

**Alliance**  
**Transitions of Care Committee Meeting**  
**Second Thursdays 1:00pm – 2:30pm**  
**Thursday, August 10, 2023**

<https://us02web.zoom.us/j/89796541408?pwd=OGpPRVArcDhTS1MzWml3YUhaZHV3dz09>

Can also be joined by calling 669.900.9128,,89796541408#,,,,\*651946#

**Committee Vision/Mission:**

The *Transition of Care Committee* identifies best practices, innovative approaches, and gaps to safe and uninterrupted transitions for youth, young adults and their caregivers when experiencing mental health crisis or risk of crisis. It promotes policies and practices that effectively support their needs for continuity during the period in which intentional coordination of care is imperative.

**Members List:** Co-Chair Charlette Lumby, Co-Chair Liz Schwarz, Angi Meyer, Erin Porter, Jonathan Rochelle, Julie Magers, Kristin Fettig, Mary Massey, Meghan Crane, Rachel Ford, Tanya Pritt

**Staff:** Annette Marcus (Alliance), Jennifer Fraga (Alliance)

**Present Today:** Co-Chair Liz Schwarz, Erin Porter, Craig Leets, Julie Magers, Meghan Crane, Rachel Ford, Rachel Howard

**Absent Today:** Co-Chair Charlette Lumby, Gordon Clay, Jonathan Rochelle, Mary Massey, Tanya Pritt

**Alliance Staff Present:** Annette Marcus (Alliance), Jennifer Fraga (Alliance)

**Alliance Staff Absent:**

**Guest(s):** Hilary Harrison, Lynne Frost

**Meeting Attachments:** OHA ED Boarding Data Presentation

Time	Agenda Item	What / Update Action Item(s)	Notes
1:00	<b>Welcome</b> Agenda Review	<i>Introduce new members.</i>  <a href="#"><u>Group Agreements</u></a>	
1:05	<b>OHA Presentation on Emergency Department and Boarding Time Data</b> Hilary Harrison		Hilary shared a presentation on emergency department data and discharge rates / readmitted rates. See attached meeting materials.
2:00			<p>Members who attended today completed a ranking poll to identify what efforts they want to work on moving forward. Results of the poll are below.</p> <p>Suggested resource in figuring out the best way to move forward on the prioritized effort:</p> <ul style="list-style-type: none"> <li>- Behavioral Health Resource Network</li> </ul> <p>Would also like to look at what is 988 doing – uniqueness of implementation, alongside outpatient services as this could impact our priority area.</p> <p>Question from the group:</p> <ul style="list-style-type: none"> <li>- What is the existing state of services and resources in rural areas?</li> </ul> <p>Jenn will reach out to UO lab to see if they can help with a scan.</p>
2:30	<b>Round Table / Announcements / Adjourn</b>		

## Transitions of Care Focus Area

Advocacy for increased access to outpatient services in rural areas, like Douglas County



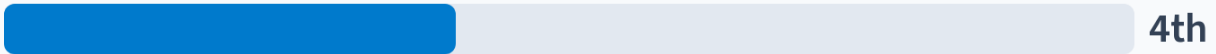
Readmit rates, what works and what doesn't when people discharge.



Transitions into Inpatient from Schools



Advocacy for better training for hospital staff around suicide intervention and prevention strategies



Transitions out of Oregon Youth Authority



SEE MORE 

## Where We Are Now

Implementation of 3090/3091 **has faltered** due to:

- limited oversight,
- siloed work,
- inadequate communication, and
- a lack of accountability.

October 19, 2020 | JM Presentation on Transitions of Care Committee History

## Where We Are Now

Effective implementation would **benefit** from:

- a collaboration of the interconnected group of stakeholders,
- a convening authority,
- designated communication channels, and
- clarity of roles.

October 19, 2020 | JM Presentation on Transitions of Care Committee History

## Where We Are Now

The Transitions of Care Committee identified nine stakeholder entities that fill vital roles in effective implementation of rules

- OHA,
- OAHHS,
- individual hospitals,
- patients and families,
- DCBS,
- public and private insurance,
- schools,
- the UO Suicide Prevention Lab, and
- the Oregon Alliance to Prevent Suicide (specifically the Transitions of Care Committee).

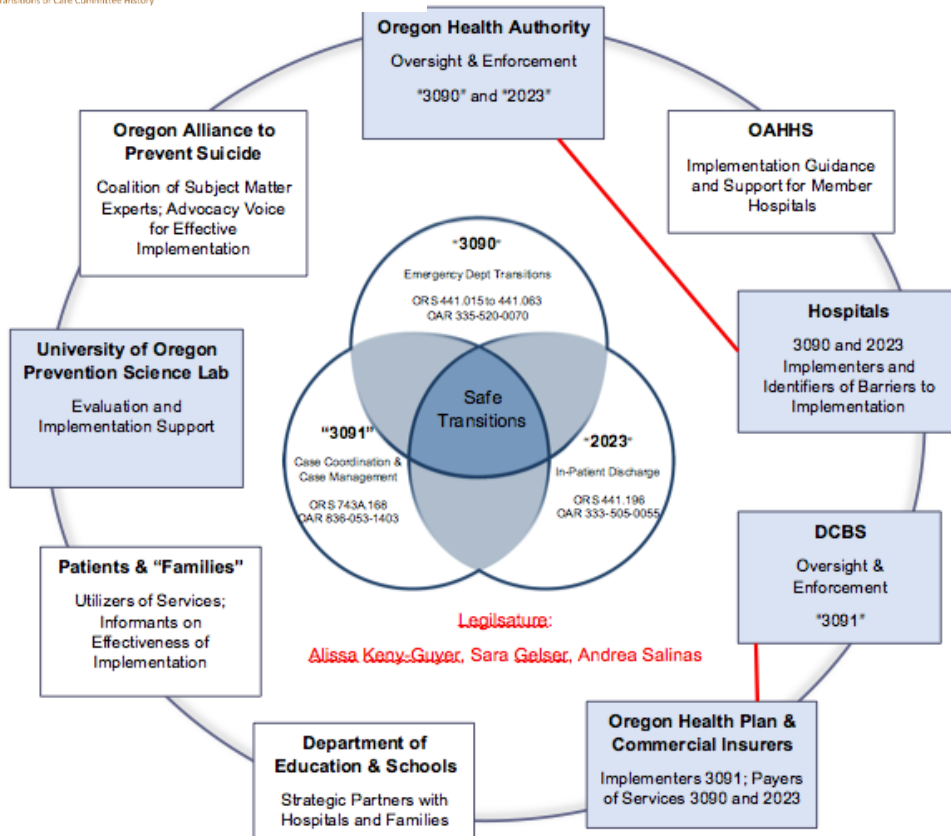
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## Where We Are Now

Partners in the work:

*“The Oregon Alliance to Prevent Suicide and the Suicide Prevention Lab within the College of Education at the University of Oregon remain ready to collaborate with OHA to ensure these laws are fully adopted and established in practice by all stakeholders in Oregon to which the laws apply.”*

October 19, 2020 | JM Presentation on Transitions of Care Committee History



Standing questions from group (revisit these as topics arise):

1. Does anyone know off hand how much hospitals are reimbursed for post-discharge caring contact work?
  - a. Are they reimbursed? based on early conversations with my hospital months ago I hadn't thought there was an expectation for reimbursement.
    - i. HB 3091 was created because hospitals said they weren't covered for those services. 3091 stated that case management and care coordination to be covered by both commercial health insurance plans and Oregon Health Plan (OHP).
2. Is there a way to know if the amount of reimbursement requests are consistent with the number of behavioral health crisis admissions/discharges? (Claims data?)
3. Should we include insurance providers to the list of groups to engage around billing codes? Hospitals make sense as the first entities to make sure they have access to them, just want to make sure that insurance providers are also aware since so many rely on them and it seems like small changes can sometimes interfere with costs they can cover.