



Governor's Behavioral Health Advisory Council Policy Option Package Summary

Due to COVID-19, the Governor's Behavioral Health Advisory Council (GBHAC) took a two-month break beginning in April. Prior to breaking, the GBHAC's affinity groups had produced a list of policy proposals that were in the process of further refinement and were due to be finalized through full council deliberation. Unfortunately, the group was unable to meet and finalize in time to prepare the recommendations for Oregon Health Authority's (OHA) agency request budget. To honor the work for the GBHAC and ensure foundational pieces of the work were included in the agency request budget, OHA took the information and policy proposals that were being finalized, refined, and included pieces that could be defined given the circumstances. These proposals only represent what will be submitted in the agency request budget and can be further refined, amended or withdrawn in the Governor's budget request. The policy option package is divided into sections mirroring the three affinity groups (Programs and Services, Workforce, and Housing) and adds a fourth section for Youth and Young Adults. The total package is a state general fund investment of about \$100 million (\$200 million total).

Youth and Young Adults:

1. Establish a Center for Training and Technical Assistance for Youth and Young Adult Behavioral Health that would develop fidelity models and best practice, outcome measures, and technical assistance for youth and young adult serving programs. **Cost:** \$1.0 million general fund only
2. Expand Young Adult in Transition Residential System with four additional five-bed Residential Treatment Homes (RTH) and a 10-bed Secure Residential Treatment Facility (SRTF) specializing in the young adult population (age 17.5 – 25). **Cost:** \$9.1 million general fund, \$13.6 million total¹
3. Develop Psychiatric Residential Treatment Service (PRTS) capacity through establishment of 47 additional PRTS beds and on-going funding that can support sustainability and capacity infrastructure needed to ensure a comprehensive continuum of care for children's mental health with a focus on intensive inpatient programs. **Cost:** \$7.5 million general fund only¹
4. Expand Early Assessment and Support Alliance (EASA) program from a two-year program to a three-year program. The third year is based on a step-down framework and would provide adolescents and young adults (14-25) continued transition services, access to a strengthened peer support component, and enhanced life and self-care elements. **Cost:** \$9.2 million general fund only
5. Provide additional funding to Young Adult Hubs, which are modeled after Transition to Independence Process and provide mental health services, case management, and support for disconnected youth. **Cost:** \$3.2 million general fund only

¹ The Youth Adult in Transition Residential System (#2) and Psychiatric Residential Treatment Services (#3) estimates are preliminary and may change before OHA submits its agency request budget.



Programs and Services:

6. Provide general funds to implement and pilot three non-clinical peer-run respite centers, including a culturally specific program designed to provide services and supports to individuals who are Black, Indigenous, or Persons of Color. **Cost:** \$2.4 million general fund only
7. Establish a State Certified Community Behavioral Clinic Program (CCBHC) by providing state Medicaid match to fund 12 CCBHCs and further defining service array, certification, and evaluation based on the Federal Demonstration. **Cost:** \$33.5 million general fund, \$128.6 million total
8. Fund parts of the Tribal Behavioral Health Strategic Plan including funds to support Medicaid reimbursement of Tribal Based Practice. **Cost:** \$0.5 million general fund, \$1.4 million total
9. Develop payment methodology to fund integrated treatment of substance use disorder and mental illness. **Cost:** \$10.1 million general fund, \$10.2 million total

Workforce:

10. Develop a robust behavioral health workforce incentive fund to serve rural and/or marginalized communities. Incentives would include funding for bachelor's and master's level education, retention bonuses post-graduation, relocation bonuses, and loan forgiveness for a culturally specific workforce. **Cost:** \$10.2 million general fund only

Housing:

11. Expand Mobile Permanent Supportive/Supported Housing (PSH) team model to provide behavioral health services that travel with an individual through multiple housing scenarios to 300 additional people. **Cost:** \$2.7 million general fund only
12. Increase tenant-based rental assistance for low barrier housing that can be paired with supportive services to break the cycle of homelessness, hospitalization, commitment and criminalization for 300 additional people. **Cost:** \$5.7 million general fund only
13. Provide barrier removal funds, including money for individuals (for utilities, security deposit, etc) and funding for landlords (for repairs above and beyond expected wear and tear). **Cost:** \$0.9 million general fund only
14. Fund ongoing needs assessment of residential needs throughout the state and across residential placement types. **Cost:** \$0.2 million general fund
15. Fund renovation funds for residential living to increase the inventory of available residential placements across the continuum for individuals with serious mental illness. **Cost:** \$5.5 million general fund