County Of San Diego

Agenda Item

Board Of Supervisors

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Fourth District

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Fifth District

Date: **November 17, 2026**

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To: Board of Supervisors

Authorize Competitive and Single Source Behavioral Health Services Procurements, Amendments to Extend Existing Behavioral Health Services Contracts, and Waive Board Policy A-87, Competitive Procurement, to Authorize Awards for Behavioral Health Services Contracts (Districts: All)

Overview

The County of San Diego (County) 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 and coordinated services are supported through review of electronic health record data and data archives. These services support some of the region's most 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 action would authorize competitive and single source procurements, extensions of existing behavioral health services contracts, and authorize awards for behavioral health services contracts by waiving Board Policy A-87, Competitive Procurement. Today's actions support the continuation of critical work to advance the behavioral health continuum of care throughout San Diego County. In doing so, these actions advance the County 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. This will be accomplished by upholding practices that align with community priorities and improving transparency and trust while maintaining strong fiscal management

Recommendation by Chief Administrative Officer:

1) In accordance with Section 401, Article XXIII of the County Administrative Code, 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 Director, Behavioral Health Services.

a. Electronic Health Record System
b. In-Reach Services
c. Substance Use Disorder Prevention – Regional Programs

2) In accordance with Board Policy A-87, Competitive Procurement, approve and authorize the Director, Department of Purchasing and Contracting, to enter into negotiations with the organizations for the services listed below, and subject to 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 Director, Behavioral Health Services.
   a. Native American Early Intervention Services with:
      - Indian Health Council, Inc.
      - San Diego American Indian Health Center
      - Southern Indian Health Council, Inc.
   b. Psychiatric Health Facility and Community Treatment Facility Services with Star View Behavioral Health, Inc.
3) 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 contracts for each of the behavioral health services listed below, subject to the availability of funds; and to amend the contracts as required to reflect changes to services and funding allocations, subject to the approval of the Director, Behavioral Health Services.
   a. CalWORKs Connection (Vista Hill Foundation, 566042) – Extend contract through June 30, 2028, and up to an additional six months, if needed.
   b. San Diego's Web Infrastructure for Treatment Services (FEI.com, Inc., 553427) – Extend contract through June 30, 2029, and up to an additional six months, if needed.
4) Waive Board Policy A-87, Competitive Procurement, and in accordance with Administrative Code Section 401, authorize the Director, Department of Purchasing and Contracting, subject to successful negotiations and a determination of a fair and reasonable price, to award a contract to Sharp Mesa Vista Hospital for Intensive Teen Recovery Center services for an Initial Term of up to 18 months, with four 1-year Options, and up to an additional six months, if needed, subject to the availability of funds; and amend the contract as required in order to reflect changes to services and funding allocations, subject to the approval of the Director, Behavioral Health Services.
5) Waive Board Policy A-87, Competitive Procurement, and in accordance with Administrative Code Section 401, authorize the Director, Department of Purchasing and Contracting, subject to successful negotiations and a determination of a fair and reasonable price, to award contracts to Scripps Health, BH-SD OPCO, LLC dba Alvarado Parkway Institute, Inc., Aurora Behavioral Health Care San Diego, Sharp HealthCare, Regents of the University of California, UCSD, and Prime Healthcare Paradise Valley, LLC for Medi-Cal Managed Care Psychiatric Inpatient Hospital Services for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed, subject to the availability of funds; and amend the contract as required in order to reflect changes to

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services and funding allocations, subject to the approval of the Director, Behavioral Health Services.

Equity Impact Statement
The County of San Diego (County) 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 2025, approximately one in five 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 most impactful and equitable manner, with the goal of yielding 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 (County) 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) 2026-28 CAO Recommended Operational Plan in Behavioral Health Services. If approved, today's recommendations will result in approximate costs and revenue of $0.9 million in FY 2026-27 and approximate costs and revenue of $18.1 million in FY 2027-28. These costs will be incorporated into future Operational Plans. There will be no change in net General Fund costs and no additional staff years.

Recommendation #1: Authorize Competitive Procurements
If approved, this request will result in no cost and revenue in FY 2026-27. In addition, estimated costs and revenue of $9.3 million in FY 2027-28. The anticipated funding sources are $4.1 million from Behavioral Health Services Act (BHSA), $2.5 million from Realignment, $2.2 million from Substance Use Block Grant (SUBG), and $0.5 million from Opioid Settlement Fund. There will be no change in net General Fund costs and no additional staff years.

Recommendation #2: Authorize Single Source Procurements
If approved, this request will result in no cost and revenue in FY 2026-27. In addition, estimated costs and revenue of $4.9 million in FY 2027-28. The anticipated funding sources are $0.3 million

from BHSA, $0.4 million from Realignment, and $4.2 million from Short-Doyle Medi-Cal. There will be no change in net General Fund costs and no additional staff years.

Recommendation #3: Authorize Amendments to Extend Existing Contracts
If approved, this request will result in no cost and revenue in FY 2026-27. In addition, estimated costs and revenue of $2.1 million in FY 2027-28. The anticipated funding sources are $1.3 million from CalWORKs and $0.8 million from Drug Medi-Cal (DMC). There will be no change in net General Fund costs and no additional staff years.

Recommendation #4: Authorize Award to Sharp Mesa Vista Hospital
If approved, this request will result in an estimated cost and revenue of $0.9 million in FY 2026-27. The anticipated funding sources are $0.2 million from Realignment, $0.1 million from SUBG, and $0.6 million from DMC. In addition, estimated costs and revenue of $1.8 million in FY 2027-28. The anticipated funding sources are $0.5 million from Realignment, $0.1 million from SUBG, and $1.2 million from DMC. There will be no change in net General Fund costs and no additional staff years.

Recommendation #5: Authorize Awards to Scripps Health, BH-SD OPCO, LLC dba Alvarado Parkway Institute, Inc., Aurora Behavioral Health Care San Diego, Sharp HealthCare, Regents of the University of California, UCSD, and Prime Healthcare Paradise Valley, LLC
If approved, this request will result in no cost and revenue in FY 2026-27 and FY 2027-28. There will be no change in net General Fund costs and no additional staff years.

Business Impact Statement
N/A

Advisory Board Statement
At their meeting on October 1, 2026, the Behavioral Health Advisory Board voted to _____ of these recommendations.

Background
The County of San Diego (County) 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 public and private agencies.

Recommendation #1: Authorize Competitive Procurements for Various Behavioral Health Services

a. *Electronic Health Record System*
The County's Skilled Nursing Facility (SNF) within BHS serves diverse and underserved adults across San Diego County who require long-term, medically supervised care. In this setting, documenting accurate and timely clinical information is critical for safety and quality care. The implementation of an Electronic Health Record (EHR) system will support safe, coordinated services in the County's Skilled

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Nursing Facility SNF. The EHR is essential for enhancing medication management, clinical documentation, and interdisciplinary workflows for residents with complex medical, behavioral health, or neurocognitive needs. The EHR will further strengthen documentation accuracy, streamline interdisciplinary communication, and improve care planning, and expedite medication handling.

Today's action requests the Board authorize a competitive procurement for the EHR system in the County's SNF for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed.

b. *In-Reach Services*
On January 26, 2023, California became the first state in the nation approved to offer a target set of Medicaid services to youth and eligible adults in state prisons, county jails, and youth correctional facilities for up to 90 days prior to release. On July 18, 2023 (14), the Board authorized the competitive procurement of both Jail-In-Reach Services (Project In-Reach) and Faith Based Wellness and Mental Health In-Reach Ministry Services program. On May 21, 2024 (8), the Board authorized a contract term extension for these contracts for In-Reach and behavioral health linkage service at local county jails through June 30, 2026, to support the implementation of the Justice-Involved Reentry Initiative. Subsequently, on November 18, 2025 (5), the Board authorized a contract term extension of these contracts through June 30, 2027, and up to an additional six months, if needed, to support pre-release Medi-Cal enrollment, Behavioral Health Links, and 90-Day pre-release services for justice-involved individuals, as the system of care prepared for the Sheriff's Office's implementation of the Justice-Involved Reentry Initiative which is expected to go-live in Fall 2026.

In-Reach Services engage incarcerated adults who have or are at risk of psychological disorders and/or substance use conditions to prepare them for community reentry and decrease recidivism. This is accomplished by improving outcomes among key areas of functioning, including, health, housing, mental health, prosocial behavior, substance use, family wellness, and employment. Services are provided countywide, and include screening, case management, group and individual counseling, crisis intervention, and coordination to substance use treatment including residential treatment, if needed.

i. *Project In-Reach*
In FY 2025-26, the program served a total of 182 unduplicated clients. Of those clients served, 47% received housing assistance and 10% were linked to employment or education support.

ii. *Faith Based Wellness and Mental Health In-Reach Ministry*
In FY 2025-26, the program served a total of 263 unduplicated clients. Of those clients served, 30% received housing assistance and 10% were linked to employment or education support.

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Through the Justice-Involved Initiative, California is taking steps to address poor health outcomes in the justice-involved population by establishing Medi-Cal enrollment strategies to ensure individuals have continuity of coverage upon their release, as well as access to key behavioral health and substance use disorder treatment to help them successfully return to their communities. The outcomes shared demonstrate ongoing demand and the programs' effectiveness in addressing key factors that reduce recidivism, including housing stability, and employment readiness. Continued service delivery is essential to support successful community reintegration for high-risk individuals and to reduce long-term justice system involvement.

If approved, services will be developed to be responsive to the requirements of the Justice-Involved Reentry Initiative, to ensure continuity of care and meet the ongoing reentry needs of justice-involved residents across the County. In May 2026, DHCS released the Policy and Operational Guide focused on the implementation of the Justice-Involved Reentry Initiative. This guide will inform the upcoming design of the future procurement, including streamlining services being offered to the reentry community that are eligible for behavioral health links as codified in California Penal Code Section 4011.11. Behavioral health links require detention facilities to facilitate referrals to county specialty mental health services, the Drug Medi-Cal Organized Delivery System and/or Medi-Cal Managed Care Plans for non-specialty mental health services for incarcerated individuals who received behavioral health services while incarcerated to allow for the continuation of medically necessary services to meet the behavioral health needs in the community.

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

c. *Substance Use Disorder Prevention – Regional Programs*
On October 29, 2019 (8), the Board authorized the competitive procurements of six Substance Use Disorder (SUD) Prevention Services – Regional Programs. SUD Prevention Services deliver comprehensive programs aligned with the Substance Abuse and Mental Health Services Administration's strategies on Center for Substance Abuse Prevention and the California Department of Health Care Services' (DHCS) Substance Use Prevention Plan. These countywide efforts aim to promote healthy and safe communities by increasing community capacity, reducing harms associated with substance misuse, and preventing overdose. Services are focused on youth and adults, which include facilitating leadership groups, providing educational workshops on substance misuse prevention, building and sustaining community coalitions to increase safe and healthy communities, and providing harm reduction distribution, education, and outreach to prevent overdose.

Harm related to substance misuse remains a public health concern in San Diego County according to the California Department of Health Care Access and Information reports. Based on the reports in 2023, the County experienced 2,181 emergency encounters per

100,000 people, a 13% increase compared to 2019. Overdose deaths reached 31.4 per 100,000 residents in the same year, representing a 98% increase since 2019. These trends underscore the continued and escalating need for robust prevention and harm-reduction strategies.

Program data further demonstrate strong community demand and broad reach. In FY 2025-26, the six regional programs served a total of 8,957 unduplicated clients, facilitated 18 youth groups, 130 youth workshops, 108 adult workshops, and supported 15 community-based coalitions. During the first year of harm reduction implementation from August 2025 to June 2026, the six regional programs collectively distributed 25,646 naloxone kits and 14,978 fentanyl test strips, established 40 Naloxone Access Point sites, and conducted harm reduction outreach at 142 community events.

These outcomes reflect both growing community needs and the programs' effectiveness in preventing overdose and reducing substance related harms. Continued service delivery of these services is necessary to maintain progress, sustain overdose-prevention efforts, and ensure consistent prevention infrastructure across all regions.

Today's action requests the Board authorize a competitive procurement for the SUD Prevention Services - Regional Programs, resulting in the award of up to three contracts, with each contract serving two regions, 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 Single Source Procurements for Various Behavioral Health Services

The following programs qualify for a single source contract to provide these services based on Board Policy A-87 Competitive Procurement, Procedure § 3.A.1 - Unique capability: The procurement is for goods and services where only one product or provider can reasonably or adequately meet the County's needs, or where the provider has unique knowledge, skill, and ability.

a. *Native American Early Intervention Services*
   On July 13, 2021 (11), the Board authorized the single source procurements of Native American Prevention and Early Intervention (PEI) Services with the Dream Weaver Consortium. The Dream Weaver Consortium is a partnership between four Native American health clinics that join cultural with evidence-based practices to address mental health and SUD prevention and early intervention services. In alignment with the Behavioral Health Services transformation efforts and Behavioral Health Services Act funding requirements, these programs were renamed Native American Early Intervention Services to reflect their focus on providing countywide behavioral health early intervention through three contracted Indian Health Care providers serving defined service areas.

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The Native American Early Intervention Services integrate community-defined evidence practices (CDEPs) with traditional evidence-based approaches to meet the needs of youth, families, adults and older adults across tribal communities. CDEPs offer culturally grounded practices developed within communities and validated through community consensus. This approach is essential in a county with more tribal nations than any other county in the United States and where many residents live in rural and remote areas with limited access to timely care.

Indian Health Services (IHS) has reported disproportionately high rates of mental health challenges and suicide among Native American, Alaska Native, and American Indian communities, especially youth. The County's Community Health Statistics Unit also reported that many individuals must travel over an hour to reach hospital-level or emergency care, underscoring the need for accessible, community-based early intervention services.

In FY 2024-25, the Native American PEI programs served a total of 11,054 unduplicated clients. Participants reported increased willingness to access services and reduced risk of mental illnesses becoming severe and disabling.

These services align with California Welfare and Institutions Code (WIC) section 5840.7, which prioritizes culturally responsive, linguistically appropriate early intervention programs that incorporate both CDEPs and evidence-based practices. The program helps reduce disparities, address intergenerational trauma and prevent mental illness and substance use disorders from worsening. If approved, the resulting contracts will provide early intervention services including outreach, access and linkage to care, treatment, and support services.

Justification for Single Source Procurement:

Each Indian Health Care provider is the trusted provider for the tribal nations or tribal communities in its service area and delivers integrated health and behavioral health services that are culturally designed, locally rooted, and accessible to tribal members both in rural and urban communities. The County has had long standing partnerships with providers of the Dreamweaver Consortium, a coalition of Indian Health Care Providers in the county. With the transition to BHSA and a focus on Early Intervention services, these providers, through their partnerships and established trust within the Native American communities they serve, will be uniquely positioned to outreach and link individuals with behavioral health conditions to care. Indian Health Council, Inc, Southern Indian Health Council and San Diego American Indian Health Center are all Indian Health Care Providers and Federally Qualified Health Centers. As such, they offer specialized, culturally-designed health and behavioral health integrated services to meet needs of the Native American population throughout rural communities and urban cities in San Diego County, and, thus, are specially qualified to provide Native American Early Intervention Services. The determination to contract with Indian Health Council, Inc, Southern Indian Health Council and San Diego American Indian

Health Center through a single source mechanism is supported as these organizations are the health care clinics formed by their member tribal nations, with access and ability to provide services for this population.

Today's action requests the Board authorize single source contracts with Indian Health Council, Inc., Southern Indian Health Council, Inc., and San Diego American Indian Health Center for Native American Early Intervention Services for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed.

b. *Psychiatric Health Facility and Community Treatment Facility Services*
On January 24, 2017 (2), the Board authorized the establishment, renewal, and extension of single source residential contracts for behavioral health services delivered in residential 24-hour facilities or homes licensed by the California Department of Social Services (CDSS) and the Department of Health Care Services (DHCS). Subsequently, on January 26, 2021 (11), the Board authorized a contract term extension, and the contract was first extended to June 30, 2022, and up to an additional six months, if needed, and then to June 30, 2027, and up to an additional six months, if needed.

Under California WIC 14684, county mental health plans are required to provide eligible Medi-Cal beneficiaries with Specialty Mental Health Services (SMHS), including inpatient care. These services are delivered in state-licensed residential facilities or homes that provide 24-hour treatment for clients who require a higher level of care than available in an outpatient setting. When clients living in a residential program also require behavioral health services, contracting with the same provider for both types of care is most efficient and effective for the clients.

Psychiatric Health Facility (PHF) and Community Treatment Facility (CTF) services provide integrated, intensive residential care for youth placed by the Child and Family Well Being (CFWB) Department. CFWB oversees residential care while BHS establishes companion contracts for the provision of SMHS. These programs serve children and adolescents who meet seriously emotionally disturbed criteria, are full-scope Medi-Cal beneficiaries, and reside in either a PHF or CTF. Services are offered countywide and include a full range of Title 9 Specialty Mental Health diagnostic and treatment services, such as day treatment, individual, group, and family therapy, crisis intervention, therapeutic behavioral services, targeted case management, and medication services.

In FY 2025-26, the program served three unduplicated clients with two successfully stepping down to a lower level of care. This demonstrates the essential role of these high acuity services in supporting stabilization and progression toward community-based treatment.

Justification for Single Source Procurement:

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According to the California licensing requirements through the CDSS and the DHCS, Star View Behavioral Health, Inc., is the only licensed provider in California operating both PHF and CTF services at the same location. Therefore, Star View Behavioral Health, Inc., is the only provider from which the County can procure this combination of services. This unique structure is required to meet the intensive, specialized, high level of care services needed by San Diego youth placed by CFWB and Probation Department who reside in the Star View facility.

Today's action requests the Board authorize a single source contract with Star View Behavioral Health, Inc. for PHF and CTF for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed.

Recommendation #3: Authorize Amendments to Extend Various Behavioral Health Services Contracts

a. *CalWORKs Connection (Vista Hill Foundation, 566042)*

On June 4, 2019 (10), the Board authorized the competitive procurement of CalWORKs Connection. Subsequently, on November 18, 2025 (5), the Board authorized a contract term extension of this program up to June 30, 2027, and up to an additional six months, if needed. This program provides screening, referral, and linkage to treatment programs and community resources for CalWORKs Welfare to Work (WTW) participants. The program is designed to assist families achieve self-sufficiency by addressing behavioral health barriers to employment and providing behavioral health screening, coordinating SUD services, and offering family stabilization services.

This service is a core component of the CalWORKs program, supporting compliance with work participation requirements, and serving as a required element for determining self-sufficiency eligibility. Furthermore, it enables WTW participants experiencing SUD to access critical resources needed to obtain and maintain employment. Services are provided countywide.

In FY 2025-26, the program served 48 unduplicated SUD clients and 44 unduplicated clients through family stabilization services. There were 6,376 clients screened for SUD services and nine of these participants met the criteria for SUD treatment referral. Of the 295 family stabilization referrals received from Self-Sufficiency Services, 90 participants were provided with care coordination. These data demonstrate continued and significant demand for these services. Additionally, 6,570 participants received SUD prevention education, underscoring the program's broad reach and its role in early intervention and prevention.

The current contract term ends on June 30, 2027. Due to uncertainty in the CalWORKs funding source stream and recent State budget reductions, the County currently is unable to commit to a five-year contract term. An extension is requested to maintain uninterrupted access to critical behavioral health and stabilization services that support CalWORKs families in achieving lasting economic self-sufficiency. If approved, this

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will ensure service continuity for vulnerable CalWORKs families while allowing time for funding to stabilize and long-term program planning to occur.

Today's action requests the Board authorize an extension of the current contract with Vista Hill Foundation for CalWORKs Connection up to June 30, 2028, and up to an additional six months, if needed.

b. *San Diego's Web Infrastructure for Treatment Services (FEI.com, Inc., 553427)*
On August 2, 2005 (15), the Board authorized the competitive procurement of San Diego's Web Infrastructure for Treatment Services (SanWITS). Subsequently, on March 27, 2018 (2), the Board authorized a contract term extension up to June 30, 2025, to support the expanded SUD provider network capacity, local oversight responsibilities, and system-wide care coordination, with SanWITS functioning as the BHS clinical database supporting Medi-Cal billing for SUD programs. On October 22, 2024 (27), following BHS' transition to a separate database, the Board authorized an additional contract term extension up to June 30, 2027, and up to an additional six months, if needed, to maintain business continuity and allow for evaluation of the data housed within the SanWITS platform.

Although BHS transitioned to SmartCare as its clinical and billing system in late 2024, the SanWITS program's services, demographic, and outcome data for adults and adolescents receiving substance use prevention and treatment services must remain accessible. The SanWITS system was required for billing reconciliation activities and currently remains available for providers to access former client information as needed to support continuity of care. Since the last Board action, BHS has reviewed data categories, retention requirements, and system dependencies to develop a data migration plan. This assessment identified several technical and operational considerations including:

- Validation of statutory and contractual retention obligations for legacy SUD records.
- Identification of system linkages with reporting, billing, and compliance processes that rely on continued historical data availability.
- Evaluation of secure and cost-effective long-term storage solutions that meet federal and state confidentiality standards.
- Coordination with County Information Technology and program operations to ensure any future archival approach supports business continuity.

Until the data archival work is completed, continued access to SanWITS is essential. The system remains necessary to support ongoing audit and reporting activities, provider access to historical client data, and resolution of outstanding billing reconciliation matters. An extension is requested to allow BHS to complete remaining technical assessments, finalize an implementation-ready archival plan and safeguard access to critical historical data. This approach protects both operational integrity and regulatory compliance while providing the necessary time to transition the system responsibly.

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Today's action requests the Board authorize an extension of the current contract with FEI.com, Inc. for SanWITS up to June 30, 2029, and up to an additional six months, if needed.

Recommendation 4: Authorize Award to Sharp Mesa Vista Hospital

On May 20, 2025 (17), the Board authorized the competitive solicitation of the Intensive Teen Recovery Center (ITRC) program. The ITRC will provide intensive outpatient substance use treatment and high intensity outpatient services, also known as partial hospitalization, for adolescents ages 12 up to 18 years and their families. Previously, the intensive outpatient services were delivered through six regional Teen Recovery Centers, while the High Intensity Outpatient Services (HIOS) is a new component. The ITRC program is designed for adolescents with substance use disorders who require six or more hours of service weekly, in accordance with the American Society of Addiction Medicine criteria for intensive outpatient and high intensity outpatient care.

The ITRC program aligns with American Society of Addiction Medicine (ASAM), 4th Edition guidelines for intensive outpatient and high intensity outpatient services. The DHCS is projected to implement ASAM 4th Edition effective July 1, 2027. Under the DHCS Intergovernmental Agreement (IA), ASAM levels 1.0 Outpatient Services and 2.1 Intensive Outpatient Services (IOS) are mandatory, while level 2.5 Partial Hospitalization/HIOS are optional but may become required upon implementation of ASAM 4th Edition.

The Intensive Outpatient component that was previously included in the six TRCs served 63 unique clients in FY 2025-26. The standalone ITRC program aims to serve approximately 140 clients (projecting 110 IOS clients and 30 HIOS clients) in one countywide facility, co-locating specialized staff to provide between 6 and 19 hours per week of services to each individual, with the potential to provide Medication for Addiction Treatment if needed.

The County has issued a Request for Information on September 30, 2025, and two Requests for Proposals on October 17, 2025, and May 1, 2026, for the ITRC program but has not received a proposal that has resulted in a contract. Due to these unsuccessful attempts to obtain a contract for the ITRC program through competitive procurement, waiver of Board Policy A-87 is requested to ensure access to intensive substance use treatment services for adolescents in accordance with ASAM criteria and the DHCS IA.

Interest in the ITRC program was expressed during the RFI and RFP pre-proposal processes by Sharp Mesa Vista Hospital and several non-hospital entities. Feedback received from non-hospital entities who chose not to submit proposals focused on concerns that their programs would not be equipped to meet requirements, such as hours of service, countywide coverage, and staffing, for the High Intensity Outpatient (HIOS) level of care.

HIOS requires staff who are highly skilled in clinical and medical services for youth with complex substance use and high-risk behaviors, including licensed behavioral health professionals and advanced medical practitioners. The staffing and intensity of service needed to provide HIOS

services is not typical for a non-medical outpatient substance use treatment facility and is more closely aligned to hospital programs. However, it is not within the regular business practices of hospitals to respond to competitive procurements for non-inpatient substance use services. Through extensive research into service offerings at youth-serving hospital-based programs, and in acknowledgement of Sharp's expressed interest in the ITRC RFI, Sharp Mesa Vista Hospital was identified as a current provider of partial hospitalization/high intensity specialty mental health services for youth with private or commercial coverage. Expanding their services to include HIOS substance use offerings aligns with their existing capabilities and could be implemented efficiently within a compressed timeline.

Today's action requests the Board waive Board Policy A-87, Competitive Procurement, and authorize a contract with Sharp Mesa Vista Hospital for Intensive Teen Recovery Services for an Initial Term of up to 18 months, with four 1-year Options, and up to an additional six months, if needed.

Recommendation 5: Authorize Awards to Scripps Health, BH-SD OPCO, LLC dba Alvarado Parkway Institute, Inc., Aurora Behavioral Health Care San Diego, Sharp HealthCare, Regents of the University of California, UCSD, and Prime Healthcare Paradise Valley, LLC

On December 12, 2006 (7), the Board authorized the single source procurements of Medi-Cal Managed Care Psychiatric Inpatient Hospital Services. Subsequently, on November 13, 2018 (12) and November 7, 2023 (31), the Board authorized contract term extensions of this program through June 30, 2024, and June 30, 2026, respectively, with an additional six months, if needed, with Scripps Health, BH-SD OPCO, LLC dba Alvarado Parkway Institute, Inc., and Aurora Behavioral Health Care San Diego. Additionally, on January 26, 2021 (11) and November 16, 2021 (5), the Board authorized contract term extensions through June 30, 2022, and June 30, 2027, respectively, with an additional six months, if needed, with Sharp HealthCare. Most recently, on July 18, 2023 (14), the Board authorized the single source procurements of the same program with the Regents of the University of California, UCSD and Prime Healthcare Paradise Valley, LLC.

Psychiatric inpatient hospital services are provided countywide for adults and older adults experiencing psychiatric symptoms requiring 24-hour observation and intensive treatment. Services include the diagnoses, care, and treatment of acute episodes. The inpatient setting offers a secure environment where individuals can stabilize, regain functioning, and develop an aftercare plan before transitioning to a lower level of care. These acute services are a critical component of the County's overall system of care and its continuum of behavioral health services.

Under California's Lanterman-Petris-Short Act (LPS Act), LPS designated acute inpatient hospitals are specialized facilities authorized to provide 24-hour evaluation, stabilization, and intensive treatment. These facilities meet a critical need for secure, locked environments capable of delivering comprehensive psychiatric care and necessary medical stabilization. They admit individuals who, due to severe mental illness or serious substance use disorders, pose a danger to themselves or others, or are gravely disabled. It is essential that psychiatric patients in crisis should have timely access to an available LPS bed when they meet criteria for a psychiatric inpatient stay. Continued contracting with local LPS designated hospitals ensures that San Diego County can provide inpatient psychiatric care within each region, preventing gaps in service. Without

sufficient inpatient psychiatric beds, emergency departments would become overburdened for extended periods, a crisis also known as psychiatric boarding. Non-LPS designated hospitals cannot legally hold an involuntary psychiatric patient involuntarily past their initial emergency stabilization.

Authorizing the ability to award contracts with local LPS-designated acute inpatient hospitals that serve Medi-Cal beneficiaries in the County provides a resource for individuals with a psychiatric crisis needing inpatient care, as well as decreases treatment delays from time spent waiting for intensive inpatient psychiatric interventions.

Today's action requests the Board waive Board Policy A-87, Competitive Procurement, and authorize contracts with all LPS designated hospitals serving Medi-Cal beneficiaries, which include: Scripps Health, BH-SD OPCO, LLC dba Alvarado Parkway Institute, Inc., Aurora Behavioral Health Care San Diego, Sharp HealthCare, Regents of the University of California, UCSD, and Prime Healthcare Paradise Valley, LLC for Medi-Cal Managed Care Psychiatric Inpatient Hospital Services for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed. This request does not include those LPS designated hospitals that are not open to the general public (i.e. Naval Medical Cetner and Department of Veterans Affairs Medical Center).

Linkage To The County Of San Diego Strategic Plan
Today's proposed actions support the County of San Diego 2026-2031 Strategic Plan Initiatives of Equity (Health) and Community (Quality of Life). 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,

USE "INSERT PICTURE" FUNCTION TO INSERT SIGNATURE

Ebony N. Shelton
Chief Administrative Officer

Attachment(s)
N/A

DRAFT