
Assertive Community Treatment (ACT) Referral Process

May 10, 2016
10:00-11:00 am PDT &
3:00-4:00 pm PDT

Conference Line:
1-800-920-7487
Participant Code 4365143#



Health Systems Division

Background

Currently, Oregon does not have a standardized process to access ACT services. With 19 qualified ACT programs operating independently with different internal admission processes, it has become difficult to accurately identify the current need for services and develop additional capacity.

Additionally, OHA is obligated to track and report data to federal oversight agencies and to the State Legislature. To address this issue, OHA will be implementing a standardized referral tracking process for ACT services. To mitigate the effects of implementing this process OHA will roll out the referral process in two phases:

1. A standardized referral process will be effective from the Oregon State Hospital (OSH) on July 1, 2016.
2. The standardized referral process will expand universally on October 1, 2016.

How will the referral process affect our program?

- OHA is updating the OARs to include the referral process, admission criteria, and criteria for transitioning to less intensive services.
- The new process will not affect a qualified ACT service provider's autonomy over the admissions to the program.
- The ACT program, depending on their contract with the CCO and/or CMHP will determine if additional criteria is allowed.
- Initially, referrals are likely to increase. Overtime, when baseline data is established, and capacity is increased, the number of referrals should stabilize.

Standardization

The intention of the referral process is to:

- Track admission rates
- Track reasons for denials
- Streamline access to ACT programs
- Develop baseline data
- Help OHA determine need to expand capacity

Streamlining process will allow for greater access

- All referrals in phase one will be from OSH through a single point of contact (SPOC) for each service area. The SPOC for phase one of the rollout has been identified as the ENCC. The referral will be routed through the ENCC. The ENCC is part of the OSH IDT and thus, will be aware of the individuals needs upon discharge. The ENCC is responsible for preparing the community services and supports needed for transition.
- The phases rollout will allow OHA, SPOC, and ACT programs to work out any bugs before the referral form will be used universally.

Waitlist and Oversight

- Until there is sufficient ACT service capacity, OHA will oversee a waitlist established from the patients who were denied services because of capacity issues.
 - The ENCC will collect waitlist information and report it to OHA.
 - The ENCC must be aware of each ACT program's capacity in their respective services area.
 - The ENCC must work with the programs in their service area to understand the number of community referrals and referrals from OSH and residential care.
 - OHA will use the data to drive future investments in the program

ACT is a Medicaid Reimbursable Program

ACT is a Medicaid Reimbursable service, and therefore an entitlement. ACT is a service that is the highest level of care available for individuals in a community setting. There are inherent risks associated with delivering this cadre of services and it is the provider's responsibility to design a program that can serve populations associated with this risk. OHA encourages ACT team to work with their respective CCO to determine how to meet this market need.

How will it work?

- Client is identified as someone who would benefit from ACT services
- Client is assessed and meets statewide admission standards
- Five (5) day calendar referral turnaround time
 - Referral form is populated and forwarded (with supporting documentation-TBD) to the SPOC and copy OHA with the referral form
 - The SPOC reviews the form and engages the ACT program(s) in their service area
 - ACT program(s) receive referral and evaluate if the patient can be accepted into the program (three (3) calendar days)
 - The SPOC receives determination from ACT program and provides OHA with completed tracking form

Questions?



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