

January 2014

Statement from Tina Edlund, acting director of the Oregon Health Authority, in response to the USDOJ Interim Report to the State of Oregon

The interim report includes USDOJ's preliminary analysis of the year one baseline data. This data does not reflect the significant investments the Oregon Legislature made in our community mental health system. We expect to see the numbers improve as new programs and services come online in 2014.

The state shares a commitment with USDOJ to ensure people with severe and persistent mental illness (SPMI) are able to live in the least restrictive setting possible. Our goal is to provide people with the right care, in the right place, at the right time.

We also share a commitment to getting the best data possible to determine the baseline for the current service level – where we're at right now – and then, according to the four-year plan outlined in the agreement, we are going to use this data to identify gaps in the system and determine the best way to address those needs. We look forward to working with USDOJ on everything outlined in the report, and we expect to see improvement in the data soon.

While the agreement with USDOJ is for a four-year plan, we didn't wait to begin making changes. Last summer, Governor Kitzhaber and the Legislature made an unprecedented investment in mental health services, with almost \$40 million going to the community mental health system. Then the Legislature invested an additional \$20 million during the September special session. Many of these investments will fund services for people with SPMI, such as:

- Crisis services;
- Supported housing and peer-delivered services;
- Supported employment services; and
- Assertive Community Treatment (ACT).

These investments will focus on creating more services, but they will also fund provider training and technical assistance to help programs establish evidence-based practices that have been proven to help people recover from mental illness. This will augment our existing contracts with two centers of excellence to conduct fidelity reviews and to offer technical assistance to providers of ACT and supported employment.

Since July, the state has moved forward quickly with the new investments, and we're already well underway. More than \$28 million has been awarded so far. We're on an accelerated timeline, so we expect to see the impact of those investments reflected in the data collected within the next several months.

At the same time, Oregon is reducing its reliance on the state hospital system. Over the past 10 years, the total annual average daily population in the state hospitals has decreased by 19.8 percent, from a high of 784 in 2004 to 629 in 2013. It is also worth noting that while state

hospital population numbers have dropped, the overall population in Oregon has been increasing.

However, our goal is to continue reducing admissions to the state hospital. People should receive the best and most integrated care that will help them get well and stay well. Whenever possible, this care should be in their local communities. That said, just like with any other condition, there will always be times when some individuals need hospital-level care on their road to recovery.

As we move into the second year of our four-year agreement, we look forward to collaborating with USDOJ on the best way to move forward. While we will see faster, more direct results through the community mental health investments, the coordinated care model will have a long-term effect as CCOs work to integrate behavioral and physical health services and establish patient-centered primary care health homes to provide critical community services to people living with SPMI so they are able to live in the most integrated setting possible.