

Building Steps for an Oregon System of Care
June 23, 2009

| Steps | Task | Lead | Status |
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| 1 | Identify the populations you want to serve <ul style="list-style-type: none"> • What are the populations of children served by two or more systems? • Who are not being well served? • Focus on children coming from child welfare, juvenile justice, mental health, education | Agency Strategy Team | Done for Phase One of Implementation |
| 2 | What are desired outcomes for each identified population? <ul style="list-style-type: none"> • Child welfare • Juvenile Justice • Mental Health • Education | Agency Strategy Team | Done for Phase One of Implementation |
| 3 | Appoint a "Team Leader" to the Initiative | DHS Director | By August 2009 |
| 4 | Quantify outcomes for each target population <ul style="list-style-type: none"> • Financial • Programmatic • Clinical • Social Example: 25% reduction in residential treatment; 50% reduction in Medicaid inpatient days; 20 point improvement in youth functioning. | Agency Strategy Team | By September 2009 |
| 5 | Identify funding sources and costs associated for each target group of youth to be served. Determine how to redirect funds from existing sources. | Roger Staples, Department and Agency finance staff | By October 2009 |
| 6 | Identify services and supports youth need to be successful. Examples: <ul style="list-style-type: none"> • Care management • In-home supports • Day treatment • Mentors • Respite • Crisis intervention • Flex funds • Informal supports | OFSN, existing Wraparound programs in Oregon and elsewhere, Agency Strategy Team | By October 2009 |
| 7 | Cost per child per month for required services <ul style="list-style-type: none"> • Service • Number of youth needing service • Cost per unit • Total units per month • Cost per child | | |
| 8 | Identify practice model and underlying values <ul style="list-style-type: none"> • Wraparound approach • Using care coordinators • Family peer supports • Coordinated service teams. | Agency Strategy Team and Department leaders | Done in the Legislation (HB 2144) |

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| 9 | What is the system design model? <ul style="list-style-type: none"> • Regional or county-based • Care Management Entity selected through RFP process • Implement practice model based on community readiness • Care Management Entities evaluated based on ability to achieve outcomes | Agency Strategy Team and Team Leader | Underway – to be completed no later than October 2009 |
| 10 | Infrastructure requirements to implement system design <ul style="list-style-type: none"> • IT • Provider Network • Quality Assurance • Finance • System Oversight • Evaluation, referral, intake and assessment • Medical oversight & crisis services | Agency Strategy Team, Team Leader, existing Wraparound projects | Underway – to be completed no later than October 2009 |
| 11 | Risk <ul style="list-style-type: none"> • Care Management Entities carrying risk • System of Care sites be non-risk sharing • Need to know before drafting the RFP | Agency Strategy Team, Team Leader, Agency or Department leaders | By November 2009 |
| 12 | Financing – how will funds be pooled at state level? Example #1: <ul style="list-style-type: none"> • CME will coordinated and pay for care • DHS will pay monthly case rate out of federal/state funds that is less than current placement costs • DMAP will calculate separate capitated payment to MHOs for mental health care • Local school and juvenile justice, foundation funds will be used as 40% match to draw down 60% federal funds under targeted case management Example #2: <ul style="list-style-type: none"> • DMAP wants to reduce inpatient days and residential days for children 0-18 and provides funds to CME. • DMAP provides 95% of monthly rate to CME • Cost savings retained by CME • Could be done with current 1115 waiver • Each participating partner could also do the same creating a win-win scenario. | DMAP (Roger Staples), Jim Scherzinger (DHS), and equivalent positions with Education, Commission and OYA | By November 2009 |
| 13 | Identify local funding sources that could provide match – cash or in-kind <ul style="list-style-type: none"> • Business • Education • Juvenile Justice • Foundations | Existing Wraparound projects in Oregon, Project Implementation Team members | By September 2009 |

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| 14 | Family and youth involvement <ul style="list-style-type: none"> • How it will be supported in the System of Care • Support for statewide Family and Youth Organization | Team Leader, Agency Strategy Team, OFSN | Underway – recommendations made |
| 15 | Identify local planning and oversight body for System of Care <ul style="list-style-type: none"> • Relationship between oversight body and Care Management Entity • Relationship to Statewide Advisory Committee | Team Leader, Agency Strategy Team, local Wraparound projects | By October 2009 |
| 16 | RFP timetable, implementation and benchmarks to measure System of Care effort | Team Leader, DHS, Agency Strategy Team | By November 2009 |
| 17 | Training and workforce development <ul style="list-style-type: none"> • Identify training needs • Plan to develop System of Care and Care Management Entities | PSU Cross-System Training Academy, local Wraparound sites | By October 2009 |
| 18 | Identify key stakeholder roles: <ul style="list-style-type: none"> • Courts • Business • Foundations • Local schools • Juvenile Justice • Law enforcement | Statewide Advisory Committee | By November 2009 |
| 19 | Changes in state regulations, policies, budgets | Agency Strategy Team, Department and Agency leaders | By November 2009 |
| 20 | Waivers and state plan amendments | DMAP, DHS, Agency Strategy Team | By September 2009 |
| 21 | Prepare and issue RFP for creation of three Care Management Entities | DHS | By January 2010 |
| 22 | Apply for SAMHSA grant for one of the three implementation sites | DHS | Date to be determined |