

Children's System Change Initiative Update

**Department of Human Services
Addictions and Mental Health Division**

January 2007

CSCI Implementation Evaluation Report to the Emergency Board

On November 30, 2006 Department of Human Services (DHS), Addictions and Mental Health Division (AMH) and staff from Portland State University's (PSU) Regional Research Institute (RRI) presented a report to the Legislative Emergency Board (E-Board) about Year One implementation of the Children's System Change Initiative (CSCI). A previous DHS/AMH report to the E-board occurred on June 22, 2006. The PSU evaluation describes changes made to the children's mental health treatment system, progress on the work that still needs to be completed and reviews the results of the qualitative evaluation conducted by DHS contractor PSU/RRI. Suggested system improvements include refining the standardized method of determining a child and family's level of service intensity need, increasing coordination of care, improving interagency collaboration and accountability, and increasing the development of services that are more community-based with management, decision-making, and service delivery occurring at the local level. The PSU evaluation listed accomplishments and challenges for Year One and made recommendations for Year Two CSCI implementation outcomes. Those recommendations will help inform strategies to identify and achieve Year Two outcomes. The full PSU/RRI evaluation can be found at: <http://www.rri.pdx.edu/index.php>. It can also be viewed along with the complete AMH E-board report at the AMH website: <http://www.oregon.gov/DHS/mentalhealth/child-mh-soc-in-plan-grp/main.shtml>.

State Children's System Advisory Committee Block Grant Recommendation

At the October 27, 2006 meeting of Children's System Advisory Committee (CSAC), the committee recommended that uncontracted child mental health block grant dollars for FY 07-09 be dedicated to developing a statewide system of "family navigators" similar to one developed in Washington state. These "navigators" are family members who mentor other parents or

caregivers through the system. The concept will be developed through a Request for Proposal (RFP). This is a good example of how family support has become a priority in our state.

Children's System Improvement Project RFP Distributed

A pilot project designed to support workforce development by Intensive Community-Based Treatment and Support Services (ICTS) providers was posted on the Oregon Procurement Information Network (ORPIN) website and widely distributed to stakeholders. The RFP targets that cohort of children who require the most intensive services and supports to succeed. The successful applicant will be trained in an evidence-based model of system improvement (The Change Book) that will be used to assess, plan, implement, and evaluate the targeted system improvement. The deadline for submission of proposals was January 2, 2007. The RFP can be found at: <http://orpin.oregon.gov/open.dll/open?sessionID=1171138>.

2007 ITS Rate Setting Process

The Actuarial Services Unit (ASU) and DHS, AMH Division have completed the 2007 Intensive Treatment Services (ITS) and Intensive Community Treatment Services (ICTS) rate setting process for 2007. The ITS and ICTS portion of the Mental Health Organization (MHO) capitation rates use a plan specific methodology as opposed to the glide path methodology developed in 2005. The change in methodology was made because:

- The data submitted by MHOs varied in intensity and frequency of services provided;
- It supports the various rates at which MHOs implemented CSCI principles;
- It creates incentives for MHOs to ensure data reporting is complete;
- It creates incentives to provide community-based alternatives at equal dollar value to the traditional services; and
- It disburses resources into communities where those services have been provided.

The rate setting process resulted in:

- Revenues to MHOs were reduced by \$200,000 (0.13%) in 2007;
- Revenues for ITS and ICTS Services were reduced by \$2 million and were mostly offset by expected increases.

Plan Specific rates can be reviewed at the link below. The complete rate setting report can be found on the web at:
http://www.oregon.gov/DHS/healthplan/data_pubs/rates-costs/main.shtml.
Exhibit 4-F in the report details the changes for each MHO.

ICTS Provider Recertification Update

A total of 52 programs have been certified and the recertification of those programs is nearly complete. 1,097 children were enrolled in CPMS with ICTS providers as of October 31, 2006.

Major Administrative Rule Revision

AMH is undertaking a project to examine and revise **all** of the administrative rules under its jurisdiction (rules in Chapter 309 and Chapter 415); a steering committee made up of addiction and mental health stakeholders and AMH staff has been meeting regularly since August to oversee this task. Additional information is available on the website at:
<http://www.oregon.gov/DHS/addiction/rule/main.shtml>. For further information contact Rick Luthe at: Richard.L.Luthe@state.or.us.

Ongoing CSCI Meetings

- Children's System Advisory Committee (CSAC) – meets 4th Friday of the month
- Quality Data Improvement Workgroup (QDIG) – meets 1st Wednesday of the month

For more information, go to the AMH website at:
<http://www.oregon.gov/DHS/mentalhealth/child-mh-soc-in-plan-grp/main.shtml>