



MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST NOTICE OF INTENT

(Revised: 9/23/13)

APPROVED: MULTNOMAH COUNTY
BOARD OF COMMISSIONERS
AGENDA # R.9 DATE 3-27-14
LYNDA GROW, BOARD CLERK

Board Clerk Use Only

Meeting Date: 3/27/14
Agenda Item #: R.9
Est. Start Time: 11:05 am
Date Submitted: 3/12/14

Agenda Title: NOTICE OF INTENT to submit an application for \$250,000 to the Health Resources & Services Administration Behavioral Health grant program.

Note: This APR is for NOI's only. APRs are available for other types of submittals. Title should not be more than 2 lines but be sufficient to describe the action requested.

Requested Meeting Date: 3/27/14 Time Needed: 5 minutes
Department: Health Division: Integrated Clinical Services
Contact(s): Marc Harris and Christy Ward
Phone: 503-988-3663 Ext. 29778; 86642 I/O Address: 160/9
Presenter Name(s) & Title(s): Marc Harris, Health Services Development Administrator; Christy Ward, Health Centers Operations Supervisor

General Information

1. What action are you requesting from the Board?

Authorization for the Director of the Health Department to submit an application for up to \$250,000 per year for two years to the Health Resources & Services Administration, Bureau of Primary Health Care Affordable Care Act – Mental Health Expansion – Behavioral Health Integration grant program.

2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.

On January 31, 2014, the Health Resources & Services Administration (HRSA) Bureau of Primary Health Care released a funding opportunity announcement for the Mental Health Expansion – Behavioral Health Integration grant program. The purpose of this grant opportunity is to improve and expand the delivery of behavioral health services through the establishment/enhancement of an integrated primary care/behavioral health model at existing health centers. Applicants must propose a plan for achieving or enhancing a fully-integrated primary care and behavioral health services model of care. The plan must

include: 1. Use of screening, brief intervention, and referral to treatment (SBIRT) and other evidence-based practices, including tracking of the new *Depression Screening and Follow Up* performance measure; 2. Addition of at least one onsite, full-time equivalent (FTE) licensed behavioral health provider; and 3. Use of a team-based, integrated model of care.

MCHD is currently piloting the practice of SBIRT and will establish its practice at all health centers by the start of the grant, and MCHD health centers already have a team-based, integrated model of care due to their use of the Patient-Centered Medical Home model. With this grant, MCHD will enhance behavioral health integration by contracting with Lifeworks Northwest to co-locate two licensed mental health therapists in two clinic locations. The locations will be selected based on geography and community need. Additionally, a nationally recognized primary care behavioral health consulting firm will be utilized to re-train the Department's existing staff of licensed clinical social workers and psychologists in the Behavioral Health Consultant model, which is widely considered to be a best practice for primary care integration. These grant activities will enhance access in primary care to mental health therapy services; develop a strong partnership with the largest behavioral health organization in the region to ensure seamless access to the full range of services provided by Lifeworks and other community providers; and enable the provision of higher quality behavioral health, including psychiatric services, to the entire primary care patient population, including those who are experiencing homelessness and those who are uninsured.

3. Explain the fiscal impact (current year and ongoing).

This grant will provide the Health Department with up to \$250,000 per year for two years.

4. Explain any legal and/or policy issues involved.

None.

5. Explain any citizen and/or other government participation that has or will take place.

The Department will contract directly with Lifeworks for the co-located mental health therapists. The Department will also coordinate with the Multnomah County Department of County Human Services and other federally qualified health centers and community-based behavioral health providers in the county. Additionally, the Health Department's Community Health Council has approved the project.

Grant Application/Notice of Intent

If the request is a Grant Application or Notice of Intent, please answer all of the following in detail:

- **Who is the granting agency?**

The granting agency is the Health Resources and Services Administration, Bureau of Primary Health Care, Health Center Program.

- **Specify grant (matching, reporting and other) requirements and goals.**

The goal of the grant is to increase the coordination, collaboration, and integration of primary and behavioral health care services at existing health centers funded under Section 330 of the Public Health Service Act.

Cost matching is not a requirement of this grant.

Annual financial and progress reports are required.

- **Explain grant funding detail – is this a one time only or long term commitment?**
This is a one-time funding opportunity that would provide \$250,000 per year for two years.
- **What are the estimated filing timelines?**
The application is due April 3, 2014.
- **If a grant, what period does the grant cover?**
The grant covers the period of August 1, 2014, through July 31, 2016.
- **When the grant expires, what are funding plans?**
Billing revenue will help sustain services once grant funding expires.
- **Is 100% of the central and departmental indirect recovered? If not, please explain why.**
Yes, 100% of indirect costs are covered by the grant funding.

Required Signatures

**Elected Official
or Department/
Agency Director:** Wendy Lear for Joanne Fuller/s/wl **Date:** 03/11/14

Budget Analyst: Althea Gregory /s/ **Date:** 03/12/14

Note: Please submit electronically. We are no longer using actual signatures. Insert names of your approvers followed by /s/. Please insert date approved