

BEHAVIORAL HEALTH ADVISORY BOARD  
**Transitional Age Youth (TAY) Committee Meeting**

**HYBRID MEETING: In-Person & Via ZOOM**

Ventura County Behavioral Health (VCBH)  
1911 Williams Drive, Training Room (first floor) • Oxnard, CA 93036

**Wednesday, October 19, 2022 - 3:30 PM – 5:00 PM**

**In-Person Attendance**

You now have the option of attending this meeting in person in the Training Room at the Williams Drive offices of VCBH. Masks are required to enter the building but may be removed once inside the room. Kindly continue social distancing practices. In person attendees will be visible and audible to those attending by zoom (and vice-versa) through recording equipment in the Training Room.

**Zoom Participation**

The following information referenced below and continuing on page two of this Agenda is provided to you in support of your attending the upcoming BHAB TAY Services Committee Meeting via Zoom:

**Join Zoom Meeting:**

<https://us02web.zoom.us/j/82573279436?pwd=SUUzU0VHUU1NUkdleGx3K3pXMXdYZz09>

**Meeting ID:** 825 7327 9436

**Password:** 525383

**PHONE Dial-in:** 669-900-9128

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**AGENDA**

- I. Call to Order
- II. Welcome and Introductions
- III. Roll Call
- IV. Public Comments (aim for 3 minutes max per speaker, please)
- V. Approval of the Agenda – **ACTION** (Roll Call)
- VI. Approval of the June 15, 2022 Minutes – **ACTION** (Roll Call) (postponed due to lack of a quorum at 8/17/22 meeting)
- VII. Approval of August 17, 2022 Minutes – **ACTION** (Roll Call)
- VIII. Update on Continuum of Care Initiatives – Jennifer Harkey, Continuum of Care-County Executive Office, Program Administrator
- IX. Facilitated Discussion: Needs, Services Overview, and Gaps in Addressing TAY Concerns as Reported by Attendees
- X. VCBH Updates
  - A. Mental Health Services for TAY Persons and their Families
  - B. Substance Use Services
  - C. Mental Health Services Act (MHSA)
- XI. Information Sharing/Upcoming Events and News – Community & Committee Members
- XII. Contracts Review (July 2022)
- XIII. Suggested Items for Agenda for Subsequent Meetings
- XIV. Final Public Comments (aim for 3 minutes max per speaker, please)
- XV. Adjourn (*THANK YOU for your time and interest!*)

In compliance with the Americans with Disabilities Act, if you need special assistance to participate in this meeting, please contact: Behavioral Health Administration, at (805) 981-6830. Reasonable advance notification of the need for accommodation prior to the meeting (48 hours advance notice is preferable) will enable us to make reasonable arrangements to ensure accessibility to this meeting.

**Next Meeting: Wednesday, December 21, 2022**

**Zoom Participation Information – continued**

**Please note the following important information related to supporting your participation in the upcoming meeting:**

1. The meeting will be recorded.
2. Participation is available in **Spanish** via simultaneous translation (use **globe icon**).
3. All participants are muted upon entry to minimize any unintended disruption from background sounds.
4. Zoom meetings will initially start with attendees being admitted to a “**waiting room**.” At the start of the meeting, attendees will be “admitted” by a host into the meeting.
5. During opportunities for offering comments about items on the agenda, participants will be unmuted and welcome to comment for up to 3 minutes. Comments can be offered in the following ways:
  - a. If you have joined the meeting via video/audio, your name can be added to the comment queue by clicking on the participant window at the bottom of the zoom screen and then clicking on the “**raise hand**” feature at the bottom of the participant window. Alternately, at the bottom of the main screen is an option labeled "Reactions." After clicking, a menu will open revealing a "raise hand" option to select.
  - b. If you are joining the meeting by telephone only, you can join the comment queue by pressing \*9. When it is your turn to speak, please unmute yourself by pressing \*6.
6. Comments will be taken in the order they are received, and each speaker is allotted up to 3 minutes at a time. After three minutes of sharing, the speaker will be notified that the time has ended, will be able to make a closing comment, and then the mic will be passed to the next person in the queue. Speakers can comment again after others have had a chance to share their thoughts and perspectives.
7. Following changes in the policy at General BHAB meetings, there will no longer be a 5-minute maximum comment limitation on any participant.
8. Your active participation in this process is strongly encouraged and valued. Thank You!

**Ventura County Behavioral Health**  
**Board Letter Summary of Contracts for July 2022**

Board Date	Contractor	Amount	Term	Description
7/12/2022	Advocates for Human Potential, Inc. (AHP)	\$149,916	January 3, 2022 through December 31, 2022	<b>FY 2021-23 Agreement with AHP to Plan for and Establish an East Ventura County Adult Crisis Stabilization Unit (CSU).</b> The Behavioral Health Continuum Infrastructure Program (BHCIP) is a joint effort with the California Department of Social Services (CDSS) Community of Care Expansion Program (CCE) to provide \$805 million in funding for acquisition, construction, and rehabilitation to preserve and expand adult and senior care facilities that serve Social Security Income (SSI) applicants and recipients, including those who are homeless or at risk of homelessness and people with behavioral health conditions. These BHCIP funds are a portion of the \$2.2 billion in funding that California Department of Health Care Services (DHCS) is authorized to release to construct, acquire, and expand properties and invest in the mobile crisis infrastructure related to behavioral health. The BHCIP funds were released through six rounds targeting various gaps in the state's behavioral health facility infrastructure. The second round of funding is intended to support preparation activities to plan for the acquisition and expansion of behavioral health infrastructure throughout the state. Planning grants were made available up to \$150,000. On November 30, 2021, Ventura County Behavioral Health (VCBH) submitted an application to DHCS, for a BHCIP County and Tribal Planning Grant in the amount \$149,916 to plan for the establishment of an east Ventura County Adult CSU. Currently, there is no existing CSU in the east county. The need for an east county CSU was identified by the 2019 Ventura County Mental Health Community Assessment. This planning grant targets the gaps identified by the Behavioral Health Advisory Board (BHAB) through the following infrastructure goals: (1) Client and Community Engagement by guiding stakeholder engagement activities so that infrastructure planning serves the needs of the client populations, (2) Service Excellence and Innovation to ensure that mental health services are not fragmented and offer access to the appropriate level of care/services in a diverse region, (3) Growth and Access by providing additional services along the continuum in an area of the county where services do not currently exist, and (4) Financial Stability and Performance by providing an appropriate and least restrictive level of care and reducing hospitalizations and inappropriate impact to other types of professionals and services (e.g., police, medical staff, emergency departments, jails). On January 4, 2022, the DHCS released the Notice of Award notifying VCBH that its grant application was awarded BHCIP funding in the amount of \$149,916 for the term of January 3, 2022 through December 31, 2022. The Subcontract Agreement is with AHP, a private corporation that DHCS selected and contracted with to administer the BHCIP grant application, award, and program processes. Source of funding is the BHCIP Grant.
7/12/2022	California Mental Health Services Authority (CalMHSA)	\$9,653,150	Effective Upon Execution of the Agreement through March 18, 2029	<b>FY 2021-22 Participation Agreement with CalMHSA for Semi-Statewide Enterprise Health Record (EHR) Services.</b> CalMHSA, a joint powers authority created by California counties in 2009 to jointly develop and fund mental health services and education programs for its members, has entered into a participation agreement with interested counties to provide EHR program services related to their implementation of several behavioral health programs and initiatives. California Advancing and Innovating Medi-Cal (CalAIM) is a DHCS initiative to reform and transform the Medi-Cal program and, in turn, improve the quality of life and health outcomes of Medi-Cal beneficiaries. Over the course of several years, CalAIM will implement a broad delivery system, program and payment reform across the Medi-Cal system, and build upon the successful outcomes of various pilot programs to completely transform the delivery of behavioral health services for Medi-Cal beneficiaries. Effective July 1, 2023, VCBH transformed its EHR system to support payment reform under CalAIM. To ensure that this transition is successful, VCBH is pursuing a Participation Agreement with CalMHSA to assist with development of a California-central EHR that will be implemented across multiple counties to support core business requirements and address regulatory requirements implicated by the sharing of protected health information required by Cal-AIM/Medi-Cal. The EHR, developed by CalMHSA's selected contractor, Streamline Healthcare Solutions, LLC (Streamline), establishes consistent workflows, configuration, and functionality that supports: 1) centralized application administration, 2) standardized training and end-user support, 3) shared technical services, 4) a common baseline against which new updates for state and federal mandate can be defined/applied, 5) the creation of a learning community across the participating counties, 6) clinical best practices and state objectives, and 7) better use of data to drive performance outcomes. Under the Participation Agreement, CalMHSA acts as the fiscal and administrative agent for the EHR program. On behalf of participating counties, CalMHSA implements and administers all components of the EHR program, including: 1) invoicing and managing funds from the participants, 2) working closely with Streamline to coordinate the development and implementation of the EHR, 3) assuring Streamline completes and passes all applicable system testing requirements, 4) completing required data collection and submission to DHCS, 5) monitoring Streamline contracted services, and 6) coordinating with and reporting to participating agencies. The Participation Agreement includes a "not to exceed" limit of \$9,653,150, which is inclusive of \$8,459,261 for participant specific committed funding for EHR development costs and \$1,193,889 in contingency funding to account for user growth, development, and professional services related to future projects anticipated to be implemented within the term of this agreement. VCBH is required to remit \$1,063,780 to CalMHSA within 30 days of execution of this Participation Agreement for development services that have been provided to CalMHSA. These services are funded with Short Doyle Medi-Cal Federal Financial Participation (SD/MC FFP) and Mental Health Services Act (MHSA) funds.
7/12/2022	New Dawn Counseling and Consulting Inc. (New Dawn)	\$1,212,484	July 1, 2022 through June 30, 2023	<b>FY 2022-23 Second Amendment to the Agreement with New Dawn for Specialty Mental Health Services.</b> New Dawn provides Early and Periodic Screening Diagnostic Treatment (EPSDT) Specialty Mental Health services to children and their families. New Dawn is being contracted to provide mental health, case management and crisis intervention services. In FY 2021-22, New Dawn provided services to 97 unduplicated clients (July to December). The FY 2022-23 agreement with New Dawn for EPSDT Specialty Mental Health services is for a one-year term and represents an increase of \$162,840 from the prior fiscal year due mainly to an increase in staffing costs. This agreement is funded with SD/MC FFP and Realignment funding.
7/12/2022	Aspiranet	\$942,980	July 1, 2022 through June 30, 2023	<b>FY 2022-23 Fourth Amendment to Agreement with Aspiranet for Specialty Mental Health Services.</b> Aspiranet provides EPSDT/Intensive Services Foster Care (ISFC) specialty mental health care services. Services are targeted at children younger than 21 years of age who are EPSDT Medi-Cal beneficiaries. Aspiranet has been contracted to provide mental health, case management and crisis intervention services. Many of the children/youth whom Aspiranet is serving have complex trauma histories which make them vulnerable to mental health challenges, circumstances and/or conditions that require a more timely response. In these cases, more intensive services such as crisis intervention are required. The unduplicated client count in FY 2021-22 was 104 for EPSDT and 17 for ISFC (July through April). The FY 2022-23 agreement with Aspiranet for EPSDT/ISFC services is for a one-year term and represents an increase of \$24,740 from the prior fiscal year due mainly to an increase in staffing costs. This agreement is funded by SD/MC FFP, Realignment, and other County resource funding.
7/12/2022	Seneca Family of Agencies (Seneca)	\$1,749,753	July 1, 2022 through June 30, 2023	<b>FY 2022-23 Third Amendment to Agreement with Seneca for Specialty Mental Health Services.</b> Seneca provides Comprehensive Assessment and Stabilization Services (COMPASS) program services for VCBH. The COMPASS program is a licensed six bed Short-Term Residential Therapeutic Program (STRTP). The program is designed to provide voluntary residential treatment for minors who are not able to be stabilized in less than 24 hours but who do not meet criteria required under Welfare and Institutions Code section 5585.50 for psychiatric hospitalization. On average, these youth will typically stay at the STRTP for ten days. The focus of this program is to stabilize the minor to assure safety, develop safety planning with the family, introduce therapeutic and psychiatric interventions and establish linkages to aftercare treatment, reducing the likelihood of recurring crisis situations and potential psychiatric hospitalization. Seneca staff also provide transitional community-based services to promote a successful transition from the COMPASS program back to minors' homes. Such services can be provided up to 60 days from the date of discharge. In FY 2021-22, the COMPASS program provided continued crisis stabilization services to 11 youth (July through April). The FY 2022-23 agreement with Seneca for COMPASS services is for a one-year term and represents an increase of \$73,363 from the prior fiscal year due mainly to an increase in staffing costs. This agreement is funded with SD/MC FFP and MHSA funding.

Board Date	Contractor	Amount	Term	Description
7/12/2022	Telecare Corporation (Telecare)	\$2,895,208	July 1, 2022 through June 30, 2023	<b>FY 2022-23 Fourth Amendment to Agreement with Telecare for Specialty Mental Health Services.</b> Telecare provides locked mental health rehabilitation center (MHRC) (Horizon View) services for individuals who have a history of severe mental illness who cannot be properly treated at lower levels of care. These consumers are: (1) Medi-Cal eligible, (2) 18 years of age or older, and (3) have been conserved pursuant to Welfare and Institutions Code section 5350, et seq. (the "Lanterman-Petris-Short Act") and are transferring from an acute psychiatric hospital, a state hospital, or another locked MHRC. Consumers receive supervision, guidance, and personal assistance in performing their daily living activities. In addition, structured day and evening services are also provided to assist consumers in acquiring living skills, accessing community resources, and accessing educational or vocational resources. In FY 2021-22 Telecare Horizon View served 28 clients. The FY 2022-23 agreement with Telecare for Horizon View services is for a one-year term and represents an increase of \$117,649 from the prior fiscal year due mainly to an increase in 1 full time equivalent (Recovery Specialist) and an increase in staffing costs. This agreement is funded with SD/MC FFP Funds, Realignment, and other County resource funding.
7/26/2022	AHP	\$758,848	April 15, 2022 through February 14, 2023	<b>FY 2022-23 Agreement with AHP for Crisis Care Mobile Units (CCMU) Program Augmented Funding.</b> DHCS made \$18.5 million in additional funds from the Substance Abuse and Mental Health Services Administration Coronavirus Response and Relief Supplemental Appropriations Act (CRRSAA) available for CCMU Implementation grantees in March of 2022 primarily for CCMU direct services. These funds were designated to be used for one or both of the following: (1) additional CCMU team(s) and/or (2) additional staff and activities to enhance the direct services for CCMU teams. On April 13, 2022, VCBH submitted an application to DHCS in the amount of \$125,458 to enhance its existing CCMU direct services. On May 31, 2022, AHP, the private corporation that DHCS selected and contracted with to administer the CCMU grant application, award, and program processes, notified VCBH that that it was awarded \$125,458 in additional funding. VCBH will use this additional funding to: (1) support the existing grant funded CCMU team in the provision of direct client services and (2) offset the other funding source (MHSA funding) that VCBH would have needed to use had this additional funding not been made available. Due to the additional funding augmentation, VCBH's CCMU grant agreement will increase from \$633,390 to \$758,848. In addition to the funding augmentation for the CCMU services, the amendment with AHP also updates the Business Associate Agreement terms. These services are funded with BHCIP CCMU grant funding.
7/26/2022	California Department of State Hospitals (DSH)	\$3,596,200	July 1, 2022 through June 30, 2024	<b>FY 2022-23 First Amendment to the Agreement with DSH for Pre-Trial Felony Mental Health Diversion Program Services.</b> VCBH submitted a Letter of Intent and program plan in February of 2022 to DSH to apply for an expansion of funding: (1) to serve additional clients and (2) for housing funding for these additional clients. VCBH was approved for this additional funding, and the First Amendment to the Agreement revised the Agreement terms to establish two (2) categories of unduplicated Felony Mental Health Diversion clients to be served by VCBH. Category 1 includes VCBH providing diversion services to eighteen (18) Felony Mental Health Diversion clients found Incompetent to Stand Trial (IST) or likely to be found IST with diagnosis of schizophrenia, schizoaffective-disorder, or bipolar disorder and as established in the original VCBH Diversion Grant Agreement that is in the amount of \$2,428,200. Category 2 represents the expansion of services/new category of client services under the First Amendment to the Agreement with DSH. This new category includes VCBH providing diversion services to four (4) additional Felony Mental Health Diversion Clients found IST and ordered to DSH with any diagnosis allowed under Penal Code 1001.36 and in the amount of \$568,000. In addition, for these four (4) additional clients, VCBH received \$600,000 in housing funding to house diversion clients in the most appropriate level of care. The new proposed maximum agreement amount with DSH will be \$3,596,200. VCBH will also contribute a 20% match in local county funds for Category 1. The in-kind contribution will be delivered by VCBH staff that will dedicate a portion of their time to the Diversion Grant, along with other overhead costs specific to the grant. Match funds are not required for housing or 0Category 2 funds. These services are funded with DSH Diversion grant, MHSA, and SD/MC FFP funding.
7/26/2022	Gold Coast Health Plan	\$0	July 1, 2022 through June 30, 2023	<b>FY 2022-23 Memorandum of Understanding (MOU) with Gold Coast Health Plan Specifying the Terms and Conditions Applicable to the Provision of Mental Health, Substance Use Disorder, and Eating Disorder Services to Medi-Cal Beneficiaries.</b> On December 15, 2020, the Board approved an MOU between the County of Ventura and GCHP regarding the provision of mental health and substance use disorder (SUD) services for Medi-Cal beneficiaries in Ventura County. That MOU clarified and further defined the roles and responsibilities, access, and care coordination of specialty mental health, non-specialty mental health services, and SUD services. Under the MOU, VCBH provides or arranges for specialty mental health services for eligible individuals, and GCHP provides or arranges for non-specialty mental health services for eligible individuals, as specified in the GCHP Medi-Cal Managed Care contract with DHCS. Non-specialty mental health services covered by GCHP are for individuals with mild to moderate impairment of mental, emotional or behavioral functioning resulting from a mental health disorder. Specialty mental health services provided by VCBH are for individuals with a serious and persistent mental illness. DHCS has established the criteria for eligibility and the provision of services under both the specialty mental health and non-specialty mental health service programs. The 2020 MOU also included provisions related to SUD services and specifically clarified definitions, roles, access, care coordination, and the timelines requested by DHCS. In addition to this information, care coordination with GCHP through the 24/7 Beneficiary Access Line schedule was also delineated. This new MOU, is substantially similar to the 2020 MOU, but will replace it and further define the roles and responsibilities of VCBH and GCHP with respect to providing specialty mental health services, non-specialty mental health services, SUD services, and eating disorder services. Specifically, the new MOU includes: (1) revisions to the criteria for access to specialty mental health services, non-specialty mental health services, and SUD services, (2) revisions to the dispute resolution requirements, (3) addition of new eating disorder service requirements, roles, and responsibilities, (4) revision of various care coordination, grievance and appeal, and policies and procedures requirements, and (5) deletion of Exhibit A, Attachment 2 (Drugs Excluded from MCP Coverage). These various revisions are required per DHCS and some as part of the California Advancing and Innovating Medi-Cal, a DHCS initiative.