

Yolo County Health and Human Services Agency

BEHAVIORAL HEALTH SERVICES

Local Mental Health Board Mental Health Director's Report May 23, 2016

Substance Use Disorder Prevention, Treatment and Recovery Site Visit

On April 26, 2016, the Department of Health Care Services did an on-site review of our policies, procedures, and programs associated with Drug Medi-Cal and the Substance Abuse Prevention and Treatment block grant. The site visit is similar to the EQRO visit associated with our mental health services. The State will be issuing a report within 30 days which we can share with the Board. They also offered technical assistance moving forward on areas where we may be deficient.

HHSA Director

On May 3, 2016, Karen Larsen was appointed as HHSA Director for Yolo County. Karen will maintain her Mental Health Director and Alcohol and Drug Administrator designation and continue to stay closely linked and leading behavioral health efforts locally. Karen has appointed Sandra Sigrist as the Adult and Aging Branch Director and feels confident in Sandra's ability to continue the work of integration and forward progress for our adult and aging services.

NAMI Potluck

On May 4, 2016, Karen Larsen, Michele Kellogg, Diana White, and Dr. Leigh Harrington attended the NAMI-Yolo meeting to provide an overview of the public mental health system, our successes, challenges, and plans for the future. The conversation was rich and rewarding and reminded us all why we work in this field.

Mental Health Court

On May 9, 2016, both probation and HHSA submitted requests to the Community Corrections Partnership (CCP) requesting funding for staffing to expand Mental Health Court. The CCP had concerns regarding funding sustainability associated with the request and we will be re-visiting at the June 13 CCP meeting.

Certified Community Behavioral Health Clinic

On May 13, 2016, Yolo County submitted a letter of interest to become a Certified Community Behavioral Health Clinic (CCBHC). CCBHC could completely transform the mental health system for consumers and the counties serving them. Services would be comprehensive, including physical health care and would provide more robust funding for counties. The benefits to the County associated with becoming a CCBHC: Enhanced federal share of costs for outpatient behavioral health services for people other than Medi-Cal expansion population for which federal share is now 100% (share of costs goes from 50% to 65% for two years starting in July 2017 with a likelihood that federal law will allow this to be extended). This means that for \$1 million of services that now require \$500,000 of County funds, there would only be \$350,000 required. The freed-up \$150,000 could be used to purchase \$300,000 in new services, so that \$1 million becomes \$1.3 million with the same County costs! Statewide that could be more than \$1 billion of new federal funding over two years. It comes with a prospective payment system (PPS) meaning that payment is guaranteed based upon estimated costs for each individual in each of several categories based upon level of function on a monthly all inclusive payment served each month. There are no cost reconciliations. There are performance bonus payments and a much more liberal definition of eligible costs. Unfortunately, only two counties in California will be chosen to

participate in the pilot and we aren’t sure we can do the heavy lifting necessary to become certified by October 1, 2016.

Child Welfare Mental Health Services

In an effort to improve our penetration rates for foster youth needing mental health services and improve our compliance with Katie A mandates, we will be shifting internal staff from our Transition Aged Youth (TAY) team into integrated Child Welfare Services teams. Existing TAY clients (approximately 60) will be served through a combination of contract providers (Turning Point, Yolo Family Service Agency, and CommuniCare) and our internal Full Service Partnership (FSP) and Moderate Teams, depending on individual needs.