

HB 5100 Unspecified Reductions
Agency: Department of Human Services
Appropriation: Mental Health Developmental Disabilities Division (Mental Health)

11/14/02 Revision

Program Description by Appropriation	Impact of reduction	Date Implemented	2001-03 Fiscal Impact					2003-05 Fiscal Impact						
			General Fund	Lott-ery Funds	Other Funds	Federal Funds	Total Funds	FTE	General Fund	Lott-ery Funds	Other Funds	Federal Funds	Total Funds	FTE
Across-the-Board Reductions (\$88 Million Target)														
Central administrative staff reductions			(9,800)			(9,800)	(19,600)	(0.33)	(29,400)	-	-	(29,400)	(58,800)	(1.00)
Eliminate remaining funding directed to local mental health services plans. A portion of this cut has already been taken. Planning funds have been distributed to counties.	House Bill 3024 embodies the recommendations of the Governor's Mental Health Alignment Work Group. Removal of the funds to support the process will eliminate much-needed local collaboration between the Local Mental Health Authority (LMHA) and such entities as local law enforcement, juvenile justice, adult corrections and other allied service providers. Given the dramatic increase in demand for services, particularly with respect to acute and long term care, eliminating collaboration would stall potential systemic remedies to an already existing resource crisis.	2/1/03	(1,216,932)				(1,216,932)	-	(6,500,000)				(6,500,000)	-
Eliminate mental-health supported employment program for 121 people with mental illness. These programs provide employment opportunities for clients in the mental health system. Supported employment services include: supervision and job training with the consumer; on-the-job visits; consultation with employers; job coaching with the consumer; counseling; skills training; and transportation. Effective February 2003	This will remove 121 people with mental illness from services that make it possible for them to work. The 13 programs that support these people will close. These people will lose their jobs and need some level of service to avoid becoming civilly committed. They are at risk of local hospitalization, homelessness, and crime.	2/1/03	(478,658)				(478,658)	-	(2,377,973)				(2,377,973)	-

Shaded areas are cuts that will be taken regardless of the outcome of the tax-increase election, as a result of actions taken at the November 8 Emergency Board meeting. See the page on "E-Board Actions" for more information.

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Eliminate 132 non-Medicaid, and 32 Medicaid Psychiatric Day Treatment (DARTs) slots. These programs provide mental health services to children and adolescents. Cuts to both Medicaid and non-Medicaid eligible clients will be made. Effective Feb 2003.	This would deprive children of access to critical treatment in times of psychiatric crisis. Costs will shift to schools, the juvenile justice system, and inpatient care. There will be a destabilization of children in foster care, and an increased need for out-of-home placements.	2/1/03	(1,793,765)			(208,375)	(2,002,140)	-	(8,911,425)			(1,035,207)	(9,946,632)	-
Not proceed with opening of new Oregon State Hospital (OSH) ward planned for January 2003.	Because the OSH facility is consistently at capacity, those needing service must wait (often in jails or other inappropriate facilities) for openings. As the backlog of clients grows, this delay will increase which could jeopardize public safety and put mentally-ill individuals at risk of harming themselves or others. Legal action regarding the delay in getting court-ordered clients into the OSH facility has already occurred and will continue.	2/1/03	(930,000)				(930,000)	(8.00)	(2,691,010)		-		(2,691,010)	(33.00)
Reduce community mental health services funding for non-Medicaid adults. This will result in reduced medication or treatment for 10,453 clients. Effective February 2003.	Without access to appropriate medication and treatment, 10,500 clients with mental illness will be unable to continue functioning in the community. Those with jobs will be unable to continue working and may end up being civilly committed or may commit crimes. This will affect those who need less intensive services first. Without treatment services, the illness of these clients will worsen. Some will require hospital treatment and may end up homeless.	2/1/03	(3,156,168)				(3,156,168)	-	(9,170,411)				(9,170,411)	-

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<p>Eliminate funding for 122 beds of adult mental-health residential treatment, a reduction in capacity of 18%. This would end housing supports, treatment (including medication management) for an estimated 290 adults. This will eliminate \$436,277 of general fund for the 2001-03 biennium. (Effective 3/1/03)</p> <p>In addition, a reduction of 17.6% to contracted County Mental Health Programs (CMHPs) will be made. Approximately 410 fewer people would be served this fiscal year. This will eliminate \$230,664 in General Fund for the 2001-2003 biennium.</p>	<p>These persons would become homeless, many could commit crimes or become suicidal. All would be at risk of psychotic episodes, civil commitment, and increased psychiatric hospitalizations.</p> <p>The costs of these consequences would far exceed savings both this biennium and in future biennia. These funds are contracted to CMHPs to cover the statutorily required "24-7" community response to people who are in severe mental health crisis, people who may be in danger to themselves or others, or may be held in local jails.</p>	3/1/03	(666,941)				(666,941)	-	(3,313,363)				(3,313,363)	-
<p>Cut remaining community mental health services for non-Medicaid children, eliminating outpatient services for an estimated 3,730 children. Effective February 03</p>	<p>Without access to appropriate medication and treatment, 3,700 children with mental illness and children with severe emotional disturbance (SED) will be unable to continue functioning in the community.</p> <p>Adults with jobs will be unable to continue working and may end up being civilly committed or may commit crimes.</p> <p>Children with SED will be unable to succeed in school. This cut will affect those who need less intensive services first. Without treatment services, the illness of these clients will worsen. Some will require hospital treatment and may end up in foster care or homeless.</p>	2/1/03	(535,624)				(535,624)	-	(2,660,980)				(2,660,980)	-

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Change beginning date of Health Plan eligibility for adults,couples and families to the first of the month following eligibility determination. This would impact about 120,000 clients. This action requires federal approval. The implementation date is assumed to be February 2003.	Eligibility would be delayed until the first of the month following the eligibility approval. Some clients may incur expense during this time and will be responsible for payment. Some providers may provide services during this time and not be compensated due to the inability of clients to make payments.	2/1/03	(491,251)			(741,809)	(1,233,060)								
Eliminate Mental Health benefit for OHP Standard population (for OHP2). (OHP Standard covers people with incomes too high for regular Medicaid coverage but below the Federal Poverty Level. Effective March 2003.	Approximately 118,000 clients in OHP Standard will lose eligibility for mental health services. Consequences: there will be some cost shift to physical and hospital care to deal with medical emergencies as a result of this elimination of mental health treatment.	3/1/03	(2,352,796)			(3,552,817)				(21,552,685)			(32,545,420)	(54,098,105)	
Subtotal			(11,631,935)	-	-	(4,512,801)	(10,239,123)	(8.33)	(57,207,247)	-	-	(33,610,027)	(90,817,274)	(34.00)	

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