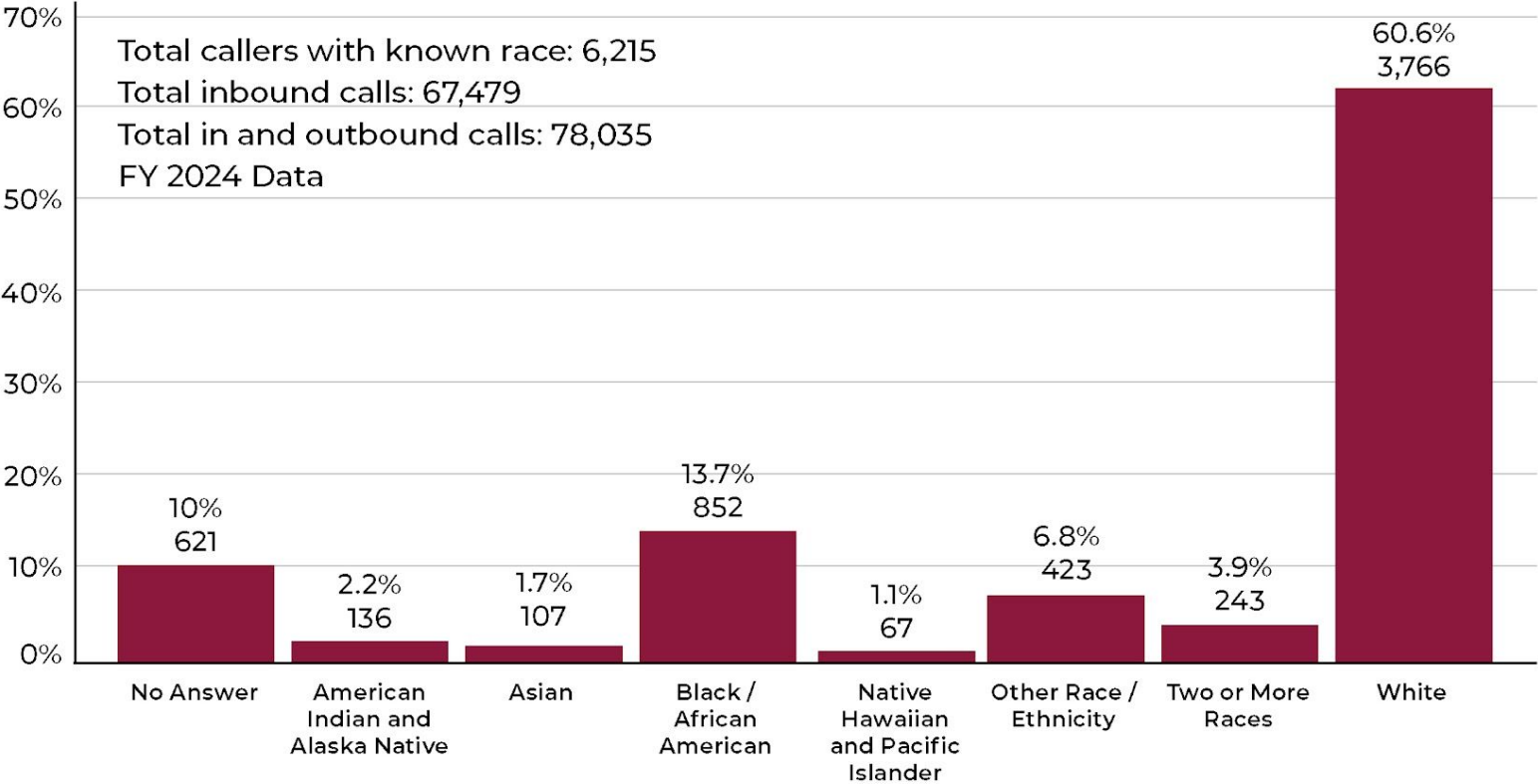
Behavioral Health Division: Who We Serve

Multnomah Intensive Transition Team Enrollment by Race



Behavioral Health Division: Who We Serve

Behavioral Health Call Center Callers with Known Race



Diversion Services: Aid & Assist

- **Respond** to 60 court orders per month, within five judicial days
- **Provide** intensive case management and monitoring for 120 individuals under community restoration orders
- **Collaborate** with Oregon State Hospital on discharge planning for 120 individuals
- **Coordinate** with Multnomah County Detention Center for all Adults in Custody whose competence is in question

Direct Clinical Services: Early Assessment & Support Alliance (EASA)

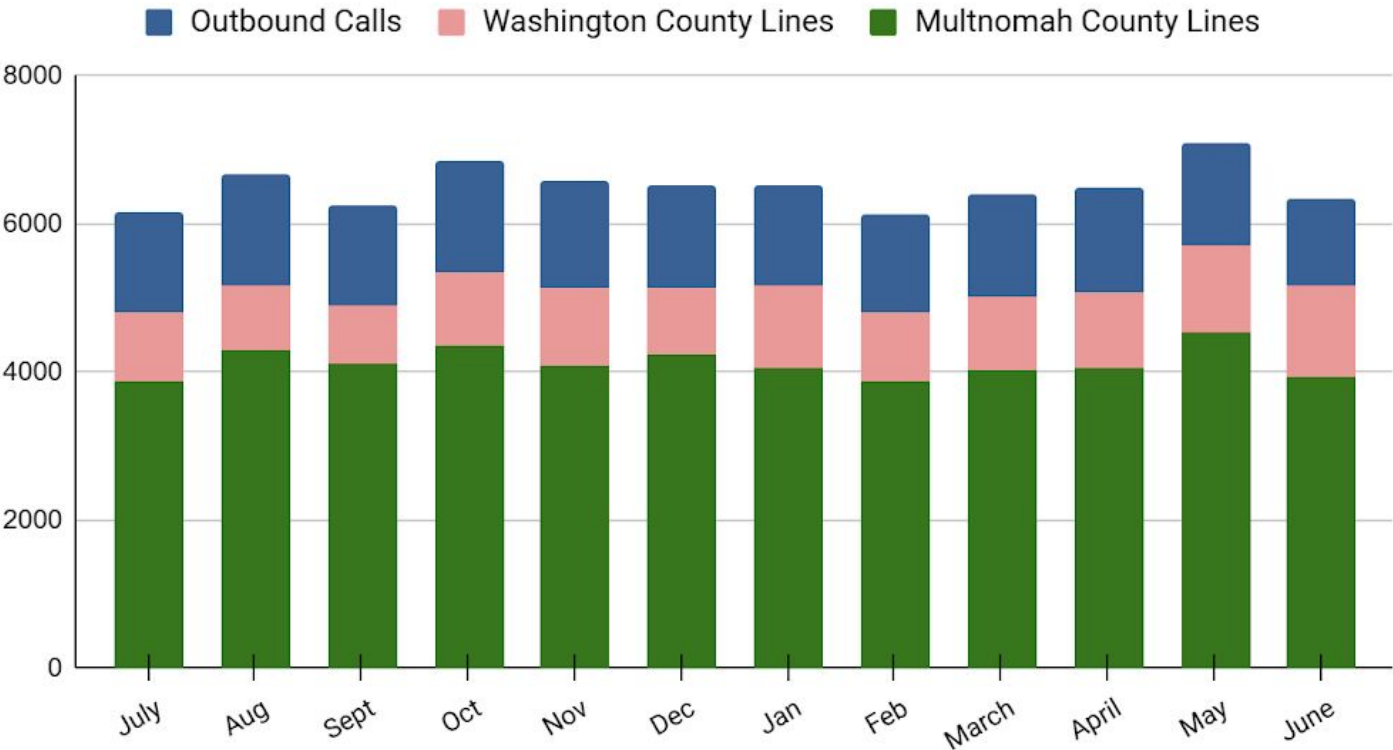
Services:

EASA is a two-year evidence-based model that helps young people who have experienced psychosis develop long-term recovery plans and restore their life paths.

Medication Management	Case Management
Support for Employment	Psychiatric Nursing Services
Peer Support	Psychoeducation
Multi-Family Group	Social Skills Building Groups
Occupational Therapy Assessment and Intervention	Individual and/or Family Psychotherapy

Crisis Services: Multnomah County Call Center/Crisis Line

Monthly Call Volume FY 2024



Crisis Services: Urgent Walk-In Clinic

Urgent Walk-In Clinic is...

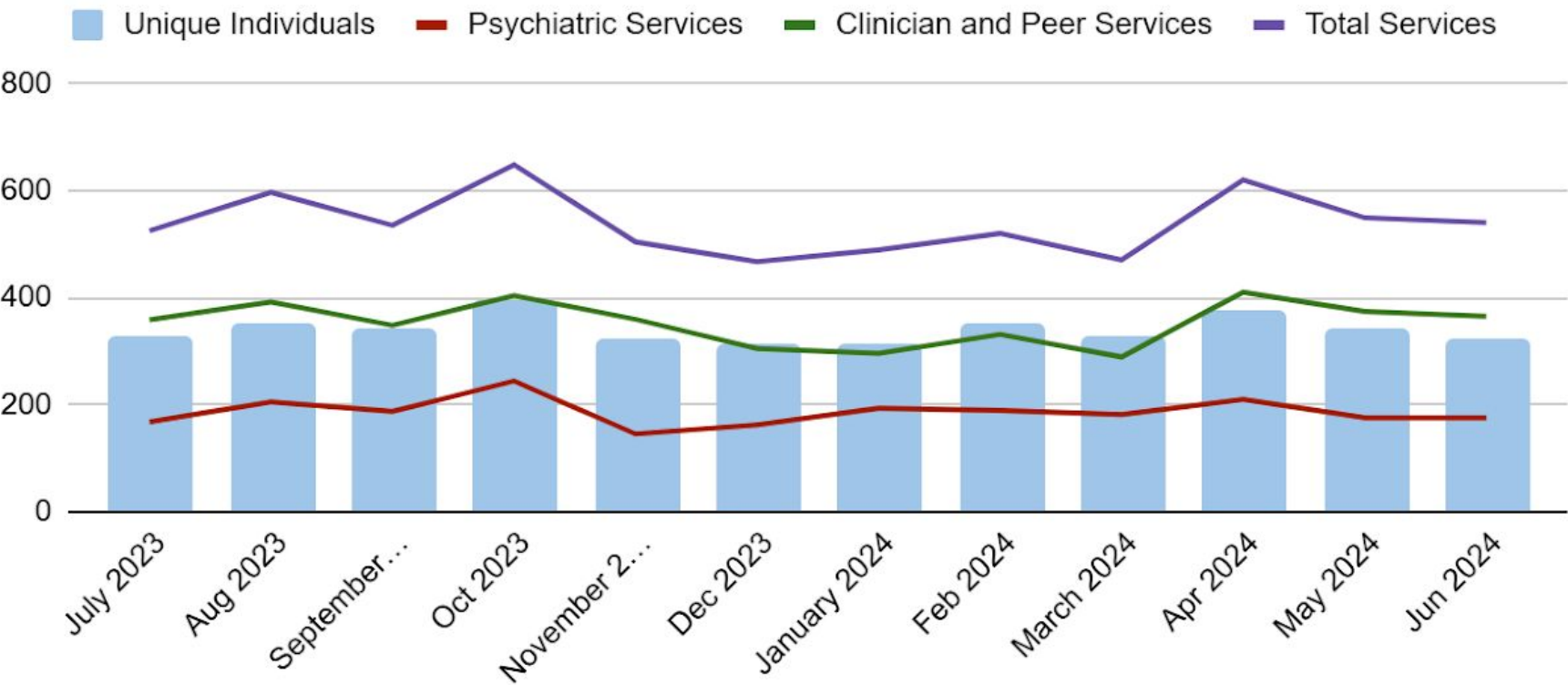
- A vital part of Multco Crisis Services Continuum
- Contracted through Cascadia
- In operation 25+ years
- Open to all ages & demographics 7 days/wk
- Only urgent care behavioral health primary service in the county



Urgent Walk-In Clinic, located at 4212 SE Division St, #100

Crisis Services: Urgent Walk-In Clinic

Urgent Walk-in Services





Homelessness Response Action Plan (HRAP)

Homelessness Response Action Plan Alignments (HRAP)

HRAP Strategies	01	Determine the numbers of beds and services needed.
	02	Increase the number of acute care treatment and residential treatment beds.
	03	Increase the number of outpatient treatment beds and services.
	04	Explore & fund “shovel-ready” projects that increase BH bed capacity.
	05	Address behavioral health workforce shortage.

FY 2026 HRAP alignment:

- Comprehensive Local Plan+/Systems Transformation work
- Residential Services and Bridgeview
- Care Coordination
- Addictions Treatment and Housing Continuum
- Promoting Access to Hope (PATH) Care Coordination
- Deflection and Sobering Services & 24/7 Sobering and Crisis Stabilization Center
- Behavioral Health Resource Center (BHRC) Day Center & BHRC Shelter/Bridge Housing

Homelessness Prevention & Response

FY 2025 Accomplishments for SHS Investments:

- **190** community members served through 80 beds in Transitional Housing
- **150** households helped through vouchers for Regional Long-Term Rent Assistance
- **88** community members housed through 48 single occupancy rooms in the Bridgeview Housing Program
- **10** individuals housed through Promoting Access to Hope (PATH) Rapid Re-Housing

Homelessness Prevention & Response: Program Spotlight

Motel Shelter Programs

Provides housing and wraparound services for up to 76 people, through 2 programs:

- Bridging Connections
- Cultivating Communities

These programs are:

- Peer informed
- Low barrier
- Person centered





How We Do the Work



Behavioral Health Division: Strategic Goals/Outcomes

Goal: Individuals in need of behavioral health intervention and treatment will experience decreased delay to SUD and mental health treatment placements appropriate to their needs through a system that employs an integrated approach to the social determinants of health, prevention, harm reduction, treatment and recovery services.

Strategy:

- Continue Comprehensive Local Plan (CLP)+ and **Systems Transformation** work
- Build systems and structures needed to **improve data, accessibility, expand the workforce, and create a continuum** that provides the right services to the right people in the right place. (PO40000D)

Behavioral Health Division: Strategic Goals/Outcomes

Goal: Multnomah County communities of color will experience increased access to culturally and linguistically specific behavioral health services as a result of workforce enhancement, training, and building capacity for culturally specific services.

Strategy:

- Continue contracting for **mental health services for individuals from communities experiencing significant inequities** in access to both treatment services and education/prevention opportunities to ensure that all members of our community have treatment options that incorporate specific cultural needs. Continue ongoing case management and support to culturally specific populations (PO40084A, PO40084B)
- Continue to **recruit and hire** Knowledge, Skills and, Abilities (KSA) and dual language positions within our direct service programs

Behavioral Health Division: Strategic Goals/Outcomes

Goal: All individuals within Multnomah County regardless of insurance or ability to pay will have increased access to behavioral health, physical health, and services that address social determinants of health thereby reducing the need for higher levels of care or contact with the criminal justice system.

Strategy:

- Continue to fund behavioral health providers to **treat consumers who are uninsured during periods of exacerbated psychiatric symptoms** in acute stages of mental illness (PO40077)

Behavioral Health Division: Strategic Goals/Outcomes

- **Reduce criminal justice involvement** for people with unmet behavioral health needs by intervening in the jail and with the court to **create avenues to services** in the community through our Coordinated Diversion programs (PO40088)
- PATH team will continue **outreach to people with problematic substance use** who are also houseless and at risk of criminal justice system exposure, and assist individuals with placement to appropriate levels of SUD treatment and recovery support services and provide ongoing support to address deficits in social determinants of health (PO40101)

Behavioral Health Division: Strategic Goals/Outcomes

- **Assist individuals who may have substance use disorder**, another behavioral health disorder or co-occurring disorders in accessing community-based pathways to treatment, recovery support services, housing, case management or other services outside of the justice system through Deflection and Sobering Programs (PO40000C, PO40104A, PO40104B)

A stylized graphic on the left side of the slide. It features two dark green mountain peaks of different heights. Below the mountains is a dark green wavy band representing a forest or a middle ground. At the bottom is a dark blue wavy band representing water. The entire graphic is composed of solid-colored shapes with no internal details or textures.

FY 2026 Budget Decision Making

FY 2026 Budget Decision Making

BHD FY 2026
Budget Rubric

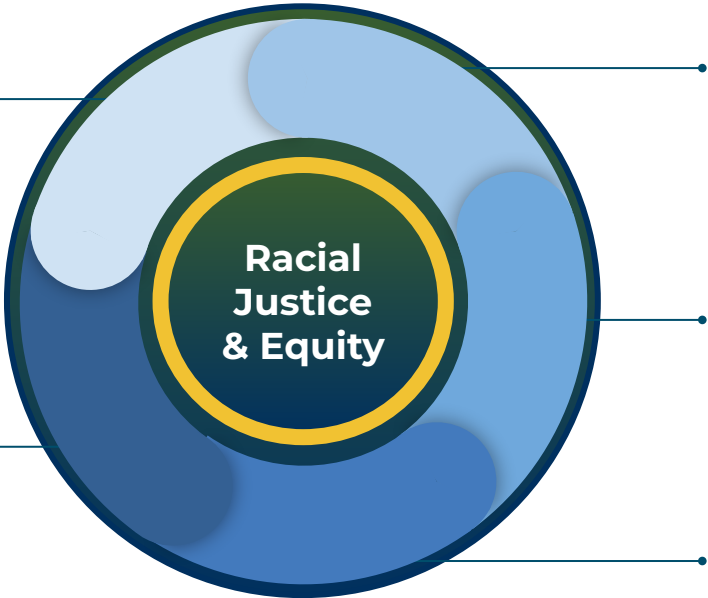
01	Align	Align with our Comprehensive Local Plan and focus on statutorily required core BH services
02	Preserve	Preserve culturally specific services across the substance use and mental health continuums of care
03	Sustain	Sustain programs that primarily support individuals who are experiencing homelessness
04	Enhance	Enhance/Sustain capacity to address the leading causes of preventable death
05	Retain	Retain our workforce , minimizing the loss of essential FTE and the accompanying strain on workforce

Budget Approach

BHD Reduction Strategies

Preserving critical infrastructure to support necessary system sustainability and transformation work.

Aligning budgeted contracts with actual utilization



Focused reductions within programs in order to ensure that core mandated services continue to be available

Allocating CGF to programs that don't have access to alternative funds

Reducing programs that the Community Mental Health Program is not specifically mandated to provide



FY 2026 Approved Budget

Overview

Behavioral Health: Budget by the Numbers

\$147.3 Million

FY 2026 Approved Operating Budget

3.2%
\$4.6 Million

Increase from
FY 2025 Adopted Operating Budget

333.91
FTE



(13.12)
Decrease
from
FY 2025
Adopted

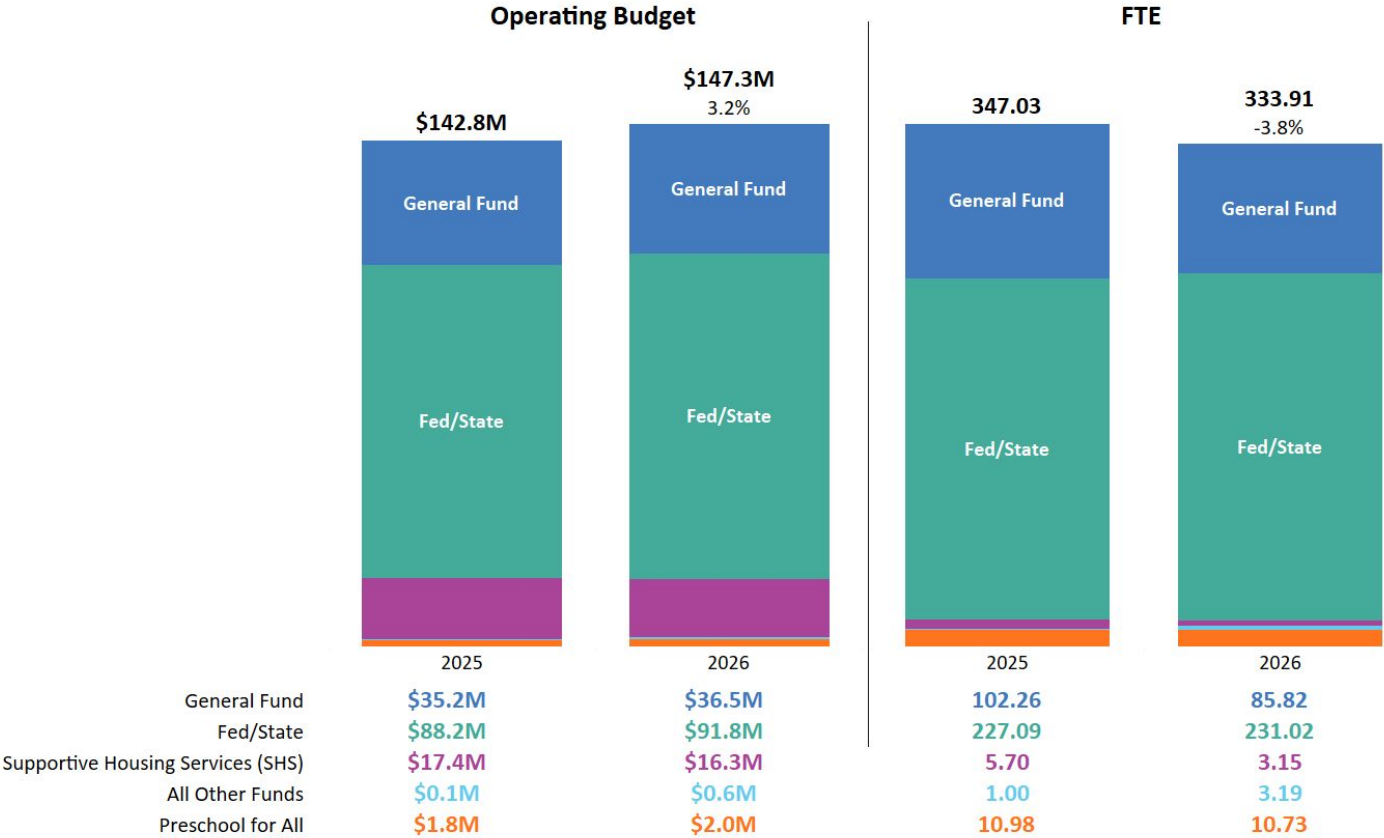
General Fund Investments

\$1.6 Million
One-Time-Only
\$1.0 Million
Ongoing

\$150.5 Million
Total Budget

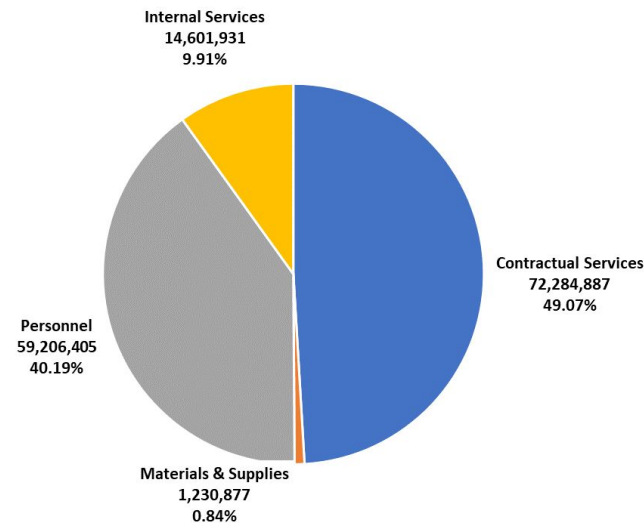
(includes cash transfers,
contingencies, and
unappropriated
balance)

Behavioral Health: Operating Budget & FTE



Operating Budget by Category - \$147,324,100

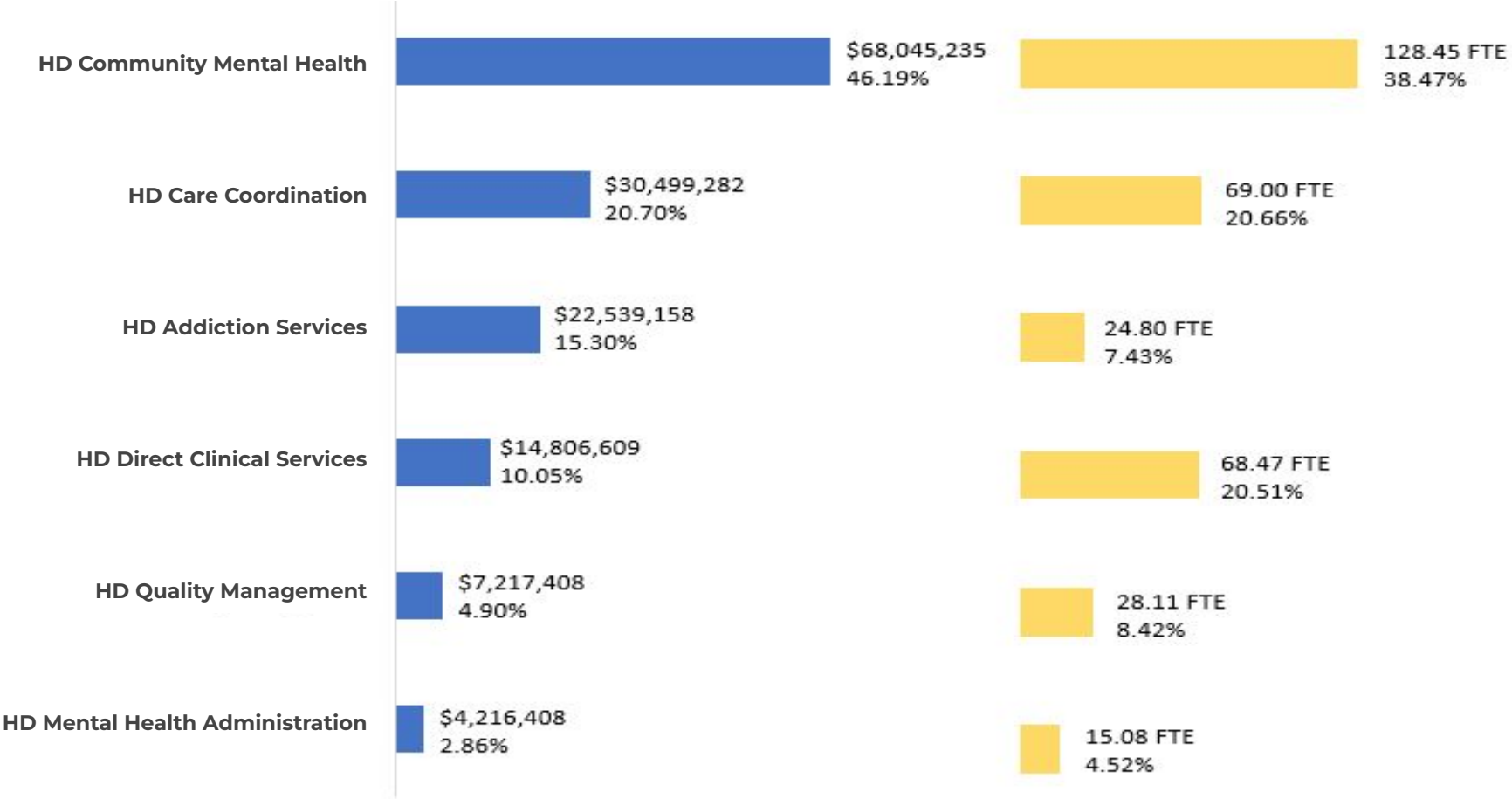
FY2026 Proposed Expenditure & Percent of Total



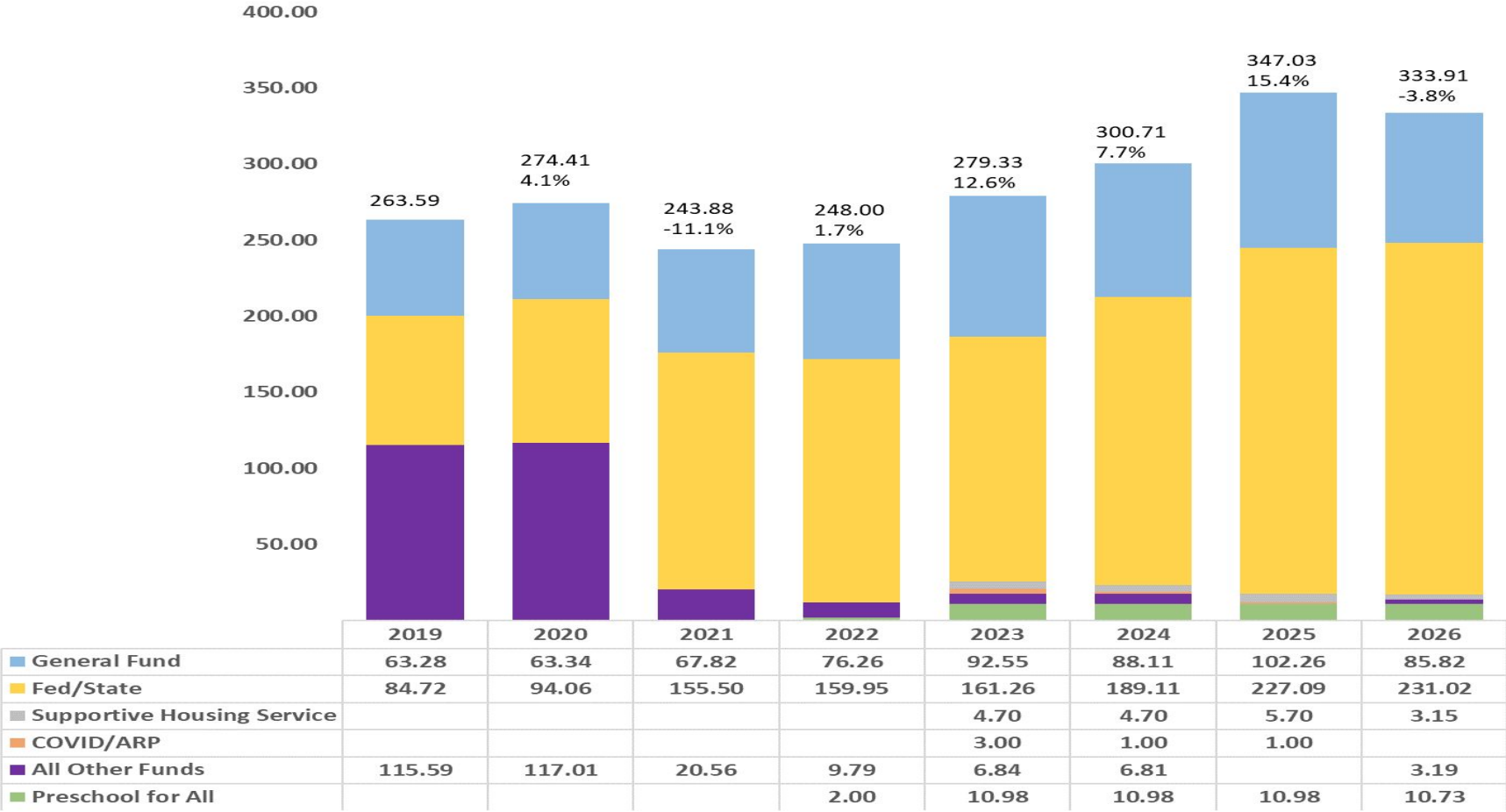
FY2026 Proposed Expenditures & Annual Percent Change

	FY19 Adopted	FY20 Adopted	FY21 Adopted	FY22 Adopted	FY23 Adopted	FY24 Adopted	FY25 Adopted	FY26 Proposed
Personnel	32,079,982	35,199,751	33,753,733	36,589,491	42,656,428	49,101,843	58,505,942	59,206,405
		9.72%	-4.11%	8.40%	16.58%	15.11%	19.15%	1.20%
Contractual Services	72,374,052	60,780,942	41,233,092	47,343,189	51,358,151	57,119,833	69,609,058	72,284,887
		-16.02%	-32.16%	14.82%	8.48%	11.22%	21.86%	3.84%
Materials & Supplies	599,221	646,830	409,961	532,505	843,492	921,914	2,249,424	1,230,877
		7.95%	-36.62%	29.89%	58.40%	9.30%	143.99%	-45.28%
Internal Services	5,988,989	6,974,430	7,071,971	6,863,142	9,519,138	10,643,522	12,390,622	14,601,931
		16.45%	1.40%	-2.95%	38.70%	11.81%	16.41%	17.85%

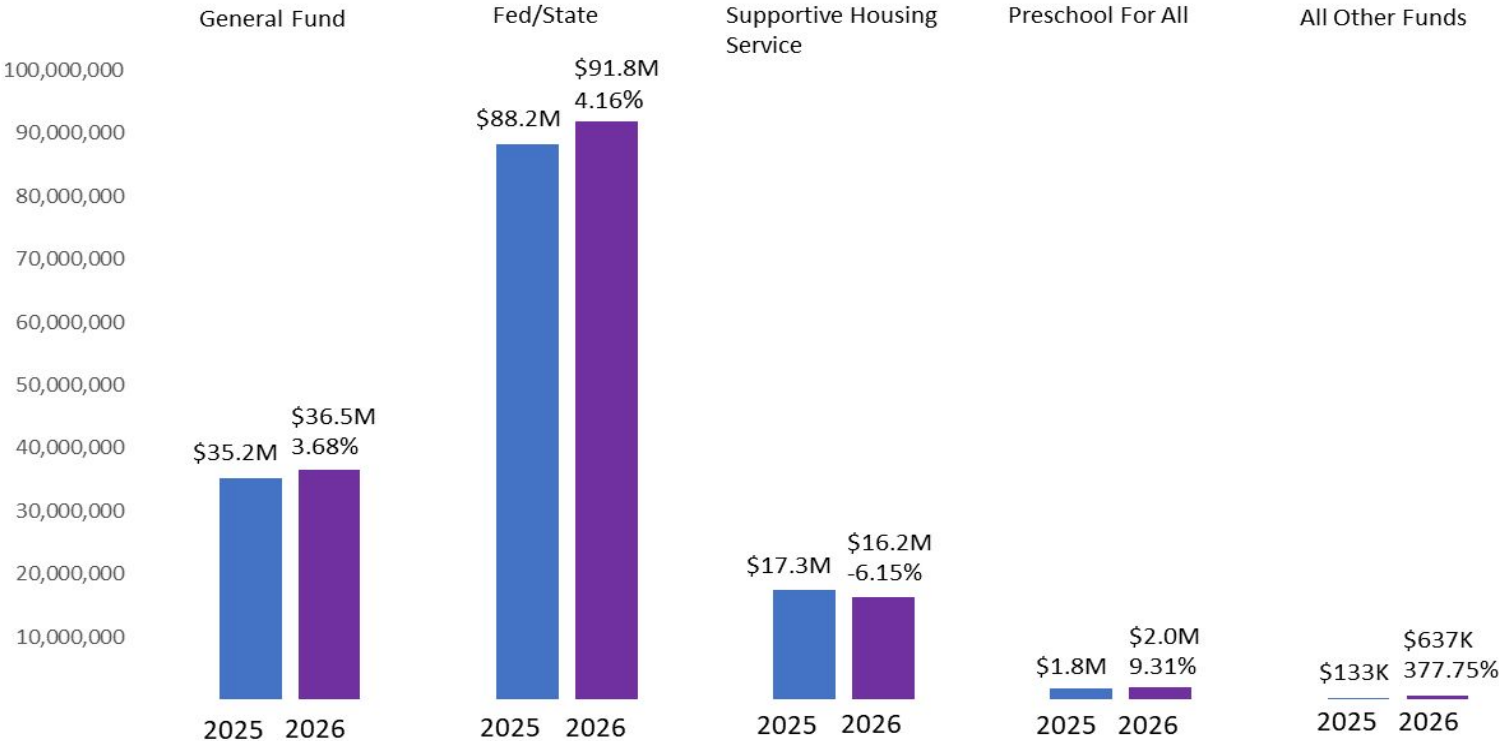
Operating Budget by Program (\$147,324,100 & 333.91 FTE)



FTE Trend FY 2019-2026



Operating Budget by Fund: \$147,324,100



Behavioral Health: Beginning Working Capital

Program Offer #	Program Offer Name	OHA CFAA Settlement	Other BWC	Total BWC	Total BWC FTE
40065	Behavioral Health Division Administration	602,344		602,344	2.33
40067	Medical Records for Behavioral Health Division	146,048		146,048	1.00
40068	Behavioral Health Quality Management	2,068,897		2,068,897	9.54
40070	Mental Health Crisis Assessment & Treatment Center (CATC)	317,047		317,047	
40080	Community Based Mental Health Services for Children & Families	269,340	637,000	906,340	4.00
40082	School Based Mental Health Services	177,664		177,664	1.00
40105A	Behavioral Health Resource Center (BHRC) - Day Center	228,000		228,000	
	Total	3,809,340	637,000	4,446,340	17.87

Behavioral Health: How the Budget Delivers

- **Multnomah County Care Coordination:** Youth care coordinators will serve 375 unique children in Youth Care Coordination
- **School Based Mental Health (SBMH):** SBMH clinicians will serve an estimated 380 youth/families who enroll in services and refer an estimated 725 youth for assessment and treatment services
- **Adult Addictions Treatment Continuum:** Contracted service providers will serve 3,000 individuals in treatment and recovery support services

Behavioral Health: How the Budget Delivers

- **Coordinated Diversion for Justice Involved Individuals:**
Our Aid and Assist team will engage and divert 140 individuals from the criminal justice system and OSH into community restoration services
- **Behavioral Health Resource Center:** Continue to serve 100 houseless individuals daily through the Day Center and 52 individuals daily through the Shelter and Bridge Housing programs

Behavioral Health: Reductions

Program Offer #	Program Offer Name or Reduction Description	General Fund Reductions	Internal GF Reductions	Other Funds Reductions	Total Reductions	Total FTE Reductions
40068	Behavioral Health Quality Management	(471,062)			(471,062)	(3.00)
40069	Behavioral Health Crisis Services			(1,930,360)	(1,930,360)	0.00
40070	Mental Health Crisis Assessment & Treatment Center (CATC)		(317,048)		(317,048)	0.00
40073	Peer-Run Supported Employment Center		(128,215)		(128,215)	0.00
40074A	Mental Health Residential Services			(148,069)	(148,069)	(0.80)
40077	Mental Health Treatment & Medication for the Uninsured		(454,803)		(454,803)	0.00
40081	Multnomah County Care Coordination			(692,841)	(692,841)	(4.00)
40082	School Based Mental Health Services	(865,450)	(496,822)	(1,000,000)	(2,362,272)	(13.67)

Behavioral Health: Reductions

Program Offer #	Program Offer Name or Reduction Description	General Fund Reductions	Internal GF Recutions	Other Funds Reductions	Total Reductions	Total FTE Reductions
40085	Adult Addictions Treatment Continuum			(500,000)	(500,000)	0.00
40101	Promoting Access To Hope (PATH) Care Coordination Continuum			(561,826)	(561,826)	(2.00)
	Total	(1,336,512)	(1,396,888)	(4,833,096)	(7,566,496)	(23.47)

School Based Mental Health (SBMH)

Changes for FY 2026:

- \$2,174,185 CGF + \$2,364,000 Other Funds = \$4,538,185 Total Funds
 - Total reduction: \$2,168,895 including \$1M CareOregon funding reductions
- 13.67 FTE net reduction
 - 9.00 to 0.00 FTE Case Managers, loss of 9.00 FTE
 - 16.77 to 12.59 FTE Mental Health Consultants, loss of 4.18 FTE

What we will change

To achieve

Improve
business
rigor



Increase
billable
revenues



Collaborate
with School
Districts &
partners to
mitigate
student
impact



Develop
better data
tracking



Sustainability
Over
Time

Behavioral Health: Challenges and Responses

FY 2026 Challenges

- Increased service demand while facing reduced or static funding
- Data tracking needs improvement
- Gaps across both Substance Use Disorder (SUD) and Behavioral Health (BH) continuums of care

Behavioral Health: Challenges and Responses

The FY 2026 Plan

- Increase Medicaid reimbursables
- Build efficiencies into programming and services
- Continue System Transformation work, including:
 - Increase partner collaboration
 - De-silo system workflows
 - Develop better data tracking

Behavioral Health: New, OTO, & Backfill

Program Offer #	Program Offer Name	FY 2026 General Fund	FY 2026 GF Backfill	FY 2026 Other Funds	Total	OTO	New
40074B	Bridgeview	0	\$1,300,000	0	\$1,300,000	X	
40112	Shelter, Housing and Supports	0	\$413,573	\$9,615,877	\$10,029,450	X	
40104B	24/7 Sobering and Crisis Stabilization Center Implementation	\$891,189	0	0	\$891,189		X
		\$891,189	\$1,713,573	\$9,615,877	\$12,220,639		

Behavioral Health: Deflection & Sobering

24/7 Sobering and Crisis Stabilization Center Implementation



Community Outreach Event, March 20, 2025

Behavioral Health: Deflection & Sobering

24/7 Sobering and Crisis Stabilization Center Implementation

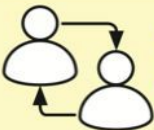
Sobering and Crisis Stabilization Center

1901 SE Grand Ave, Portland, OR 97214

Services will Include



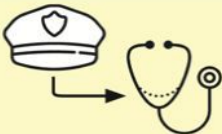
Triage Services,
Medical & Behavioral
Health Assessment



Care Coordination
and Referrals



Medication Assisted
Treatment (MAT)



Deflection
Programming



Transportation



Up to 50 Sobering
and Withdrawal
Management Beds



Additional Factors

Oregon Legislature: Session Updates

- **Governor's budget** prioritizes increasing treatment capacity and workforce investments; \$90M earmarked in HB 2059
- **Revenue forecast** due May 14; informs 2025-27 biennium budget decisions
- **HB 2059** includes:
 - New residential BH Capacity Program in Oregon Health Authority (OHA) to fund programs that increase statewide capacity for withdrawal management, residential treatment and psychiatric inpatient facilities
 - OHA to develop fund distribution guidelines incorporating partner/practitioner input with programs funded that have greatest immediate impact on community needs

Current Status: In Committee

Budget Impacts: Unknown at this time

Oregon Legislature: Session Updates

- **HB 2024** (Workforce bill) includes:
 - OHA to establish grant/incentive payment programs to support recruitment of BH workers for entities providing BH services to individuals where at least 50% are uninsured or Medicare/Medicaid enrolled
 - Incentive payments to allow eligible entities to increase wages commensurate with wages at non-eligible entities
 - Appropriates \$45M

Current Status: Waiting for hearing by Ways and Means Committee

Budget Impacts: Unknown at this time

State/Federal Impacts and Other Policy Issues

- **CareOregon Reductions = \$2,193,393**
 - School Based Mental Health: Case Management (\$1M, 3.24 FTE)
 - Mental Health Residential Services: Residential Peer Support (\$148K, .8 FTE)
 - Care Coordination: American Society of Addiction Medicine Team (\$693K, 4.0 FTE)
 - Promoting Access to Hope: PATH Expansion (\$350K, 2.0 FTE)
- **Behavioral Health Division SHS Reductions = \$2,639,703**
 - BH Crisis Services: Shelter Inreach and Old Town Inreach Programs (\$1.93M)
 - Adult Addictions Treatment Continuum (\$500k)
 - Promoting Access to Hope (PATH) (\$209k)
- **Static CFAA Funding**



Questions



Appendices

The following slides
are provided for reference.

Total Budget vs. Operating Budget

\$147.3 M **Operating Budget*** (focus of subsequent slides)

+

\$0 M **Contingency (All Funds)**

+

\$0 M **Internal Cash Transfers**

+

\$3.2 M **Reserves (Unappropriated Cash Balance)**

=

\$150.5 M **Total Behavioral Health Budget**

**Avoids some double-counting; provides a clearer picture of what departments expect to spend in a year.*

Budget by Program Area: \$147,324,100

