



February 21, 2019

Ms. Sarah Radcliffe, Managing Attorney  
Mental Health Rights Project  
Disability Rights Oregon  
511 SW 10<sup>th</sup> Avenue, Suite 200  
Portland, OR 97205

<Sent via mail and electronic delivery>

Dear Ms. Radcliffe:

Thank you for your follow-up questions regarding our internal assessments of the adult mental health residential program and your recommendations for next steps described in your February 7 email and February 20 letter. We look forward to meeting with you on February 28 to address your questions in more detail.

I want to assure you that while we have taken a lot of steps to increase our oversight of the adult mental health residential system, we acknowledge much more work is needed to ensure supportive and planned transitions. I appreciate your questions and the opportunity to explain further.

I would like to first address your follow-up questions related to the six-month health outcomes associated with individuals who were discharged from residential settings.

Across all residential programs, there were 38 unique individuals who died six months following discharge from a residential facility. Please note that some of these individuals were transitioned into a different setting. Residential treatment providers are required to report deaths of individuals to the Office of Training, Investigations, and Safety, for investigation.

The table below provides counts of persons by cause of death.

<b>38</b>	<b>Total Persons Who Died within Six Months of Discharge</b>
7	Unreported to the Office of Training, Investigations, and Safety (OTIS)
3	Suicide
28	Natural causes (causes include cancer, heart failure and kidney disease)

Two of the individuals who died by suicide were receiving care in a residential treatment setting at the time of their death. One had absconded from their facility. OTIS investigations did not find fault with the treatment programs. The seven previously unreported deaths are now under investigation by OTIS.

I acknowledge that in our efforts to protect individuals' rights to live and receive supports in the most integrated setting possible, transitions come with heightened risks for disruptions in care. This is why we work with our CHOICE contractors to support and coordinate the transition process. We have just added two staff members to our adult mental health and housing unit. One of them will be providing state-level

oversight and analysis of transitions as reported to us by CHOICE. The other new hire will be focused on emergency department utilization and warm hand-offs for individuals with chronic mental illness accessing the emergency department.

In addition, OHA has begun reviewing all KePro decisions related to Secure Residential Treatment Facility level of care. So far, our staff have reversed all of KePro's SRTF denials. These are just a few of the steps our agency has taken to improve health outcomes and ensure compassionate and planned transitions.

You also recommended a couple of steps that we should take as an agency to protect individuals' rights to person-centered service planning and transition planning, as well as their access to clear information regarding the medical necessity review process.

We agree with those recommendations and work is underway for both.

A team of OHA Medicaid policy analysts are revising the 1915(i) Home and Community Based Services State Plan Option rules to reflect the changes made to the KePro contract and to align with the CMS-approved 1915(i) State Plan Amendment (SPA). The revised rules will refer the individual's right to person-centered service planning and transition planning under [OAR 411-004-0030](#). We anticipate having the revised rules ready for the temporary rule-making process by the end of March.

OHA staff on our Medicaid and Behavioral Health teams are also working on a frequently asked questions document that will be used to inform individuals, guardians, providers, advocates and interested parties of the updated medical appropriateness review process. The FAQ will address all of the questions you listed as well as process questions that have arisen during this transition process. We hope to have this FAQ completed, posted to the web and distributed also by the end of March.

I look forward to continuing this discussion at our upcoming meeting. We'd be happy to answer any additional questions you may have. Thank you again for this opportunity to explain further about our work.

Sincerely,



Patrick M. Allen  
Director