



Legislation Text

File #: 22-0024, **Version:** 2

Health and Human Services Agency recommending the Board:

- 1) Make findings in accordance with County Ordinance 3.13.030 that it is appropriate to enter into tri-party Memorandum of Understanding (County MOU 6216) with California Mental Health Services Authority (CalMHSA) and the California Department of State Hospitals (DSH) for State hospital beds because (B) "Specialty skills, qualifications, and equipment not expressly identified in County classifications involved in the performance of the work;"
- 2) Approve and authorize the Chair to sign MOU 6216 with CalMHSA and DSH, for the provision of State hospital beds on an "as requested" basis, for a retroactive term of July 1, 2021 through June 30, 2022, with a variable maximum obligation dependent on usage of State hospital beds; and
- 3) Authorize the Purchasing Agent to sign future amendments to this MOU issued by CalMHSA and DSH, and contingent upon approval by County Counsel and Risk Management. (Cont. 1/11/2022, Item 8)

FUNDING: 1991 Mental Health Realignment.

DISCUSSION / BACKGROUND:

In accordance with Welfare and Institutions Code Section 4100 et seq., the California Department of State Hospitals (DSH) has jurisdiction over State hospitals for the provision of services to persons with severe mental disorders that have not responded to treatment at lower levels of mental health care. These services include inpatient psychiatric health care, treatment, and support services. County residents who have mental, emotional, or behavioral disorders that cannot be treated at a lower level, are referred to the State hospitals for treatment.

Welfare and Institutions Code Section 4331 requires counties, either acting alone or in combination with other counties, to annually contract with the State to reserve the number and types of State hospital beds the county anticipates utilizing in the coming fiscal year. Prior to the development of Memorandum of Understanding 265-M1610 (MOU), counties were required to pay for the bed reservation(s) regardless of whether the bed was occupied. The process for payment was handled by the State withholding funds from the County 1991 Realignment allocation. Bed rates depend on the type of service required, which is directly related to patient acuity. Due to the need for high-acuity mental health services, counties had no option but to accept the terms and conditions offered by the State.

This changed on February 15, 2011, when the Board authorized the County to become a participating member in the California Mental Health Services Authority (CalMHSA) JPA via Resolution 024-2011 and participation agreement 373-162-M-E2010 (EDC #142-O1111). Initially, CalMHSA was formed so that counties could pool their Mental Health Services Act (MHSA) Prevention and Early Intervention (PEI) funds to maximize the effectiveness of funding. Over time, CalMHSA evolved to include a broader scope of services, including the negotiation on behalf of participating counties for the purchase of State Hospital beds and other programs or activities including but not limited to the Drug-Medical Treatment Program, managed mental health care, and delivery of specialty mental health services.

Since joining in the CalMHSA State Hospital Bed negotiation process, the County has no longer paid for unoccupied beds. The Board approved current CalMHSA participation Agreement 4282 on November 5, 2019 (File ID 19-1297). Agreement 4282 authorizes CalMHSA to contract for State Hospital beds on the behalf of the County of El Dorado. Amendment II to Agreement 4282 was approved by the Board on May 11, 2021 (File ID 21-0597) to extend the termination date to June 30, 2022. The program goals are to ensure compliance by DSH with all applicable requirements, create efficiency and contain costs, establish consistency in quality of care, work collectively to identify and/or develop alternative resources for special populations requiring secure 24 hour treatment services. The County is currently committed to one (1) bed.

MOU 6216 and Participation Agreement 4282 are dependent upon one another and the County is required be a party to each one in order to participate in the State Hospital Bed Program. Furthermore, it is necessary that the County execute retroactive MOU 6216 to ensure future availability of State hospital bed(s) should any County clients require the specialty services that can only be obtained through DSH.

Retroactive Term

Health and Human Services Agency (HHSA) staff began communicating with CalMHSA in January 2021, requesting that a new MOU be issued. The initial response was that DSH was developing a new agreement and that CalMHSA was waiting on direction from DSH, and HHSA continued to receive that response into November 2021. On November 16th, CalMHSA sent the retroactive Purchase of State Hospital Beds Memorandum of Understanding to HHSA.

ALTERNATIVES:

Should the Board decline to approve this recommendation, the County would be out of compliance with State, Federal, and program requirements. Additionally, when the County needs to use a State bed, the County would be charged the current bed rate issued by the Department of State Hospitals, as opposed to the CalMHSA negotiated rates, terms and conditions, including but not limited to the ability to pay only for beds used, not a daily bed rate, whether the bed is occupied or not.

PRIOR BOARD ACTION:

05/11/21, 21-0597, HHSA Agreement 4282 Amendment II
01/05/21, 20-1650, HHSA CalMHSA/Dept. State Hospitals Agreement 5338
11/05/19, 19-1297, HHSA Agreements 265-M1610 Amendment II, 4282, and 4284
08/08/17, 15-1386, CalMHSA State Hospital Participation Agreement
08/08/17, 15-1386, CDSH MOU Amendment I
11/16/15, 15-1386, CDSH MOU

OTHER DEPARTMENT / AGENCY INVOLVEMENT:

County Counsel

CAO RECOMMENDATION:

Approve as recommended.

FINANCIAL IMPACT:

Agreement 5338 has no stated not-to-exceed amount (NTE), as the NTE is variable depending on usage. The bed rate is established annually and depends on the type of service required, which is

related to patient acuity. No invoices are issued by DSH. The yearly 1991 Mental Health Realignment amount allotted to the County is reduced by the number of beds used.

CLERK OF THE BOARD FOLLOW UP ACTIONS

- 1) Clerk of the Board to obtain the Chair's signature on three (3) originals of MOU 6216; and
- 2) Clerk of the Board to return all documents to HHSA Contracts Unit, 3057 Briw Road, to obtain final signatures.

STRATEGIC PLAN COMPONENT:

County Strategic Goal: "Healthy Communities."

CONTACT

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