



March 2, 2017
Behavioral Health Advisory Board
Meeting Minutes

P.O. BOX 85524
San Diego, CA 92186-5524
(619) 563-2700 • FAX (619) 563-2775/2705

MEMBERS PRESENT

Eyra Leeper – District 1
Joel San Juan – District 1
Carmelita Trujillo – District 1
Rebecca Hernandez, 2nd Vice Chair – District 2
Jenifer Mendel, Member-at-Large (ADS) – District 2
Deanne George – District 3
Ed Weiner – District 3
Tom Behr – District 4
Jerry Hall – District 4
John Sturm, 1st Vice Chair – District 4
Phil Deming, Chair – District 5
Dana Hamilton – District 5
Richard McGaffigan – District 5
K.C. Strang – District 5

MEMBERS NOT PRESENT

Michael Matthews – District 2
Helen Rees – District 2
Colin MacKinnon – District 3
Judith Yates, Member-at-Large (MH) – District 4

STAFF TO THE BEHAVIORAL HEALTH ADVISORY BOARD

Alfredo Aguirre, Director, County Behavioral Health Services (BHS) Division
Traci Finch, Administrative Analyst III, County Behavioral Health Services Division

I. CALL TO ORDER

The Behavioral Health Advisory Board (BHAB) meeting was called to order by Phil Deming, Chair, at 3:37 p.m. at the County Administration Center, 1600 Pacific Highway, San Diego, California 92101, Room 302/303.

II. INTRODUCTION OF BOARD MEMBERS

Members of the BHAB introduced themselves. Also in attendance was Christi Knight, Senior Policy Advisor to Supervisor Kristin Gaspar, District 3.

III. APPROVAL OF THE MINUTES – FEBRUARY 2, 2017

ON MOTION of John Sturm, seconded by Rick McGaffigan, the BHAB approved the minutes of February 2, 2017, as written.

AYES: 11 NAYS: 0 ABSTENTIONS: 1

IV. PUBLIC COMMENT

None

V. PRESENTATION – HHSA/BHS Budget Forecast – Alfredo Aguirre

Alfredo Aguirre introduced Andy Pease, HHSA Executive Finance Director, who presented a PowerPoint on “Behavioral Health Advisory Board Fiscal Update.” Discussion points covered:

- FY 2016-17 Adopted Budget
 - HHSA Budget by Program
 - BHS Expenditures
 - BHS Revenue Sources
 - BHS Realignment
 - Federal Revenue
 - Staffing by Program
- Federal and State Issues
 - Repeal of Affordable Care Act
 - Elimination of Coordinated Care Initiative (CCI) and In-Home Supportive Services Maintenance of Effort (MOE)
 - HHSA Realignment
- Cost Drivers and Budget “Sneak Peek”
 - Retirement Costs
 - County Labor Negotiations
 - Governor’s Budget
 - BHS 10-Year Roadmap Priorities
 - Project One For All (POFA)
 - Long Term Care Needs
 - Drug Medi-Cal Waiver
 - No Place Like Home
 - MHSA
- Budget Timeline and Key Dates
 - Funding Sources & Trends
 - Financial Planning Cycle Next Steps
 - Key Dates

BHS to follow up on the following questions raised by BHAB members that could not to be answered during the presentation:

1. What percent of the BHS/alcohol and drug services budget is dedicated to prevention?
2. Is there any information about the dollars spent on undocumented immigrants?
3. There is concern regarding General Relief reduction. Can clients be billed for medical services?

VI. ACTION ITEM – MHSA Cycle Three and Four Innovation Plan – Alfredo Aguirre/Adrienne Collins Yancey)

California’s Proposition 63, the Mental Health Services Act (MHSA), was approved by California voters in November 2004 and became effective January 1, 2005, providing funding for expansion of mental health services in California. MHSA consists of five program components designated by the State: Community Services and Supports, Prevention and Early Intervention, Workforce Education and Training, Innovation, and Capital Facilities and Technological Needs. Pursuant to MHSA and California Welfare and Institutions Code Section 5846, County mental health programs are required to design and implement innovative programs and to increase access to and improve the quality of mental health services. Plans for each component were submitted to the State and implemented following Board of Supervisors approval on December 13, 2005 (1).

Mental Health Services Act Innovation Component

The County of San Diego is entering Cycle 4 of the Innovation component of the County’s MHSA Plan. Innovation programs are time-limited projects that test promising practices to improve systems of care. The Innovation Program and Expenditure Plan, 2017-18 through 2023-24, includes current programs (Cycle 3) with an evaluation component, previously approved by the Board of Supervisors on October 28, 2014 (9), and proposals for five new projects to be implemented during Fiscal Years 2017-18 through 2023-24, all within the scope of available funding. The proposals have been considered by stakeholders

through community engagement forums and the required 30-day public review period. As mandated by MHSA, the Innovation programs, including changes to previously approved programs, require review and approval by the Board of Supervisors before being submitted to the California Mental Health Services Oversight and Accountability Commission (MHSOAC). MHSOAC is required by statute to review and approve the Innovation projects before a County can begin implementation.

California Mental Health Services Authority

The California Mental Health Service Authority (CalMHSA), a joint-powers authority (JPA), was established to expedite implementation and administration of statewide Prevention and Early Intervention (PEI) projects funded under MHSA. On January 25, 2011 (8), the Board authorized San Diego County's membership in CalMHSA through a Joint Exercise of Powers Agreement (JEPA) in order to jointly develop statewide or regional mental health projects with other counties (Phase I). To maintain successful PEI projects, CalMHSA is requesting that participating counties continue supporting statewide PEI activities, including a three-year commitment to secure outside funding to fully implement Phase III of a statewide "Forging California's Culture of Mental Wellness" campaign.

Approval of this item's recommended action authorizes new procurements and contract amendments to expand and extend MHSA Innovation programs and evaluation for mental health services to children and youth, transition age youth (TAY), adults, and older adults; and authorizes payment to CalMHSA to support fund-development for the statewide PEI campaign. These actions support the County's adopted *Live Well San Diego* vision by enhancing access to services, promoting health and well-being in children, adults and families, and encouraging self-sufficiency.

It is, THEREFORE, staff's recommendation that the Board support the recommendations to: accept and approve the proposed MHSA Innovation and Program and Expenditure Plan, 2017-18 through 2023-24 and submit the proposals to MHSOAC for approval; authorize issuance of competitive solicitations for new services; authorize amendments to existing contracts to extend and expand existing services; and authorize payments to CalMHSA to support fund-development for the statewide PEI campaign.

PUBLIC HEARING:

No forms were submitted or comments made by the public.

DISCUSSION:

When the innovations budget comes forward, can the long-term projected cost be added? Does the amount that we're increasing come out of the Innovation fund, or does it come out of a surplus?

- Innovation is a separate category of funds. The County is required by the MHSA to take 5% of its allocation from Community Services and Support (CSS) and Prevention and Early Intervention (PEI) and set it aside for Innovation funding. The County has three years once funds are received to spend it or the funds are reverted back to the state. This is a separate dollar amount that cannot be used for any other types of programs other than Innovation.

If funding is for only five years, isn't there the risk of double dipping when programs have to end before the 5-year cycle of funding?

- Estimates are built in which allows the County to plan ahead and project out for Cycle 4 dollars.

How are evaluations funded?

- For every program listed in the handout accompanying the Board Letter, five percent of the dollar amount is used for the evaluation of the program. This is a separate contract with the University of California, San Diego and is highlighted in the Board Letter.

Will Innovation 12, Family Therapy Participation Project Overview have a LGBTQ component built into it?

- The last dot point under Research Questions leaves room for incorporating varying racial/ethnic, cultural and linguistic backgrounds. In addition, the County is in the process of procuring a County-wide program that is going to be specific in helping us with expertise throughout our system in serving the LGBTQ community. Components of Innovation 12 are already embedded in a number of the County's school-based and community clinics.

Are all the programs contracted out to private contractors, or are any run by the County employees themselves?

- All programs are contracted out.

ON MOTION of John Sturm, seconded by Rick McGaffigan, the BHAB voted to support the recommendations, with discussion as noted above.

AYES: 12 NAYS: 0 ABSTENTIONS: 0

VII. DIRECTOR'S REPORT – Alfredo Aguirre, Director, Behavioral Health Services

- HHSA Board Letter on Fees
 - On March 21, 2017, Health and Human Services Agency (HHSA) will submit a comprehensive fee Board Letter for Behavioral Health Services, Child Welfare Services and Public Health Services to amend ordinances related to HHSA fees with the goal of executing a full cost recovery proposal. Seventy-six fees are being brought forward, of which 10 are related to BHS. Between 1993 and 2014, HHSA has come forward at various times—by individual program—with fee and/or rate adjustments. This Board Letter will be one comprehensive Agency Board Letter, with the intent to update the Board of Supervisors annually. The following information is being shared with the BHAB as an FYI on the BHS fees/rates impacted by this Board Letter:
 - In BHS's case:
 - A total of 10 BHS fees/published rates were reviewed for inpatient and outpatient mental health services.
 - We are deleting one fee (Patient Advocacy Program) as the fee is a small amount, and we do not want it to be a barrier for patients to pursue advocacy services.
 - We are updating the Edgemoor private pay fee (most people are eligible for Medi-Cal, so it will not impact them), and it may impact 1-2 patients a year increasing from \$625 to \$681 a month.
 - We are aligning eight inpatient/day service rates to section 239 of the ordinance, which will allow us the ability to claim to the state published Medi-Cal rate. This will allow us to increase our published rates to the state published rates, with the potential to draw down about \$4.8 million of additional federal dollars—with no impact to customers.
 - If approved, the overall additional BHS revenue is estimated at \$4.9 million and, with the exception of Edgemoor, are federal funds and no impact to our customers. For Edgemoor, it may add \$40,000 a year in revenue if we had an estimated 730 bed days of private pay.
 - An electronic copy of the Board Letter will be sent to the BHAB as soon as it is docketed.
- Suicide Prevention Workgroup: BHS Update on Feasibility Report – Holly Salazar/Dr. Michael Krelstein
 - Holly Salazar and Dr. Michael Krelstein recapped the timeline of actions of the Suicide Prevention Workgroup and recommendations and presented a PowerPoint on "Suicide Prevention Workgroup Feasibility Update" that detailed the status to date of the seven recommendations that, after undergoing a feasibility analysis, were found to have adequate resources to be implemented.
 - Handout: Suicide Prevention Workgroup Executive Summary
 - The complete BHS Feasibility Report can be found at the BHAB website located on the Network of Care: <http://www.sandiegonetnetworkofcare.org/mh> under Behavioral Health Advisory Board, Reports.

- Alfredo Aguirre attended the National Association of County Behavioral Health & Developmental Disability Directors (NACBHDD) Legislative Policy Conference in Washington, D.C., February 25-March 1. He presented on "The California Story: How Proposition 63 Transformed Our Community Mental Health System" along with Kirstin Barlow, the Executive Director of California Behavioral Health Directors Association (CBHDA).
- The question was raised as to how the County plans to deal with PTSD, anxiety and stress among undocumented immigrants in our community in light of the recent immigration laws and racist acts and its impact to families. Will the County be allocating any resources? Alfredo Aguirre explained that he has been in contact via email with the Superintendent of the Chula Vista School District. BHS will be collaborating with them on mental health and trauma informed resources in the schools.

VIII. CHAIRPERSON'S REPORT – Phil Deming, Behavioral Health Advisory Board Chair

- Data Notebook Workgroup Update (Ed Weiner)
 - Ed Weiner provided an update from the workgroup meeting held February 13. Responses from the other workgroup members as well as those from County staff on the nine questions were compiled, and the workgroup will meet again this Monday, March 6. After that meeting the group will put together an edit for BHAB review before the submission deadline of March 31.
- HHSA Advisory Board Chairperson's Meeting (John Sturm/Judith Yates)
 - Tabled until next BHAB meeting.
- Community Forum on Homelessness in Oceanside (Dana Hamilton)
 - Dana Hamilton attended a community forum on homelessness on February 13 hosted by the Oceanside Charitable Foundation. The purpose of the forum was to discuss the issues and what the local community can do to make a difference. Alison St. John, KPBS Senior Metro Reporter was the Moderator for the night, and panelists included individuals from the service provider perspective, city perspective, business perspective and police perspective. More stats on homelessness in the various regions can be found at the San Diego County Regional Task Force on the Homeless website: <http://www.RTFHSD.org>.
- The BHAB is looking ahead for a date for the 2017 BHAB retreat. Communication will be going out soon to poll BHAB members on October date preferences (Saturdays).
- Phil Deming will be working closely with the newer members of the BHAB to answer their questions about BHAB processes. He will convene briefly after regular BHAB meetings, and those not able to stay afterwards can send their questions to Traci Finch.

IX. ADVOCATE REPORTING

None

X. BOARD MEMBER ANNOUNCEMENTS

Congratulations to Alfredo Aguirre on his appointment by Governor Brown to the State's No Place Like Home Advisory Committee. The appointment will support both the County's ongoing commitment to comprehensive innovative homeless programming and our local challenges with a growing influx on new homeless persons.

XI. MEETING ADJOURNMENT

ON MOTION of Jenifer Mendel, seconded by Jerry Hall, the meeting adjourned at 6:06 p.m.
AYES: All

Brown Act Procedure: *As required by California Government Code 54950 et seq. (Ralph M. Brown Act), a copy of the packet of information that was mailed to Behavioral Health Advisory Board members at the point of posting of this agenda has been placed at the reception desk at 3255 Camino Del Rio South, San Diego, CA 92108, for public inspection, and is available at the site of the meeting for public inspection. Members of the public wanting their own copy of the advance materials may request them under Government Code 6250 et seq. (Public Records Act) and receive them on payment of copying charges of \$0.20/page, and actual mailing charges, if mailing of the material is requested. If you are planning to attend and need special accommodations, you must call Jackson Alexander at (858) 505-6521, at least three days in advance of the meeting.*

Respectfully submitted,



Allison V. Williams, Secretary to the Director
Behavioral Health Services

Reviewed by,



Traci Finch, Administrative Analyst III
Behavioral Health Advisory Board Support Staff

Approved by,



Phillip R. Deming, Chairperson
Behavioral Health Advisory Board

For BHAB documents, agenda, minutes and Director's Reports, please read or download from the Network of Care Behavioral Health Advisory Board at:
<http://sandiego.networkofcare.org/mh/content.aspx?id=257>