



# COUNTY OF SAN DIEGO

#### AGENDA ITEM

NORA VARGAS

First District

JOEL ANDERSON Second District

TERRA LAWSON-REMER Third District

> VACANT Fourth District

JIM DESMOND

# **DRAFT**

**DATE:** July 18, 2023

XX

**TO:** Board of Supervisors

#### **SUBJECT**

AUTHORIZE COMPETITIVE SOLICITATIONS, SINGLE SOURCE CONTRACTS, AMENDMENT TO EXTEND EXISTING BEHAVIORAL HEALTH SERVICES CONTRACT, COOPERATIVE AND REVENUE AGREEMENTS (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, as well as contracts with local agencies. Those served include vulnerable populations, including individuals who are experiencing homelessness, individuals with justice involvement, and children and youth with complex behavioral health conditions.

Approval of today's recommended actions authorizes competitive solicitations, single source contracts, amendments to extend existing behavioral health services contracts, and cooperative and revenue agreements, to sustain critical behavioral health services, with the goal of building a better behavioral health services delivery system for San Diego County communities. Today's recommended actions include the procurement of the new services within the children system of care designed to provide diagnostic and clinical treatment services to children and youth up to 21 years old with specialty mental health needs inclusive of substance use co-occurring needs. These programs support the County's efforts to respond to the need for intensive mental health services by expanding the levels of care available to serve children and youth. These recommended actions support the continuation of critical work to advance the Behavioral Health Continuum of Care.

These items support 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 improve transparency and trust while maintaining good fiscal management.

SUBJECT: AUTHORIZE COMPETITIVE SOLICITATIONS, SINGLE SOURCE CONTRACTS, AMENDMENT TO EXTEND EXISTING BEHAVIORAL

HEALTH SERVICES CONTRACT, COOPERATIVE AND REVENUE

**AGREEMENTS** 

# RECOMMENDATION(S) 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 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 Agency Director, Health and Human Services Agency.
  - a. Assertive Community Treatment (ACT) Services
  - b. Behavioral Health Patient Rights Education and Advocacy Services
  - c. Supported Employment Technical Consultant Services
  - d. Supported Employment Continuum
  - e. Faith-Based Behavioral Health Training, Education Academy and Community Education
  - f. Faith Based Wellness and Mental Health In-Reach Ministry
  - g. Jail In-Reach
  - h. Incredible Families
  - i. Multicultural Community Counseling
  - j. Intensive Case Management Wraparound Services
  - k. Early Intervention for Prevention of Psychosis Program
  - 1. Community Harm Reduction Team
  - m. Support Services for Women Experiencing Homelessness
  - n. Adult Substance Use Outpatient Program
  - o. Adult Substance Use Residential Program
  - p. Perinatal Substance Use Residential Program
  - q. Adolescent Substance Use Residential Program
  - r. Adult Substance Use Outpatient Program for Alcohol Use
  - s. Peer Support Services
  - t. Behavioral Health Services for AB109 Clients
  - u. Intensive Outpatient Program and Partial Hospitalization Program
- 2. In accordance with Board Policy A-87, Competitive Procurement, approve and authorize the Director, Department of Purchasing and Contracting, to enter into negotiations for behavioral health services listed below, and subject to successful negotiations and determination of a fair and reasonable price, enter into single source contracts 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 the approval of the Agency Director, Health and Human Services Agency.
  - a. Electroconvulsive Therapy Services

- b. Medi-Cal Managed Care Psychiatric Inpatient Hospital Services
- c. Skilled Nursing Facility
  - i. Skilled Nursing Facility for Adults with Behavioral Health Conditions
  - ii. Skilled Nursing Facility with Special Treatment Program
- **d.** Short Term Residential Therapeutic Programs
- e. School-Based Outpatient Behavioral Health Services
- 3. In accordance with Board Policy A-87, Competitive Procurement, and 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 amend the contracts listed below to extend the contract term and expand services, subject to the availability of funds; and amend the contracts as required in order to reflect changes to services and funding allocations, subject to the approval of the Agency Director, Health and Human Services Agency.
  - **a.** Extend the contract term up to December 31, 2024, and up to an additional six months, if needed:
    - Placement Stabilization Services at Polinsky Children's Center
      - o New Alternatives, Inc. (Contract #556401
  - **b.** Extend the contract term up to December 31, 2024:
    - Breaking Down Barriers Initiative
      - o Jewish Family Service of San Diego (Contract #559599)
  - **c.** Extend the contract term up to June 30, 2027, and up to additional six months, if needed:
    - Behavioral Health Administrative Services Organization dba Optum
      - o United Behavioral Health (Contract #553848)
  - **d.** Extend the contract term up to June 30, 2024, and up to an additional six months, if needed:
    - Behavioral Health Collaborative Court
      - o Telecare Corp. (Contract #551670)
- 4. In accordance with Board Policy B-29, authorize the Director, Health and Human Services Agency, upon receipt, to execute the following Agreements.
  - **a.** Cooperative Agreement with the State Department of Rehabilitation for Mental Health Employment Services
  - **b.** Revenue Agreement with Driving Under the Influence Program

# **EQUITY IMPACT STATEMENT**

The County of San Diego (County) Health and Human Services Agency, 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 or serious emotional disturbance, and the service delivery system for Medi-Cal eligible residents with substance use care needs. As a steward of public health for the region, BHS must ensure that the services offered through

County-operated and contracted programs address the social determinants of health by being accessible, capable of meeting the needs of diverse populations, and with the intent to equitably distribute services to those most in need.

In support of these efforts, BHS utilizes a population health approach to identify need and design services that are impactful, equitable, and yield meaningful outcomes for those served. This includes facilitating ongoing engagement and input from the community, stakeholders, consumers, family members, community-based providers, and healthcare organizations through formal and informal convenings, along with cross-collaboration with other County departments and community partners. Additionally, through the establishment of the Community Experience Partnership and the recent launch of the Behavioral Health Equity Index, in collaboration with the University of California San Diego, BHS is leading the development of a tool for measuring behavioral health equity which will be used to inform program planning, siting of services, and allocation of resources in a way that supports community needs.

If approved, today's action will award contracts and amend to extend existing contracts for services that improve access to treatment and care for populations who are underserved by social and behavioral health resources, including individuals experiencing homelessness, individuals with justice involvement, as well as children and youth with complex behavioral health needs.

#### SUSTAINABILITY IMPACT STATEMENT

The proposed action to provide services that improve access to treatment and care for populations who are underserved by social and behavioral health resources, will result in sustainability enhancements in terms of health/wellbeing, equity, economy, and environment. Awarding contracts for these services will contribute to County of San Diego Sustainability Goal #2 to provide just and equitable access to County services by providing a wider availability and range of supportive, inclusive, and stigma-free options. Services will first improve the overall health of communities, reducing the demand of associated care services, while then increasing effectiveness of care providers and lowering operating costs of facilities, thus reducing emissions and waste generated within the care sector.

#### FISCAL IMPACT

Funds for these requests are included in the Fiscal Year (FY) 2023-25 Operational Plan in the Health and Human Services Agency (HHSA). If approved, today's recommendations will result in approximate costs and revenue of \$3.7 million in FY 2023-24 and \$239.6 million in FY 2024-25. There will be no change in net General Fund cost and no additional staff years.

# Recommendation #1: Authorization to Issue Competitive Solicitations

If approved, this request will result in estimated costs and revenue of \$1.1 million in FY 2023-24 and \$150.1 million in FY 2024-25. The funding sources are MHSA, Realignment, Short Doyle Medi-Cal, CalWORKS, Perinatal/SABG, DMC, and Assembly Bill 109. There will be no change in net General Fund cost and no additional staff years.

#### Recommendation #2: Authorization to Issue Single Source Contracts

SUBJECT: AUTHORIZE COMPETITIVE SOLICITATIONS, SINGLE SOURCE

CONTRACTS, AMENDMENT TO EXTEND EXISTING BEHAVIORAL HEALTH SERVICES CONTRACT, COOPERATIVE AND REVENUE

**AGREEMENTS** 

If approved, this request will result in estimated costs and revenue of \$53.4 million in FY 2024-25. The funding sources are MHSA, Realignment, and Short Doyle Medi-Cal. There will be no change in net General Fund cost and no additional staff years.

#### Recommendation #3: Authorization to Amend and Extend Contracts

If approved, this request will result in estimated costs and revenues of \$2.5 million in FY 2023-24 and \$35.6 million in FY 2024-25. The funding sources are MHSA, Realignment, DMC, Crisis Care Mobile Unit Grant, California Department of Social Services, and Public Safety Group. There will be no change in net General Fund cost and no additional staff years.

Recommendation #4: Execution of a Cooperative Agreement with the State Department of Rehabilitation for Mental Health Employment Services and a Revenue Agreement with Driving Under the Influence Program

If approved, this request will result in estimated costs and revenue of \$0.1 million in FY 2023-24 and \$0.5 million in Fiscal Year 2024-25. The funding sources are Realignment and Driving Under the Influence Program participant fees. There will be no change in net General Fund cost and no additional staff years.

## **BUSINESS IMPACT STATEMENT**

N/A

#### ADVISORY BOARD STATEMENT

At their meeting on July 6, 2023, the Behavioral Health Advisory Board voted to \_\_\_\_\_ these recommendations.

#### **BACKGROUND**

The County of San Diego (County) Health and Human Services Agency, Behavioral Health Services (BHS) provides a comprehensive array of community-based 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 as well as contracts with local public and private agencies. Approval of today's recommended actions authorizes competitive solicitations, single source procurements, amendment to extend existing behavioral health services contracts, revenue and cooperative agreements.

These recommended actions support the continuation of critical work to advance the ongoing transformation of the Behavioral Health Continuum of Care. All contracts are contingent upon the availability of funding, successful negotiations, and determination of a fair and reasonable price.

#### **Recommendation #1: Issue Competitive Solicitations**

# a. Assertive Community Treatment Services

On June 20, 2017 (13), the Board authorized the procurements of Assertive Community Treatment (ACT) Services in the Central and North Central regions, as well as countywide for older adults and transitional age youth (TAY). Subsequently, on November 15, 2022

(28), the Board authorized a contract term extension for these ACT programs up to June 30, 2024, and up to an additional six months, if needed. ACT programs provide intensive multidisciplinary treatment services for clients who are experiencing homelessness, who have a serious mental illness (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 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.

ACT services offset costs through a reduction in emergency utilization when comparing client contacts 6 months before and after a sustained connection to ACT services. In calendar year 2021, utilization of emergency services was reduced by 56% based on the 676 total contacts prior to ACT and 296 contacts post ACT. As of June 2021, out of 1,281 clients, 92% were housed. Services are provided in the Central, North Central regions and countywide. In FY 2021-22 collectively, 77% of the 1238 clients showed functional improvement and 74% showed clinical improvement. Additionally, 91.5% of these clients were connected to a primary care provider.

Today's action requests the Board to authorize a competitive solicitation for the reprocurement of four ACT programs 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 contracts as needed to reflect changes in services and funding.

# b. Behavioral Health Patient Rights Education and Advocacy Services

On November 13, 2018 (12), the Board authorized the procurement of Behavioral Health Patient Rights Education and Advocacy Services countywide. The program provides education and advocacy services for county residents who need help accessing health care coverage, including medical and behavioral health services. Services include assuring consumer access to appropriate and timely mental health and substance use programs; assistance in outpatient behavioral health beneficiary grievance and appeals resolution; and serving as a patient's rights advocate for county mental health and substance use program recipients.

In FY 2021-22, the program opened 1,446 cases and closed 1,553 cases, in which they served 2,228 unduplicated clients. They remain connected to consumers, stakeholders, and partners by participating in 308 virtual and in-person presentations, training, social media, and outreach events. The program offers a hotline for assistance, referral, and general education and received about 10,000 calls in FY 2021-22. Consumers of education and advocacy services complete a consumer satisfaction survey to report on their experience. In FY 2021-22, 91% of the 140 consumers who were surveyed responded services provided by the contractor as being good or very good. Additionally, 193 consumers who participated in Contractor's Health Education and Advocacy programs and workshops were surveyed. Of these consumers, 98% reported increased knowledge about the services for

which they are eligible, how to access services, and how to navigate the physical and/or mental health medical services system.

San Diego County is committed to honoring the rights of every client to have access to a fair, impartial, effective process through which the client can seek resolution of a grievance or adverse benefit determination by the mental health plan and Drug Medi-Cal Organized Delivery System (DMC-ODS). All county operated and contracted providers are required to participate fully in the beneficiary and appeal process. The county has delegated the roles and responsibilities of managing the grievance and appeal resolution process for beneficiaries to contracted advocacy organizations.

Today's action requests the Board to authorize a competitive solicitation for the reprocurement of the Behavioral Health Patient Rights Education and Advocacy 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, and to amend contracts as needed to reflect changes in services and funding.

# c. Supported Employment Technical Consultant Services

On November 13, 2018 (12), the Board authorized the procurement of Supported Employment Technical Consultant Services. The Supported Employment Technical Consultant Services program provides technical expertise and consultation on countywide employment development, partnership, engagement, and funding opportunities for adults with behavioral health conditions.

Services are coordinated and integrated with Behavioral Health Services (BHS) and operate through collaboration with behavioral health providers, regional collaborative, local employers, employment agencies, workforce partnerships, local government employment agencies, and other groups to develop new employment resources. Individuals have increased their participation in competitive employment since the Supported Employment Initiative was implemented in FY 2014-15 and when the Individualized Placement & Support (IPS) Model was implemented in FY 2018-19. From 3,370 unduplicated clients with competitive employment in FY 2014-15, there was a total increase of 66% in FY 2021-22. Additionally, from 4,196 unduplicated clients seeking employment in FY 2014-15, there was a total increase of 19% in FY 2021-22.

As BHS moves forward in supporting individuals connected to behavioral health programs by embracing supportive services as a focal point for direct service impact on improving the quality of life, if approved, these redesign components of adding an IPS Trainer and expanding meetings to substance use programs will help our community to thrive in their journey to independence. A consistent income enables the ability to secure and retain housing, increases social connectedness, and provides opportunities for a stable future.

Today's action requests the Board to authorize a competitive solicitation for the reprocurement of the Supported Employment Technical Consultant 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, and to amend contracts as needed to reflect changes in services and funding.

# d. Supported Employment Continuum

On November 13, 2018 (12), the Board authorized the procurement of Supported Employment Continuum, a supported employment program that provides an array of job opportunities to help adults with SMI obtain competitive employment. Services are coordinated and integrated with BHS and operate through collaboration with behavioral health providers, regional collaborative, local employers, employment agencies, workforce partnerships, local government employment agencies, and other groups to develop new employment resources. The program uses a comprehensive approach that is community based, client and family driven, and culturally competent. This program serves individuals diagnosed with SMI and individuals not connected with an Employment Specialist working at another BHS program.

This program supports the County's goal of maximizing employment opportunities and the new Five-Year Strategic Employment Plan (FY 2020-24), which outlines a clear vision for continued expansion of employment opportunities for people with behavioral health issues. This includes investing in evidence-based and evidence-informed practices that are effective in increasing employment. Services are provided countywide.

Individuals have increased their participation in competitive employment since the Supported Employment Initiative was implemented in FY 2014-15 and when the Individual Placement and Support (IPS) Model implemented in FY 2018-19. In FY 2021-22, the program exceeded its goal of serving 151 clients by serving 153 unduplicated clients.

Today's action requests the Board to authorize a competitive solicitation for the reprocurement of the Supported Employment Continuum program 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 contracts as needed to reflect changes in services and funding.

# e. Faith-Based Behavioral Health Training, Education Academy and Community Education

On November 13, 2018 (12), the Board authorized the procurement of Faith-Based Behavioral Health Training and Education Academy (FBBHEA) and Community Education. A FBBHEA and Community Education curricula for Behavioral Health Services were developed to increase awareness and understanding of behavioral health issues and faith-based approaches to behavioral health. The FBBHEA and its community education trainings facilitate behavioral health awareness and connection to resources within the communities of the North and Central regions. The program serves faith leaders, their congregations, behavioral health providers, and communities. FBBHEA and Community Education Presentations (CEP) are used to extend behavioral health related

education into congregations and communities that may not otherwise have access to this information.

In FY 2021-22, the total participants have exceeded the attendee goals for both FBHHEA and CEP. In the North region, there was a total of 134 FBHHEA participants which exceeded the attendee goal by 12% and a total of 647 CEP participants which exceeded the attendee goal by 116%. In the Central Region, there was a total of 126 FBHHEA participants which exceeded the attendee goal by 5% and a total of 516 CEP participants which exceeded the attendee goal by 72%.

US Census data shows there are approximately 1,720 temples, mosques, churches, or synagogues within the County of San Diego. In FY 2021-22, the programs performed outreach and engagement services connecting with 199 different faith-based groups. If approved, the program will be expanded into 4 regional contracts (North, Central, East, and South regions) to address the gap of 1,521 faith-based groups.

Today's action requests the Board to authorize a competitive solicitation for the reprocurement of the Faith-Based Behavioral Health Training and Education Academy, and Community Education program 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 contracts as needed to reflect changes in services and funding.

#### f. Faith Based Wellness and Mental Health In-Reach Ministry

On November 13, 2018 (12), the Board authorized the procurement of Faith Based Wellness and Mental Health In-Reach Ministry. Subsequently on November 16, 2021 (05), the Board authorized a contract term extension of this program up to June 30, 2024, and up to an additional six months, if needed. The Project In-Reach Ministry program provides services to at-risk and treatment-resistant individuals identified by detention facility staff. In-reach services aim to educate detention staff and support the successful transition and reintegration of individuals from jail to the community. The target population is incarcerated TAY or adult African American or Latino individuals with serious mental illness. Services include individuals with SMI such as schizophrenia or bipolar disorder; providing spiritual support; mental and physical health wellness; information and counseling on the impact and effects of untreated mental illness, co-occurring conditions, and trauma. The Faith Based Wellness and Mental Health In-Reach Ministry will provide support services consistent with pastoral counseling and the individual's faith in addition to information, linkage, and education about community-based resources.

Services are provided countywide. In FY 2021-22, the program served a total of 239 unduplicated clients and 65% of these clients were linked to services at discharge.

Today's action requests the Board to authorize a competitive solicitation for the reprocurement of Project In-Reach program 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 contracts as needed to reflect changes in services and funding.

#### g. Jail In-Reach

On January 7, 2014 (9), the Board authorized the procurement of Jail In-Reach Services to provide engagement for incarcerated adults, who have or are at risk of psychological disorders and /or substance use conditions while in detention, and to prepare them for community reentry. Jail In-Reach program provides services to at-risk and treatment-resistant individuals identified by detention facility staff. In-reach services aim to educate detention staff and support the successful transition and reintegration of individuals from jail to the community. The target population is incarcerated TAY or adult African American or Latino individuals with serious mental illness.

The program provides services that include screening, brief case management, group and individual counseling services and crisis intervention while in detention, and brief case management in the community to ensure individuals are linked to appropriate services. The services aim to reduce recidivism by improving outcomes among key areas of functioning: health, housing, mental health, prosocial, substance use, family-wellness, and employment. Services are provided Countywide. In FY 2021-22, the program served a total of 242 unduplicated clients of which 67% of these clients were linked to services at discharge.

Today's action requests the Board to authorize a competitive solicitation for the reprocurement of Jail In-Reach program 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 contracts as needed to reflect changes in services and funding.

#### h. Incredible Families

On June 19, 2018 (9), the Board authorized the procurement of Incredible Families (IF) program. The IF program provides parenting support group and outpatient mental health treatment services for children and youth, ages 2 to 14, and their families involved with Child Welfare Services (CWS) / Child & Family Well Being Department (CFWB) and promotes the reunification of children with their families. Program receives all referrals from CWS/CFWB, and collaborative efforts include treatment planning and outreach to support the child/youth and family goal reunification. Services include individual, family, group psychotherapy, psychiatric services, case management, rehabilitative services, intensive care coordination, intensive home-based services, collateral crisis intervention services, therapeutic family visitation, and peer support services.

Children and youth experience higher success when living with a supportive parent who can meet their emotional and physical needs. The IF program Incredible Years (IY) groups support parents with developing emotional engagement and healthy skills for parenting their children. Services are provided countywide. In FY 2021-22, the program served a total of 64 unduplicated clients. Of the 64 families enrolled in the IF program, 67% were provided therapeutic family visitation and 53% of the 34 families enrolled in the IY

parenting group completed all 15 group sessions. Additionally, 100% of the 50 discharged clients avoided psychiatric hospitalization or re-hospitalization and 58% participated in family therapy sessions.

Today's action requests the Board to authorize a competitive solicitation for the reprocurement of the Incredible Families program 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 contracts as needed to reflect changes in services and funding.

# i. Multicultural Community Counseling

On November 15, 2022 (28), the Board authorized a contract term extension of the Multicultural Community Counseling (MCC) program up to June 30, 2024, and up to an additional six months, if needed. The MCC program is an outpatient behavioral health program that provides services to Asian Pacific Islander (API) and Latino children and youth up to age 21 with emphasis on API. Services include individual, group and family therapy, care coordination, case management, rehabilitative services, crisis intervention, medication services and outreach and engagement.

These services support the need for cultural and specific outpatient behavioral health services and case management for children and youth, and their families. Services are provided at clients' homes, schools, community sites, and clinic, as well as via telehealth. Multiple language abilities include Tagalog, Vietnamese, Spanish, Mandarin, and Korean. Services are provided Countywide. In FY 2021-22, the program served a total of 198 unduplicated clients. Of the 87 discharges, 100% avoided psychiatric hospitalization and 100% transitioned to or remained in a less restrictive educational placement.

Today's action requests the Board to authorize a competitive solicitation for the reprocurement of the MCC program for an Initial Term of up to one year, with up to four 1-year Options, and up to an additional six months, if needed, and to amend contracts as needed to reflect changes in services and funding.

# j. Intensive Case Management Wraparound Services

On June 19, 2018 (9), the Board authorized the procurement of Intensive Case Management Wraparound Services program for Youth and Families Involved with CWS. The program offers team based intensive and individualized case management to children/youth involved in CWS/CFWB/Probation systems, leveraging both formal and informal supports. The services are designed to maximize the capacity of the family to meet the youth's needs and, in turn, reduce the frequency of hospitalizations, as well as reduce the level of care from a congregate care setting to a permanent home or home-like setting. Services include, but are not limited to, assessment, crisis intervention, case management and rehabilitative services, intensive care coordination, intensive home-based services, medication management, and individual therapy as appropriate. Services are provided countywide.

On February 9, 2018, the Family First Prevention and Services Act (FFPSA), was signed into law. The Qualified Residential Treatment Programs requirements are summarized in the FFPSA Overview and Timeline document and includes the provision of discharge planning and family-based aftercare supports, including wraparound services, for at least six months post-discharge. Wraparound services have proven highly successful in facilitating stability and permanency for the highest need youth and their families. Services are provided countywide. In FY 2021-22, the program served a total of 260 unduplicated clients. At discharge, 93% of the 143 clients living in a home or home-based setting avoided placement into higher level of care and 81% of the 16 clients residing in Short-Term Residential Therapeutic Program (STRTP) or residential setting returned home or home-based setting. Additionally, of the 61 probation-involved clients, 74% avoided a probation violation charge while 79% avoided a new charge while in treatment.

Today's action requests the Board to authorize competitive solicitation for the reprocurement of the Intensive Case Management Wraparound program 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 contracts as needed to reflect changes in services and funding.

# k. Early Intervention for Prevention of Psychosis Program

On January 7, 2014 (9), the Board authorized the procurement of the Early Intervention for Prevention of Psychosis Program. Subsequently on November 16, 2021 (5), the Board authorized a contract term extension of this program up to June 30, 2024, and up to an additional 6 months if needed. This program also provides prevention through public outreach and education about psychosis.

Prevention and Early Intervention (PEI) programs are designed to prevent the onset of mental illness or provide early intervention to decrease severity of symptoms. PEI programs focus on reducing the stigma associated with mental illness, preventing suicide, and addressing the early signs of psychosis. Early Intervention for Prevention of Psychosis Program services are provided to children and transition aged youth, ages 10 to 25, who have emerging "prodromal" symptoms of psychosis. Prodromal is the earliest stage of schizophrenia. First signs are indicated by small changes to personality and behavior or normal routine. Symptoms include nervousness, anxiety, depression, difficulty concentrating, excessive worry, social isolation or uneasiness around other people, lack of attention to or care for personal hygiene. This program has three service components including: (1) Prevention through public education, (2) Early Intervention through screening potentially at-risk youth, and (3) Intensive Treatment with treatment of youth who are identified as at risk and their families. This program provides vital PEI services and education countywide.

In FY 2021-22, the PEI Mental Health Service Act MHSA program served 207 unduplicated clients and the PEI Mental Health Block Grant program served 103 unduplicated clients. In FY 2021-22, 90.5% of the 310 clients served showed same or improved 'Functional Status' and 90% showed same or improved 'Clinical Status'.

Additionally, there were 324 clients screened, 455 attended the Multi Family Groups, and there were 24 Outreach and Educational presentations to "gatekeepers" provided.

Today's action requests the Board to authorize a competitive solicitation for the reprocurement of the Early Intervention for Prevention of Psychosis Program 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 contracts as needed to reflect changes in services and funding.

# l. Community Harm Reduction Team

On January 26, 2021 (11), the Board authorized the procurement of the Community Harm Reduction Team (C-HRT). The C-HRT provides street outreach and engagement to adults, ages 18 years and older, experiencing homelessness in the East Village and Midway areas of the City of San Diego who have a chronic substance use condition and are resistant to services. Services include Just in Time specialty services, connection to behavioral health, Medication Assisted Treatment, and designated housing including short term shelter and Safe Haven housing for difficult to engage clients with chronic substance use and co-occurring conditions. Just in Time services are designed to remove barriers that cause delays in access to services including transportation, joining individual to appointments, and ensuring connections to ongoing treatment or services. These services provide wellness, stability, and access to permanent supportive housing. Services are provided in the Central region.

In FY 2021-22, the program served a total of 135 unduplicated clients. At the end of FY 2021-22, 59 individuals were served through street outreach and 43 individuals were served in the designated C-HRT shelter of which 32 were discharged. Of the 32 discharged individuals, 7 went to permanent housing.

Today's action requests the Board to authorize a competitive solicitation for the reprocurement of the C-HRT 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 contracts as needed to reflect changes in services and funding.

#### m. Support Services for Women Experiencing Homelessness

On November 13, 2018 (12), the board authorized the procurement of Behavioral Health Education for Women Experiencing Homelessness program. This program supports adult women experiencing homelessness, ages 18 years and above, with behavioral health conditions (mental health and substance use). This program works with managed care plans for California Advancing and Innovating Medi-Cal (CalAIM)-funded opportunities that also serve individuals with behavioral health issues to promote a systematic approach to coordinated care with Behavioral Health contracted services. Care coordination efforts will be provided by collaborating with CalAIM Enhanced Care Management and Community Support Providers and by increasing care coordination with BHS service providers.

The program provides participants personalized assistance to connect and link with community-based resources to address mental health, physical health, and substance use conditions. Services include access to showers, mail and phone services, case management, educational groups, and supportive services. These services link program participants to recovery opportunities in a safe and trauma informed environment. Services are provided in Central region. Research shows that the burden of homelessness on women creates multiple challenges including vulnerability to victimization, limited options for safe locations to meet personal needs, and connection to resources.

In FY 2021-22, the program served a total of 210 unduplicated clients. This program facilitates weekly meetings for program participants connected to recovery planning, relapse prevention, self-help, and community resources. The overall program outcomes are associated with developing goals to improve quality of life, level of functioning and connection to housing.

Today's action requests the Board to authorize a competitive solicitation for the reprocurement of the Behavioral Health Education for Women Experiencing Homelessness program 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 contracts as needed to reflect changes in services and funding.

# n. Adult Substance Use Outpatient Program

On September 23, 2014 (9), the Board authorized the procurement of Adult Substance Use Outpatient Programs. Subsequently on March 27, 2018 (2) and December 11, 2018 (13), the Board authorized negotiations to amend existing contracts to reflect changes to services and authorized single source procurements for a term of up to one year, with up to four option years, and up to an additional six months. Additionally, on November 16, 2021 (5), the Board authorized contract term extension of existing contracts up to June 30, 2024, and up to an additional 6 months if needed. Adult substance use Outpatient Programs provide treatment, recovery, and ancillary services to TAY ages 18 to 21, adults ages 18 years and older, and older adults with substance use conditions including those with co-occurring mental health needs. Services are provided countywide.

Services incorporate evidence-based treatment and recovery approaches. Services include outpatient withdrawal management, intensive outpatient substance use treatment, case management, connection to medication assisted treatment, recovery services, and client support in attaining the appropriate level of care, employment, and stable housing. This includes American Society of Addiction Medicine (ASAM) Level 1- outpatient treatment and Level 2.1 intensive outpatient services which are critical components in the substance use continuum of care within San Diego County.

On June 28, 2022 (22), the Board authorized the creation of an implementation plan to address illicit fentanyl as public health crisis. The San Diego County Examiner reported 33 fentanyl deaths in 2016 and the number of deaths exceeds 800 in 2021. Preliminary

numbers indicated accidental fentanyl deaths would exceed those from 2021. With the opioid epidemic and rise in fentanyl deaths, there is a need to increase additional substance use outpatient and medication-assisted treatment capacity in our system of care to provide the support required to adequately serve the community.

In FY 2021-22, these five substances use outpatient treatment programs served a total of 730 unduplicated clients. Clients demonstrated an increase in housing stability in FY 2021-22 where 46 out of the 51 individuals experiencing homelessness at intake were housed at the end of treatment. Additionally, 82% of the 274 clients who completed treatment were enrolled in an eligibility program at the end of treatment or employed either in a structured employment preparation program or in a formal educational setting. Furthermore, 96% of these clients have reported no new arrests, successful assessment completion, and the provision of recovery services.

Today's action requests the Board to authorize competitive solicitations for the reprocurement of the five Substance Use Outpatient Treatment Programs 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 contracts as needed to reflect changes in services and funding.

# o. Adult Substance Use Residential Program

On March 27, 2018 (2) and December 11, 2018 (13), the Board authorized the single source procurements of the Adult Substance Use Residential Programs. These programs provide 24-hour, non-medical, residential substance use treatment, withdrawal management, recovery, and ancillary services to adults, ages 18 years and older, with substance use conditions including co-occurring mental health conditions. Services include clinical assessments for substance use and mental health conditions, care coordination and a "warm hand-off" to appropriate level of care in the mental health system when need exceeds services available through the program. 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 ASAM criteria. Services are provided countywide with programs located in the Central, North Central, and South regions.

The Adult Substance Use Residential Programs are designed to provide clients access to timely care, retention in treatment, reduction of substance use relapse and justice involvement, as well as improvement in their quality of life. In FY 2021-22, the programs served a total of 1,912 unduplicated clients and 99% of these clients had no new arrests. Of the 1,102 clients who were experiencing homelessness upon admission and discharged as planned, there was over 80% decrease in homelessness.

Today's action requests the Board to authorize a competitive solicitation for the reprocurement of Adult Substance Use Residential Programs 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 contracts as needed to reflect changes in services and funding. If approved, it is anticipated

that procurement for Substance Use Residential Treatment Programs will result in multiple contract awards.

# p. Perinatal Substance Use Residential Program

On March 27, 2018 (2), the Board authorized the implementation of Drug Medi-Cal Organized Delivery System (DMC-ODS) to improve care for those struggling with substance use and to enhance the system of care available to San Diego County residents, which allowed for single source procurement of the three Perinatal Residential Substance Use Residential Programs. Additionally, on June 4, 2019 (10), the Board authorized the single source procurement of another perinatal residential SU treatment program in the Central Region. Subsequently, on November 15, 2022 (28), the Board authorized a contract term extension of the four perinatal residential programs up to June 30, 2024, and up to an additional six months, if needed.

These programs are designed to provide residential substance use treatment, recovery, and ancillary services to pregnant or parenting women, and women with substance use conditions, countywide. Perinatal Residential substance use treatment services address screening for co-occurring mental health services. Services utilize best practices such as parenting classes, childcare services, peer support services, clinician services for children including developmental screening and mental health referrals, crisis intervention, outreach, engagement, treatment and recovery services, and relapse prevention. Treatment modalities include assessment, individual group counseling, motivational interviewing and other evidence-based practices, case management and care coordination.

Perinatal Substance Use Residential treatment services fulfill the California Department of Health Care Service's requirement for services that adhere to Perinatal Practice guidelines for substance use treatment for pregnant and parenting women seeking or referred to substance use treatment. These programs ensure access to quality substance use treatment services for perinatal clients in accordance with DMC-ODS, and the Substance Use Prevention and Treatment Block Grant Perinatal Set-aside from the Substance Abuse and Mental Health Services Administration (SAMHSA). In FY 21-22, these programs served a total of 1,137 unduplicated clients. Of the 391 discharged clients who completed treatment for 31 or more days, 99% had no new arrests, 86% were employed and/or in a formal education setting, and 96% were referred to outpatient services. Of the 290 clients who were experiencing homelessness at intake, 86% were housed at the end of the treatment phase. Furthermore, 96% of the 25 babies born to mothers in treatment were born free of exposure to illicit substances. Additionally, these programs provided mental health screening to 180 children of enrolled clients.

Today's action requests the Board to authorize a competitive solicitation for the reprocurement of Perinatal Substance Use Residential Programs 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 contracts as needed to reflect changes in services and funding.

# q. Adolescent Substance Use Residential Program

On March 27, 2018 (2), the Board authorized the implementation of DMC-ODS to improve care for those struggling with substance use and to enhance the system of care available to San Diego County residents, which allowed for single source procurement of the Adolescent Substance Use Residential Program. Subsequently, on November 15, 2022 (28), the Board authorized a contract term extension of this program up to June 30, 2024, and up to an additional six months, if needed.

The Adolescent Substance Use Residential Program provides 24-hour non-medical residential substance use treatment, recovery, and ancillary services to adolescents, ages 12 to 17 years old, with substance use conditions, including co-occurring mental health disorders. Services include individual or group treatment services, case management, peer support services, and education groups along with other specialized programming including prosocial activities. When applicable, program staff assist clients in complying with court mandates and probation requirements.

Adolescent Substance Use Residential treatment services fulfill the California Department of Health Care Service's requirement for services that adhere to Adolescent substance use best practices for substance use treatment for adolescents seeking or referred to substance use treatment. This program ensures access to quality substance use treatment services for adolescents in accordance with DMC-ODS. Services are provided countywide. In FY 2021-22, the program served a total of 99 unduplicated clients. Of the 53 discharged clients who completed treatment for 31 or more days, 100% had no new arrests, 92% were employed and/or in a formal education setting, and 100% were referred to outpatient services.

Today's action requests the Board to authorize a competitive solicitation for the reprocurement of Adolescent 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, and to amend contracts as needed to reflect changes in services and funding.

# r. Adult Substance Use Outpatient Program for Alcohol Use

On November 16, 2021 (5), the Board authorized a contract term extension of the Adult Substance Use Outpatient Program for Alcohol Use, formerly known as Serial Inebriate Program (SIP), up to June 30, 2024, with an additional six months, if needed. This program provides outpatient substance use treatment, recovery, and ancillary services to adults ages 18 years and older with a primary alcohol use condition and may include co-occurring mental health conditions. It is also focused on addressing homelessness as transitional housing for up to two years while client is engaged in treatment. The program accepts referrals from law enforcement, probation, the courts, emergency medical services, other behavioral health treatment providers, and hospitals as a collaborative effort to address chronic inebriates. It provides screenings, assessments, substance use group and individual counseling, intensive case management (referrals and linkages to community resources), peer support and recovery services. The program is a trauma informed care facility that

focuses on whole person wellness and utilizes evidenced base practices. It primarily provides services in the Central region.

In FY 2021-22, the program received 215 referrals and admitted 95 clients. In FY 2021-22, there were a total of 12 discharges for clients who completed at least 31 days of treatment. Of those discharges, there were 11 clients who were experiencing homelessness at intake and 100% had secured stable housing at discharge, which exceeded the program's goal of 30%. Of those 12 discharges, there were 11 clients (92%) who were self-sufficient through employment, schooling, or a benefit program at discharge, which exceeded the program's goal of 70%. Of those 12 discharged clients, 10 clients (83%) were enrolled in Recovery Services which exceeded the program's goal of 45%.

Today's action requests the Board to authorize a competitive solicitation for the reprocurement of the Adult Substance Use Outpatient Program for Alcohol Use 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 contracts as needed to reflect changes in services and funding.

### s. Peer Support Services

On November 13, 2018 (12), the Board authorized the procurement of Peer Support Services. The Peer Support Services program serves adults ages 18 years and older diagnosed with SMI who, in addition to needing to use hospital and/or crisis house services, have a limited social support network and are most likely to not be effectively connected with relevant services. Services include coaching and incorporating shared decision-making. Services also included active social supports to increase the depth and breadth of services to adults diagnosed with SMI who use acute, crisis-oriented mental health services but are not effectively connected to community resources.

In FY 2021-22, there were 265 unique admissions to Central region hospitals. Of these admissions, 46% live in Central region, 7% live in North Central region, and the remaining 47% live in the South, East, North Inland, and North Coastal regions. The operation of a single program covering all regions will assist in ensuring connection with the specific regional BHS resources to increase access to care and reduce unnecessary acute care. Services are provided countywide. Connections to services are monitored and reflected for the 265 unduplicated individuals served in FY 2021-22, 96% of these participants had a decrease in 30-day psychiatric hospitalization readmissions and 94% had a decrease in 30-day crisis residential facility readmissions. Within 3 months of enrollment, 67% of these individuals were linked and connected to social support/recovery network and 80% demonstrated an improved level of recovery at discharge (measured by Milestones of Recovery Scale (MORS).

Today's action requests the Board to authorize a competitive solicitation for the reprocurement of Peer Support Services 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 contracts as needed to reflect changes in services and funding.

**AGREEMENTS** 

#### t. Behavioral Health Services for AB109 Clients

On January 7, 2014 (9), the Board authorized the procurement of Behavioral Health Services for AB109 Clients. Subsequently on November 15, 2022 (28), the Board authorized a contract term extension of this program up to December 31, 2023, and up to an additional six months, if needed. The Behavioral Health Services for AB109 Clients program provides comprehensive mental health services to individuals who have been referred by the Probation Department and are under supervision as AB109 offenders. This includes those individuals on post-release community supervision and mandatory supervision for adults ages 18 years and older who have been referred by Probation as AB109 post-release offenders and mandatory supervision offenders. Services may include comprehensive mental health services, medication management, strengths-based case management, assertive outreach, assertive research, cognitive-behavioral individual and group therapy, transportation assistance, linkage and referrals to community-based organizations, education, employment, housing, and other skill development and resource development needs.

Research shows that one of the most vulnerable populations in San Diego is the severely mentally ill. This program will increase access and connectivity between the justice system and behavioral health to ensure clients are receiving the appropriate level of care and deliver best practice to improve wellness and reduce recidivism for justice-involved individuals, including those transitioning from custody to the community. Services are provided in North Coastal and Central region. In FY 2021-22, the program served a total of 343 unduplicated clients.

Today's action requests the Board to authorize a competitive solicitation for the reprocurement of the Behavioral Health Services for AB109 Clients program 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 contracts as needed to reflect changes in services and funding.

#### u. Intensive Outpatient Program and Partial Hospitalization Program

Intensive Outpatient Program (IOP) and Partial Hospitalization Program (PHP) are non-24-hour treatment programs that are hospital-based or community-based. Both programs are designed to provide diagnostic and clinical treatment services in a structured and therapeutic milieu environment utilizing a Day Treatment Intensive (DTI) half mode for IOP and DTI full mode for PHP. IOP and PHP are intended to provide services to children and youth up to age 21 with specialty mental health needs inclusive of substance use cooccurring needs. IOP programming is traditionally offered multiple days a week after school hours, while PHP offers a full day curriculum during weekdays. Services include individual, group, and family therapy, psychiatric evaluation, medication management, peer support and/or recovery-oriented services.

In December 2021, the US Surgeon General reported staggering increases in mental health symptoms among youth demonstrated by a 25% increase in the proportion of high school

students who had considered suicide between 2009 and 2019. In February 2022, the Centers for Disease Control and Prevention reported that suicide was the second leading cause of death among children ages 10 to14 in 2020. In California, over 60% of youth with depression did not receive treatment in 2022.

In response to this urgent need, Governor Newsom implemented the Master Plan for Kid's Mental Health which initiated a major overhaul of California's behavioral health infrastructure focused on expanding access to community-based services from prevention through treatment and recovery. IOP and PHP are critical components of the continuum of care that are currently not available in the San Diego County public system and support the County's efforts to respond to the increased need for intensive mental health services by expanding capacity to serve children and youth. If approved, both programs will offer a critical alternative to higher levels of care as well as step-down for children and youth who have been discharged and are returning home from psychiatric inpatient or residential stays.

Today's action requests the Board to authorize competitive solicitations for the procurement of the Intensive Outpatient Program and Partial Hospitalization Program for an Initial Term of up to one year, with four 1-year Options, and up to an additional six months, if needed for each program, and to amend contracts as needed to reflect changes in services and funding.

# **Recommendation #2: Issue Single Source Procurements**

#### a. Electroconvulsive Therapy Services

On October 4, 2016 (01), the Board authorized single source contracts with Sharp Grossmont Hospital and Sharp Mesa Vista Hospital, and increased funding for the Electroconvulsive Therapy (ECT) program. Subsequently, on November 16, 2021 (05), the Board authorized single source contracts with Sharp Mesa Vista Hospital and University of California, San Diego. This program provides ECT services to patients who have been authorized by the County or County designee based on medical necessity. ECT services are provided on an outpatient or inpatient basis to San Diego County's Medi-Cal beneficiaries and indigent patients when it is medically justified and legally permissible.

This program qualifies for a single source contract to provide these services based on the Board Policy A-87 Competitive Procurement, Section 1D-3: The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources. There are limited providers able to offer ECT, which is administered in a licensed behavioral health facility with specialized equipment and by qualified staff, including an anesthesiologist and a psychiatrist. Since 2003, there has been ongoing efforts to identify hospitals that are willing and able to provide this service for Medi-Cal beneficiaries throughout San Diego County.

Today's action requests the Board to authorize new single source contract with Sharp Grossmont Hospital to provide ECT services 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 contracts as needed to reflect changes in services and funding.

# b. Medi-Cal Managed Care Psychiatric Inpatient Hospital Services

On November 13, 2018 (12), the Board authorized the single source procurement of Medi-Cal Managed Care Psychiatric Inpatient program services. This program provides psychiatric inpatient hospital services to adults ages 18 years and older, and older adults with acute symptoms who need 24-hour observation and intensive treatment. The program provides specialized services where the contractor possesses expertise, competencies, and resources that cannot be replicated.

This program qualifies for a single source contract to provide these services based on the following section of Board Policy A-87 Competitive Procurement: Section 1D-3: The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources. Regents of the University of California, San Diego (UCSD) and Paradise Valley Hospital provide psychiatric inpatient hospital services to eligible adults and older adults who experience a psychiatric emergency and require acute inpatient services to stabilize and ensure their safety and the safety of others. These facilities offer a secure environment where adults can regain their functioning and establish an aftercare plan before discharge and return to the community. The acute care provided is a critical component of the overall system of care and the unique continuum of services. While there are existing contracts established with other hospitals within the region that are qualified to provide these services, the contracts with Regents of the University of California, San Diego (UCSD) and Paradise Valley Hospital are planned to be reprocured in FY 2024-25. The award and extension of these contracts are recommended because these hospitals provide these specialized services and these hospitals possess expertise, competencies, and resources only available through the contractors that the County is currently in contract with. Services are provided countywide.

Today's action requests the Board to authorize new single source contracts with Regents of the University of California, UCSD and Prime Healthcare Paradise Valley, LLC program 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 contracts as needed to reflect changes in services and funding.

# c. Skilled Nursing Facility

On June 20, 2017 (13), the Board authorized the execution of a single source contract for the Skilled Nursing Facility (SNF) for Adults with Behavioral Health Conditions. Subsequently, on November 15, 2022 (28), the Board authorized to extend the contract term for this facility up to June 30, 2024, and up to additional six months, if needed. On November 13, 2018 (12), the Board authorized the single source procurement of a 24-hour SNF with Special Treatment Program Services (STP) and authorized the single source procurement of a 24-hour Medical, Nursing and Rehabilitative Services.

The SNF provides specialized mental health services utilizing their expertise, competencies, capabilities, and resources. The following programs qualify for a single source contract to provide the SNF specialized services based on the following section of Board Policy A-87 Competitive Procurement: Section 1. D3. The procurement is for services from a provider with unique knowledge, skill, or ability not available from other sources.

Today's action requests the Board to authorize new single source contracts with the following providers 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 contracts as needed to reflect changes in services and funding.

#### i. Skilled Nursing Facility for Adults with Behavioral Health Conditions

The Vista Woods Health Association LLC facility is a 24-hour Mental Health Rehabilitation Center providing augmented services for clients needing additional psychiatric support. While there are other SNF's that may be able to provide augmented services for clients needing psychiatric support, the Vista Woods Health Association LLC is the only facility in San Diego County which has a specialized neurobehavioral unit for adults diagnosed with neurocognitive impairment and traumatic brain injury. This facility provides specialized mental health services utilizing their expertise, competencies, capabilities, and resources. Currently, there is a growing population of clients with SMI. Services are provided countywide. In FY 2021-22, this facility served a total of 25 unduplicated clients. All these clients have been discharged to a lower level of care and no clients have returned to the facility after discharge.

#### ii. Skilled Nursing Facility with Special Treatment Program

The GHC of Lakeside LLC is a SNF with special treatment program (STP) beds designed to serve clients who have a severe psychiatric impairment and whose adaptive functioning is moderately impaired. This secured (locked) 24-hour facility has structured programs for clients with SMI. This is the only licensed SNF with STP facility in San Diego County. This facility provides care for San Diego County Mental Health Services to clients ages 18 years and over, with disabling psychiatric disorder requiring a 24-hour mental health rehabilitation center.

Additionally, this facility provides therapeutic services to mentally ill persons having special needs in one or more of the following areas: self-help skills, behavioral adjustment, and interpersonal relationships. The facility also includes pre-vocational preparation and pre-release planning services. Services are provided countywide. In FY 2021-22, this facility served a total of 123 unduplicated clients.

#### d. Short Term Residential Therapeutic Program

On October 17, 2000 (1), the Board authorized the implementation of the Children's Mental Health Initiative that allowed for an expanded continuum of comprehensive mental health care for children, adolescents, and their families which authorized the execution of new contracts for mental health services to children placed in State-licensed residential care programs. On January 24, 2017 (2), the Board authorized the single source procurement of residential services inclusive of Short-Term Residential Therapeutic Program (STRTP). This program provides therapeutic behavioral health services for children and youth, ages 6 to 21, who have experienced trauma resulting in mental health and/or co-occurring substance use conditions. Services include individual, family, group psychotherapy, medication management, case management, rehabilitative services, Intensive Care Coordination, Intensive Home-Based Services, collateral, and crisis intervention services. All local STRTPs with an active contract in good standing with Child & Family Wellbeing Department obtain the ancillary Behavioral Health Services contract for the specialty mental health services.

STRTPs qualify for single source contracts based on the following section of Board Policy A-87 Competitive Procurement: Section 1D-6 Continuity: The procurement is for goods and/or services where continuity of providers will provide efficiency or critical knowledge, and other providers of the goods and/or services cannot provide similar efficiencies or critical knowledge.

STRTPs are residential facilities that provide an integrated program of specialized and intensive care and supervision, services and supports, specialty mental health treatment services, and short-term, 24-hour care and supervision to children. These residential facilities are licensed by the Community Care Licensing Division of the California Department of Social Services. STRTP requires provision of both care and supervision, as well as Specialty Mental Health Services (SMHS). The Child and Family Well-Being/Child Welfare Services Department has the oversight of these facilities and establishes STRTP contracts for care and supervision while the program establishes companion contracts for the provision of the SMHS.

Currently, BHS has ten (10) STRTP contracts which are anticipated to be reprocured in FY 2024-25. If approved, this ensures efficient continuation of SMHS. Services are provided Countywide.

In FY 21-22, these STRTPs served a total of 372 unduplicated clients. Of the 217 discharged clients, 41% transitioned to a lower level of care while 85% avoided psychiatric hospitalization or re-hospitalization.

Today's action requests the Board to authorize single source contract with New Alternatives Inc. for Short-Term Residential Therapeutic Program 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 contracts as needed to reflect changes in services and funding.

# e. School-Based Outpatient Behavioral Health Services

On February 24, 2009 (8), the Board authorized the continuation of school-based contracts beyond their expiration dates based on school district choice. On January 24, 2017 (2), the Board authorized the single source procurement of School-Based Outpatient Behavioral Health Services program. The program provides culturally competent outpatient behavioral health services at designated schools, home, community, or office/clinic locations, as well as via telehealth. Services include individual, group and family therapy, case management, rehabilitative services, crisis intervention, medication management and outreach and engagement to children and youth, 21 years and below, and their families.

These programs qualify for single source contracts to provide specialty mental health services based on the following section of Board Policy A-87 Competitive Procurement: Section 1D-6 Continuity: The procurement is for goods and/or services where continuity of services will provide efficiency or critical knowledge, and other providers of the good/ and/or services cannot provide similar efficiencies or critical knowledge. The implementation of school-based mental health services began in 1995 with leadership oversight by the Board School Subcommittee. Beginning in 2002, the Board began awarding and extending school-based contracts through a single source process. The County has worked extensively with elementary, middle, and high schools, existing and potential providers, and consumers 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, BHS, in collaboration with school districts, has implemented a system of care that emphasized behavioral health services to be delivered on the campuses of schools, with services tailored to the needs of the students and schools. This collaboration and partnership between BHS and school districts resulted in significant expansion of behavioral health school-based services where the contractors possess expertise, competencies, resources, and a partnership with the school that cannot be replicated.

Currently, BHS has twenty-eight (28) school-based contracts, and thirteen (13) of these contracts listed on Attachment A are planned to be reprocured in FY 2024-25. If approved, this ensures efficient continuation of school-based behavioral health services. Services are provided Countywide.

In FY 21-22, school-based programs served a total of 7,362 unduplicated clients. Of 4,777 discharged clients, 96% avoided psychiatric hospitalization or re-hospitalization, and 63% participated in family therapy sessions. Additionally, at discharge, over 71% of clients whose episode lasted 30 days or longer were referred to a prosocial activity.

Today's action requests the Board to authorize single source contracts with existing contractors listed on Attachment A for school-based behavioral health services 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 contracts as needed to reflect changes in services and funding.

#### Recommendation #3: Authorization to Amend to Extend

# a. Placement Stabilization Services at Polinsky Children's Center (Contract #556401)

On October 4, 2016 (1), the Board authorized the procurement of Placement Stabilization Services at Polinsky Children's Center (PCC). In collaboration with CWS, this program supports the mental health needs of children and youth placed at PCC after removal from parent, guardian, caregiver, or other current living situation. This program is designed to identify mental health needs of children and youth ages 6 to 17 at PCC to ensure proper interventions are in place. A comprehensive behavioral health assessment is completed to identify needs and strengths for ensuring that the needed services are in place during and after their stay at PCC. Services include assessment sessions, treatment planning, individual therapy, group therapy, rehabilitation services, case management and crisis intervention.

Most children and youth placed at PCC have experienced some form of trauma due to chronic abuse, exposure to violence or recent placement disruption. The Placement Stabilization Services program identifies and supports emotional and behavioral needs of children and youth in order to enhance stability. In FY 2021-22, the program served a total of 137 unduplicated clients. Of the 135 clients that were discharged, 33% received group therapy services.

Today's action requests the Board to authorize an extension of the current contract with New Alternatives, Inc. for the Placement Stabilization Services at Polinsky Children's Center up to December 31, 2024, and up to an additional six (6) months, if needed.

# b. Breaking Down Barriers Initiative (Contract #559599)

Pursuant to Admin Code 401, the county's Director of the Department of Purchasing and Contracting authorized the procurement of the Breaking Down Barriers program. The Breaking Down Barriers program aims to reduce mental health stigma. The program includes providing outreach, engagement and education to persons who are members of unserved and underserved populations from culturally diverse populations. This also includes creating effective collaborations with other agencies, community groups, client and family member organizations, and other stakeholders to support the program's mental health stigma and discrimination reduction campaign. The target populations of this program include, but not limited to, Latino, African American, LGBTQ+, refugees, Middle Eastern, Asian/Pacific-Islander, Native American.

Services include educational workshops and events, discussions of mental health and provides outreach to unserved and underserved populations by linking them to appropriate mental health services and other helpful resources. The program also provides cultural humility/competency training to community members and providers who work with these populations.

Academic research and program utilization data have shown that individuals from diverse communities face unique challenges when accessing mental health services, including stigma, cultural barriers, and a lack of awareness of available resources. The program's

workshops, events, and outreach efforts aim to reduce these barriers and improve the overall well-being of underserved communities. Services are provided countywide. In FY 2021-22, the program provided prevention/early intervention services to 6,340 participants. There were 232 community presentations and 118 group sessions provided, both of which exceeded the annual goal of 200 community presentations and 90 group sessions. Of those participants served by the program, 96% demonstrated an increased awareness of mental health resources, knowledge of factors leading to mental health stigma, and strategies to reduce, and prevent the stigma of mental illness.

Today's action requests the Board to authorize an extension of the current contract with Jewish Family Service for Breaking Down Barriers Services up to December 31, 2024.

# c. Behavioral Health Administrative Services Organization dba Optum (Contract #553848)

On August 4, 2015 (4), the Board authorized the procurement of the Behavioral Health Administrative Services Organization (ASO). The County of San Diego (County) Health and Human Services Agency (HHSA) has ongoing and evolving needs for the ASO program to support healthcare services, including specialty Pre-Paid Inpatient Plan (PIHP) requirements. The services include provision of Clinical Management services to include a 24/7 Behavioral Health Access and Crisis Line (ACL) which supports the 9-8-8 National Suicide Prevention Lifeline, provision of centralized identification and referral of available Medi-Cal capacity at various levels of care, provision of Utilization Management for various levels of behavioral health services, and provision of screening staffing that supports AB 109 realignment programming and community reentry efforts. This also includes management of the BHS contracted Fee for Service (FFS) Provider Network, management and provision of administrative and clinical quality review of the Treatment Evaluation Resources Management (TERM) provider network, provision of claims and billing support for in and out of network providers and facilities, provision of Management Information System (MIS) support services including EHR administration functions and training, operation of a User Support and Assistance Desk, development and maintenance of the System of Care Provider database and directory, provision of Credentialing and Medi-Cal Provider Enrollment Services for County and contracted individuals delivery of behavioral health services, and provision of clinical referral support to the Mobile Crisis Resource Team.

In January 2022, the State Department of Health Care Services launched California Advancing and Innovating Medi-Cal (CalAIM), a multiyear initiative that aims to strengthen Medi-Cal, including the transformation of the Behavioral Health Delivery System. As local needs regarding CalAIM implementation are still evolving, approval of today's recommended action authorizing an extension of the existing ASO contract for three option years and up to six months, if needed, allows for support in areas of specialty health plan and DMC-ODS requirements to include but not limited to: Implementation of updates to CalAIM documentation requirements, alignment with payment reform and provider claims payment and adjudication requirements, updates to Utilization

Management functions to align with new medical necessity and documentation standards in FFS Provider Network and various levels of care, facilitation of justice-involved population initiatives rollout, as applicable, finalization of the Network Adequacy 274 electronic file requirement, and provision of centralized processes supporting health plan operations.

Additionally, an extension of the contract term allows continued infrastructure and staffing of ongoing essential projects related to the mental health plan electronic health record and technological updates and expansion of the 988 Suicide and Crisis Lifeline.

Today's action requests the Board to authorize an extension of the current contract with United Behavioral Health for OptumHealth Services up to June 30, 2027, and up to and additional six months, if needed.

#### d. Behavioral Health Collaborative Court (Contract #551670)

On November 16, 2021 (5), the Board authorized to extend the contract term for Telecare Behavioral Health Collaborative Court. Behavioral Health Collaborative Court is a Full-Service Partnership (FSP) and Assertive Community Treatment (ACT) team that provides clinical case management and mental health, substance-induced psychiatric disorder rehabilitation treatment, and recovery services to adults 18 years and older experiencing SMI in the San Diego area. Participants must be referred via the Collaborative Behavioral Health Court of San Diego County Superior Court. Services include intensive court services and community supervision by the Superior Court and Probation Department, mental health, and co-occurring treatment services, including medication prescription and management, case management, and support in attaining stable housing and employment.

The Behavioral Health Collaborative Court program is based on a collaborative court model, which has shown effectiveness in increasing success and decreasing recidivism as participants transition from custody to community. The program helps participants effectively manage SMI and co-occurring conditions. It also helps prevent future criminal activity while reducing the burden and costs of repeatedly processing individuals with low-level, non-violent offenses through the nation's courts, jails, and prisons. Services are provided countywide. In Fiscal Year 2021-22, this program served 142 unique clients. Of those served by the program, 76% showed improvement in their functional status and 48% showed improvement in their clinical status.

Today's action requests the Board to authorize an extension of the current contract with Telecare Behavioral Health Collaborative Court up to June 30, 2024, and up to an additional six months if needed.

# **Recommendation #4: Execute Cooperative and Revenue Agreements**

#### a. Department of Rehabilitation Cooperative Agreement

On January 26, 2021 (11), the board authorized the renewal of the Cooperative Agreement with the State Department of Rehabilitation (DOR). This agreement provides vocational

services for adults ages 18 years and older, experiencing SMI to support them in achieving placement in competitive employment. Services are provided through a contracted provider countywide, and include client assessment, short-term support services, and employment services.

In FY 2021-22, the Individualized Placement and Support (IPS) model was implemented to support the BHS Supportive Employment Strategic Plan. Services are provided countywide. In FY 2021-22, the program served a total of 153 unduplicated clients of which 71 individuals received an intake out of the goal of 76, 81 individuals received employment preparation out of the goal of 105, 63 individuals received job development and placement out of the goal of 93, and 27 individuals received job placement.

Today's action requests the Board to authorize execution of a renewal revenue agreement, upon receipt, with DOR for the employment services program for the period of July 1, 2024, through June 30, 2029, with an increase in revenue match dollars not to exceed \$0.4 million annually, and any amendments thereto, and future years' Agreements and amendments, provided terms, conditions, program services and funding are not materially impacted or altered. The current annual County cost for this program is \$240,948, a 33% percent revenue match that leverages State funding of \$473,631.

# b. Driving Under the Influence Program

On October 19, 1999 (4), the Board authorized the extension of revenue agreements with the current Driving Under the Influence (DUI) providers to continue each revenue agreement as long as the contracted provider is licensed by the State Department of Health Care Services (DHCS) for provision of DUI program services.

The DUI programs are alcohol and other drug education and counseling programs for convicted first and multiple offenders. The programs are State regulated and licensed, and legislatively mandated for persons convicted of driving under the influence of alcohol or other drugs.

The program goals are to reduce the incidence of DUI, DUI recidivism, and DUI-related crashes, injuries, and fatalities which are consistent with the Board's emphasis on addressing public health and public safety impacts associated with substance use and misuse. Under State law, the County is responsible for, among other things, monitoring the DUI program and ensuring that providers comply with all State licensing requirements and remain fiscally viable, thus avoiding any lapse in service. The cost of the programs, including the County's role in administering and monitoring revenue agreements with State-licensed providers, is funded entirely by DUI program participant fees collected by the providers. The County of San Diego may assess an amount not to exceed five percent of gross program revenue per annum for its administration and monitoring of the DUI programs per Title 9 Regulations.

**AGREEMENTS** 

Today's action requests the Board to authorize the increase of licensed DUI programs in San Diego County from three programs to four programs, with a new program to be in the HHSA North Inland region. Implementation of this additional program will provide much needed availability for DUI program services based in the region as the previous program in that region closed in June 2021. This will provide access equity for individuals needing to participate in person for services as they would not have to travel significant distances to attend program services in another region of the county. Through competitive selection, the County will recommend a provider for licensing to DHCS, and subsequently enter into a Revenue Agreement with the DHCS Licensed Program. Today's action also requests authorization to amend the Revenue Agreement, as required, for changes in services and funding, subject to approval of the Director, Health and Human Services Agency. The Revenue Agreement will continue as long as the contracted provider is licensed by DHCS for DUI program services. The current County revenue for existing three DUI programs is 5% of gross DUI program revenue, approximately \$270,000 annually.

#### LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's proposed actions support the County of San Diego's (County) 2023-2028 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,

USE "INSERT PICTURE" FUNCTION TO INSERT SIGNATURE

HELEN N. ROBBINS-MEYER Interim Chief Administrative Officer

ATTACHMENT(S)

Attachment A: Behavioral Health Services List of Single Source Contracts