
Behavioral Health Partner Meeting

Sep. 6, 2022

The logo for the Oregon Health Authority is centered within a light blue, curved banner. It features the word "Oregon" in a smaller, orange, serif font positioned above the "H" of the word "Health". The word "Health" is written in a large, dark blue, serif font. Below "Health", the word "Authority" is written in a smaller, orange, serif font, with a thin blue horizontal line extending from the left side of the "H" in "Health" to the start of "Authority".

Oregon
Health
Authority

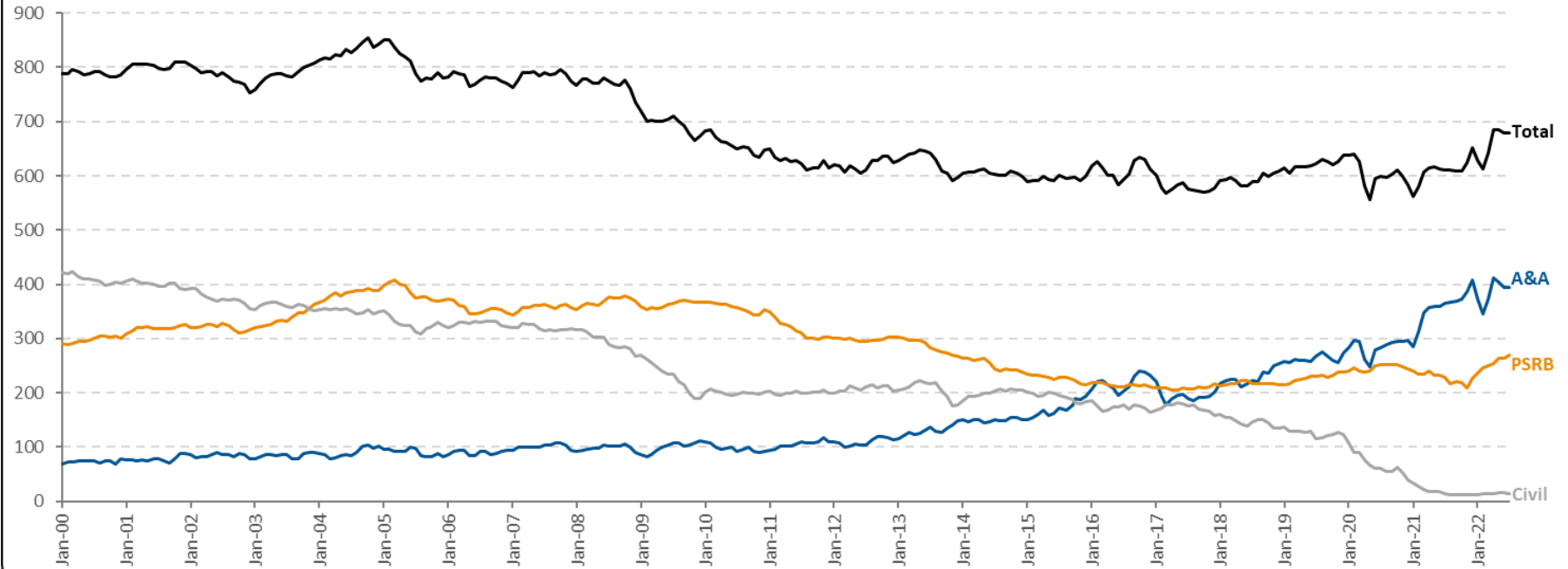
Agenda

- Oregon State Hospital (OSH) capacity challenges
- Federal Court Order – What does it mean?
- Federal Court Order Implementation

State Hospital Capacity Challenges

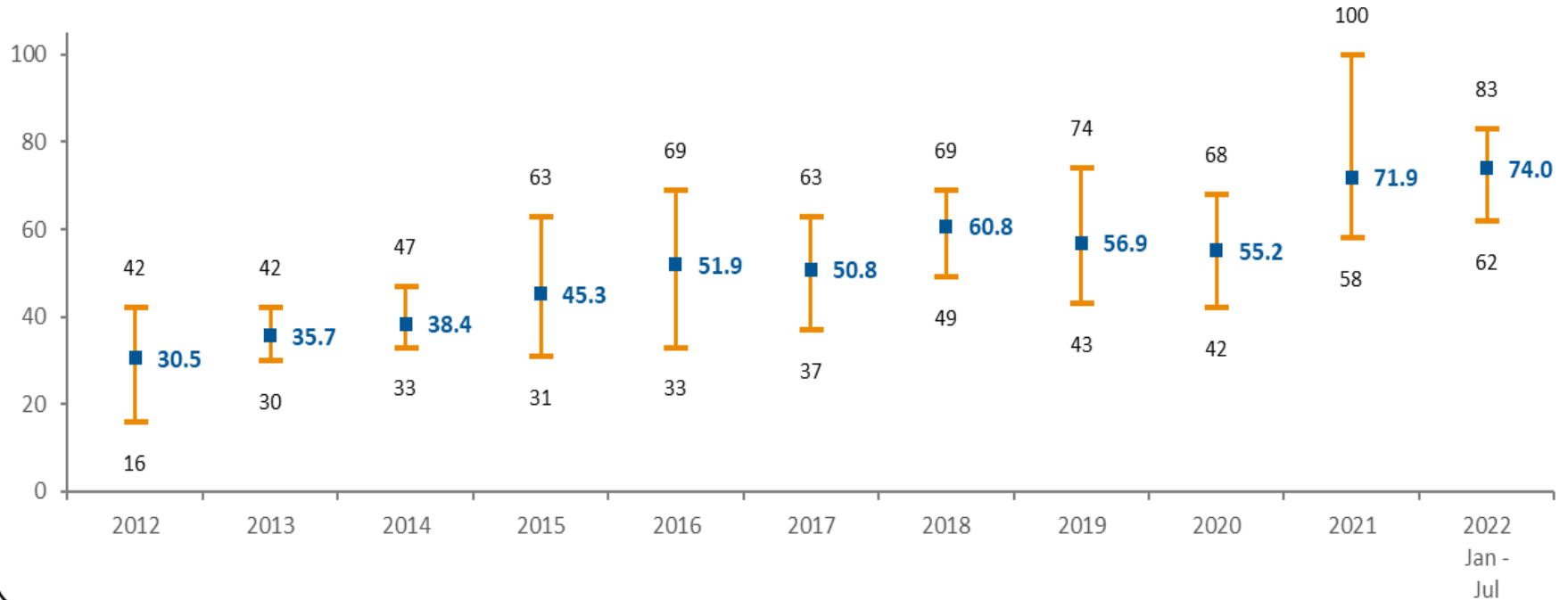
Oregon State Hospital Utilization

OSH Average Daily Population by Month and Legal Status Type since 2000



Oregon State Hospital A&A Demand

Aid & Assist Admissions / Orders per Month by Year since 2012
(with high, low, and average per month)

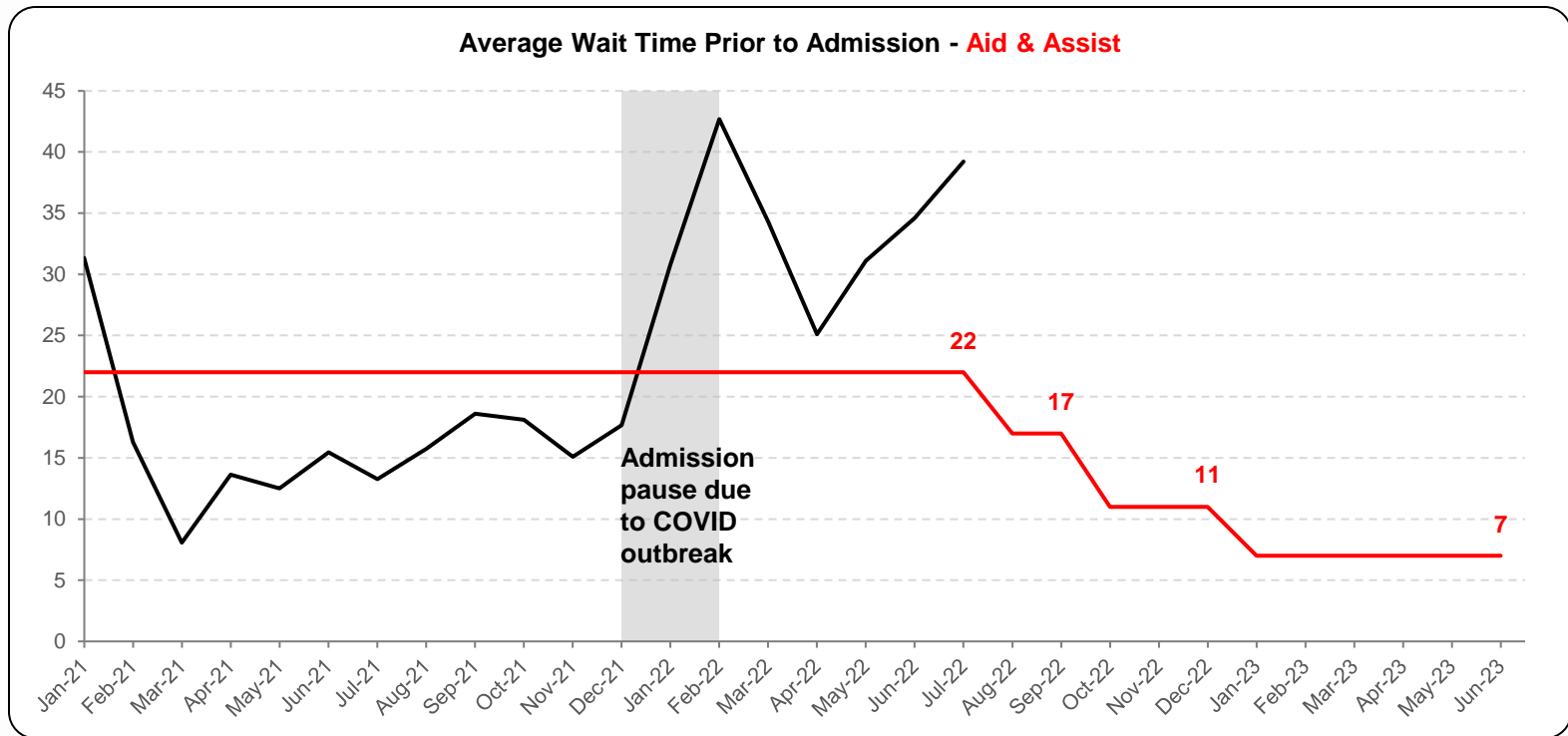


Types of charges vary by county

OSH Aid & Assist Census as of 2022-09-06

County	A&A Census	% of Census	% of State Pop.	Census vs. Pop. Dif.	Fel.	% Fel.	Misd.	% Misd.	None Listed
Multnomah	73	17.9%	19.44%	-1.54%	70	95.9%	1	1.4%	2
Washington	60	14.7%	14.53%	0.18%	45	75.0%	15	25.0%	
Marion	50	12.3%	8.18%	4.08%	48	96.0%	2	4.0%	
Lane	44	10.8%	8.94%	1.85%	22	50.0%	20	45.5%	2
Clackamas	24	5.9%	9.99%	-4.11%	18	75.0%	6	25.0%	
Jackson	20	4.9%	5.23%	-0.33%	15	75.0%	5	25.0%	
Douglas	18	4.4%	2.64%	1.78%	13	72.2%	4	22.2%	1
Linn	15	3.7%	2.98%	0.69%	13	86.7%	2	13.3%	
Deschutes	11	2.7%	4.62%	-1.92%	8	72.7%	3	27.3%	
Benton	10	2.5%	2.22%	0.23%	8	80.0%	1	10.0%	1
Josephine	9	2.2%	2.03%	0.18%	9	100.0%			
Klamath	7	1.7%	1.59%	0.12%	6	85.7%	1	14.3%	
Lincoln	7	1.7%	1.13%	0.58%	3	42.9%	4	57.1%	
Tillamook	7	1.7%	0.62%	1.09%	2	28.6%	4	57.1%	1
Polk	6	1.5%	1.96%	-0.49%	3	50.0%	2	33.3%	1
Umatilla	6	1.5%	1.91%	-0.44%	4	66.7%	2	33.3%	
Coos	6	1.5%	1.48%	-0.01%	6	100.0%			
Clatsop	6	1.5%	0.92%	0.55%	4	66.7%	2	33.3%	
Curry	6	1.5%	0.54%	0.93%	3	50.0%	3	50.0%	
Columbia	5	1.2%	1.25%	-0.02%	2	40.0%	3	60.0%	
Malheur	5	1.2%	0.75%	0.47%	5	100.0%			
Union	4	1.0%	0.63%	0.35%	4	100.0%			
Yamhill	3	0.7%	2.54%	-1.81%	1	33.3%	2	66.7%	
Jefferson	2	0.5%	0.56%	-0.07%	2	100.0%			
Baker	2	0.5%	0.40%	0.09%	2	100.0%			
Wasco	1	0.2%	0.64%	-0.39%	1	100.0%			
Crook	1	0.2%	0.55%	-0.30%	1	100.0%			
Hood River			0.60%	-0.60%					
Morrow			0.30%	-0.30%					
Lake			0.19%	-0.19%					
Grant			0.17%	-0.17%					
Harney			0.17%	-0.17%					
Wallowa			0.17%	-0.17%					
Gilliam			0.05%	-0.05%					
Sherman			0.04%	-0.04%					
Wheeler			0.03%	-0.03%					
Total	408	100%	100%	0%	318	77.9%	82	20.1%	8

Wait times are increasing



Federal Order Designed to Improve Admissions

Month	No Changes to Current Practices				Implement Restoration Limits Starting Sep 2022			
	Est. New Orders ¹	Est. Discharges ²	Difference	Est. Admit List Count ³	Est. New Orders ¹	Est. Discharges ⁴	Difference	Est. Admit List Count ³
Sep-22	74	67	+7	82	74	67	7	77
Oct-22	74	67	+7	89	74	90	-16	61
Nov-22	74	67	+7	96	74	90	-16	45
Dec-22	74	67	+7	103	74	97	-23	22
Jan-23	74	67	+7	110	74	97	-23	0
Feb-23	74	67	+7	117	74	97	-23	0
Mar-23	79	67	+12	129	79	109	-30	0
Apr-23	79	67	+12	141	79	91	-12	0
May-23	79	67	+12	153	79	91	-12	0
Jun-23	79	67	+12	165	79	91	-12	0
Jul-23	79	67	+12	177	79	91	-12	0
Aug-23	79	67	+12	189	79	91	-12	0
Sep-23	83	67	+16	205	83	94	-11	0
Oct-23	83	67	+16	221	83	94	-11	0
Nov-23	83	67	+16	237	83	94	-11	0
Dec-23	83	67	+16	253	83	94	-11	0

¹ The average number of orders received over the previous 12 months (Aug 2021 through Jul 2022) has been 74 per month. But that number has been increasing each year (by 12% from 69 orders per month the previous 12 months) and the expectation is that it will continue to increase. To reflect that, the estimated new orders in this projection increase every six months based on that 12% annual rate.

² Based on the average A&A discharges over the last 12 months (Sep 2021 through Aug 2022).

³ Using the admit list count as of 9/2/22 (70) and adding or subtracting the difference each month.

⁴ Assumes OSH will have the estimated 67 discharges per month with an additional amount each month to be determined based on priority and capacity as the patients currently at OSH are discharged. After the cohort of current patients are discharged, the estimated discharges per month moving forward are calculated based on the estimated lengths of stay with the restoration limits in place.

Federal Court Order

Intent of Federal Court Order

- Designed to reduce time to admission for people waiting for hospital care while in jail by
 - Prioritizing forensic admissions until the hospital reaches compliance with Mink/Bowman
 - Limits length of restoration in alignment with national trends

Fed. Court Order – What does it do?

OSH admissions framework:

- GEI and A&A patients to be admitted per place on waitlist, unless expedited admissions criteria met.
- Precludes admissions of civilly committed patients, unless expedited admissions criteria met.
- Allows admissions of PSRB GEI revocations and persons pursuant to ORS 426.701 (extremely dangerous persons).

Limits restoration timelines at OSH:

- Limits length of restoration (LOR) for A&A patients charged with **misdemeanors to 90 days.**
- Limits LOR for A&A charged with **non-M11 felonies to six months.**
- Limits LOR for A&A charged with **M11 felonies to one-year.**

Federal Court Order Implementation

Federal Order Will Impact Counties Differently

- Rates of Aid and Assist orders vary widely among counties
- Mix of misdemeanor and felony charges vary among county Aid and Assist admissions
- Counties vary in resource development to support people with complex behavioral health conditions.

No change for approx. 70% of Aid and Assist patient discharges

- **Discharges occur as usual for:**
 - People found able or not able to aid and assist
 - People found to no longer need hospital level of care
 - People with their charges dismissed

 - Approx. 67 patients discharged / month
 - Discharge notices issued when people meet criteria above

Federal Court Order Implementation

- **Cohort 1:** Patients newly admitted to OSH on or after 9/1/22 (date of Federal Court order).
- **Cohort 2:** Patients at OSH at the time of the Federal Court order.

Cohort 1: Patients newly admitted to OSH on or after 9/1/22

- **OSH will apply the new Federal Court Order restoration time limits:**
 - People charged with misdemeanor: up to 90 days
 - People charged with non-M11 felony: up to 6 mos
 - People charged with M11 felony: up to 1 year
- **Notices will be sent to the courts 30 days prior to the date the restoration time limit is reached**

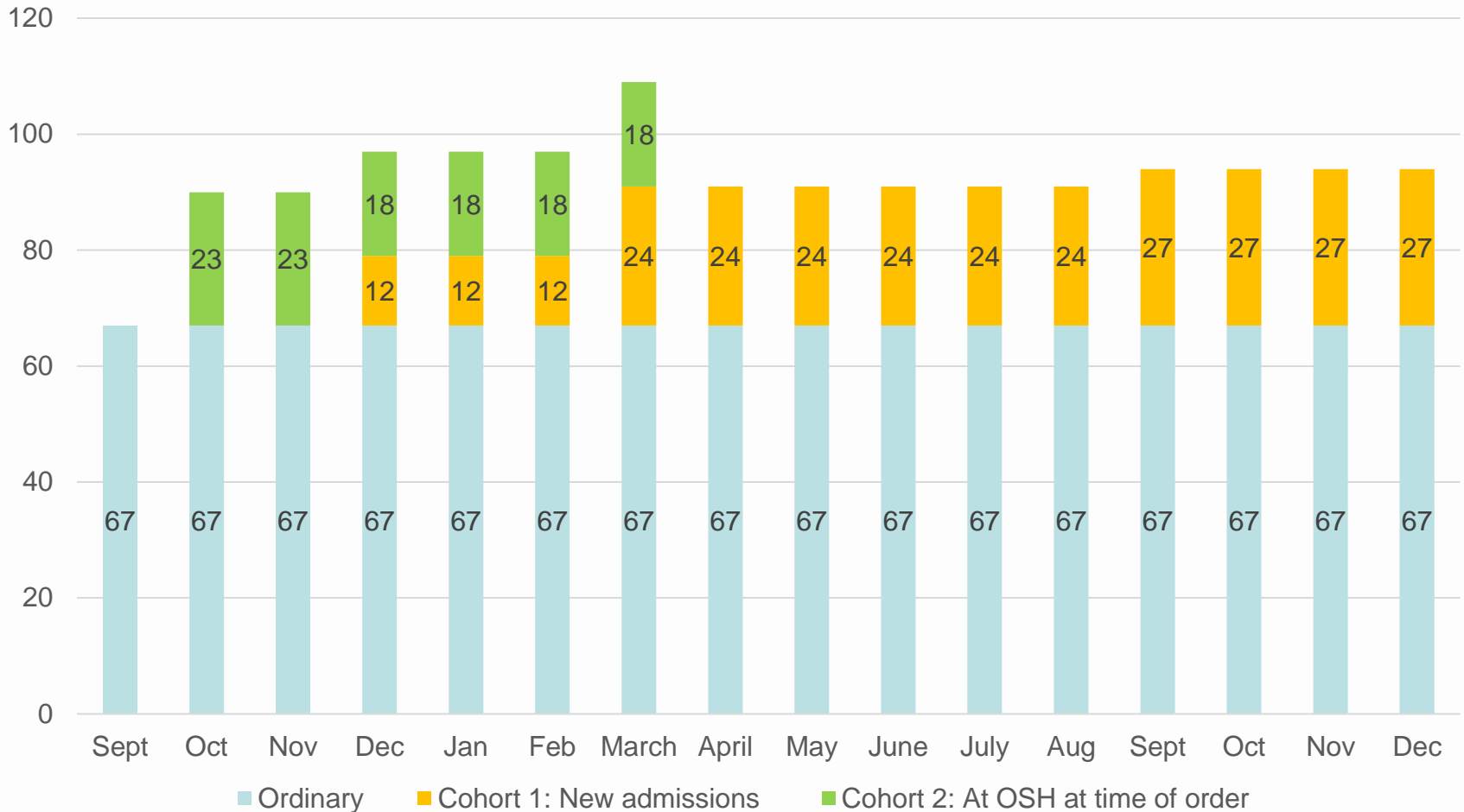
Cohort 2: Patients at OSH at the time of the Federal Court order

- **OSH will stagger discharges over the next several months for patients who meet new Federal Order criteria using the following sequencing:**
 - Misdemeanors on 9b/RTP list
 - Non-M11 felonies on 9b/RTP list
 - Misdemeanors not on 9b/RTP list
 - Non-M11 felonies not on 9b/RTP list
 - M11 felonies not on 9b/RTP list
- **Notices will be sent to the courts 30 days prior to discharge**
- **Approx. 120 patients will be discharged through this process**

Cohort 2: Notices will be sent on 9/12 for October discharges

County	Misdemeanor	Felony	Total
Clackamas		1	1
Coos	1		1
Curry	1	1	2
Deschutes	1		1
Douglas		1	1
Jackson		1	1
Josephine	2		2
Lane	2	1	3
Linn		1	1
Malheur	1		1
Marion	2	3	5
Umatilla	1		1
Washington		2	2
Yamhill	1		1
Total	12	11	23

Monthly Discharges by Group



New and existing resources are available to support these changes

Community Mental Health Programs (CMHPs)

- **\$15M increase in Aid and Assist dedicated funding** (*flexibility encouraged if program design needs to be changed/refined*)
- **\$100M** in housing and treatment infrastructure
- Doubling of mobile crisis funding (**\$15M obligated/spent to date**)
- By County Innovations (*e.g. Washington Co's New Narrative program bridge services from hospital and jail*)

M110 Behavioral Health Resource Networks

- Contracts have been executed state-wide, implementation will vary by county/region
- **All M110 BHRN monies obligated or spent (\$302M)**

Other legislative investments

- **\$130M in housing and treatment infrastructure**
 - Current RFGA for Supportive Housing and Residential expansion
- Improving Peoples Access to Community-based Treatment (IMPACTS) program – grants awarded to counties, **\$20M**

Medicaid funded services (*upon Medicaid enrollment/activation*)

- Assertive Community Treatment (ACT)
- Intensive Care Coordination

Questions?