



Multnomah County Agenda Placement Request Budget Modification

(Revised 9/23/13)

Board Clerk Use Only

Meeting Date: _____

Agenda Item #: _____

Est. Start Time: _____

Date Submitted: _____

Agenda Title: BUDGET MODIFICATION # DCHS-44-15: Reclassification of 5 Mental Health Consultant positions to Program Specialist Sr in DCHS

Requested Meeting Date: _____ **Time Needed:** Consent

Department: 25 - County Human Services **Division:** Mental Health & Addiction Services (MHASD)

Contact(s): Ashlynn Martin

Phone: 503-988-6659 **Ext.** 86659 **I/O Address** 167/1/520

Presenter Name(s) & Title(s): N/A – Consent Agenda

General Information

1. What action are you requesting from the Board?

The Department of County Human Services requests approval of Budget Modification DCHS-44-15 which reclassifies five Mental Health Consultant positions to Program Specialist Senior positions per class comp requests #2736, #2737, #2738, #2739 and #2740.

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.

Program Offer #25053 - Quality Management & Protective Services – The following five positions have been reclassified from Mental Health Consultants to Program Specialist Senior positions due to changes in duties and responsibilities.

Position #716748 - This 1.00 FTE position is reclassified per class comp request #2736. The purpose of this position is coordinating the implementation of clinical measurement tools within the provider network and contracted agencies. The Outcomes Coordinator will be responsible for assisting consultants and provider networks with choosing a toolkit of clinical measurement tools, completing validity research on tools, consulting with provider agencies with implementing tools, measuring and reporting on progress of provider network on client outcomes based on tool measurements. This position will be the main contact for and participate with the Center for Clinical Informatics. Duties include project management, including analyzing provider data and identifying

quality improvements, producing reports, assisting with action plan implementations, and coordinating with residential teams to implement quality improvement strategies; consultation and training, including coordinating and delivering training, completing individualized training with agencies, and producing training videos; treat to target, including working with contracted consultants in developing and implementing multi phase action plans; and statistical data analysis and evaluation.

Position #712819 - This .80 FTE position is reclassified per class comp request #2737. This position meets a compliance requirement to have all appeals handled by a licensed QHMP. The Grievance Systems Coordinator serves a liaison between Oregon Health Plan members and Health Share Multnomah Mental Health in handling complaints regarding quality of care and denied claims, referrals, and membership. This position is responsible to present all appeals and the clinical formulation to Medical Director for final decision and to represent Multnomah Mental Health at all administrative and state contested hearings. Duties include complaints, including documenting and resolving issues, conducting comprehensive investigations, and documenting all actions taken; appeals and hearings, including executive clinical audits, serving as primary appeals and hearing liaison, and preparing all documentation for County Counsel for hearings; policy and procedures, including assisting in establishing operating procedures, analyzing trends and preparing reports, and assisting compliance auditors to ensure agency compliance; and technical assistance, including providing assistance to the public and internal and external staff.

Position #712015 - This .80 FTE position is reclassified per class comp request #2738. This position is being reclassified in order to restructure the work due to the health care expansion and the presence of Coordinated Health organizations. The purpose of this position is to perform as auditor and provide annual oversight of MHASD service providers a contracted community mental health agencies for compliance with standards related to certificate of approval, Health Share of Oregon health plan contract, and Medicaid, Federal and State regulations. This position will provide technical assistance to community agencies and internal staff regarding clinical quality and serve as a subject matter expert regarding compliance standards. Duties include provider network compliance audits, including conducting desk, site, and data audits reviewing policies, procedures, and records of provider agencies for compliance, completing reports, and monitoring corrective action plans; maintenance and oversight of MHASD certificate of approval, including reviewing policies and procedures for compliance to approval standards, reviewing clinical records to Medicaid standards, and providing recommendations to management based on findings; organize and lead compliance review, including acting as lead reviewer, representing tri-county region, leading entrance and exit reviews with provider administrators and management, and completing reports on audit findings and corrective action plans.

Position #710132 - This 1.00 FTE position is reclassified per class comp request #2739. This position is being reclassified in order to restructure the work due to the health care expansion and the presence of Coordinated Health organizations. The purpose of this position is to perform as auditor and provide annual oversight of MHASD service providers a contracted community mental health agencies regarding compliance of contract, Medicaid, State and Federal regulations. This position will provide technical assistance to community agencies and internal staff regarding clinical quality and serve as a subject matter expert regarding compliance standards. Duties include provider network compliance audits, including conducting desk, site, and data audits, reviewing policies, procedures, and records of provider agencies for compliance, completing reports, and monitoring corrective action plans; maintenance and oversight of MHASD certificate of approval, including reviewing policies and procedures for compliance to approval standards, reviewing clinical records to Medicaid standards, and providing recommendations to management based on findings; organize compliance review, including acting as lead reviewer, representing tri-county region, leading entrance and exit reviews with provider administrators and management, completing report on audit findings and corrective action plans.

Position #709951 - This .80 FTE position is reclassified per class comp request #2740.

Multnomah Mental Health is required to have a compliance officer to oversee and implement a Medicaid compliance program and direct activities. The purpose of this position is to provide external compliance officer duties related to the contracted provider network and serve as subject matter expert on CMS guidelines and the Health Share of Oregon contract. Duties include compliance program oversight and monitoring, including conducting risk assessments, developing regional compliance monitoring processes, leading compliance auditors, consulting on contract language, maintaining policies and procedures, providing FWA monitoring, conducting data analysis, and investigating compliance issues; compliance committee reporting; provider education and training, and participating in compliance audits.

The duties, responsibilities and qualifications support the above positions allocated to Program Specialist Senior (6088).

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

The fiscal impact to DCHS Program Offer #25053 - Quality Management & Protective Services is budget neutral as the increase of \$8,609 in personnel expenses will be offset by a decrease in the unobligated professional services budget.

Subsequent fiscal year personnel merit and COLA increases will be absorbed within the division's budget.

Service reimbursement to the Risk Management fund will increase by \$1,539

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

N/A

5. Explain any citizen or other government participation.

N/A

Budget Modification

6. What revenue is being changed and why? If the revenue is from a federal source, please list the Catalog of Federal Assistance Number (CFDA).

There is no change in revenue.

7. What budgets are increased/decreased?

The Department of County Human Services, Mental Health & Addictions Division budget will remain budget neutral as a result of this budget modification.

Service reimbursement to the Risk Management fund will increase by \$1,539

8. What do the changes accomplish?

This budget modification implements the decision from HR Class/Comp to reclassify a total of 4.40 FTE Mental Health Consultant positions to Program Specialist Senior positions.

9. Do any personnel actions result from this budget modification?

Yes. The approval of this budget modification will result in reclassifying a total of 4.40 FTE from Mental Health Consultants to Program Specialist Senior positions as determined by the Class/Comp unit of Central Human Resources.

#716748 1.00 FTE
#712819 .80 FTE
#712015 .80 FTE
#710132 1.00 FTE
#709951 .80 FTE

10. If a grant, is 100% of the central and department indirect recovered? If not, please explain why.

N/A

11. Is the revenue one-time-only in nature? Will the function be ongoing? What plans are in place to identify a sufficient ongoing funding stream?

N/A

12. If a grant, what period does the grant cover? When the grant expires, what are funding plans? Are there any particular stipulations required by the grant (e.g. cash match, in kind match, reporting requirements, etc)?

N/A

Required Signature

**Elected Official or
Dept. Director:** _____

Date: _____

Budget Analyst: _____

Date: _____

Department HR: _____

Date: _____

Countywide HR: _____

Date: _____