

**SMG Meeting Minutes**  
**May 10, 2010**

**Present:** Linda Matthias, Consumer Advocate; Carol Sjolín, Trish Davis and Gary Heard for Marion County; Tim Murphy, BRS; Geoff Heatherington, PCMH; Tomoko Gersch, Clear Paths; Sue Blayre, MCSO; Jim Russel, MVBCN; Cary Moller, Bonnie Malek, Dwight Bowles, and Scott Smith for CAPS

**Meeting called to order at 1:35 am**

**I. Announcements:**

- ❖ Introductions and no announcements were made

**II. Data and Budget Management**

- ❖ Cary explained the MPCHP data report and asked members for feedback on the data and other elements they would like to see reported out.
- ❖ Dwight explained the handout on the SE66 Indigent Funds under cost and utilization
- ❖ Tim, Trish and Tomoko reflected on billing codes they are using and service model/ population differences.
- ❖ Tomoko said she would like to see Clear Paths' OHP data separated from the county data

**III. Program Reports and Updates-Providers**

- ❖ Cary reported that 27 people on MPCHP are being seen by a provider that is not on the panel. This was a staff misunderstanding/error at MPCHP that is being corrected.
- ❖ Tomoko reports Clear Paths is close to their indigent targets this month and expects this to continue through the end of the fiscal year. Her OHP numbers are still low but referrals are increasing slowly.
- ❖ Gary reports that MCHD is generally at capacity in the Salem programs and building capacity at Woodburn.
- ❖ Tim reports that referrals are increasing for outpatient services and BRS is still adjusting to the shifts in funding from gambling residential. Their numbers are still low on the indigent side.

**IV. Reevaluating Indigent and MPCHP Authorization Caps**

- ❖ Bonnie explained handouts with projected costs for ASAM Level I and II.1. This would entail a shift from funding specific evidence-based practices to a funding approach that is focused on severity and need.
- ❖ Tomoko stated a preference for more focus on best practices in general as opposed to more population based evidence based practice. Her thought is that outcomes are better when they are based on individual needs and the treatment modality is based on best practices.

- ❖ Bonnie also discussed a funding methodology for brief intervention with mandated marijuana clients. This would help to reduce over treating people without other significant substance abuse problems.
- ❖ Sue stated that corrections research also cautions against over treating people with low severity problems as this can produce poor outcomes.
- ❖ Jim stated that he is still unclear about whether this level of funding is an actual need based on historical data and has concerns about whether we can sustain this level of funding and retain adequate capacity in the system.
- ❖ Bonnie said that she would follow up with Linn County and get their feedback as her impression is that their funding methodology is very similar to what we are proposing.

## **V. Data Template and Implementation Timelines**

- ❖ Cary and Dwight explained the data pilot and what we are hoping to learn before the July 1<sup>st</sup> go live date. The goal is to work out any data entry and logistical problems before implementation.
- ❖ Bonnie described goals for the data collection process, which include making more data informed decisions about where to allocate more resources and to give providers meaningful data that they can work with internally. This data will also be an asset in funding requests and reporting outcomes.
- ❖ Geoff, Tim and Gary offered to participate in the data pilot
- ❖ Dwight will get the electronic templates with instructions to all of the managers. We will revisit the topic next month for feedback on the pilots and the process.

**Meeting adjourned at 3:00**