



**MULTNOMAH COUNTY  
AGENDA PLACEMENT REQUEST  
NOTICE OF INTENT**

(Revised: 9/23/13)

**Board Clerk Use Only**

**Meeting Date:** 10/31/53  
**Agenda Item #:** R.6  
**Est. Start Time:** 10:15 am  
**Date Submitted:** 10/8/13

**Agenda Title: NOTICE OF INTENT to submit an application for \$200,000 to the Oregon Health Authority State Innovation Model Community Prevention 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:** 10/31/13 **Time Needed:** 10 min  
**Department:** Health **Division:** Community Health Services  
**Contact(s):** Marc Harris, Alison Frye, Kim Toevs, Kari McFarlan  
**Phone:** 503.988.3663 **Ext.** 29778,27029,26377,24214 **I/O Address:** 160/9  
**Presenter Name(s) & Title(s):** Marc Harris and Alison Frye, Grants; Kim Toevs, HIV/STD/HCV Manager; Kari McFarlan, Community Wellness and Prevention Manager

**General Information**

**1. What action are you requesting from the Board?**

Approval for the Director of the Health Department to submit an application for \$200,000 to the Oregon Health Authority.

**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.**

In February 2013, the Oregon Health Authority (OHA) received a grant from the Centers for Medicare and Medicaid Services (CMS) for the State Innovation Models: Model Testing initiative (SIM). The SIM grant supports Oregon's ongoing health system transformation and works to spread reforms made to the state Medicaid program, such as the Patient-Centered Primary Care Home initiative. A total of \$600,000 of SIM grant funding per year for three years is available for the Community Prevention program, which will further the SIM grant goals by supporting local communities in implementing evidence-based interventions that are proven to improve the health of the entire population, not only Medicaid recipients.

OHA is requesting applications from consortia consisting of at least one local public health authority (LPHA) and at least one Coordinated Care Organization (CCO) to implement primary and secondary prevention strategies grounded in evidence-based practices that address the leading causes of death and disability and primary drivers of health care costs in Oregon. Applicants must choose at least one of seven health topic areas - Tobacco; Obesity and Overweight; Diabetes; Maternal and Child Health Promotion; Clinical Preventive Services and Screenings; Mental Health Promotion; Substance Abuse Prevention - and propose at least one approved community-level and one approved health system-level intervention strategy to address the selected health topic. Topic areas must align with local/regional health assessment data and the regional health equity plan.

Multnomah County intends to submit an application as the lead applicant of a regional consortium that includes Washington and Clackamas Counties, Health Share of Oregon, and the Health Oregon Partnerships for Equity (HOPE) Coalition to address two topic areas: 1)Obesity and Overweight and 2)Substance Abuse Prevention. Community strategies will include working with institutions such as residential treatment and childcare facilities to develop comprehensive wellness strategies to prevent obesity and developing and implementing a community health worker naloxone rescue program. Health system interventions will include developing systems to ensure culturally and linguistically counseling around nutrition and physical activity and developing guidelines for using the Oregon Prescription Drug Monitoring Program (PDMP).

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

Funding is for \$200,000 a year for three year for a total of \$600,000.

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

This will include agency level policy work. Legislation was recently passed expanding naloxone prescription to third parties and expanding use of the PDMP system.

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

This is a partnership with Public and Behavioral Health at Washington and Clackamas Counties and well as the HOPE coalition, a coalition of over 25 community based organizations.

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**Grant Application/Notice of Intent**

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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 Oregon Health Authority.

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

Matching funds are not required. The goal of the project is to implement primary and secondary prevention strategies grounded in evidence-based practices that address the leading causes of death and disability, and the primary drivers of health care costs in Oregon. Reporting includes quarterly and annual progress reports.

• **Explain grant funding detail – is this a one time only or long term commitment?**

This funding is for a three-year project.

- **What are the estimated filing timelines?**

The grant is due October 31, 2013.

- **If a grant, what period does the grant cover?**

The estimated grant period is from November 15, 2013 through September 30<sup>th</sup>, 2016.

- **When the grant expires, what are funding plans?**

As this is system, environment, and policy work, these changes will be implemented during the grant period and sustained regardless of funding.

- **Is 100% of the central and departmental indirect recovered? If not, please explain why.**

100% of indirect funds are covered by this grant.

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## Required Signatures

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**Elected Official  
or Department/  
Agency Director:**

Wendy Lear for Lillian Shirley /s/

**Date:** 10/11/2013

**Budget Analyst:**

Althea Gregory /s/

**Date:** 10/14/2013

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