

*Department of Human Services  
Health Services  
Office of Mental Health and Addiction Services*

# **MHO UTILIZATION SUMMARY REPORT**

FOR  
JULY 2002 – JUNE 2003  
REPORTING PERIOD

*This report was produced by the  
Program Analysis and Evaluation Team  
April 2004*

**EXECUTIVE SUMMARY**  
**REPORT ON OREGON HEALTH PLAN (OHP)**  
**UTILIZATION AND ENROLLMENT FOR**  
**MENTAL HEALTH SERVICES:**  
**JULY 2002 – JUNE 2003**

The following is a summary of the OHP Utilization and Enrollment Report for the period of July 2002 through June 2003. The data were pulled March 1, 2004. All information came from the Office of Medical Assistance Programs' (OMAP) Medicaid Management Information System (MMIS). December 31, 2002, Providence Behavioral Health ended their managed care contract with the State of Oregon. January 1, 2003, Washington County Mental Health started up a managed care contract with the State of Oregon. These contract changes are reflective in the data on this report.

**ENROLLMENT AND ELIGIBILITY SUMMARY**

- Enrollment for all MHOs shows a decrease during this period, decreasing 23.3 percent from 358,867 to 275,324. This decrease is possibly due to the legislative budget cuts to services during the first half of 2003.

**PERCENT OF ENROLLEES SERVED**

- The percent of enrollees served statewide decreased during the first and second quarter of 2003. LaneCare, however, showed a slow and steady increase over this time period; from 7.6 percent to 9.5 percent.
- The lowest proportions were served in the youngest (0-3) and oldest (75+) age groups. The highest proportions were served in the adult (21-64) age group.
- Among the ethnic and cultural groups the highest annual average percent served was Native American/Alaskan (7.2%) and white (6.8%) populations. The lowest percent served was among Hispanics at 1.3%.

## **OUTPATIENT UTILIZATION**

- Verity had the highest volume of members served (approximately 1583 units of service/1,000 members).

## **ACUTE HOSPITAL**

- Approximately 12 percent of consumers were readmitted to acute care within 30 days, while over 26 percent were readmitted within 180 days.
- Approximately 62 percent of consumers were seen in community services within seven (7) days of discharge from hospital care.

## TABLE OF CONTENTS

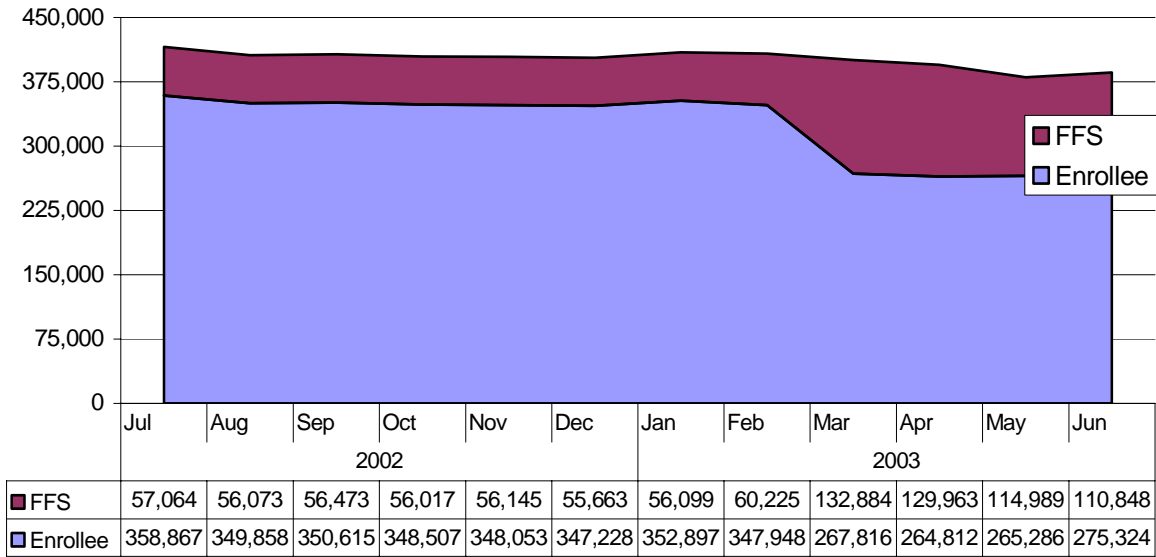
The format and contents are constructed as follows:

- Figures are used to illustrate trends in statewide data.
- Tables are used to summarize quarterly data at the MHO level. The tables also include FFS and All Eligibles.

.....

|   |    |
|---|----|
| Executive Summary .....   | i  |
| Figure 1: Statewide Count of MHO Enrolled and Fee-For-Service (FFS) .....             | 1  |
| Table 1: Monthly Average Enrollment per Quarter by MHO .....                          | 1  |
| Figure 2: Percent of Enrollees and Eligibles Served in Outpatient Services .....      | 2  |
| Table 2: Monthly Avg/Percent of Enrollees Served Outpatient .....                     | 2  |
| Table 3: Percent of Enrollees Served in Outpatient - by Age Group and Gender .....    | 3  |
| Table 4: Avg Percent of Enrollees Served in Outpatient - by Ethnicity/Culture.....    | 3  |
| Figure 3: Statewide Avg Outpatient Services per 1,000 by Enrollees & Eligibles .....  | 4  |
| Table 5: Avg Outpatient Units of Service per 1,000.....                               | 4  |
| Figure 4: Annual Avg Outpatient Units of Services per 1,000 by Diagnostic Group ...   | 5  |
| Figure 5: Annual Avg Outpatient Unites of Services per 1,000 by Service Category....  | 5  |
| Figure 6: Statewide Acute Hospital Admissions per 1,000 by Enrollees & Eligibles .... | 6  |
| Figure 7: Statewide Annual Avg Acute Hosp. Admissions per 1,000 by Age Group ...      | 6  |
| Table 6: Quarterly Avg Acute Admissions per 1,000 by MHO and FFS .....                | 7  |
| Figure 8: Statewide Annual Avg Acute Hospital Days per 1,000 by Age Group.....        | 8  |
| Figure 9: Statewide % of Eligibles Re-Admitted to Acute Care within 30 days.....      | 9  |
| Figure 10: Statewide % of Eligibles Re-Admitted to Acute Care within 180 Days .....   | 9  |
| Figure 11: Statewide % of Eligibles Seen within 7 Days of Dischg - Acute Care.....    | 10 |
| MHO Utilization Report Glossary.....  | 11 |

**FIGURE 1: Statewide Count of MHO <sup>1</sup>Enrolled and <sup>2</sup>Fee-For-Service (FFS)**



**TABLE 1: Monthly Average Enrollment per Quarter by MHO**

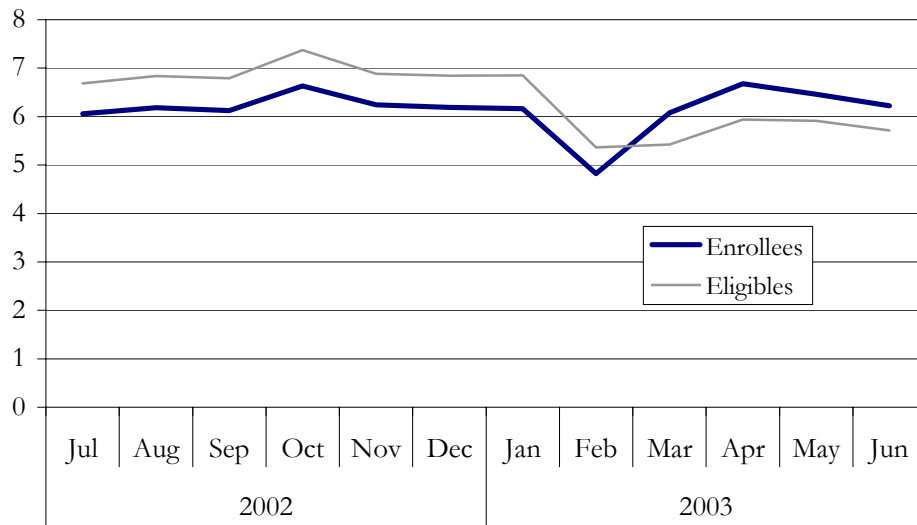
| MHO Enrolled/FFS                   | 2002           |                |              |                | 2003         |                |              |                |
|------------------------------------|----------------|----------------|--------------|----------------|--------------|----------------|--------------|----------------|
|                                    | 3rd Qtr        |                | 4th Qtr      |                | 1st Qtr      |                | 2nd Qtr      |                |
|                                    | AVG/ Month     | % of Total     | AVG/ Month   | % of Total     | AVG/ Month   | % of Total     | AVG/ Month   | % of Total     |
| ABHA                               | 25,731         | 6.3%           | 25,242       | 6.3%           | 23,756       | 5.6%           | 19,168       | 5.0%           |
| Clackamas                          | 24,909         | 6.1%           | 24,117       | 6.0%           | 22,748       | 5.4%           | 19,427       | 5.0%           |
| Family Care                        | 7,012          | 1.7%           | 7,278        | 1.8%           | 6,616        | 1.6%           | 5,264        | 1.4%           |
| GOBHI                              | 29,286         | 7.1%           | 28,910       | 7.2%           | 27,383       | 6.4%           | 23,153       | 6.0%           |
| JBH                                | 67,577         | 16.5%          | 66,400       | 16.4%          | 61,515       | 14.5%          | 49,937       | 12.9%          |
| Lane Care                          | 35,105         | 8.6%           | 34,732       | 8.6%           | 31,984       | 7.5%           | 26,255       | 6.8%           |
| MVBCN                              | 62,784         | 15.3%          | 61,395       | 15.2%          | 58,430       | 13.7%          | 50,774       | 13.1%          |
| *Providence                        | 21,293         | 5.2%           | 21,456       | 5.3%           | 21,512       | 5.1%           | 0            | 0.0%           |
| Tuality                            | 4,630          | 1.1%           | 4,557        | 1.1%           | 4,612        | 1.1%           | 4,248        | 1.1%           |
| Verity                             | 74,787         | 18.3%          | 73,842       | 18.3%          | 68,915       | 16.2%          | 56,950       | 14.7%          |
| **Washington                       | 0              | 0.0%           | 0            | 0.0%           | 14,636       | 3.4%           | 13,299       | 3.4%           |
| FFS                                | 55,403         | 56,537         | 13.8%        | 55,942         | 13.9%        | 83,069         | 19.5%        | 118,600        |
| <b>Total <sup>3</sup>Eligibles</b> | <b>393,978</b> | <b>383,919</b> | <b>93.7%</b> | <b>378,629</b> | <b>93.7%</b> | <b>401,420</b> | <b>94.4%</b> | <b>367,906</b> |

<sup>1</sup> Enrollees: Eligible for OHP and enrolled in an MHO

<sup>2</sup> Fee-For-Service (FFS): Eligible for OHP and NOT enrolled with an MHO (Open-Card)

<sup>3</sup> Eligibles: Both Enrolled and FFS

**FIGURE 2: Percent of <sup>1</sup>Enrollees and <sup>2</sup>Eligibles Served in Outpatient Services**



**TABLE 2: Monthly Average/Percent of Enrollees Served Outpatient Mental Health Services**

|                            |              | 2002    |         | 2003    |         | Annual Average |
|----------------------------|--------------|---------|---------|---------|---------|----------------|
| MHO Enrolled/FFS           |              | 3rd Qtr | 4th Qtr | 1st Qtr | 2nd Qtr |                |
| MHO Contractors            | ABHA         | 5.6%    | 5.6%    | 4.7%    | 5.3%    | 5.3%           |
|                            | Clackamas    | 4.9%    | 5.3%    | 5.2%    | 5.2%    | 5.1%           |
|                            | Family Care  | 3.9%    | 1.3%    | 2.3%    | 3.6%    | 2.7%           |
|                            | GOBHI        | 4.8%    | 5.2%    | 4.8%    | 5.6%    | 5.1%           |
|                            | JBH          | 5.7%    | 6.0%    | 5.5%    | 5.5%    | 5.7%           |
|                            | Lane Care    | 7.6%    | 8.1%    | 8.4%    | 9.5%    | 8.4%           |
|                            | MVBCN        | 6.6%    | 7.1%    | 5.0%    | 7.2%    | 6.5%           |
|                            | *Providence  | 5.8%    | 6.2%    | 5.6%    | 0.0%    | 5.9%           |
|                            | Tuality      | 3.9%    | 1.8%    | 3.2%    | 3.6%    | 3.2%           |
|                            | Verity       | 7.0%    | 7.1%    | 6.2%    | 6.7%    | 6.8%           |
|                            | **Washington | 0.0%    | 0.0%    | 6.7%    | 7.2%    | 7.0%           |
| <sup>3</sup> FFS           |              | 9.8%    | 10.8%   | 11.3%   | 6.8%    | 4.5%           |
| <b>Total All Eligibles</b> |              | 6.7%    | 6.7%    | 7.0%    | 5.9%    | 5.9%           |

Note: The percent of unique individuals served is calculated by dividing the unique number served per month by the total available. (MHO: enrolled/served in managed care; FFS: FFS/served "open card".)

<sup>1</sup> Enrollees: Eligible for OHP and enrolled in an MHO

<sup>2</sup> Eligibles: Both Enrolled and FFS

<sup>3</sup> Fee-For-Service (FFS): Eligible for OHP and NOT enrolled with an MHO (Open-Card)

Data Source: MMIS Encounter and Enrollment Tables

\*Providence managed care contract ended December 31, 2002.

\*\*Washington Co. managed care contract began January 1, 2003.

**TABLE 3: Percent of<sup>1</sup>Enrollees Served in Outpatient Mental Health by Age Group and Gender**

| Age Group | Gender | 2002    |         | 2003    |         | Annual Average |
|-----------|--------|---------|---------|---------|---------|----------------|
|           |        | 3rd Qtr | 4th Qtr | 1st Qtr | 2nd Qtr |                |
| Age 0-3   | female | 0.5%    | 0.6%    | 0.5%    | 0.5%    | 0.5%           |
|           | male   | 0.6%    | 0.7%    | 0.5%    | 0.6%    | 0.6%           |
| Age 4-12  | female | 4.2%    | 4.6%    | 4.1%    | 4.7%    | 4.3%           |
|           | male   | 5.9%    | 6.6%    | 5.8%    | 6.7%    | 6.0%           |
| Age 13-17 | female | 6.6%    | 7.7%    | 7.0%    | 7.7%    | 7.0%           |
|           | male   | 7.8%    | 8.8%    | 7.9%    | 8.9%    | 8.1%           |
| Age 18-20 | female | 3.8%    | 4.0%    | 3.2%    | 3.4%    | 3.5%           |
|           | male   | 5.0%    | 5.4%    | 4.2%    | 4.2%    | 4.6%           |
| Age 21-64 | female | 10.9%   | 10.8%   | 8.2%    | 8.3%    | 9.4%           |
|           | male   | 10.1%   | 10.4%   | 7.9%    | 8.0%    | 9.0%           |
| Age 65-74 | female | 4.2%    | 4.1%    | 3.3%    | 3.6%    | 3.7%           |
|           | male   | 3.4%    | 3.5%    | 3.0%    | 3.2%    | 3.2%           |
| Age 75+   | female | 1.7%    | 1.6%    | 1.4%    | 1.7%    | 1.6%           |
|           | male   | 1.6%    | 1.4%    | 1.1%    | 1.3%    | 1.3%           |

**TABLE 4: Average Percent of Enrollees Served in Outpatient Mental Health by Ethnicity/Culture**

| Culture/Ethnicity       | 2002    |         | 2003    |         | Annual Average |
|-------------------------|---------|---------|---------|---------|----------------|
|                         | 3rd Qtr | 4th Qtr | 1st Qtr | 2nd Qtr |                |
| White                   | 7.7%    | 7.8%    | 8.1%    | 6.5%    | 6.8%           |
| Hispanic                | 1.3%    | 1.4%    | 1.5%    | 1.2%    | 1.3%           |
| Black                   | 7.3%    | 7.0%    | 6.9%    | 5.5%    | 6.0%           |
| Asian/Pacific Islander  | 6.4%    | 5.2%    | 5.9%    | 4.7%    | 5.3%           |
| Native American/Alaskan | 7.2%    | 8.2%    | 9.1%    | 7.9%    | 7.2%           |
| Other                   | 3.6%    | 4.2%    | 4.6%    | 3.6%    | 3.3%           |

---

<sup>1</sup> Enrollees: Eligible for OHP and enrolled in an MHO

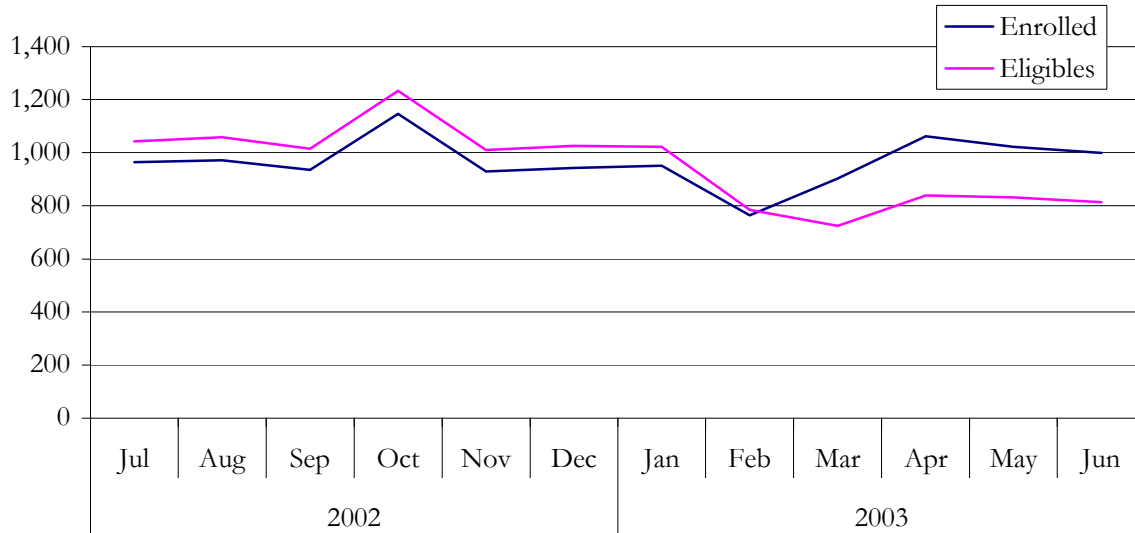
---

Data Source: MMIS Encounter and Enrollment Tables

\*Providence managed care contract ended December 31, 2002.

\*\*Washington Co. managed care contract began January 1, 2003.

**FIGURE 3: Statewide Average Outpatient Services per 1,000 by <sup>1</sup>Enrollees & <sup>2</sup>Eligibles**



**TABLE 5: AVERAGE OUTPATIENT UNITS OF SERVICE PER 1,000**

|                                |              | 2002    |         | 2003           |         | Annual Average |
|--------------------------------|--------------|---------|---------|----------------|---------|----------------|
| MHO Enrolled/ <sup>3</sup> FFS |              | 3rd Qtr | 4th Qtr | 1st Qtr        | 2nd Qtr |                |
| MHO Contractors                | ABHA         | 805.2   | 831.7   | 788.9          | 1,012.1 | 850.4          |
|                                | Clackamas    | 512.9   | 628.1   | 591.2          | 645.9   | 591.2          |
|                                | Family Care  | 839.0   | 292.0   | 432.9          | 669.9   | 550.2          |
|                                | GOBHI        | 700.8   | 723.8   | 728.9          | 1,234.3 | 827.6          |
|                                | JBH          | 803.4   | 747.6   | 635.9          | 710.7   | 727.5          |
|                                | Lane Care    | 1,163.0 | 1,188.2 | 1,208.5        | 1,457.0 | 1,241.5        |
|                                | MVBCN        | 715.2   | 776.1   | 496.7          | 824.4   | 700.3          |
|                                | *Providence  | 831.0   | 892.6   | 862.8          | 0.0     | 862.0          |
|                                | Tuality      | 339.1   | 139.1   | 283.7          | 276.3   | 270.5          |
|                                | Verity       | 1,589.2 | 1,796.7 | 1,481.3        | 1,423.3 | 1,583.5        |
|                                | **Washington | 0.0     | 0.0     | 1,008.0        | 1,045.8 | 1,029.8        |
| <b>FFS</b>                     |              | 1510.1  | 1,542.0 | <b>1,612.6</b> | 742.5   | 378.4          |
| <b>Total All Eligibles</b>     |              | 1004.11 | 1,038.0 | 1,090.5        | 847.2   | 828.2          |

<sup>1</sup> Enrollees: Eligible for OHP and enrolled in an MHO

<sup>2</sup> Eligibles: Both Enrolled and FFS

<sup>3</sup> Fee-For-Service (FFS): Eligible for OHP and NOT enrolled with an MHO (Open-Card)

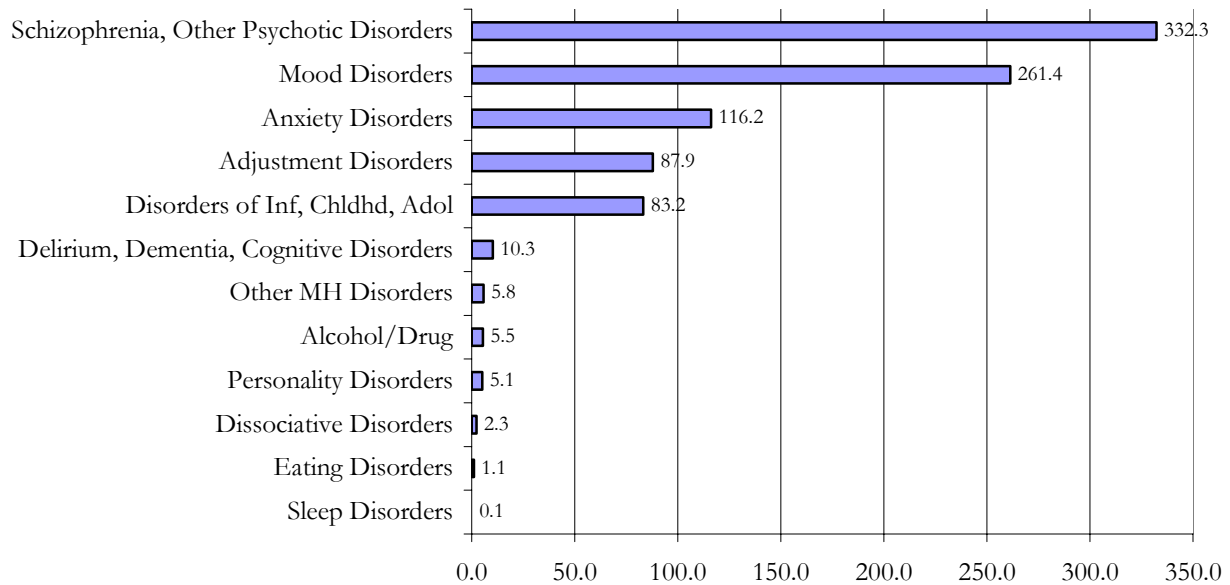
Data Source: MMIS Encounter and Enrollment Tables

\*Providence managed care contract ended December 31, 2002.

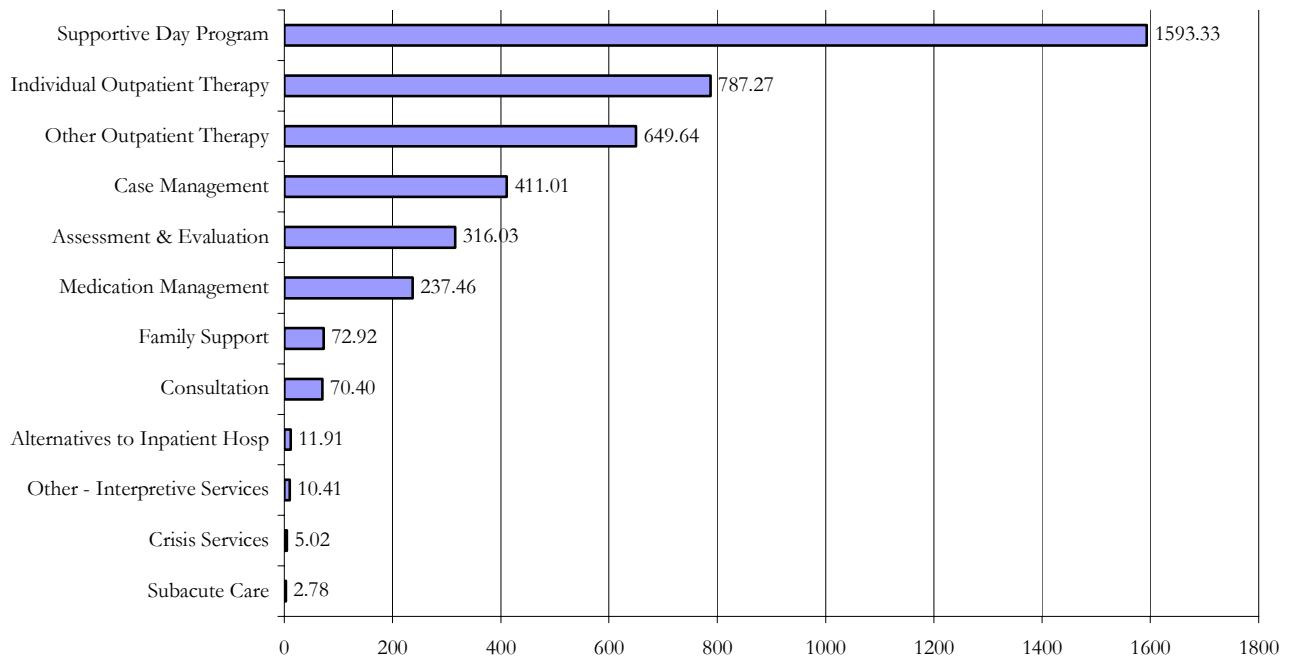
\*\*Washington Co. managed care contract began January 1, 2003.



**FIGURE 4: ANNUAL AVERAGE OUTPATIENT UNITS OF SERVICES PER 1,000 BY DIAGNOSTIC GROUP**



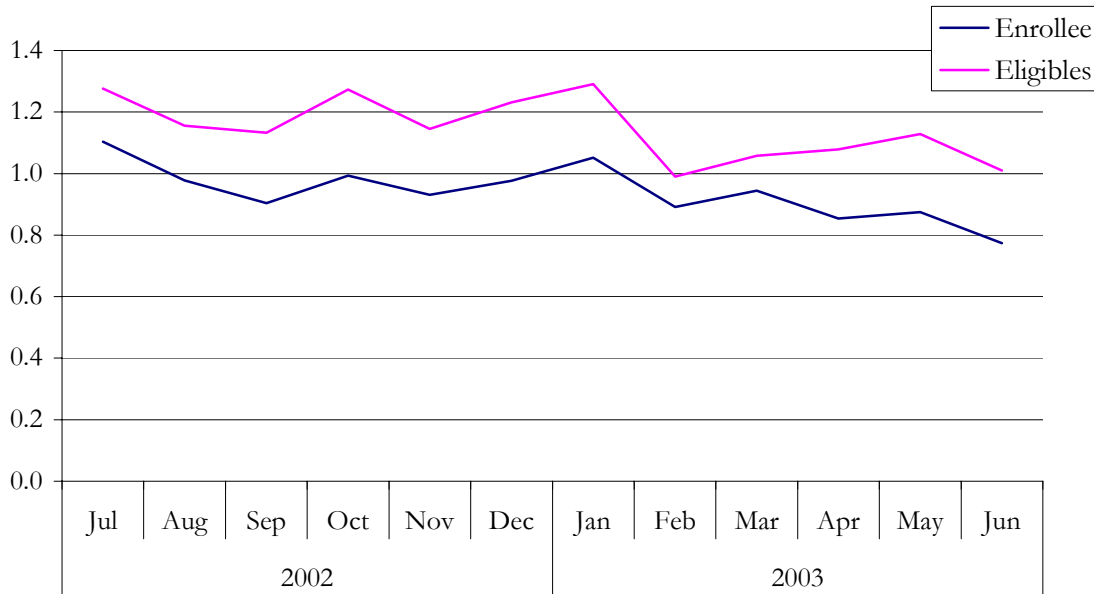
**FIGURE 5: ANNUAL AVERAGE OUTPATIENT UNITES OF SERVICES PER 1,000 BY SERVICE CATEGORY**



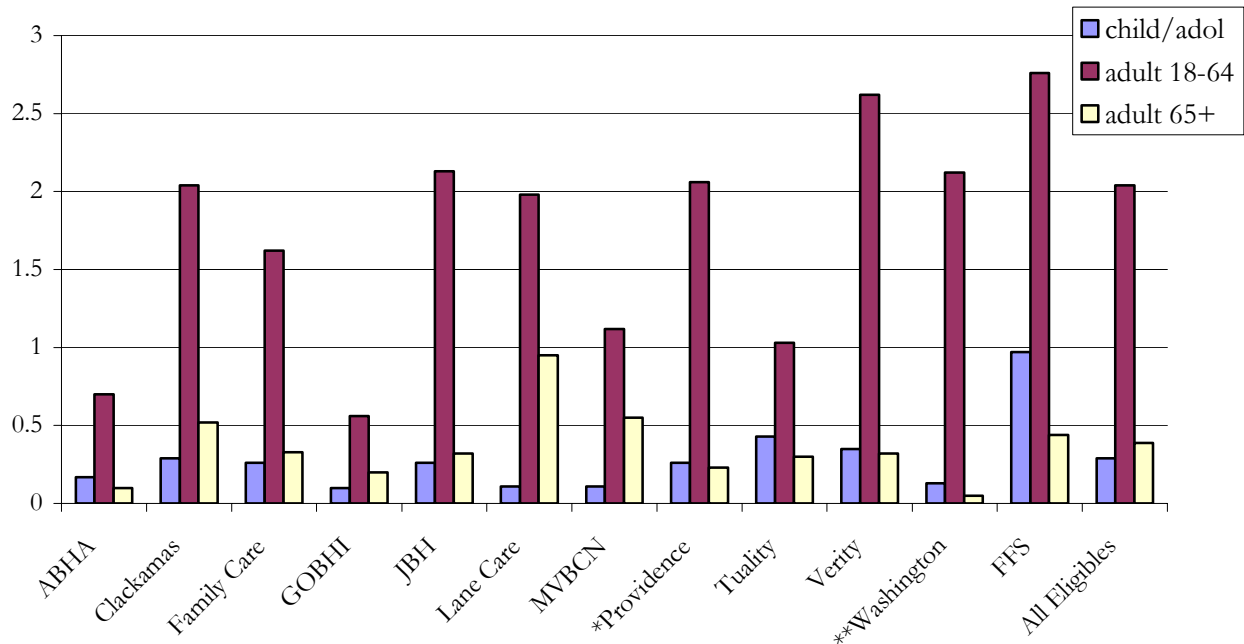
Note: Units of service per 1,000 is calculated by dividing the total units of service and dividing it by every 1,000 members of a group.

Data Source: MMIS Encounter and Enrollment Tables  
 \*Providence managed care contract ended December 31, 2002.  
 \*\*Washington Co. managed care began January 1, 2003.

**FIGURE 6: Statewide Acute Hospital Admissions per 1,000 by <sup>1</sup>Enrollees & <sup>2</sup>Eligibles**



**FIGURE 7: Statewide Annual Average Acute Hospital Admissions per 1,000 by Age Group**



<sup>1</sup> Enrollees: Eligible for OHP and enrolled in an MHO

<sup>2</sup> Eligibles: Both Enrolled and FFS

Data Source: MMIS Encounter and Enrollment Tables

\*Providence managed care contract ended December 31, 2002.

\*\*Washington Co. managed care contract began January 1, 2003.

**TABLE 6: Quarterly Average Acute Admissions per 1,000 by MHO and <sup>1</sup>FFS**

| MHO/FFS     | Age Group   | 2002                |                     | 2003                |                     | Annual Average |
|-------------|-------------|---------------------|---------------------|---------------------|---------------------|----------------|
|             |             | 3 <sup>rd</sup> Qtr | 4 <sup>th</sup> Qtr | 1 <sup>st</sup> Qtr | 2 <sup>nd</sup> Qtr |                |
| ABHA        | child/adol  | 0.2                 | 0.1                 | 0.3                 | 0.2                 | 0.17           |
|             | adult 18-64 | 0.7                 | 0.5                 | 0.7                 | 1.0                 | 0.7            |
|             | adult 65+   | 0.0                 | 0.0                 | 0.2                 | 0.2                 | 0.1            |
| Clackamas   | child/adol  | 0.1                 | 0.3                 | 0.4                 | 0.4                 | 0.29           |
|             | adult 18-64 | 1.7                 | 2.3                 | 2.1                 | 2.1                 | 2.04           |
|             | adult 65+   | 0.5                 | 0.2                 | 0.3                 | 1.1                 | 0.52           |
| Family Care | child/adol  | 0.1                 | 0.2                 | 0.4                 | 0.3                 | 0.26           |
|             | adult 18-64 | 2.0                 | 1.6                 | 1.5                 | 1.0                 | 1.62           |
| GOBHI       | child/adol  | 0.0                 | 1.4                 | 0.0                 | 0.0                 | 0.33           |
|             | adult 18-64 | 0.1                 | 0.1                 | 0.1                 | 0.1                 | 0.1            |
|             | adult 65+   | 0.3                 | 0.6                 | 0.7                 | 0.7                 | 0.56           |
| JBH         | child/adol  | 0.3                 | 0.2                 | 0.3                 | 0.3                 | 0.26           |
|             | adult 18-64 | 1.8                 | 2.3                 | 2.2                 | 2.2                 | 2.13           |
|             | adult 65+   | 0.3                 | 0.4                 | 0.2                 | 0.4                 | 0.32           |
| Lane Care   | child/adol  | 0.1                 | 0.1                 | 0.1                 | 0.2                 | 0.11           |
|             | adult 18-64 | 1.6                 | 1.9                 | 1.9                 | 3.0                 | 1.98           |
|             | adult 65+   | 1.3                 | 1.7                 | 0.4                 | 0.4                 | 0.95           |
| MVBCN       | child/adol  | 0.1                 | 0.2                 | 0.1                 | 0.1                 | 0.11           |
|             | adult 18-64 | 1.1                 | 1.1                 | 0.9                 | 1.5                 | 1.12           |
|             | adult 65+   | 0.4                 | 0.7                 | 0.5                 | 0.7                 | 0.55           |
| Providence  | child/adol  | 0.5                 | 0.4                 | 0.1                 | 0.0                 | 0.26           |
|             | adult 18-64 | 3.3                 | 3.8                 | 1.1                 | 0.0                 | 2.06           |
|             | adult 65+   | 0.7                 | 0.2                 | 0.0                 | 0.0                 | 0.23           |
| Tuality     | child/adol  | 0.0                 | 0.4                 | 0.5                 | 0.8                 | 0.43           |
|             | adult 18-64 | 0.2                 | 1.5                 | 1.0                 | 1.7                 | 1.03           |
|             | adult 65+   | 0.0                 | 0.0                 | 1.1                 | 0.0                 | 0.3            |

*(Continued on page 8)*


---

<sup>1</sup> Fee-For-Service (FFS): Eligible for OHP and NOT enrolled with an MHO (Open-Card)

---

Data Source: MMIS Encounter and Enrollment Tables

\*Providence managed care contract ended December 31, 2002.

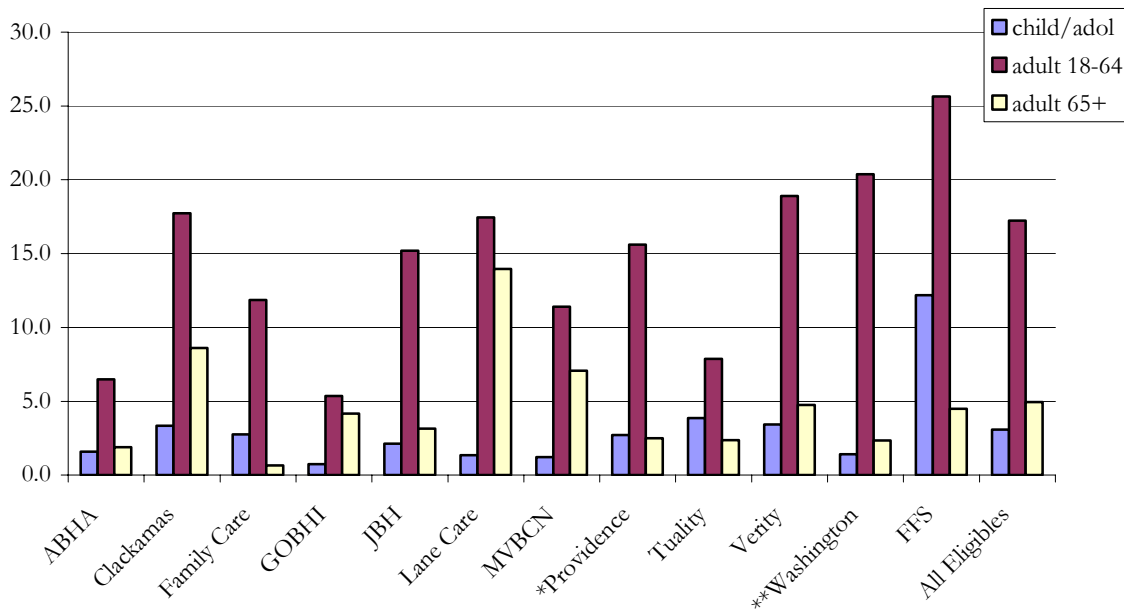
\*\*Washington Co. managed care contract began January 1, 2003.

**TABLE 6:** (Continued from Page 7)

| MHO/ <sup>1</sup> FFS      | Age Group   | 2002                |                     | 2003                |                     | Annual Average |
|----------------------------|-------------|---------------------|---------------------|---------------------|---------------------|----------------|
|                            |             | 3 <sup>rd</sup> Qtr | 4 <sup>th</sup> Qtr | 1 <sup>st</sup> Qtr | 2 <sup>nd</sup> Qtr |                |
| Verity                     | child/adol  | 0.4                 | 0.3                 | 0.4                 | 0.4                 | 0.35           |
|                            | adult 18-64 | 3.2                 | 2.0                 | 2.8                 | 2.3                 | 2.62           |
|                            | adult 65+   | 0.2                 | 0.6                 | 0.5                 | 0.1                 | 0.32           |
| **Washington               | child/adol  | 0.0                 | 0.0                 | 0.2                 | 0.3                 | 0.13           |
|                            | adult 18-64 | 0.0                 | 0.0                 | 4.2                 | 4.2                 | 2.12           |
|                            | adult 65+   | 0.0                 | 0.0                 | 0.0                 | 0.2                 | 0.05           |
| FFS                        | child/adol  | 1.1                 | 1.1                 | 0.8                 | 0.9                 | 0.97           |
|                            | adult 18-64 | 4.1                 | 5.0                 | 2.3                 | 1.9                 | 2.76           |
|                            | adult 65+   | 0.4                 | 0.4                 | 0.5                 | 0.4                 | 0.4            |
| All <sup>2</sup> Eligibles | child/adol  | 0.3                 | 0.3                 | 0.3                 | 0.3                 | 0.3            |
|                            | adult 18-64 | 2.2                 | 2.2                 | 2.0                 | 2.0                 | 2.0            |
|                            | adult 65+   | 0.4                 | 0.5                 | 0.4                 | 0.4                 | 0.4            |

Note: Admissions (admits) per 1,000 is calculated by dividing the total admits for acute hospital services by every 1,000 members of a group.

**FIGURE 8: Statewide Annual Average Acute Hospital Days per 1,000 by Age Group**



<sup>1</sup> Fee-For-Service (FFS): Eligible for OHP and NOT enrolled with an MHO (Open-Card)

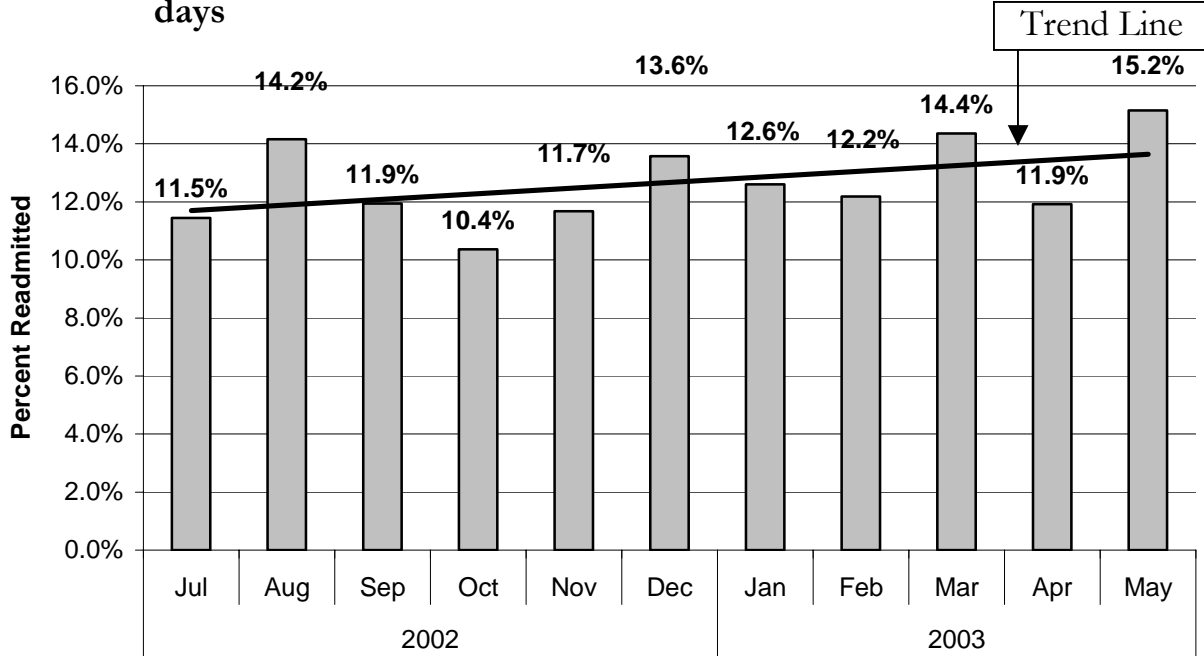
<sup>2</sup> Eligibles: Both Enrolled and FFS

Data Source: MMIS Encounter and Enrollment Tables

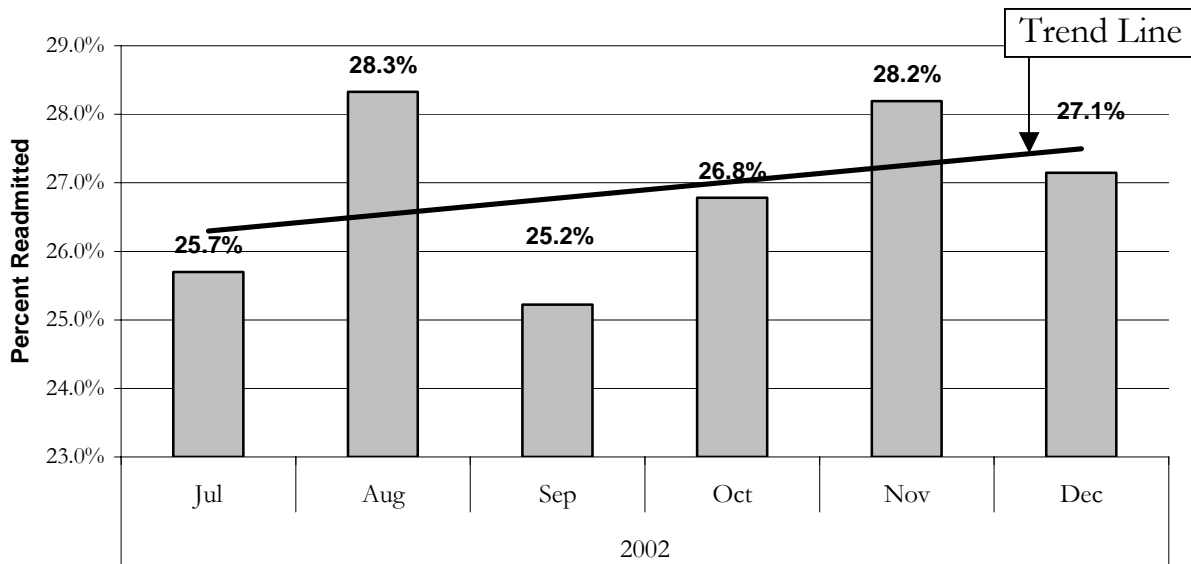
\*Providence managed care contract ended December 31, 2002.

\*\*Washington Co. managed care contract began January 1, 2003.

**FIGURE 9: Statewide Percent of <sup>1</sup>Eligibles Re-Admitted to Acute Care within 30 days**



**FIGURE 10: Statewide Percent of Eligibles Re-Admitted to Acute Care within 180 Days**



Note: The percent readmitted within 180 days is calculated by totaling the number of readmission to acute care that occur within 180 days of discharge and dividing by the total discharges that occurred during that period of time.

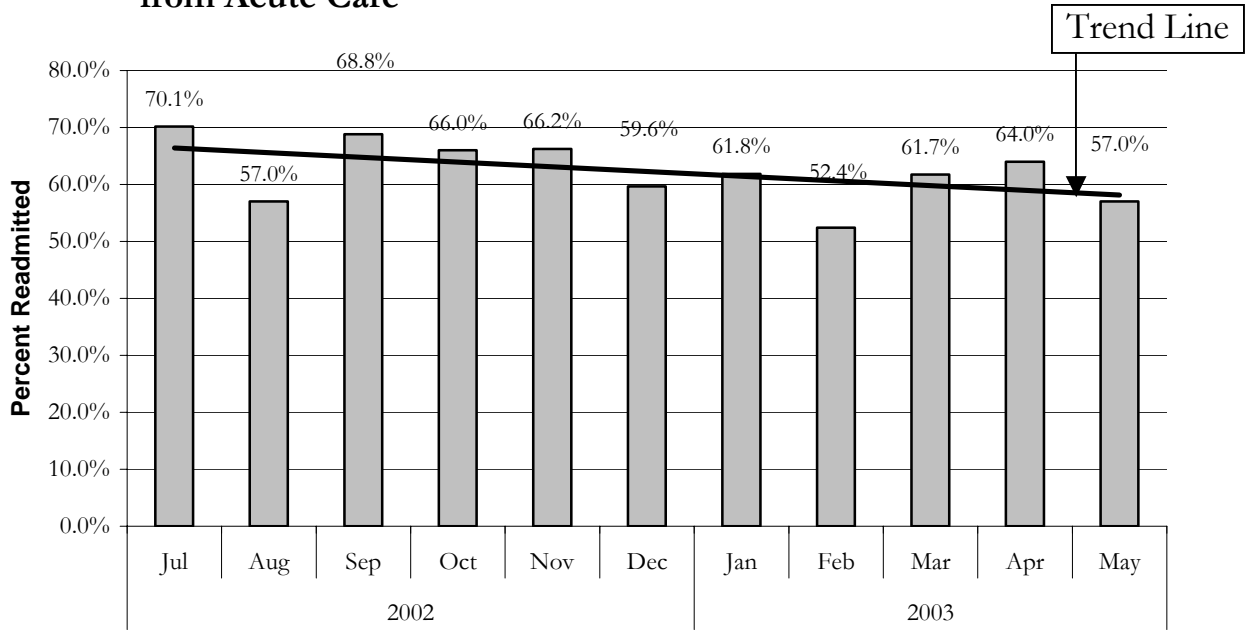
<sup>1</sup> Eligibles: Both Enrolled and FFS

Data Source: MMIS Encounter and Enrollment Tables

\*Providence managed care contract ended December 31, 2002.

\*\*Washington Co. managed care began January 1, 2003.

**FIGURE 11: Statewide Percent of <sup>1</sup>Eligibles Seen within 7 Days of Discharge from Acute Care**



<sup>1</sup> Eligibles: Both Enrolled and FFS

Data Source: MMIS Encounter and Enrollment Tables

\*Providence managed care contract ended December 31, 2002.

\*\*Washington Co. managed care contract began January 1, 2003.

## MHO UTILIZATION REPORT GLOSSARY

### DIAGNOSIS CATEGORY:

Diagnosis categories are defined by the grouping of diagnoses in the most recent version of the American Psychiatric Association's Diagnostic and Statistical Manual (DSM).

### ELIGIBLE:

An individual eligible for services under the OHP, but may not be enrolled into an MHO. Includes enrolled and fee-for-service.

### ENROLLED (ENROLLEE):

Eligible for the Oregon Health Plan (OHP) and enrolled in an MHO.

### FEE-FOR-SERVICE (FFS):

Individuals who are eligible for the OHP, but are not enrolled with an MHO. This is also known as fee-for-service (FFS) or an "open card".

### FULLY CAPITATED HEALTH PLANS (FCHPs):

Prepaid Health Plans that contract with DHS to provide physical health care services under the OHP Medicaid Demonstration Project and State Children's Health Insurance Program.

### MENTAL HEALTH ORGANIZATION (MHO):

A Prepaid Health Plan under contract with DHS to provide Covered Services under the OHP Medicaid Demonstration Project and State Children's Health Insurance Program (SCHIP). MHOs can be FCHPs, CMHPs, or private MHOs or combinations thereof.

### OFFICE OF MENTAL HEALTH AND ADDICTION SERVICES (OMHAS):

The program office of DHS responsible for the administration of mental health services for the State of Oregon.

OREGON HEALTH PLAN (OHP):

Oregon's health care reform effort consisting of a Medicaid Demonstration Project, State Children's Health Insurance Program, an individual insurance program for persons excluded from health insurance coverage due to pre-existing health conditions, and a group insurance program for small businesses. One objective of this reform effort includes universal coverage for Oregonians. In the context of this report, OHP refers to all individuals on FFS.

PERCENT ENROLLEES SERVED:

This is a general measure of access, but more related to utilization of services. It is a percentage calculated by summing the unique enrollees seen during a given time period and dividing that number by the total enrollees for that time period. For example, if there is 10,000 enrollees statewide in a given month and during that same month 500 of those enrollees receive services, the percent of enrollees served is 5%.

SERVICE CATEGORY:

Service category is a descriptive grouping of service codes (BA, ECC, and CPT) that are similar procedurally. See Appendix A as a reference for service code categorization.

UNIT OF SERVICE:

Unit of measure for services that reference the time taken to complete the service. Each unit of service for outpatient service is a 15-minute block of time, unless noted. The unit of service for inpatient services and services classified, as an alternative to hospitalization, is one day.

UNITS OF SERVICE PER 1,000 ENROLLEES:

This is a measure of service volume that is calculated by dividing the total units of service by every 1,000 enrollees for a particular entity, such as an MHO or statewide. This creates a rate of service that is comparable across different categories and/or providers of service regardless of size.