

# Behavioral Health in Orange County

A year in Review, A look Forward



MENTAL HEALTH  
AND RECOVERY  
SERVICES

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BHS Director  
BHAB Annual Retreat & Strategic Planning  
1/10/24



# Who we Served 2023



- Pts Served- 38,834
- Crisis Calls Received- 12,397
- CAT/PERT Deployments – 10,255
  - Adults – 6,178
  - Children & Youth – 3,199
  - PERT – 878

# Major Accomplishments 2023



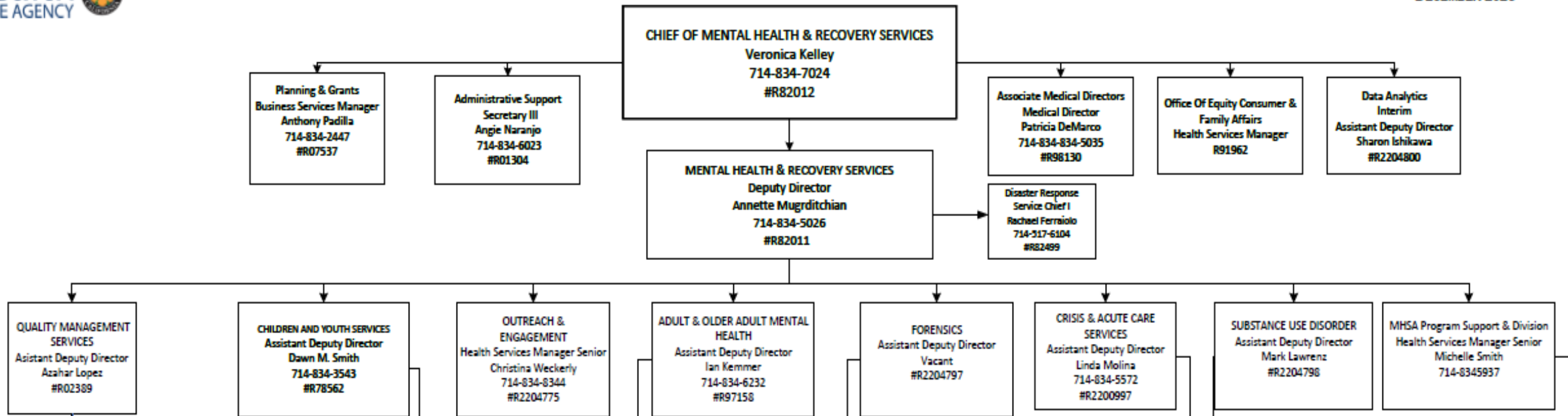
- Reorganization
- Opioid Abatement
- CalAIM
- CARE Act
- SB43
- Mobile Crisis Benefit
- BHSA Modernization

# Reorganization



## MENTAL HEALTH AND RECOVERY SERVICES

DECEMBER 2023



# Opioid Abatement



- Created a plan for received settlements
  - Distributors: \$5.6M (SFY22-23)
  - Janssen: \$3.4M(SFY22-23)
- Plan included;
  - MAT and OD Prevention kits from Custody for OCSD
  - POSC- funding 2 positions
  - Kloxxado and Narcan purchase and deployment
  - Opioid Education
  - Fentanyl Is Forever OC Campaign launched

# CalAIM



- No Wrong Door- expanded access
- Transition Tools-Beneficiary Access Line implementation of screening tool, Program implementation of transition tool and coordination with CalOptima to receive from them, improved data exchange with MCP
- Recovery Incentive-CLIA waivers for all applicable clinics- Starting with Santa Ana clinic
- Payment Reform- New HICPC codes transitioned
- Documentation Reform-Implemented 7 domain mental health assessment, progress note updates, problem list, group therapy note revisions
- BHQIP- Participating to help build infrastructure for CalAIM
- BH Administrative Integration

# CARE ACT



- Cohort 1 County bimonthly meetings at the State
- Member of State Work Group bimonthly meetings
- Hired all staff for new CARE
- Training staff on LEAP- ongoing
- Participated in Data Dictionary
- Set up State required reporting in Chorus
- Multiple meetings/interviews
- Contracted for FSP for CARE
- Bagan 10/2/23

# CARE Numbers to date



CARE Assessment & Linkage Team	10/1/23-10/31/23	11/1/2023-11/30/23	12/1/2023-12/31/23	1/2/24-1/5/24	1/8/24-1/12/24	Totals
<b>Petitions Received</b>						
Court Received Petitions	12	27	4	2		45
Petitions BHS asked to review for Prima Facie for Court	3	19	3	3		28
Petitions BHS Received from Court	6	9	4	1		20
<b>Demographics known for petitions received by BHS</b>						
Homeless	3	6	5	1		15
Medi-cal/Medicare	6	2	1			9
Private Insurance	1	1				2
<b>Referral Source for Petitions Received from Court by BHS</b>						
An adult parent, spouse, sibling or adult child of the client	4	6	1			11
Self		1		1		2
Director of a Hospital/designee	1	1	2			4
Director of public/charitable organization providing BH or institution respondent resides						0
County Behavioral Health		1	1			2
Public Guardian/GAL	1					1
APS						0
A treating or supervising licensed MH treatment provider						0
Responder (firefighter, paramedic, mobile crisis, homeless outreach)						0
<b>Total Referrals</b>	<b>6</b>	<b>9</b>				
<b>Initial Court Disposition-14 day for Petitions Received by BHS</b>						
Continued	2	8	6	5		21
Dismissed			3			3
<b>Court Disposition for Petitions Received by BHS</b>						
Petition Dismissed		1	3			4
Did not meet criteria						0
unable to locate			1			1
Criteria not met		1				1
Engaged in services prior to referral			2			2
Extended Hospitalization						0
Extended Incarceration						0
Entered into Care with Care Plan			2	1		3



# SB43- Changes to Grave Disability



- Achieved deferment of definition change until 1/1/26
- Requested to do “Needs Assessment” for D5 by 2/27/24
- Meetings ongoing with HASC, OCSD, OC Police Chiefs, PG

# Mobile Crisis Benefit



- DHCS/CMS negotiated new Medi-Cal specialty benefit
- Completed state readiness assessment
- Developed required training for all crisis response staff
- Created dispatch standardized dispatch tool
- Utilizing standardized Crisis Assessment Tool with intent to incorporate DHCS standardized crisis assessment tool
- Created local partnership & engagement in addition to CIT Steering Committee, public awareness campaign via OC Navigator
- Developed P&Ps on transport- purchasing own vehicles
- Developed policies for engagement with 911, 988 and MCPs
- DHCS approved our implementation plan and BHS started the benefit 12/29/23

# MMCS Benefit

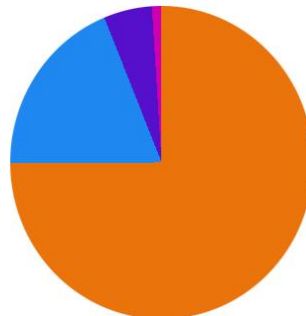


## CAT



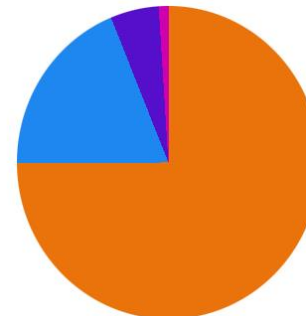
## Call Breakdown

12/29/2023 - 01/01/2024



- 174 75% Informational
- 45 19% Adult CAT
- 12 5% CYBH CAT
- 1 0% PERT CAT
- 14 6% O&E

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# BHSA Modernization



- For the past year, BHS has been working with the Author, the Administration, the BOS and CSAC/CBHDA on leveraging our success with MHSA to get an off ramp for FSPs
- Required cuts to current funding will be \$150M for MHSA with an additional \$20M for MSA at BeWell
- Mitigation planning all year- plan shared with CEO Fiscal and now will share with BOS- then providers impacted and BHAB

# Looking Ahead 2024



- Opioid Abatement-
  - plan is fluid- moving forward to craft a new plan
- CalAIM-
  - Payment reform implementation starts 7/1/24- all contractors will be negotiating new rates with BHS and all contracts will become FFS and will be amended.
  - Be implementing a HIE as a requirement of BHQIP
  - Determine if will be early adopter for BH administrative integration
- CARE ACT-
  - further implementation and possible clean up language to attend to challenges

# Looking Ahead 2024



- SB43-
- Complete needs assessment of County due to BOS 2/27/24
  - Develop P&Ps for designation of individuals and facilities
  - Recruit
  - Changes to court determination of LPS ending as no standard for involuntary SUD treatment
  - Develop how medical services will be evaluated and assessed- outside our scop
  - Determine how to fund- unfunded mandate
  - Add providers for LTC that accept comorbidities and SUD
  - Determine how to bill commercial insurance for these new services

# Looking Ahead 2024



- BHSA Modernization
- Reorganize to prepare for BHSA Modernization
- Develop programming as noted in SB46 and SB809- drug education for offenders with courts and probation- not funded
- BeWell Irvine Campus
- Implement BHBH
- Apply for BHCIP 6
- Apply for BHBH3
- Recruit & Retain
- Peer certification
- Early Access Stabilization Services (EASS)- pre JBCT

# MHSA Modernization Hypothetical Models



# Background



## **Behavioral Health Modernization was announced on March 19, 2023, as part of Governor's State of the State Tour**

- Modernize MHSA
  - Update the categorical funding components of MHSA, update name to BHSA, serve SUD clients, focus on homeless, conservatorship, and system involved (child welfare and justice involved)
  - Include on March 5, 2024, ballot as Proposition 1
- Authorize a New General Bond
  - \$6.4B to fund community behavioral health residential settings and permanent supportive housing
  - Include on March 5, 2024, ballot as Proposition 1
- If ballot passes, the Behavioral Health Services Act (BHSA) has various effective dates and requires an approved BHSA Integrated Plan for FY 2026/27 through FY 2028/29 by July 1, 2026.
- Integrated Plan requires inclusion of ALL behavior health program and funding

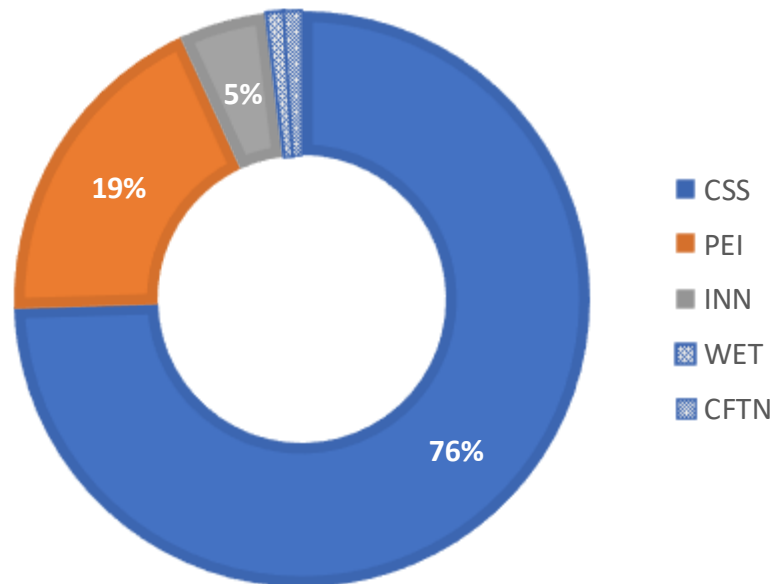
# MHSA Modernization Summary

Modified from 5 Categorical uses to 3 Categories:

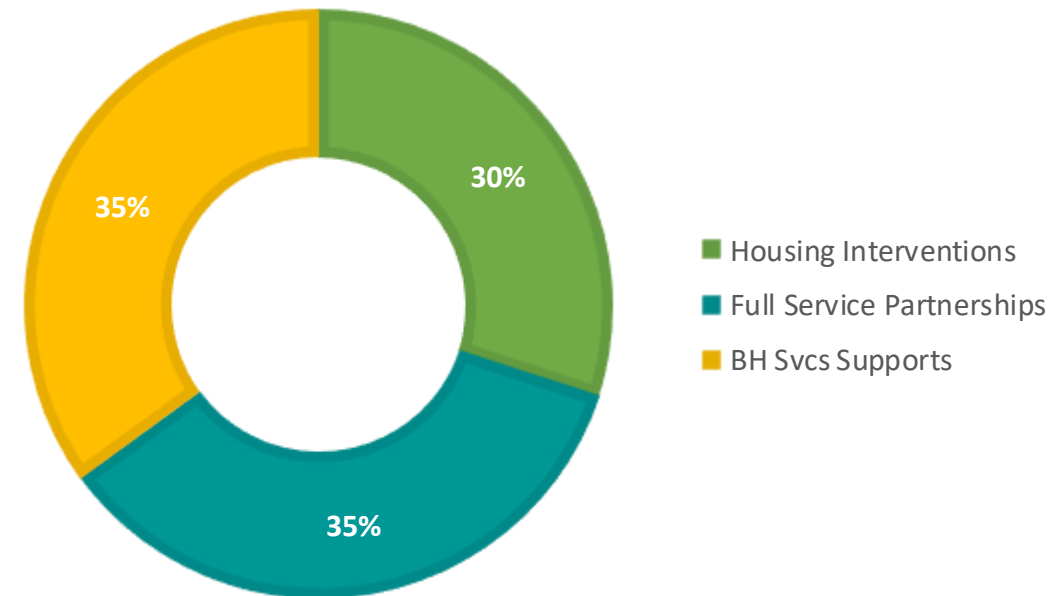


## Revenue Breakup

MHSA - CURRENT MODEL



BHSA - PROPOSED MODEL

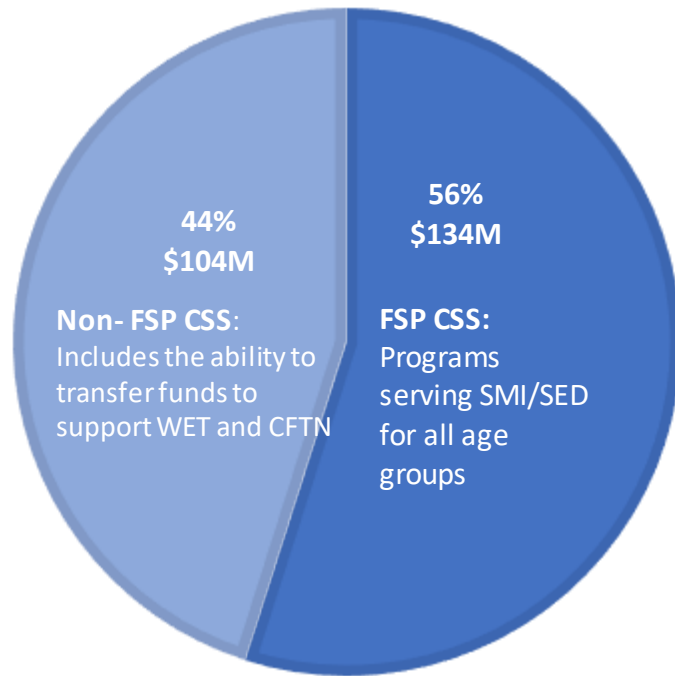


# Full Service Partnership Model

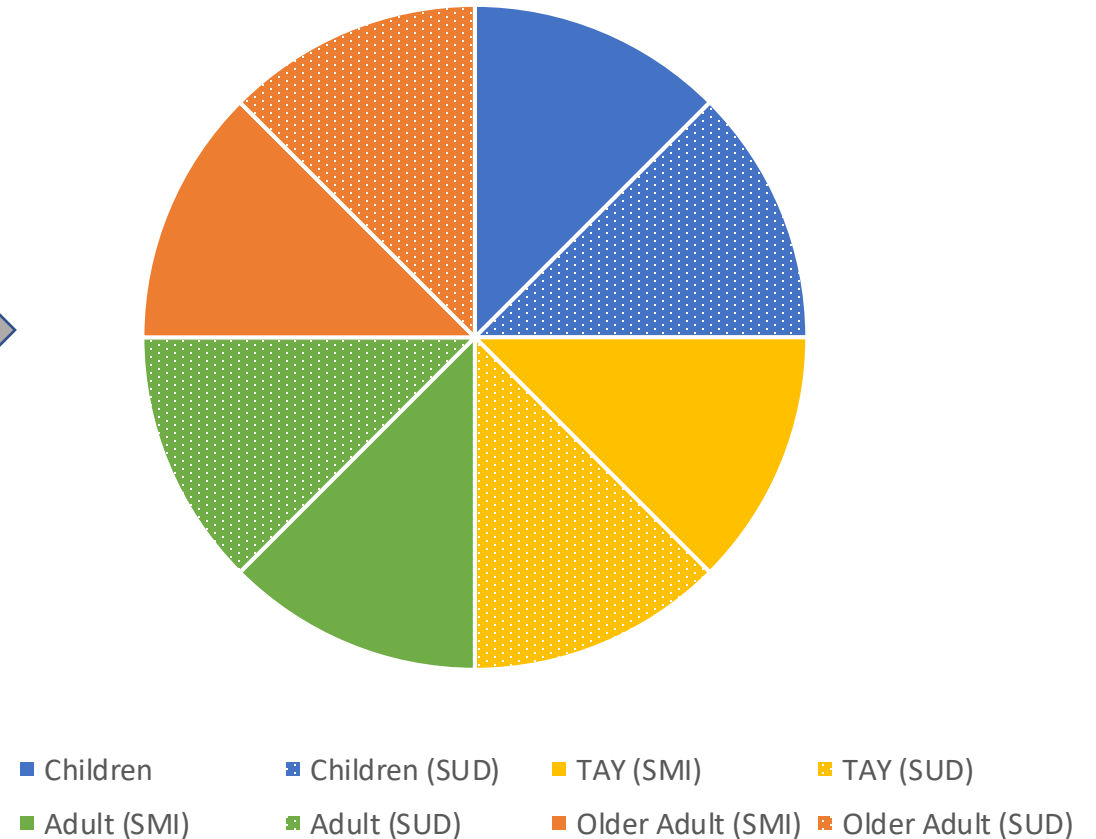
(not based on actual models)



**FY 25/26 BUDGETED CSS DISTRIBUTION**



**PROPOSED FULL SERVICE PARTNERSHIP EXAMPLE (35% of Total)**

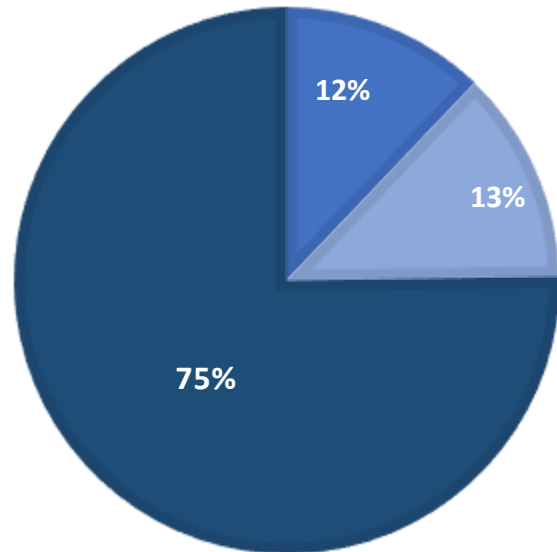


# Housing Intervention Model

(not based on actual models)

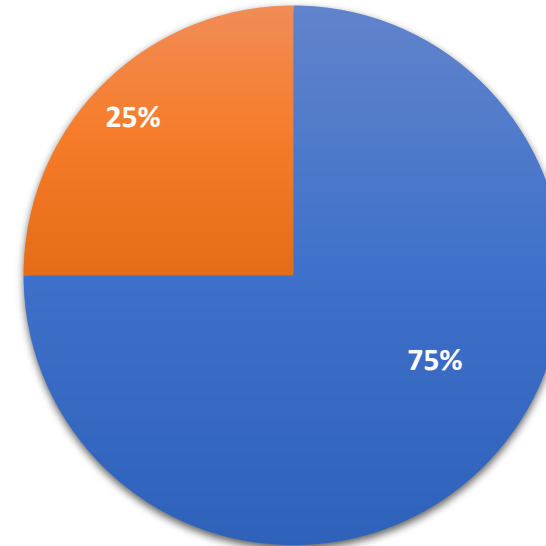


CURRENT CSS HOUSING INVESTMENT



■ Bridge Housing   ■ Year Round   ■ CSS Housing

HOUSING INTERVENTIONS (30% OF TOTAL BHSA)



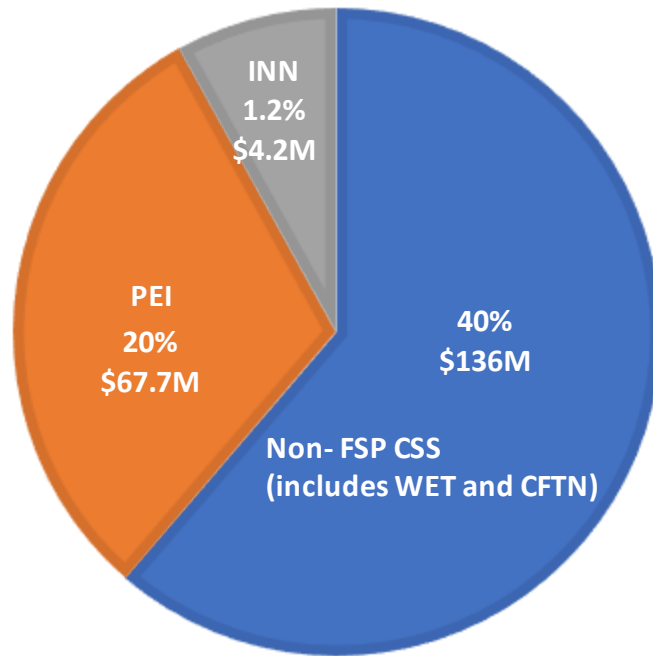
■ Housing Subsidies   ■ Capital

# Other Behavioral Health Supports Model

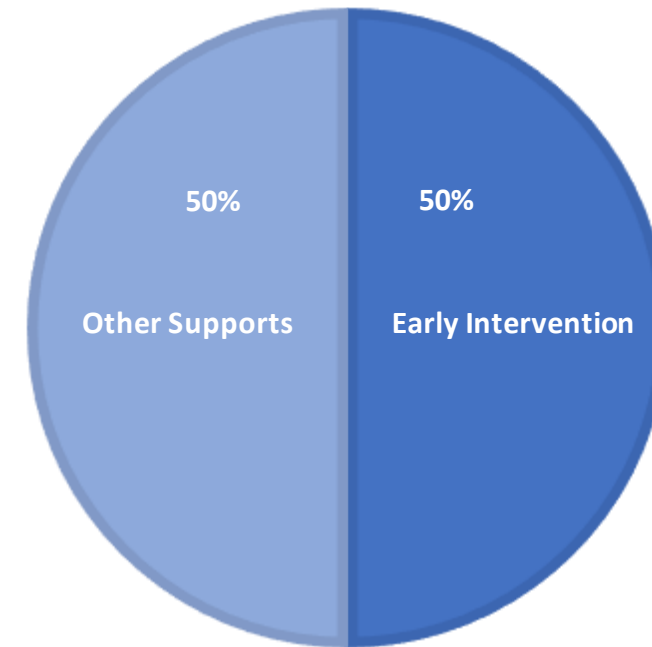
(not based on actual models)



PERCENTAGES BASED ON FY 25/26  
TOTAL PLAN BUDGET  
OTHER SUPPORTS CATEGORY



OTHER BEHAVIORAL HEALTH SUPPORTS  
(35% OF TOTAL)



# Thank you!

