Oregon Health Authority Health Systems Division Behavioral Health

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The Triple Aim Vision for Oregon

- **Better health**
- **Better care**
- 3 Lower costs



What do we mean when we say Behavioral Health



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How HSD Behavioral Services Delivers

Care

Adult Mental Health

Youth Mental Health Coordinated Care Organizations

Community Mental Health Programs

Other Partners

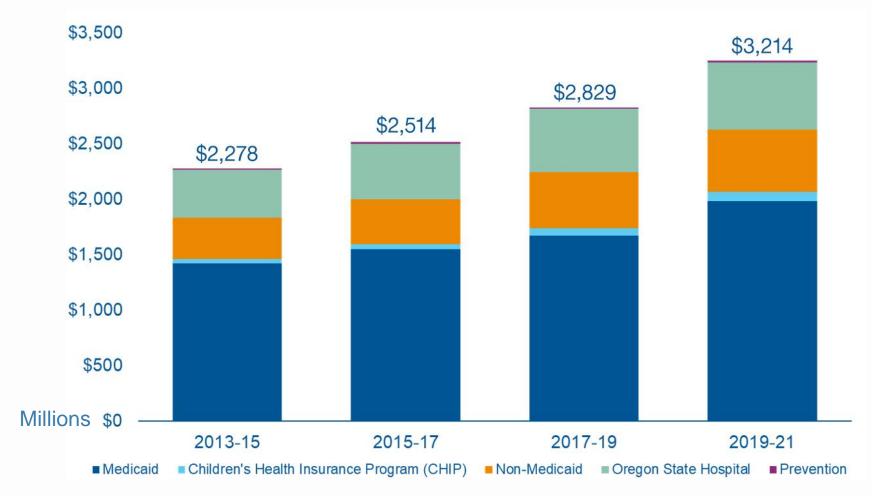
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Substance

Use Disorder



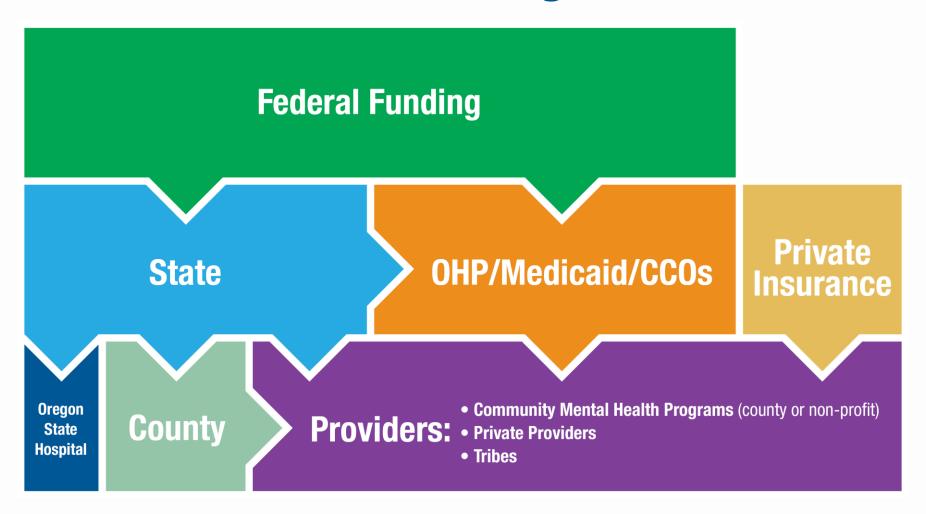
OHA Behavioral Health Spending



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Behavioral Health Funding Streams



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Behavioral Health



Coordinated Care Organizations

CCO 1.0

- Delegated full benefit
- Limited provider network and long wait times
- Members unable to access BH in PCPCH
- Limited care coordination and members "falling through the cracks"

CCO 2.0

- Responsible for BH benefit
- Must ensure adequate provider network and timely access to care (per OAR)
- Must contract for and reimburse BH in primary care
- Priority populations eligible for intensive care coordination



Community Mental Health Programs

By statute (ORS 430.630), CMHPs provide basic services to persons with mental illness or Substance Use Disorder, subject to:

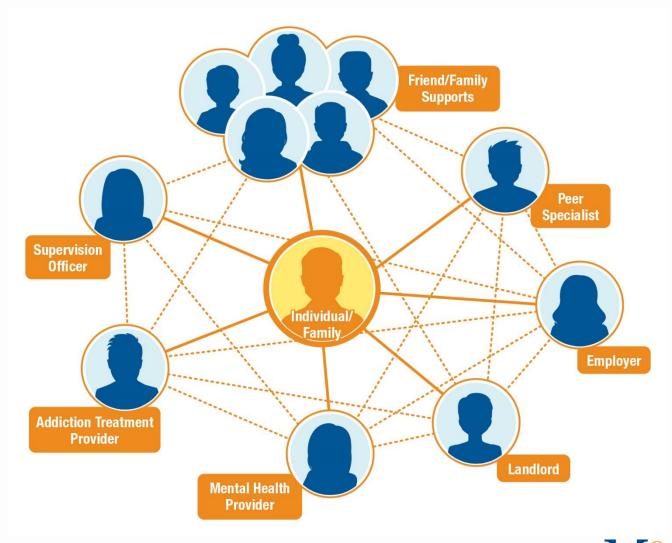
- Availability of funds;
- Rules established by OHA; and
- Service Elements in OHA-county contracts.



Who we serve



Behavioral Health System





BH Immediate Challenges

Homelessness

Access to Care

Aid and Assist

Addiction

Mental Health Parity

Children's residential placements and out of state child welfare youth

Integration

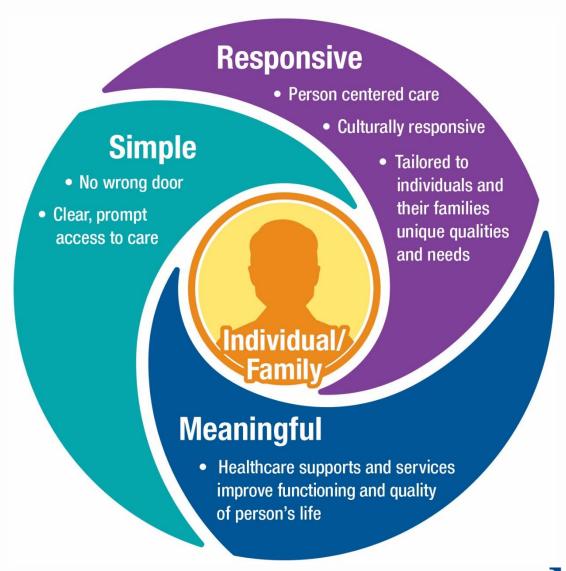
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Vision: Oregon's behavioral health system

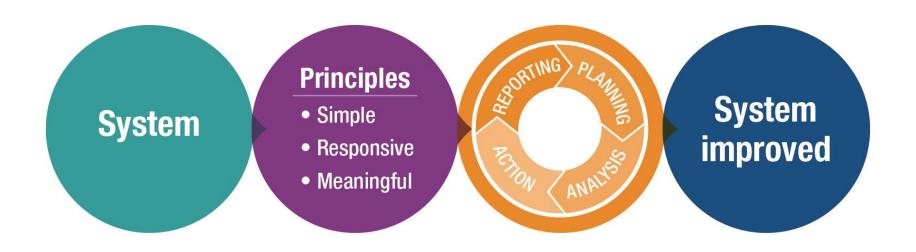
Principles	Definition
Simple	Facilitating straightforward, immediate access to needed and effective healthcare services
Responsive	Continually adjusting services and strategies to fully meet the individually specific healthcare needs of each Oregonian
Meaningful	Demonstrating improvements in people's lives







Behavioral Health System Improvement Engine



Thank You

