

## **CASCADIA ADMINISTRATIVE SERVICES**

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April 9, 2013

The Honorable Mitch Greenlick, Chair Health Care Committee Oregon House of Representatives Oregon State Capitol 900 Court Street, NE Salem, OR 97301

Dear Chairman Greenlick, Vice Chairs Keny-Guyer and Thompson, and Committee Members:

On behalf of Cascadia Behavioral Healthcare, I am writing in support of HB 2020.

As you may know, Cascadia provides a continuum of services for more than 14,000 low income adults, children and families annually, who struggle with serious mental health and addiction challenges, poor health, homelessness, poverty, trauma, criminal backgrounds and other issues.

Our aim is to provide a comprehensive, integrated system of behavioral health care and management that demonstrates quality service, innovative approaches, effective outcomes, consumer satisfaction, and cost containment in Multnomah, Clackamas and Lane Counties in Oregon. Cascadia currently offers services at four outpatient clinics, multiple residential, supported housing and extended care sites. We serve children, families and adults at many of our sites.

We expect to seek certification for these programs from Health Share, Family Care and Trillium. The process of gathering information for a service audit typically requires three staff from our Quality Management Team dedicating two to three weeks each. This includes gathering client information, policies and procedures and any pre-request materials in preparation for the audit. In addition to the Quality Management team, staff members from multiple programs spend an additional 20 to 30 hours in interviews with audit staff. The anticipated cost per audit could easily add up to \$10,000 in direct staff time; even more if lost productivity is factored into the equation.

While requirements are standardized, each audit team for differing Counties/CCOs interprets rules differently and frequently requests and focuses on different aspects of our clinical work. Therefore, each audit requires times and effort to ensure positive results. This process is duplicative and takes resources away from direct service. On behalf of Cascadia, Lask the committee to support this simple, common sense approach to saving time and money for both the CCO's and the providers.

Sincerely,

Derald Walker, PhD President/CEO

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