## Help Guide Behavioral Health in San Diego County!

#### We Want to Hear From You!

Behavioral Health Services (BHS) invites you to attend upcoming opportunities to provide input to support the development of the first Behavioral Health Services Act (BHSA) Integrated Plan for Fiscal Years 2026-2029. Community members are invited to join an upcoming virtual input sessions to share your insights and recommendations on important behavioral health topics. Input will help inform specialty mental health and substance use disorder treatment services, priorities, and future investments, ensuring local programming reflects the needs and voices of San Diego County communities.

#### **UPCOMING EVENTS\***

04 Nov

#### **Crisis Services**

• Morning Option: 10:00 a.m.–11:30 a.m.

• Evening Option: 5:30 p.m.–7:00 p.m.

03 Dec

#### **Behavioral Health Workforce**

- Morning Option: 10:00 a.m.-11:30 a.m.
- Evening Option: 5:30 p.m.–7:00 p.m.

12 Nov

#### **Housing Interventions**

- Morning Option: 10:00 a.m.–11:30 a.m.
- Evening Option: 5:30 p.m.–7:00 p.m.

09 Dec

#### **Early Intervention**

- Morning Option: 10:00 a.m.-11:30 a.m.
- Evening Option: 5:30 p.m.–7:00 p.m.

19 **Nov** 

#### **Substance Use Disorder Services**

- Morning Option: 10:00 a.m.–11:30 a.m.
- Evening Option: 5:30 p.m.–7:00 p.m.

\*All sessions held via Zoom.



## Scan the QR Code or visit the link below to Register:



- Visit
  bit.ly/BHSEngagement
  to register for one of the
  sessions listed.
- Registration is required.

To find out more about BHSA/Prop 1, share your thoughts on BHSA planning, review past engagements, and more, visit:

bit.ly/BHSA\_BHS

**Questions?** 

Please email <a href="mailto:Engage.BHS@sdcounty.ca.gov">Engage.BHS@sdcounty.ca.gov</a> with any inquiries about the planning session.

Disability-related accommodations, language interpretation (including American Sign Language), and written materials in alternative languages and formats are available upon request. Please submit your request at least 72 hours in advance of the event to Engage.BHS@sdcounty.ca.gov or by calling (619) 854-1363.









**COUNTY OF SAN DIEGO BEHAVIORAL HEALTH SERVICES (BHS)** 

#### Transforming Behavioral Health Services Together:

# Housing Interventions

Wednesday, November 12, 2025

**BEHAVIORAL HEALTH SERVICES ACT OVERVIEW & COMMUNITY INPUT SESSION** 

**BHS Communication & Engagement Unit** 

Melanie Briones, MBA, MPH, Program Coordinator

## **Land Acknowledgment**



We acknowledge that the San Diego County region is made up of the traditional lands of the Kumeyaay, Luiseño/Payómkaichum, Cahuilla and Cupeño/Kuupangaxwichem Peoples.

We acknowledge the harmony that existed among the land, nature, and its original Peoples, who have since endured displacement, persecution, and systemic oppression.

We pay our respect to the unceded territory and homelands of the 18 federally recognized tribes in our region.

We honor the ancestral grounds and sovereignty of the Tribal Nations, whose resilience and strength inspire forward movement towards more equitable and sustainable programs, policies, and practices.

## **Today's Session**



- Background & Context
  - Behavioral Health Care in California
  - About the Behavioral Health Services Act (BHSA)
  - BHSA Integrated Plan and San Diego County's Community Planning Process
- BHSA Housing Interventions Overview
- Input Session
- Next Steps



## Why Today's Conversation?



- Under BHSA, counties must identify how communities would like to see funds prioritized
  when it comes to specialty behavioral health services including crisis care, early
  intervention, and housing, among others.
- Care for behavioral health crises is part of the services County BHS provides as a Specialty Behavioral Health Plan.
- BHSA and other California Behavioral Health Transformation efforts aim to ensure people receive help in the least restrictive, most community-based setting possible.

Your insights and recommendations will help County BHS strengthen its services and help guide development of the region's first BHSA Integrated Plan for 2026-2029.

#### **Behavioral Health Care in California**





In California's Medi-Cal system, care is divided between:

- Managed Care Plans (MCPs), which cover mild-to-moderate behavioral health needs; and
- County Behavioral Health Plans (BHPs), which cover **moderate-to-severe or complex** behavioral health needs (also known as specialty behavioral health services).

If someone's needs are	Care typically starts with	County BHS steps in when
Mild Examples: Stress, early anxiety, grief, burnout	Doctor or other primary care provider through MCP	Symptoms persist, worsen, or begin to interfere with daily life
Moderate Examples: Persistent depression, trauma, substance misuse	Therapist, psychiatrist, case manager covered by MCP or private insurance	A person needs specialty treatment, multiple supports, or crisis help
Severe or complex Examples: psychosis, suicidality, overdose risk, homelessness		County BHS provides or coordinates full specialty care

#### **Behavioral Health Care in California**





Managed Care Plans (MCP)  Blue Shield Promise, Community Health Group, Kaiser  Permanente, Molina Healthcare	Specialty Behavioral Health Plan (BHP) County of San Diego Behavioral Health Services
<ul> <li>Short-term or lower-intensity outpatient care, such as brief therapy or medication management</li> <li>Collaborate with BHP for care transitions and warm hand-offs when a person's needs become more complex</li> </ul>	<ul> <li>Provide or coordinate specialty and intensive services, such as crisis stabilization, residential substance use disorder (SUD) care, case management and recovery supports</li> <li>Collaborate with MCP to step people down to lower-intensity supports once stabilized</li> </ul>

Navigating between these systems can be complex — new State policies, including BHSA, are intended to make transitions smoother for people seeking care.

#### **About BHSA**

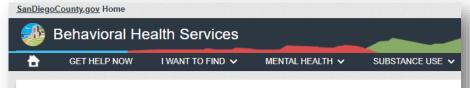




- Part of Proposition 1; takes effect July 1, 2026
- Modernizes the Mental Health Services Act (MHSA) passed by CA voters in 2004
- No additional funding introduced, but brings new components, requirements, and restrictions for how revenue derived from millionaire's tax may be used by counties for behavioral health programs/services

Learn More bit.ly/BHSA\_BHS





#### **Behavioral Health Services Act**





The Behavioral Health Services Act, also known as BHSA, is a state law passed by voters in March 2024. BHSA updates the Mental Health Services Act (MHSA) by:

- · Expanding service access to include treatment for people with substance use disorders,
- · Prioritizing care for people with the most serious mental illness,
- · Providing ongoing resources for housing and workforce development, and
- · Continuing investments in prevention, early intervention, and innovative behavioral health pilot programs.

BHSA aims to close service gaps and ensure equitable access to quality care across the state. New BHSA requirements will also enhance oversight, transparency, and accountability at the state and local levels.

To learn more about BHSA:

• Behavioral Health Transformation (DHCS)

To receive updates about BHSA, subscribe to these statewide sites:

- . Department of Health Care Services (DHCS)
- · California Department of Public Health (CDPH)

#### **Community Planning**

BHSA requires counties to look at their whole behavioral health system of care through a formal Community Planning Process (CPP). The CPP supports the County of San Diego's goal to involve communities in meaningful conversations and decision-making about local behavioral health services to ensure programs reflect their unique needs and voices.

#### Share Input via Our Online Form

Access this online form to share insights and recommendations with BHS to help guide the development of San Diego County's first BHSA Integrated Plan for Fiscal Years 2026–2029.

#### Participate in Upcoming Activities

View upcoming and past engagement activities hosted by the department, including community workshops, town halls, and input opportunities to help inform the BHSA Integrated Plan for Fiscal Years 2026–2029.

#### **About BHSA**



- Broadens scope of funding to include standalone substance use disorder (SUD)
   treatment services and housing interventions; bolsters oversight and transparency
- Mandates data-driven reporting and population-level outcome tracking
  - Behavioral Health Outcomes, Accountability, and Transparency Report<sup>NEW</sup>
- Mandates increased stakeholder engagement (approx. three-fold increase)
- Emphasis on supporting high-need and at-risk populations, evidence-based and community-defined practices, the behavioral health workforce, and health equity

## **Key BHSA Populations**



#### Eligible adults/older adults who are:

- Chronically homeless or experiencing homelessness or are at risk of homelessness.
- In, or are at risk of being in, the justice system.
- Reentering the community from prison or jail.
- At risk of conservatorship.
- At risk of institutionalization.

#### Eligible children and youth who are:

- Chronically homeless or experiencing homelessness or are at risk of homelessness.
- In, or are at risk of being in, the juvenile justice system.
- Reentering the community from a youth correctional facility.
- In the child welfare system.
- At risk of institutionalization.



## **BHSA Components**





County Allocation of MHSA Dollars (Before Prop 1)

95% County Allocation 5% State 5% Innovation **Prevention & Early** 19% Intervention **Community Services** & Supports 76%

**County Allocation of Proposed BHSA Dollars** (Under Prop 1) Prevention **State Admin** Workforce 90% County Allocation HCS 10% State State-Wide Investments 35% **Full-Service Partnerships** 

35%

30%

# Behavioral Health Services & Supports → 51% for Early Intervention (approx. 17.85%) →51% of BHSS Early Intervention funds dedicated to children, youth, and

young adults (approx. 9.15%)

#### **Housing Interventions**

→ 50% dedicated to support housing needs of individuals who are chronically homeless, with a focus on those in encampments

### **BHSA Components**





- Full Service Partnerships (FSPs) provides team-based "whatever it takes" support for people with serious behavioral health needs, focusing on recovery, whole-person care, and family partnerships.
- Behavioral Health Services and Supports (BHSS) includes treatment and recovery services like therapy, case management, medication support to promote wellness across all ages.
- **Housing Interventions** helps people with behavioral health needs find and maintain stable housing through supports like rental assistance and housing navigation services.

#### **BHSS**

- Children's, Adult, and Older Adult Systems of Care
- Outreach & Engagement
- Workforce Education and Training
- Capital Facilities and Technological Needs
- Early Intervention Programs
- Innovative Behavioral Health Pilots and Projects

### **BHSA Components**



• BHSS dollars may only support activities that align with counties' roles as BHPs, i.e., programs and services for people showing early signs of MH/SU challenges; programs that identify and link individuals to care early, early treatment and recovery supports to prevent crisis or hospitalization; crisis and stabilizations services; housing, workforce, and treatment investments that serve specialty populations

BHSA Component	Focus	Examples of Fundable Uses
Full Service Partnerships (35%)	Intensive, "whatever it takes" care for people with serious behavioral health conditions	Multidisciplinary teams, housing and employment supports, recovery planning, peer services
Behavioral Health Services & Supports (35%)	Prevention of worsening symptoms, early intervention, and treatment supports for all ages	Outreach and linkage programs, early treatment, crisis services, workforce training, recovery supports  **NO GENERAL PREVENTION/EDUCATION (State)
Housing Interventions (30%)	Housing for people with behavioral health needs	Rental subsidies, housing navigation, tenancy support, behavioral health services linked to housing

### **BHSA Integrated Plan**





# Counties' first BHSA Integrated Plan will cover Fiscal Years 2026-2029 and be due to DHCS by June 30, 2026.

#### All counties given template by state to provide:

- County Demographics and Behavioral Health Needs
- Plan Goals and Objectives
- Community Planning Process (CPP)
- Comment Period and Public Hearing
- County Behavioral Health Care Continuum Capacity
- Services by Total Funding Source
- Behavioral Health Services Fund Programs
- Workforce Strategy
- Budget and Prudent Reserve





## **BHSA: CPP Timeline**





Phase 1 Receive New State Guidance for Planning	Phase 2 Conduct Community Engagement & Education	Phase 3 Develop IP (Fiscal Years 2026-2029)	Phase 4 Review & Approve IP	Phase 5 Submit IP to State
Summer 2025-Fall 2025	Fall 2025-Winter 2026	Winter 2026-Spring 2026	Spring 2026-Summer 2026	By June 30, 2026
<ul> <li>Review BHSA County Policy Manual (finalized June 2025) and evaluate new requirements for counties from the California Department of Health Care Services (DHCS).</li> <li>Attend DHCS webinars for counties on Integrated Plan (IP) development and the Community Planning Process (CPP) to structure BHSA CPP engagement activities.</li> </ul>	<ul> <li>Facilitate outreach, listening sessions, focus groups, and other opportunities at community events and convenings for stakeholders to provide input.</li> <li>Document key learnings and stakeholder recommendations to support community priorities and system needs.</li> <li>Provide BHSA education through informational handouts and presentations at public meetings.</li> </ul>	<ul> <li>Department synthesis of stakeholder input, fiscal data, and program assessments.</li> <li>Draft San Diego County's IP for Fiscal Years 2026–2029.</li> </ul>	<ul> <li>Post IP draft for public comment and feedback.</li> <li>Present proposed IP to the San Diego County Board of Supervisors (Board).</li> <li>Incorporate public comments and finalize IP language.</li> </ul>	<ul> <li>Board-approved IP provided to State (DHCS) through their BHSA County Portal.</li> <li>Prepare for official implementation of BHSA funding and reporting requirements on July 1, 2026.</li> </ul>

#### **BHSA: CPP Activities**



- BHS is conducting engagement and education activities thru various mechanisms
  - Activities include input sessions, focus groups, interviews, tabling exchanges at outreach events, as well as informational BHSA workshops
- Input opportunities during this baseline year for BHSA are focused on hearing stakeholder insights and recommendations related to key topics which are new components and/or have heightened focus under BHSA, including:
  - Housing interventions
  - Substance use disorder (SUD) treatment services sessions 11/19/2025
  - Behavioral Health Workforce sessions 12/03/2025
  - Early intervention for youth and young adults sessions 12/09/2025

# BHSA Housing Interventions Overview

## **Related California Housing Efforts**





State Initiative	Primary Focus	Connection to BHSA Housing Interventions
Homekey+	Creates or converts properties into permanent or interim housing	BHSA may be used for operational subsidies and supports for residents living in Homekey-funded housing
Behavioral Health Bridge Housing (BHBH)	Provides temporary housing and flexible supports for people with behavioral health needs who are unsheltered or in crisis	BHSA may extend or complement BHBH models by funding low-barrier, harm reduction housing and supportive services
California Advancing and Innovating Medi-Cal (CalAIM): Community Supports and Transitional Rent	Can pay for supports, e.g. housing navigation or tenancy support	BHSA bridges gaps before or after Medi-Cal coverage to maintain housing stability

The BHSA Housing Interventions component funds housing-related services and supports for people with or at risk of behavioral health conditions and provides an ongoing behavioral health framework that links to these other State initiatives.

#### **CalAIM: Transitional Rent & BHSA**





Under BHSA, counties are expected to coordinate with Medi-Cal Managed Care Plans (MCPs) that authorize Transitional Rent through CalAIM Community Supports and then Behavioral Health Plans (County BHS) may use BHSA funds to fill gaps.

- DHCS' intent is to avoid duplication and to braid resources, ensuring Medi-Cal dollars are leveraged first when possible.
  - Transitional Rent through CalAIM Community Supports is a primary funding source for short-term rent assistance for Medi-Cal members and will start on **January 1, 2026**
- BHSA Housing Interventions eligibility:
  - Eligible individuals include children, youth (up to age 25), adults, and older adults
  - Must either meet criteria for Specialty Mental Health Services access -OR- have moderate-to-severe substance use disorders (excluding tobacco-related disorders)
  - Medi-Cal enrollment not required see eligibility criteria in California Welfare & Institutions Code Section 14184.402)

## **BHSA: Housing Interventions**





Provide, secure, and maintain safe, stable, and recovery-oriented housing for individuals with or at risk of behavioral health conditions by funding:

## Housing Navigation & Placement

Helping people apply for, secure, and move into safe, stable housing

## Interim & Transitional Housing

Short-term housing linked to treatment, recovery, or transition into permanent supportive housing

# Residential Care & Supportive Housing Services

Enhanced services within licensed facilities or supportive housing to promote stability and recovery

## System Infrastructure & Quality Improvement

Training, oversight, and partnerships that strengthen local housing systems and coordination with other related State efforts (e.g., CalAIM)

## Tenancy & Stabilization Services

Ongoing supports that help people stay housed, such as life skills coaching, landlord coordination, or peer support

#### **Your Input Matters**



California's Behavioral Health Transformation is changing how services work together across the state.

- BHSA brings prevention, crisis, treatment, housing, and workforce efforts under one coordinated framework.
- Related State efforts, such as CalAIM, 9-8-8 Expansion, and Proposition 1, direct county BHPs to align services and funding to create a more connected system of care.
- Housing is a key part of the County's specialty behavioral health system, and your feedback will help shape how these services evolve to better serve our communities.

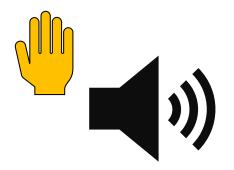
# Input Session Overview

## Ways to Engage

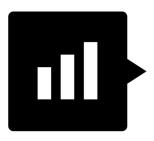




# During today's session, there are multiple ways to share your thoughts and feedback:







**Raise Hand & Unmute** 

**Zoom Chat** 

**Mentimeter** 

## **Input Session Questions**



- 1. What types of housing or housing supports help people experiencing behavioral health challenges feel safe, stable, and connected in their community?
- 2. What kinds of help make it easier for people experiencing behavioral health challenges to stay housed once they have a place to live?
- 3. What challenges or barriers make it harder for people experiencing behavioral health challenges to find or keep housing?
- 4. How can housing programs and housing-related supports be designed or delivered in ways that better support people's behavioral health and well-being?
- 5. Anything else you would like to share with BHS for the BHSA Integrated Plan?

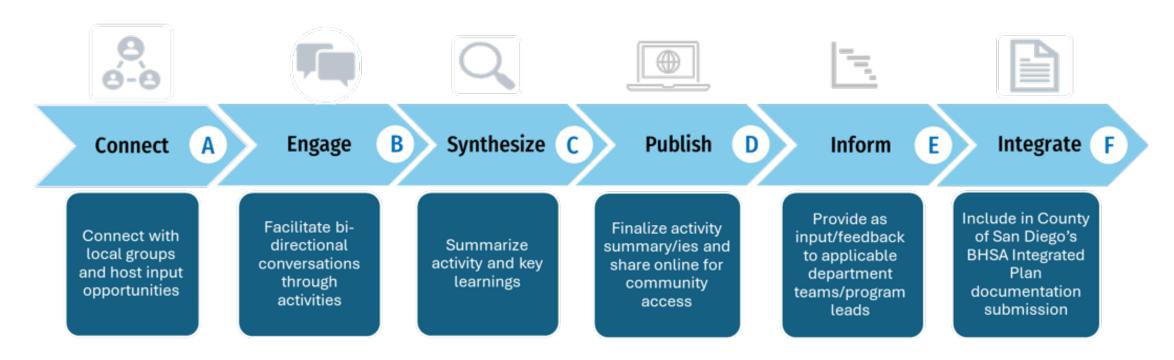
### **Next Steps**





#### How is info from CPP input sessions being utilized by the department?

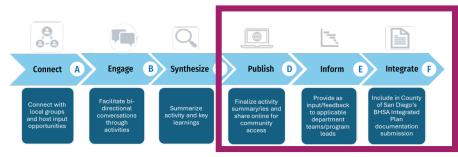
Input will inform specialty mental health and substance use disorder treatment services priorities, investments, and recommendations included in the first BHSA Integrated Plan scheduled for presentation to the San Diego County Board of Supervisors in Summer 2026.



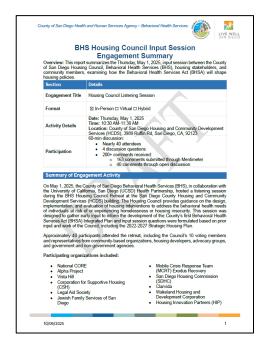
### **Activity Summaries**











#### Key Learnings

Rigid Policies Create Barriers to Stable and Accessible Housing
Barriers include eligibility rules, funding limits, and a mismatch of services when complex
health needs exist. Eligibility rules like Coordinated Entry Systems (CES) matching,
Housing and Urban Development restrictions, and felony exclusions all prevent access.
Funding limits further narrow eligibility: for example, Supplemental Security Insurance (SSI)
excludes board and care for high-need individuals. Service mismatch makes housing waits
too long for clients with specialized care needs that require access to Assertive Community
Treatment (ACT), and Full-Service Partnership (FSP).

#### Audience Recommendations

- Dedicate Funding for Capital Development
   Participants recommended the County dedicate the full 25% allowable under the BHSA 30% Housing Intervention Component to capital development projects. Maximizing this investment would be essential to expand the supply of Permanent Supportive Housing (PSH) and meet needs of individuals with serious behavioral health conditions at risk or experiencing homelessness. Recapitalization of "No Place Like Home," in collaboration with County Housing and Development Services was also suggested.
- Activity Summaries approved by BHAB on 09/04/25
- Overview of activity, participants, discussion(s) held, including questions proctored
- Three primary uses once finalized

#### **Have Additional Input?**







**Participate in Upcoming Activities** 

View upcoming and past engagement activities hosted

the BHSA Integrated Plan for Fiscal Years 2026-2029.

by the department, including community workshops,

town halls, and input opportunities to help inform

Share Input via Our Online Form

Access this online form to share insights and

recommendations with BHS to help guide the

Integrated Plan for Fiscal Years 2026-2029.

development of San Diego County's first BHSA

### **Stay Connected**

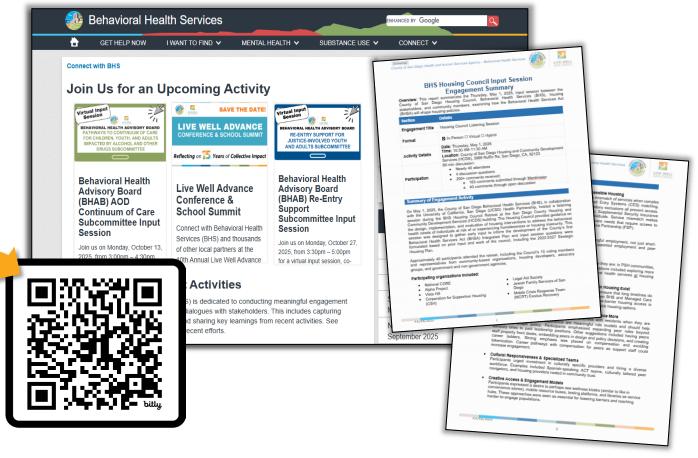




**Upcoming Engagement Opportunities** 

**Planned Engagement Activities** 

**Past Activity Materials** 



**Contact Us** 

SCAN ME

Communication & Engagement Unit: <a href="mailto:Engage.BHS@sdcounty.ca.gov">Engage.BHS@sdcounty.ca.gov</a>

## Thank You!



