



Legislation Details (With Text)

File #: 21-0713 **Version:** 1

Type: Agenda Item **Status:** Approved

File created: 4/22/2021 **In control:** Board of Supervisors

On agenda: 6/22/2021 **Final action:** 6/22/2021

Title: Health and Human Services Agency recommending the Board:
 1) Adopt El Dorado County’s Mental Health Services Act Annual Update for Fiscal Year (FY) 2021-22;
 and
 2) Authorize implementation of the FY 2021-22 projects within the Annual Plan Update.

FUNDING: 82% Mental Health Services Act funds, 14% Federal Medi-Cal, 2% Federal Block Grants, 1% Realignment/State General Fund, and 1% Miscellaneous/Fee-for-Service.

Sponsors:

Indexes:

Code sections:

Attachments: 1. A - FY 2021-22 MHSA Annual Update, 06-22-2021, 2. B - FY 2021-22 MHSA Update BOS Presentation, 06-22-2021

| Date | Ver. | Action By | Action | Result |
|-----------|------|----------------------|----------|--------|
| 6/22/2021 | 1 | Board of Supervisors | Approved | Pass |

Health and Human Services Agency recommending the Board:
 1) Adopt El Dorado County’s Mental Health Services Act Annual Update for Fiscal Year (FY) 2021-22;
 and
 2) Authorize implementation of the FY 2021-22 projects within the Annual Plan Update.

FUNDING: 82% Mental Health Services Act funds, 14% Federal Medi-Cal, 2% Federal Block Grants, 1% Realignment/State General Fund, and 1% Miscellaneous/Fee-for-Service.

DISCUSSION / BACKGROUND:

In 2004, California voters passed Proposition 63, the Mental Health Services Act (MHSA). MHSA imposes a one (1) percent tax on personal income in excess of \$1,000,000. The funds from the tax are distributed to California counties and are intended to transform the Mental Health System into one that is consumer and family driven, recovery-oriented, accessible and culturally competent, and a system that offers services appropriate for the population that is served. MHSA requires counties to prepare a three-year program and expenditure plan, known as the MHSA Three-Year Program and Expenditure Plan. The plan has five (5) components intended to address specific goals for priority populations and other key community mental health needs, which are Prevention and Early Intervention (PEI), Community Services and Supports (CSS), Innovation (INN), Workforce Education and Training (WET), and Capital Facilities and Technology Needs (CFTN).

Each year, Counties are required to follow a formal process for providing an annual update to the Plan, which requires Board approval. The purpose of the Update is to review the Plan's existing projects and, based upon their status or other identified needs, to make additions, modifications, or deletions to the Plan. Three-Year Plans and Updates are developed with input from community members and stakeholders through a public planning process, providing opportunities for interested

parties to discuss mental health policy, program planning, implementation, monitoring, quality improvement, evaluation, and budget allocations.

This year, the draft Fiscal Year (FY) 2021-22 Update was publicly posted for a 30-day review and public comment period on April 17, 2021. At the close of the 30-day period, the Behavioral Health Commission conducted a public hearing to receive any additional input from the community. Any substantive comments that were received about the draft Update during the 30-day comment period or the public hearing process were summarized and included in the final Update. At the recommendation of the Behavioral Health Director, 4 of the 5 Plan components of (PEI, CSS, INN, and CFTN) experienced some modifications to their areas. The WET component did not experience any updates.

Component 1: PEI projects are designed to prevent a mental illness from becoming severe and disabling, to the extent possible. The included PEI projects meet the PEI regulations as amended in 2018 and Senate Bill 1004 (2018).

New PEI Projects:

1. TimelyMD, a telehealth project that will allow Lake Tahoe Community College students access to scheduled appointments with a mental health professional. The budget is \$40,000 a year.
2. A pilot project to establish a Student Wellness Center in a middle school with funding of \$150,000 a year. Once the Plan is approved, a process for identifying an appropriate middle school will be undertaken to identify a site for housing this pilot. If additional MHSA funding is available, it could potentially be used to fund an additional pilot at another middle school.

Modified PEI Projects:

1. National Suicide Prevention Hotline - budget increase of \$2,889 to cover the increased call volume and associated costs.
2. Lesbian, Gay, Bisexual, Transgender, Queer or Questioning, Intersex, and Asexual and Allied (LGBTQIA) - increase in budget from \$10,000 to \$50,000. This increase in funding is a reflection of recommendations made by members of the Behavioral Health Commission. Members of the Behavioral Health Commission requested an increase to \$50,000, which was accepted by the MHSA Project Team.
3. Suicide Prevention and Stigma Reduction Strategy - \$70,000 increase in the overall strategy to assist with implementation of the Suicide Prevention Strategic Plan. The total budget for this project is \$140,000. This increase will not require a budget decrease to other projects.
4. After careful analysis of historical expenditures and an examination of project outcomes in meeting project goals, the following projects have a decrease in budget: Expressive Therapies (decrease in funding from \$100,000 to \$75,000); Wennem Wadati: A Native Path to Healing (decrease in funding from \$127,500 to \$100,000), Primary Project (administered by Tahoe Youth and Family Services - decrease in funding from \$77,000 to \$40,000), Goods and Services to Promote Positive Mental Health (decrease in funding from \$75,000 to \$50,000) and Juvenile Justice (decrease in funding from \$550,000 to \$400,000). The MHSA Team will continue to provide technical assistance to the contracted providers of these projects.

Component 2: CSS, focuses on the development of recovery-oriented services for children, youth, adults, and older adults with serious mental illness.

Modified CSS Projects:

1. Genetic Testing - decreased funding from \$100,000 to \$50,000 to more closely reflect historical expenditures.
2. Transition the Student Wellness Center pilot project to a 2-year project with a budget of \$260,000 a year.

Discontinued CSS Projects:

1. Tahoe Youth and Family Services will no longer be a contracted provider for the Children's Full Service Partnership project.

Component 3: INN consists of projects that are designed to contribute to learning, rather than a primary focus on providing a service. In addition to the Board of Supervisor adoption of MHSA Plans and Annual Updates that include INN projects, the Mental Health Services Oversight and Accountability Commission (MHSOAC) also must approve INN projects. INN projects cannot exceed five (5) years in duration.

Modified INN Projects:

1. "Partnership between Senior Nutrition and Behavioral Health to Reach Home-bound Older Adults in Need of Mental Health Services" project - The MHSOAC approved this Innovation project on January 23, 2020. Due to the extenuating circumstances associated with the COVID-19 public health emergency, the MHSA Project Team has not been able to implement this project. Throughout the Community Program Planning Process, the community and stakeholders supported requesting an extension of time to implement and administer the project. On March 10, 2021, the MHSOAC approved an extension of time for this project. It will now end on September 30, 2023. There is no change in funding.

Discontinued INN Projects:

1. Due to regulatory requirements regarding the length of INN projects, the Community-Based Engagement and Support Services (i.e. "Community Hubs") Innovation project will expire on June 30, 2021. Though INN funding is expiring, it is anticipated that the Community Hubs project will continue into FY 2021-22 through other funding sources.

Components 4 and 5: WET and CFTN serve to support the development of a well-trained, qualified, and diverse workforce and strengthen the foundation of the mental health system. Since these components are no longer funded by the MHSA, counties transfer funds from the CSS component to fund these projects.

There are no changes to the WET projects.

Modified CFTN projects:

1. There are several modifications to the CFTN projects which require an increase in budget from \$250,000 to \$550,000. This increase will cover modifications to the Electronic Health Record and help to upgrade technology to meet mandatory federal and state mandates.

ALTERNATIVES:

Failure to adopt the Update will not only result in an inability to provide continuity of care for clients currently receiving MHSA-funded services from contracted vendors but it will also result in El Dorado County being out of compliance with the requirements of the MHSA, which includes adoption of an

annual Update. Consequently, the FY 2020-21 - 2022-23 MHSA Three-Year Program and Expenditure Plan would continue as the foundation for MHSA services in the County.

PRIOR BOARD ACTION:

06-09-2020, 20-0446, HHSA Mental Health Services Act FY 2020-21 - FY 2022-23 Plan Approval
06-25-2019, 19-0936, HHSA MHSA Plan Update FY 2019-20
06-26-2018, 18-0874, HHSA MHSA FY 2018-19 Annual Update
06-20-2017, 17-0551, HHSA MHSA FY 2017-18 - FY 2019-20 Three-Year Program and Expenditure Plan

OTHER DEPARTMENT / AGENCY INVOLVEMENT:

N/A

CAO RECOMMENDATION:

Approve as recommended.

FINANCIAL IMPACT:

MHSA revenue and expenditures were included in the FY 2021-22 Recommended Budget, and will be included in future year budget requests. Additional revenue sources that offset the MHSA expenditures have also been budgeted. There is no Net County Cost associated with the MHSA program.

CLERK OF THE BOARD FOLLOW UP ACTIONS

N/A

STRATEGIC PLAN COMPONENT:

County of El Dorado Strategic Plan Project - Healthy Communities; Improved health, well-being, and self-sufficiency of El Dorado County communities, residents, and visitors.

CONTACT

Don Semon, Director