COUNTY OF SAN DIEGO

AGENDA ITEM

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BOARD OF SUPERVISORS

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Fifth District

DATE: **May 20, 2025** **XX**

TO: Board of Supervisors

SUBJECT

AUTHORIZE COMPETITIVE SOLICITATIONS, SINGLE SOURCE PROCUREMENT, AMENDMENT TO EXTEND EXISTING CONTRACT, AND AUTHORIZATION TO ENTER INTO AGREEMENTS WITH CALIFORNIA COUNTIES FOR RECIPROCAL YOUTH PLACEMENT (DISTRICTS: ALL)

OVERVIEW

The County of San Diego (County) Health and Human Services Agency, Behavioral Health Services provides a comprehensive array of mental health and substance use services to people of all ages. These services are delivered through County-operated programs and contracts with community service providers. Those served include vulnerable populations, including individuals who are experiencing homelessness, individuals with justice involvement, and children and youth with complex behavioral health conditions.

If approved, today's actions would authorize competitive solicitations, a single source procurement, an amendment to extend an existing contract, and authorize agreements with California counties as necessary to provide the fiscal mechanism for reciprocal placement of youth between counties to make and receive payment.

Today's actions would support the continuation of critical work to advance the behavioral health continuum of care throughout San Diego County. In doing so, these actions would advance the County's vision of a just, sustainable, and resilient future for all, specifically those communities and populations in San Diego County that have been historically left behind, as well as our ongoing commitment to the regional *Live Well San Diego* vision of healthy, safe, and thriving communities. This will be accomplished by upholding practices that align with community priorities and improving transparency and trust while maintaining good fiscal management.

RECOMMENDATION(S)

CHIEF ADMINISTRATIVE OFFICER

1. In accordance with Section 401, Article XXIII of the County Administrative Code, approve and authorize the Director, Department of Purchasing and Contracting, to issue competitive solicitations for each of the behavioral health services listed below, and upon successful negotiations and determination of a fair and reasonable price, award contracts for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed;

and to amend the contracts to reflect changes in program, funding or service requirements, subject to the availability of funds and the approval of the Deputy Chief Administrative Officer, Health and Human Services Agency.

a. Adult Drug Court and Re-entry Court
b. Assertive Community Treatment Services
    i. Assertive Community Treatment for Adults Served by Assisted Outpatient Treatment and Community Assistance, Recovery, and Empowerment Programs.
    ii. Assertive Community Treatment for Adults Discharged from Long Term Care
c. Independent Living Association and Recovery Residence Association
d. Biopsychosocial Rehabilitation Services
e. KidSTART Clinic and Caregiver Wellness Program
f. Sexual Treatment Education and Prevention Services
g. Substance Use Disorder Outpatient Teen Recovery Centers
    i. Substance Use Disorder Outpatient Teen Recovery Centers
    ii. Substance Use Disorder Intensive Outpatient Teen Recovery Centers
h. Therapeutic Behavioral Services
i. Intensive Case Management Wraparound Services
j. Clubhouse Services
k. Adult Substance Use Disorder Residential Treatment Services

2. In accordance with Section 401, Article XXIII of the County Administrative Code, approve and authorize the Director, Department of Purchasing and Contracting, to issue competitive solicitations for each of the behavioral health services listed below, and upon successful negotiations and determination of a fair and reasonable price, award contracts for an Initial Term of up to one year, with six 1-year Options, and up to an additional six months, if needed; and to amend the contracts to reflect changes in program, funding or service requirements, subject to the availability of funds and the approval of the Deputy Chief Administrative Officer, Health and Human Services Agency.
    a. Mobile Crisis Response Teams
    b. SchooLink Referral System

3. In accordance with Board Policy A-87, Competitive Procurement, approve and authorize the Director, Department of Purchasing and Contracting, to enter into negotiations for Incredible Years Outpatient Behavioral Health Services Program with Vista Hill Foundation and subject to successful negotiations and a determination of a fair and reasonable price, award a single source contract for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed; and to amend the contracts to reflect changes in program, funding or service requirements, subject to the availability of funds and the approval of the Deputy Chief Administrative Officer, Health and Human Services Agency.

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4. In accordance with Board Policy A-87, Competitive Procurement, and Administrative Code Section 401, authorize the Director, Department of Purchasing and Contracting to amend and extend contract #563618 with Exodus Recovery, Inc. for the Mobile Crisis Response Team in the North Coastal through June 30, 2026, and up to an additional six months, if needed; subject to the availability of funds; and to amend the contract as required to reflect changes to services and funding allocations, subject to the approval of the Deputy Chief Administrative Officer, Health and Human Services Agency.

5. Approve and authorize the Deputy Chief Administrative Officer, Health and Human Services Agency, to execute Memoranda of Agreement and/or Revenue Agreements with California counties as necessary to provide the fiscal mechanism for reciprocal placement of youth in a Group Home, Community Treatment Facility, Crisis Residential Program or Short-Term Residential Therapeutic Program for a term of five years, including amendments thereto that do not materially impact or alter the services or funding level. Additionally, waive Board Policy B-29 requirement for full cost recovery because the funding does not offset all costs due to the 25 percent local match requirement.

EQUITY IMPACT STATEMENT

The County of San Diego (County) Health and Human Services Agency (HHSA), Behavioral Health Services (BHS) serves as the specialty mental health plan for Medi-Cal eligible residents within San Diego County who are experiencing serious mental illness (SMI) or serious emotional disturbance. BHS is also the service delivery system for Medi-Cal eligible residents with substance use care needs. In 2024, nearly one in three residents were eligible for Medi-Cal, with Hispanic and Latino residents having the highest percentage of Medi-Cal eligibility at 44%.

For these Medi-Cal eligible residents who experience SMI or have a substance use care need, BHS offers County-operated and BHS-contracted programs that address the social determinants of health by being accessible, capable of meeting the needs of diverse populations, and culturally responsive, with the intent to equitably distribute services to those most in need. In doing so, BHS strives to reduce behavioral health inequities, identifying needs and designing services in a manner most impactful and equitable, which will yield meaningful outcomes for those served. A comprehensive array of behavioral health services is vital for BHS to continue providing access to treatment and care for populations who are underserved by social and behavioral health resources.

SUSTAINABILITY IMPACT STATEMENT

Today's actions support the County of San Diego Sustainability Goal #2 to provide just and equitable access to County services and Sustainability Goal #4 to protect the health and well-being of everyone in the region. These goals will be accomplished by providing a wider availability and range of supportive, inclusive, and stigma-free options to those in need of behavioral health services. Access to a comprehensive continuum of behavioral health services will improve the overall health of communities.

FISCAL IMPACT

Funds for these requests are included in the Fiscal Year (FY) 2025-27 Operational Plan in the Health and Human Services Agency. If approved, today's recommendations will result in approximate costs of $13.1 million and revenue of $12.9 million in FY 2025-26, and costs of $104.3 million and revenue of $103.7 million in FY 2026-27. There will be no change in net General Fund cost and no additional staff years.

Recommendation #1 & 2: Authorize Competitive Solicitations
If approved, this request will result in estimated costs and revenue of $7.4 million in FY 2025-26, and $101.7 million in FY 2026-27. The funding sources are Mental Health Services Act (MHSA), Realignment, Short-Doyle Medi-Cal, Substance Use Block Grant, Drug Medi-Cal, Early and Periodic Screening, Diagnostic and Treatment, People Assisting the Homeless, Substance Abuse and Mental Health Services Administration, and State General Funds. There will be no change in net General Fund cost and no additional staff years.

Recommendation #3: Authorize a Single Source Procurement
If approved, this request will result in estimated costs and revenue of $0.9 million in FY 2025-26 and $0.9 million in FY 2026-27. The funding sources are MHSA and Short-Doyle Medi-Cal. There will be no change in net General Fund cost and no additional staff years.

Recommendation #4: Authorize an Amendment to Extend an Existing Contract for the Mobile Crisis Response Team Program
If approved, this request will result in estimated costs and revenue of $4.2 million in FY 2025-26. The funding source is Realignment. There will be no change in net General Fund cost and no additional staff years.

Recommendation #5: Authorization to Enter into Agreements with California Counties for Reciprocal Youth Placement
If approved, this request will result in estimated costs of $0.6 million and revenue of $0.4 million in FY 2024-25 and estimated costs of $1.7 million and revenue of $1.1 million in FY 2025-26. The estimated costs are determined by the net number of youth placed in San Diego County and youth placed out of county. The net average over a three-year period is 34 youth at $50,000 cost per client. The funding source is Medi-Cal from the Department of Health Care Services. A waiver of Board Policy B-29 is requested because the funding does not offset all costs due to the 25 percent local match requirement of approximately $198,334 in FY 2024-25 and $595,000 in FY 2025-26. The funding source for these costs is existing Realignment. The public benefit for providing these services far outweighs these costs. There is no change in net General Fund cost and no additional staff years.

Impending federal policy changes may have significant impacts on the financial sustainability of local mental health and substance use treatment programs funded through Medicaid, or Medi-Cal in California, and may significantly impact the County of San Diego's ability to financially sustain behavioral health Medi-Cal programs.

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BUSINESS IMPACT STATEMENT
N/A

ADVISORY BOARD STATEMENT
At their meeting on May 1, 2025, the Behavioral Health Advisory Board voted to _____ these recommendations.

BACKGROUND
The County of San Diego (County) Health and Human Services Agency (HHSA), Behavioral Health Services (BHS) provides a comprehensive array of behavioral health services to vulnerable populations, including individuals who are experiencing homelessness, individuals with justice involvement, and children and youth with complex behavioral health conditions. Services are provided through County-operated programs and contracts with local public and private agencies. If approved, today's action would authorize competitive solicitations, a single source procurement, an amendment to extend an existing contract, and authorization to enter into Agreements with California counties for reciprocal youth placement.

Recommendation #1: Authorize Competitive Solicitations

a. *Adult Drug Court and Re-entry Court*
On November 16, 2021 (5), the Board authorized the procurement of Adult Drug Court and Re-entry Court services. The Adult Drug Court and Re-entry Court programs provide outpatient substance use disorder (SUD) treatment to adults ages 18 years and older with non-violent justice involvement, and substance use issues, including those who may also be experiencing co-occurring mental health disorders. Moving forward, the target population for these programs shall include individuals under the California Health and Safety Code 11395 (i.e., Treatment-Mandated Felony Act), who enter a plea of guilty or no contest, admit the alleged prior convictions, and elect treatment through a Deferred Entry of Judgment. These programs provide care coordination, non-residential substance use treatment and testing services as an alternative to incarceration to reduce recidivism. Additionally, these programs provide recovery and ancillary services.

The Adult Drug Court and Re-entry Court programs combine the resources and expertise of behavioral health experts and justice partners to address public safety issues and support program participants in becoming accountable and productive community members. Services are provided countywide. In FY 2023-24, the program served a total of 462 unduplicated clients. Of the 174 clients who were discharged after completing the program, 100% had no new arrests, and 90.8% had achieved a self-sufficiency goal such as securing employment or enrollment in a training program.

Today's action requests the Board authorize a competitive solicitation for the re-procurement of the Adult Drug Court and Re-entry Court programs, to award up to five

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contracts, with an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed.

b. Assertive Community Treatment Services

Assertive Community Treatment (ACT) programs provide intensive multidisciplinary treatment services for clients who are experiencing or at risk of homelessness, have an SMI, and whose needs cannot be adequately met through a lower level of care and are deemed in the highest need based on severity of impairment. Services are provided countywide by a multidisciplinary team to include psychiatry, medication management, case management, rehabilitation and support, peer support, co-occurring treatment, supportive employment, and housing support services. Research indicates that ACT services help reduce costs by shortening hospital stays, reducing emergency utilization, and lowering justice system involvement. Additionally, ACT services enhance housing stability and improve overall quality of life. ACT services will continue to be eligible for Medi-Cal billing as part of BH-CONNECT, providing a pathway for long-term sustainability.

Today's action requests the Board authorize competitive solicitations for the re-procurement of the following ACT services programs for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed.

i. ACT for Adults Served by Assisted Outpatient Treatment and Community Assistance, Recovery, and Empowerment Programs

On January 26, 2021 (11), the Board authorized the procurement of Assisted Outpatient Treatment Outreach and Evaluation Services for adults participating in Assisted Outpatient Treatment (AOT) programs including those who meet Laura's Law criteria. After implementation of the Community Assistance, Recovery, and Empowerment (CARE) Act in 2023, services were enhanced to include those service recipients as well. Both Laura's Law criteria and CARE Act ensure that services are provided to clients who are resistant to engagement and treatment.

In FY 2023-24, the program served a total of 119 unduplicated clients. In the same fiscal year, the percentage of clients who had at least one crisis service encounter during the 180 days before enrolling in the program was compared to the percentage of clients who received a crisis service after enrolling. There was a 67.6% reduction in crisis stabilization utilization, 57.1% reduction in PERT utilization, 40% reduction in crisis residential utilization, and 59% reduction in inpatient hospitalizations.

ii. ACT for Adults Discharged from Long Term Care

On June 4, 2019 (10), the Board authorized the procurement of ACT for Adults Discharged from Long-Term Care (LTC). This program provides ACT Full-Service Partnership services for individuals ages 18-59 who have an SMI, including those with co-occurring substance use, who are experiencing homelessness or at

risk of homelessness, and who are discharged from county-identified LTC facilities.

In FY 2023-24, the program served 156 unduplicated clients. Of the clients served, 76% showed functional improvement, while 74% showed clinical improvement. Additionally, 85% of clients served showed progress in their housing goals and 39% of clients showed progress in their educational goals.

c. *Independent Living Association and Recovery Residence Association*
On March 1, 2022, under Administrative Code Section 401, the Department of Purchasing and Contracting authorized the procurement of the Independent Living Association (ILA) and Recovery Residence Association (RRA). On July 18, 2023 (15) and November 7, 2023 (31), the Board authorized increasing funds to offer CARE housing location options for the remaining contract years. Subsequently, on December 5, 2023 (24), the Board authorized an increase of American Rescue Plan Act funds for RRA enhancement.

The ILA and RRA provide services countywide to operators and residents. The programs help identify, promote, and develop independent living as well as build capacity to direct individuals to available resources in the community. Membership and support are offered for operators of both associations to establish a comprehensive set of quality standards. The programs aim to enhance the overall quality of shared housing, particularly for individuals transitioning into permanent supportive housing. Notably, nearly half of the Full-Service Partnership population resides in these homes, benefiting from the program's emphasis on stability and supportive environments. In FY 2023-24, the program identified 674 beds available for ILA and 710 beds available for RRA. In the same period, the ILA and RRA provided training to 1,152 participants.

Today's action requests the Board authorize a competitive solicitation for the re-procurement of the ILA and RRA programs for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed.

d. *Biopsychosocial Rehabilitation Services*
On January 26, 2021 (11), the Board authorized competitive solicitations for Biopsychosocial Rehabilitation (BPSR) mental health outpatient services, in the North Inland, North Coastal, North Central, and Central regions. Additional BPSR services are provided throughout the county, including a countywide program that provides BPSR services to individuals of all ages who have experienced trauma and torture and are refugees and/or asylum seekers.

BPSR programs provide specialty outpatient mental health treatment, urgent walk-in services, rehabilitation, and recovery services to adults ages 18 years and older who have an SMI, including those who may have a co-occurring SUD. The programs provide community-based, recovery-oriented services that are integrated, strength-based, culturally

competent, and trauma informed. BPSR programs offer evidence-based comprehensive outpatient mental health services, which include assessments, individual and group therapy, psychiatric services, medication management, care coordination, case management, and peer support. BPSR services aim to improve clinical stability, reduce functional impairment, facilitate independence and self-sufficiency, improve employment options, and enhance psychiatric and social rehabilitation, and recovery. A wide range of BPSR services are available through these programs to meet the needs of the community, including older adult, transitional age youth (TAY), crisis, urgent walk-in, primary care collaboration, and co-occurring mental health and SUD services. Services are provided in the North Inland, North Coastal, North Central, and Central regions.

In FY 2023-24, a total of 5,028 unduplicated clients were served by all regions, inclusive of the program that serves victims of trauma and torture. Recent clinical outcome measures from February 1, 2024, to December 24, 2024, demonstrated that 83% of clients showed clinical improvement and 82% showed functional improvement or stabilization. Additionally, 96% of clients demonstrated improvement or stabilization with their SUD.

Today's action requests the Board authorize a competitive solicitation for the re-procurement of BPSR programs in the North Inland, North Coastal, Central, and North Central regions to award up to five contracts, with an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed.

e. *KidSTART Clinic and Caregiver Wellness Program*
On June 4, 2019 (10), the Board authorized the procurement of the KidSTART Clinic Services program. The program provides critical services to vulnerable children ages 0-5, with complex social-emotional, mental health, and development needs, and their caregivers. The program focuses on providing timely intervention when treatment can be most efficient and cost-effective. Services include early identification and treatment of children with complex needs through an integrated system of screening, triage, assessment, treatment, and referrals. Additionally, a Caregiver Wellness component focuses on the behavioral health needs of the caregiver so they can best support the child.

The program contains two synergistic components: (1) KidSTART Center, funded and overseen by First 5 San Diego under a separate contract, which provides assessment and comprehensive treatment of developmental delays in children; and (2) KidSTART Clinic, funded and overseen by BHS, an outpatient behavioral health clinic that provides a full range of diagnostic and treatment services to children and their siblings with social-emotional and mental health needs. Research shows that symptoms of mental health problems can begin to manifest in infancy and toddlerhood, leading to detrimental effects on all aspects of a child's development and their ability to succeed in school and in life.

In FY 2023-24, the KidSTART Clinic served a total of 198 unduplicated clients countywide. Of the 118 discharged clients, 100% avoided psychiatric hospitalization

during their outpatient episodes, and 85% participated in family therapy sessions. Of the 145 caregivers served, 77% engaged in individual/group therapy and care coordination. Additionally, 83% of the 110 discharged caregivers reported a high level of satisfaction with Caregiver Wellness.

Today's action requests the Board authorize a competitive solicitation for the re-procurement of the KidSTART Clinic Services program for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed.

f. Sexual Treatment Education and Prevention Services

On June 4, 2019 (10), the Board authorized the procurement of Sexual Treatment, Education, and Prevention Services (STEPS). STEPS includes Outpatient and Structured Outpatient components, offering therapy and psychiatric services for children and young adults ages 6 to 21 who are presenting with problematic sexual behaviors. The countywide program serving Medi-Cal eligible youth focuses on treating youth presenting with problematic sexual behaviors, maintaining the youth safely in the home, community, and school, and increasing prosocial functioning. The Structured Outpatient Program component is designed to offer a higher level of clinical intensity and includes a partnership with the education sector. Services include individual, group, and family therapy, case management as well as psychiatric services.

Research conducted in 2009 by the Substance Abuse and Mental Health Services Administration indicated that evidence-based treatment for youth presenting with problematic sexual behavior identified six favorable outcomes, including reduction in recidivism related to problematic sexual behaviors, reduction in time spent in detention facilities or out of home placement, decrease in delinquent activities, improvement in mental health symptoms, improvement in family and peer relations, and a decrease in substance use.

In FY 2023-24, the program served a total of 52 unduplicated clients. All of the 19 youth admitted to the program did not sexually re-offend while enrolled. Additionally, of the 31 youth who were discharged, 94% avoided psychiatric hospitalization or re-hospitalization.

Today's action requests the Board authorize a competitive solicitation for the re-procurement of the STEPS program for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed.

g. SUD Outpatient Teen Recovery Centers

On June 4, 2019 (10), the Board authorized the procurement of the Teen Recovery Centers (TRC). The TRCs provide community-based early intervention, outpatient, and intensive outpatient treatment services for adolescents ages 12-17 years who have or are at risk for an SUD. Services are provided countywide with over 20 access locations, including clinics and schools. Data from the Substance Abuse and Mental Health Services Administration, along with local statistics highlight a significant need for adolescent substance use treatment in both California and San Diego County. Research shows that substance use

treatment for adolescents is most effective when it is developmentally appropriate, trauma-informed, culturally relevant, and engages parents and families in the treatment process.

In FY 2023-24, the TRCs served a total of 701 unduplicated clients. Of the 181 youth who were discharged and completed treatment in 31 days or more, 98% were enrolled in school or engaged in employment and 100% had no new arrests.

Today's action requests the Board authorize competitive solicitations for the procurement of the following SUD services for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed:

i. *SUD Outpatient Teen Recovery Centers*
The SUD Outpatient Teen Recovery Centers (OTRCs) are designed to provide community-based early intervention and outpatient treatment services for adolescents ages 12-21 years who have or are at risk for a SUD. OTRC services are developmentally appropriate and trauma-informed, including screening and assessment, referral for medications for addiction treatment (MAT), substance use education and refusal skills training, individual and group counseling, family education and family therapy, peer support, care coordination, and introduction to prosocial activities.

ii. *SUD Intensive Outpatient Teen Recovery Center*
The SUD Intensive Outpatient Teen Recovery Center (ITRC) program is designed to provide intensive outpatient substance use treatment services for adolescents ages 12-21 and their families. The ITRC program serves adolescents with SUDs in need of six or more hours of service per week, aligned with the American Society of Addiction Medicine criteria for 2.1 and 2.5 levels of care. SUD ITRC program services include comprehensive assessments, trauma-informed and culturally relevant individual, group, and family therapy, care coordination, including coordination with juvenile justice partners, MAT, co-occurring enhanced services, and peer support.

h. *Therapeutic Behavioral Services*
On June 4, 2019 (10), the Board authorized the procurement of Therapeutic Behavioral Services (TBS). TBS provides short term one-to-one behavioral coaching for full scope Medi-Cal children up to 21 years old, who are experiencing a current emotional or behavioral challenge or experiencing a stressful life transition. Services include comprehensive assessments, creation of care plan, behavioral coaching services, and case management.

TBS is a Department of Health Care Services (DHCS) mandate which the U.S. District Court for the Central District of California ordered to be implemented as a supplemental service for Medi-Cal members, as outlined in Behavioral Health Information Notice (BHIN) 99-09 dated June 2, 1999. Subsequently, BHIN 09-10 dated July 9, 2009, was

issued and outlined the requirement to maintain a 4% penetration rate. The penetration rate calculation includes the total number of children and youth population receiving Specialty Mental Health Services by the number of unduplicated clients receiving TBS services. Services are provided countywide.

In FY 2023-24, the program served a total of 293 unduplicated clients. Of the 233 clients discharged, 98% did not require a more restricted level of care during the service duration of TBS. Additionally, 90% of discharged clients avoided psychiatric hospitalization or re-hospitalization during the outpatient episode.

Today's action requests the Board authorize a competitive solicitation for the re-procurement of the TBS program for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed.

i. Intensive Case Management Wraparound Services

On June 4, 2019 (10), the Board authorized the procurement of the Intensive Case Management Wraparound Services program for children and youth ages 6 through 21 residing within San Diego County. The program provides highly individualized, team-based care planning and coordination of needs and services for the purpose of maximizing the capacity of the family to meet the child's needs and support stabilization in their current home or home-based setting.

Services are provided countywide and include intensive care coordination, intensive home-based services, psychiatric services, case management, and crisis intervention. The program consists of a wraparound team that assists the youth and family in a High Fidelity Wraparound (HFW) planning process to support placement stabilization, skill building to reduce need of system involvement, improvement of behavioral health functioning, and improvement of school attendance.

Under the Families First Prevention and Services Act, Wraparound is required for all youth stepping down from Short-Term Residential Therapeutic Program (STRTP) level-of-care. A systematic review of the efficacy of this type of care found significant effects in favor of Wraparound across a range of important youth outcomes, including reduced out-of-home placements, improvements in mental health functioning, and better school attendance and achievement. The study also indicated significantly lower overall costs of care for youth in program, due to reduced spending on out-of-home placements. Furthermore, the Department of Health Care Services has called for HFW to be included as an evidence-based practice, as noted in the State BH-CONNECT application addendum and to make it a requirement under the Behavioral Health Service Act.

In FY 2023-24, the program served a total of 135 unduplicated clients. Of the 109 youth discharged, 60% avoided hospitalization or re-hospitalization during the outpatient episode, and 99% avoided hospitalization 60 days post discharge.

Today's action requests the Board authorize a competitive solicitation for the re-procurement of the Intensive Case Management Wraparound Services for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed.

j. Clubhouse Services

On January 26, 2021 (11), the Board authorized the procurement of five regional Clubhouses. Subsequently, on June 28, 2022 (5), the Board authorized the procurement of four specialty Clubhouses and one additional regional Clubhouse. Clubhouses assist TAY, adults, and older adults with SMI, including those with a co-occurring substance use condition, in achieving social, financial, health and wellness, educational, and vocational goals.

Clubhouse services are based on the Clubhouse International model, a strength-based social model where clubhouse members and staff collaborate in the operation of the Clubhouse. Services include outreach and engagement, involvement in the Work Ordered Day, evening, weekend and holiday activities, community support services, education, employment and housing assistance. Research shows that Clubhouse services can improve social connectedness, self-esteem, quality of life, and both physical and mental well-being. Additionally, these services help reduce hospitalizations and criminal justice involvement as well as improve employment outcomes. Clubhouse services are provided countywide.

In FY 2023-24, Clubhouses served a total of 1,969 unduplicated members. Of the 607 members who updated individualized goals, 86.7% reported improvement. Among the 265 members with baseline and follow-up data, there was a decrease in hospitalizations from 21.5% to 16.2%. Additionally, among the 301 members with follow up data, there was an increase in the percentage of members who were competitively employed from 10.6% at baseline to 19.3% at follow-up. Clubhouse services will be eligible for Medi-Cal billing as part of BH-CONNECT implementation, providing a pathway for long-term financial stability.

Today's action requests the Board authorize a competitive solicitation for the re-procurement of Clubhouse services, resulting in the award of up to 10 contracts, with an Initial Term of up to one year, with four 1- year Options, and up to an additional six months, if needed.

k. Adult Substance Use Residential Program

On July 18, 2023 (14), the Board authorized a competitive procurement for Adult Substance Use Residential Programs resulting in multiple contract awards. Subsequently, on May 21, 2024 (14), the Board authorized the renovation of the County owned Substance Use Residential & Treatment Services (SURTS) facility, located at 2300 East 7th Street in National City. These renovations included major mechanical, electrical, and plumbing systems, to modernize the dormitory rooms and office spaces, and to build-out of the Annex to include a working kitchen and laundry facility. Furthermore, on October 8, 2024 (5), the Board authorized the acceptance of grant funding that would designate a portion of

funds to be used to establish recuperative care infrastructure and services within the SURTS facility as well as authorized the issuance of a competitive solicitation and award contract(s) for provision of recuperative care services.

Adult Substance Use Residential Programs provide 24-hour, non-medical, residential substance use treatment, withdrawal management, recovery, and ancillary services to adults over the age of 18 with behavioral health conditions. Services are comprehensive, preventive, rehabilitative, and therapeutic behavioral health care delivered in the least restrictive environment and in the most effective mode based on the criteria set out by the American Society for Addiction Medicine and may include clinical assessments for substance use and mental health conditions, care coordination support transitions in the behavioral health system when client needs exceed services available through the program. Programs are designed to provide clients access to timely care and ultimately improve their quality of life. Services are provided countywide; however, this program will be located in the South region. This program will be co-located in the SURTS facility alongside Recuperative Care services. In FY 2023-24, existing Adult Substance Use Residential Programs served a total of 5,015 unduplicated clients, 76% of whom discharged to a same or improved living situation. Of the 3,330 clients who were experiencing homelessness upon admission and discharged as planned, homelessness decreased by over 84%, as clients were placed in dependent and independent housing.

Today's action requests the Board authorize a competitive solicitation for the procurement of Adult Substance Use Residential Program for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed.

Recommendation #2: Authorize Competitive Solicitations

a. *Mobile Crisis Response Teams*
On June 25, 2019 (1), the Board authorized the procurement of the Mobile Crisis Response Team (MCRT) programs which resulted in the execution of two contracts, one to serve the North Coastal region and another to serve the East, Central, North Inland, North Central, and South regions. Subsequently, on November 2, 2021 (6), the Board authorized the acceptance of Crisis Mobile Units grant funding from the California Department of Health Care Services to expand and enhance MCRT programs within San Diego County. MCRT services include non-law enforcement mobile crisis intervention, behavioral health assessments, safety planning, de-escalation, transportation and linkage to the appropriate level of care, and/or care coordination for up to 30 days post-crisis encounter.

Research shows that not all law enforcement calls require an armed, uniformed officer. Behavioral health crisis calls are more effectively handled by non-law enforcement responders, allowing individuals in crisis to build trust and be connected to appropriate services. Services are provided countywide between two programs. In FY 2023-24, the programs served a total of 3,841 unduplicated clients and accepted 6,350 calls. Of those calls, 52% were stabilized in the field, 30% were connected to a lower level of care, 13% were connected to a higher level of care, and only 2% required law enforcement

involvement.

Today's action requests the Board authorize a competitive solicitation for the reprocurement of the MCRT programs, to award up to two contracts, both for an Initial Term of up to one year, with six 1-year Options, and up to an additional six months, if needed.

b. SchooLink Referral System

SchooLink is a partnership between the County's BHS, contracted community-based organizations and local school districts to promote the behavioral health wellness of students. Through the SchooLink partnership, students are provided with behavioral health treatment on designated school campuses which promotes access to care. The current process for SchooLink referrals relies on manual processes.

The automated SchooLink Referral System will increase efficiency and effectiveness of the referral submission process enabling schools and BHS contracted programs to manage referrals electronically and reduce email-based business processes. The referral system will improve referral-related communication between schools and streamline the reporting process related to the management of SchooLink referrals. Ultimately, the overall delivery of behavioral health services to children and families will be improved through the application of information technology.

Today's action requests the Board authorize a competitive solicitation for the procurement of the SchooLink Referral System for an Initial Term of up to one year, with six 1-year Options, and up to an additional six months, if needed.

Recommendation #3: Authorize a Single Source Procurement for Incredible Years Outpatient Behavioral Health Services Program with Vista Hill Foundation

On January 24, 2017 (2), the Board authorized the single source procurement of School-Based Outpatient Behavioral Health Services contracts with existing contractors including Palomar Family Counseling Service, Inc. for the Incredible Years Outpatient Behavioral Health Services Program, referred to as ChildNet in the North Coastal and North Inland regions. The outpatient programs provide culturally competent behavioral health services at designated schools, home, community or office and clinic locations, as well as via telehealth. Services include individual, group and family therapy, case management, rehabilitative services, crisis intervention, medication management as well as outreach and engagement to children and youth up to age 21, and their families.

Beginning in 2002, the Board began awarding and extending school-based contracts through a single source process. The County continues to work extensively with elementary, middle and high schools, and existing and potential providers to create an infrastructure that ensures that the entities selected to provide services on school campuses are the choice of the school districts. Over

the years, this partnership has resulted in a system of care that emphasizes accessibility of behavioral health services on school campuses, with services tailored to the needs of the students, caregivers and schools.

During FY 2023-24, BHS had 28 school-based contracts, one of which was Palomar Family Counseling Service Inc. providing school-based outpatient behavioral health services to children ages 0-5 years and their caregivers using Incredible Years model in the North Coastal and North Inland regions. Palomar Family Counseling Service, Inc. has shifted their focus related to County contracts and is scheduled to terminate the ChildNet contract effective June 30, 2025. To maintain access to specialty mental health services at school campuses serving children ages 0-5 years in the North Coastal and North Inland regions, it is recommended to establish a new contract with Vista Hill Foundation (VHF), as the School District choice, to continue the services previously provided by Palomar Family Counseling Service Inc. to 160 unduplicated clients annually in the North Coastal and North Inland regions. VHF is a current school-based services provider in the North Coastal and North Inland regions, offering a number of services under County contracts.

VHF has been selected by the Escondido, Oceanside and Vista School Districts to provide school-based mental health services and has established agreements for services with the school districts, therefore this qualifies as a single source contract based on Board Policy A-87 Competitive Procurement, Section 1D-4: A service provider has an exclusive agreement with the supplier and no other entity may provide the services. This collaboration and partnership between BHS and school districts has resulted in significant expansion of behavioral health school-based services where the contractors possess expertise, competencies, resources, and a partnership with the school district that cannot be replicated. In FY 2023-24, ChildNet served a total of 125 unduplicated clients. Of the 71 discharged clients, 100% avoided psychiatric hospitalization during an outpatient episode, 70% demonstrated clinically significant improvement and 84% participated in family therapy sessions.

Today's action requests the Board authorize a single source contract with VHF for Incredible Years Outpatient Behavioral Health Services Program in the North Coastal and North Inland regions for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed. If approved, today's actions will ensure efficient continuation of school-based behavioral health services in the North Coastal and North Inland regions.

Recommendation #4: Authorize an Amendment to Extend an Existing Contract for the Mobile Crisis Response Team Program

On June 25, 2019 (1), the Board authorized the procurement of the Mobile Crisis Response Team (MCRT) programs which resulted in the execution of two contracts, one to serve the North Coastal region and another to serve the East, Central, North Inland, North Central, and South regions. Subsequently, on November 2, 2021 (6), the Board authorized the acceptance of Crisis Mobile Units grant funding from the California Department of Health Care Services to expand and enhance MCRT programs within San Diego County. MCRT services include non-law

enforcement mobile crisis intervention, behavioral health assessments, safety planning, de-escalation, transportation and linkage to the appropriate level of care, and/or care coordination for up to 30 days post-crisis encounter.

Research shows that not all law enforcement calls require an armed, uniformed officer. Behavioral health crisis calls are more effectively handled by non-law enforcement responders, allowing individuals in crisis to build trust and be connected to appropriate services. Services are provided countywide between two programs. In FY 2023-24, the program served a total of 796 unduplicated clients and accepted a total of 1,285 calls. Of those calls, 54% were stabilized in the field, 35% were connected to a lower level of care, 9% were connected to a higher level of care, and only 2% required law enforcement involvement.

Today's action requests the Board authorize an extension of the current contract #563618 with Exodus Recovery, Inc. for the MCRT in the North Coastal region up to June 30, 2026 (8 months), and up to an additional six months, if needed. Extending this contract will support monitoring efforts, data reporting and analysis, and alignment of procurement planning for MCRT programs.

Recommendation #5: Authorization to Enter into Agreements with California Counties for Reciprocal Youth Placement

On January 24, 2017 (2), the Board authorized the implementation of residential based behavioral health services that are in Department of Health Care Services, Department of Social Services, or designee certified or licensed as 24-hour residential or placement programs to ensure that these services are available on an ongoing basis and that placements can meet the needs of clients. These programs provide a full range of outpatient diagnostic and treatment for children and adolescents ages 12-19 and non-minor dependents who are full-scope Medi-Cal beneficiaries and are residing in a STRTP.

Effective July 1, 2017, Assembly Bill (AB) 1299 approved the establishment of Presumptive Transfer, which aimed to ensure timely access to mental health services for foster children who are placed outside their county of original jurisdiction. AB 1299 shifted primary responsibility for delivery and payment of Specialty Mental Health Services (SMHS) from the county of original jurisdiction to the county in which the foster child resides (county of residence). Effective July 1, 2024, AB 1051 established an updated process for youth placed in congregate care outside their county of original jurisdiction. Because some residential placements are intended to be short term, AB 1051 requires the Mental Health Plan (MHP) in the county of original jurisdiction for a Medi-Cal eligible foster child to maintain responsibility for the arrangement and payment of SMHS when the foster child or youth is placed out of the county in a Group Home, Community Treatment Facility, Crisis Residential Program or Short-Term Residential Treatment Program (STRTP). This updated process requires the MHP in the county of original jurisdiction to either establish contracts with out-of-county SMHS providers or establish an agreement with the MHP in the county of residence to facilitate payment to the local provider. Per the proposed Memoranda of Agreement, the MHP in the county of original jurisdiction will reimburse the county of residence solely for the

portion of funding not covered by Medi-Cal. The MHP in the county of residence will ensure the provider meets all Medi-Cal regulations, including documentation requirements for SMHS and Medi-Cal certification. BHS will be serving as the San Diego MHP. In FY 2023-24, the County's Probation and Child Family Well-Being departments placed 32 youth in out of county STRTP's across nine counties.

Today's action requests the Board approve and authorize the Deputy Chief Administrative Officer, HHSA to enter into Memoranda of Agreement and/or Revenue Agreements with California counties as necessary to provide the fiscal mechanism for reciprocal placement of youth in a Group Home, Community Treatment Facility, Crisis Residential Program or STRTP for a term of five years, including amendments thereto that do not materially impact or alter the services or funding level.

If approved, this request will result in estimated costs of $0.6 million and revenue of $0.4 million in FY 2024-25 and estimated costs of $1.7 million and revenue of $1.1 million in FY 2025-26. The estimated costs are determined by the net number of youth placed in San Diego County and youth placed out of county. The net average over a three-year period is 34 youth at $50,000 cost per client. The funding source is Medi-Cal from the Department of Health Care Services (DHCS). A waiver of Board Policy B-29 is requested because the funding does not offset all costs due to the 25 percent local match requirement of approximately $198,334 in FY 2024-25 and $595,000 in FY 2025-26. The funding source for these costs is existing Realignment. The public benefit for providing these services far outweighs these costs. There is no change in net General Fund cost and no additional staff years.

Impending federal policy changes that are being proposed may have significant impacts on the financial sustainability of local mental health and substance use treatment programs funded through Medicaid, or Medi-Cal in California. Any significant Medicaid policy changes will impact the County of San Diego's ability to financially sustain behavioral health Medi-Cal programs. Additionally, growth in realignment funding has not kept pace with the increased costs for services, which is utilized as a local match for Medi-Cal programs.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's proposed actions support the County of San Diego 2025-2030 Strategic Plan Initiatives of Equity (Health) and Community (Quality of Life) as well as the regional *Live Well San Diego* vision of healthy, safe, and thriving communities. This is accomplished by reducing disparities and disproportionality of individuals with mental health and substance use conditions and ensuring access to a comprehensive continuum of behavioral health services administered through accessible behavioral health programs.

Respectfully submitted,

DRAFT

SUBJECT: AUTHORIZE COMPETITIVE SOLICITATIONS, SINGLE SOURCE PROCUREMENT, AMENDMENT TO EXTEND AN EXISTING CONTRACT, AND AUTHORIZATION TO ENTER INTO AGREEMENTS WITH CALIFORNIA COUNTIES FOR RECIPROCAL YOUTH PLACEMENT (DISTRICTS: ALL)

USE "INSERT PICTURE" FUNCTION TO INSERT SIGNATURE

EBONY N. SHELTON
Chief Administrative Officer

ATTACHMENT(S)
N/A

DRAFT