Behavioral Health Crisis System: Where we are and where we will go together

Presented to:

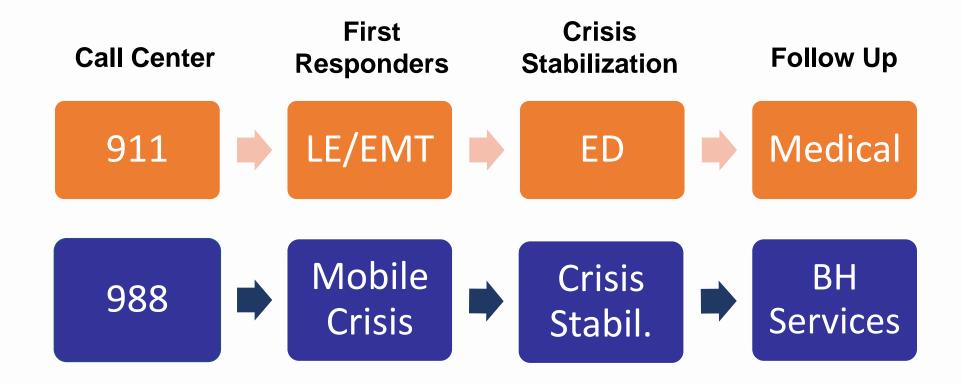
House Interim Committee On Behavioral Health

September 22, 2022



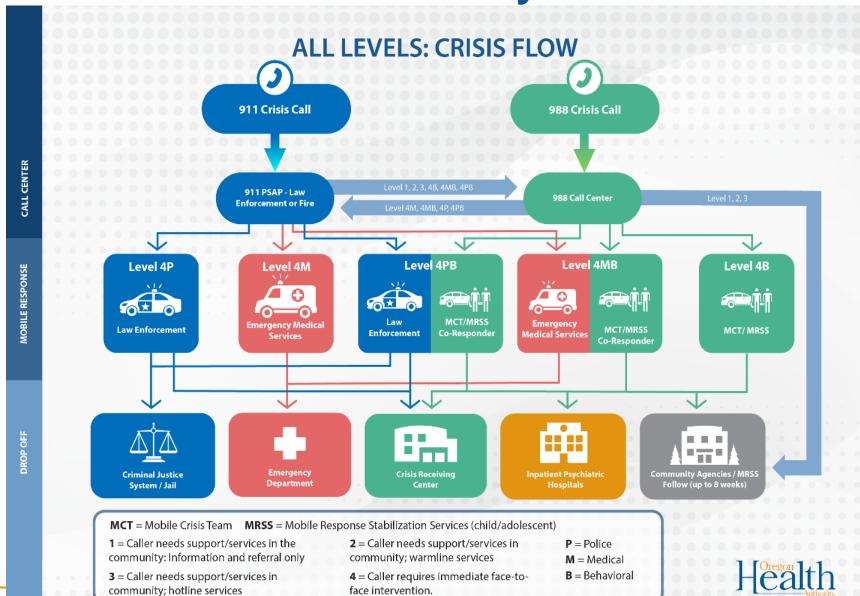
HEALTH SYSTEMS DIVISION
Office of Behavioral Health

An Effective 988 System Will Require Key Investments





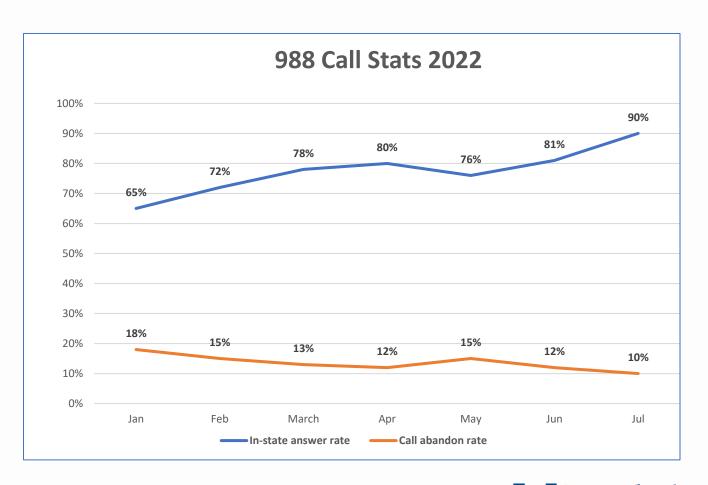
Future State of Crisis Services System



988 Call Centers Update

Includes figures from both call centers:

- Total 77 new staff hired to increase workforce capacity
- Statewide call volume increased by 35-40% for both call centers
- 436 texts in July (99% answer rate)
- 645 chats in July (100% answer rate)
- Nationwide, 45% increase in call volume since July 16





What We Need to Prepare For at Call Centers

- 988 call centers were funded with
 - \$5M from HB 2417
 - One-time federal grant of \$2.2M
- Call volume expected to increase to over 200,000 calls over the next 5 years
 - Will require additional crisis intervention counselors and staff to cover call+text+chat and maintain the standard of service
- Setting appropriate and attractive compensation for crisis intervention counselors at 988 call centers is high priority to prevent workforce attrition in a high stress job
- Another high priority is fair compensation to ensure diversity of services, so ensure the 988 call center workforce reflects the diversity of the communities served



Mobile Crisis: Responding After the Call

- On September 12, 2022, Oregon became the first approved by CMS for an 85% match for mobile crisis services
 - Includes approval to access the higher match for services provided by mobile crisis teams up to 72 hours
- State Plan Amendment ensures statewide access to a two-person mobile crisis team of behavioral health providers 24/7/365 for all Oregonians
 - Includes developmentally appropriate model for children (MRSS)
- Directly aligns implementation of mobile crisis with HB 2417
 - Enables state to move away from General Fund and leverage Medicaid funds to sustain firehouse model for mobile crisis



Mobile Crisis Investments Timeline

July 2022 988 Launched March 2022 • \$10M from HB 2417 to counties Start OAR change process January-August 2022 • OHA submits SPA to be eligible for higher Medicaid match • CMHPs complete self-assessment of mobile crisis services current state State Plan Amendment approved by CMS September-October 2022 New mobile crisis rules drafted CMHPs submit plans and timeline to align with ARPA required October-November 2022 Counties receive additional Block Grant funds for mobile crisis plan implementation New mobile crisis rules go into effect December 2022 • All providers continue to work on their mobile crisis services to align with new rules and Medicaid requirement July 2023 and beyond Crisis stabilization centers funded and opened



Stabilization Services: The Continued Gap in the System

- Investment in the complete continuum of service is critical to prevent pressure building up on 988 and mobile crisis teams
- Diversion from jail and emergency department is not achieved without a behavioral health facility for individuals to access





OHA's Legislative Requests

- Policy Option Package for \$269M for:
 - 988 Call centers
 - POP supports at least 51 counselors, 10 supervisors, and 4 quality assurance staff
 - Inclusive of anticipated cost associated with increased call, text, and chat demand
 - Crisis Stabilization Centers
 - POP includes funds to establish and operate 17 CSCs that would open steadily from January 2024 to June 2025
 - 165 crisis chairs and 238 beds for Oregonians in crisis
 - Includes funds for 4 months of operational costs for each center to get off the ground
 - FTEs to support design and implementation of crisis continuum of services
- Legislative concept to establish payor parity for behavioral health crisis services for commercial payors

Thank You

