

Mental Health Services Act (MHSA)





Steering Committee Meeting

Welcome & Introductions

- Share your name, pronouns and affiliation in the chat
- MHSA Steering Committee Members:
- Jean Perry, BHC (MHSA Co-chair)
- Leticia Bido, BHC (MHSA Co-chair)
- Adriana Furuzawa, Felton Institute
- Chris Rasmussen, BHC
- Jackie Almes, Peninsula Health Care District
- Jairo Wilches, BHRS OCFA
- Jessica Ho/Vivian Liang, North East Medical Services
- Juliana Fuerbringer, California Clubhouse
- > Kava Tulua, One East Palo Alto

- Maria Lorente-Foresti, BHRS ODE
- ➤ Mary Bier, North County Outreach Collaborative
- > Melissa Platte, Mental Health Association
- ➤ Michael Lim, BHC
- ➤ Paul Nichols, BHC
- ShaRon Heath, Voices of Recovery



Agenda

- 1. Welcome & Logistics
- 2. General Public Comments
- 3. Announcements
- 4. Proposition 1 Next Steps



A few logistics...

- Agenda, handouts, slides: <u>www.smchealth.org/MHSA</u>, under "Announcements" tab
 - Past meeting materials/minutes: under "Steering Committee"
- Stipends for clients and family members participating
 - Via chat (private message) please provide your email





Participation Guidelines

- Question/comment opportunity after each agenda item
 - Enter questions in the chat box as we go
 - "Raise Hand" option
- Share your unique perspective and experience
- Share the airtime
- Practice both/and thinking consider others' ideas along with your personal interests
- Be brief and meaningful

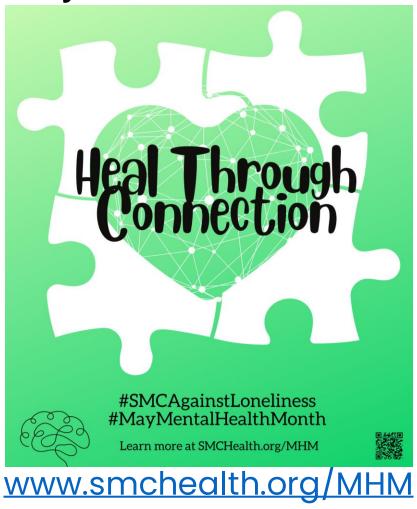


General Public Comment



Announcements

May Mental Health Month



Next MHSA Workgroup

MHSA Program Client Outcomes kick-off in October 2024



https://www.surveymonkey.com/r/ MHSAOutcomesWorkgroup

Next Workgroup: Client Outcomes for Direct Treatment Programs







Goals Met



Education



Connection



Hospitalization



Substance Use



Housing





Criminal

Proposition 1 - Next Steps



Overview

- 1. Behavioral Health Trends
- 2. Prop 1 Timeline July 1, 2026
- 3. Prop 1 Components & Local Impact
 - What does this mean for San Mateo County?
 - MHSA Steering Committee Role
- 4. Questions

Prop 1 will impact how we approach funding and developing our programs, and how we look at outcomes.

Opportunity to reflect on priorities, processes and resourcing in BHRS, beginning now.



Behavioral Health Trends

- Integrated Mental Health and Substance Use Services
- Cross-Sector Approach to Planning
- Maximizing Revenues and Transparency to the Public
- Reporting of Performance and Client-Level Outcomes
- Evidence-Based Practices
- Population Health Focus
- Other Priority Areas: equity, unhoused and criminal justice involved individuals, peer supports, workforce development, early intervention for children/youth ages 0-25



Prop 1 Implementation Timeline

- Preparation: April December 30, 2024
 - Procurement of IT, fiscal and planning supports
 - Initial discussions on what will be needed for readiness
- Transition Period: January 1, 2025 June 30, 2026
 - January 2025: Kick-off official planning processes to develop an Integrated Three-Year Plan for Fiscal Year 2026-2029
 - March-April 2026: 30-Day Public Comment Period on the Plan
 - Current programs remain as is through June 30, 2026
- Full Implementation: July 1, 2026

Proposition 1- Three Components

- 1. \$6.38 billion general obligation bond
- 2. MHSA Reform SB 326
- 3. Statewide accountability and transparency



1. Bonds(\$6.38 billion)

- \$4.4 billion for unlocked community behavioral health residential settings
- \$922 million for permanent supportive housing
- \$1.1 billion for housing for veterans

What does this mean for San Mateo County?

- Application process to access these funds BHRS will have to propose a plan that considers the full scale of operating the housing projects and residential facilities.
 - Leveraging the Behavioral Health Continuum Infrastructure Program (BHCIP), which BHRS has participated in.
 - Call for funding application may release as soon as October 2024



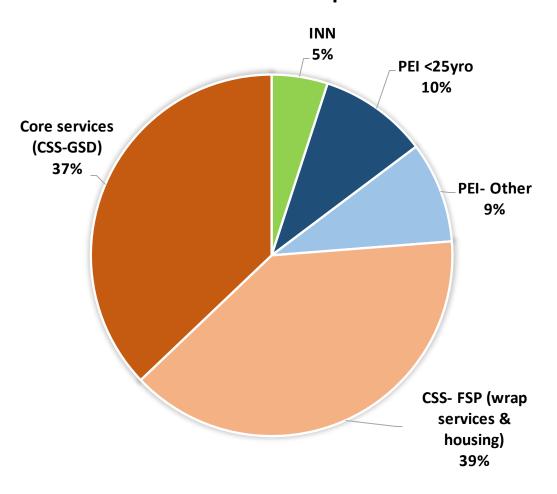
2. MHSA Reform (SB326)

- Name change to Behavioral Health Services
 Act (BHSA) broaden to substance use
- 30% Housing Interventions
 - At least 15% for chronically homeless with focus on encampments
- 35% Full Service Partnerships (FSP)
- 35% Behavioral Health Services and Supports (BHSS)
 - At least 15% Early Intervention and 51% of this allocation for youth ages 0-25
 - Eliminated local population-based prevention

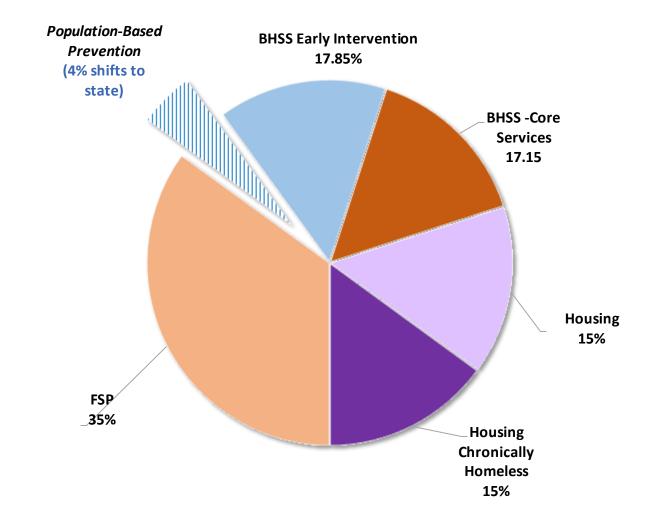
*Can transfer up to 7% per category, 14% max total

MHSA Components vs. BHSA Categories

Current MHSA Components



New BHSA Categories



What does this mean for San Mateo County?

- \$15.1M redirection of MHSA funds to meet requirements:
 - \$8.0 M (43%) from outpatient treatment programs
 - \$4.3M (100%) from population-based prevention programs.
 - \$2.8M (100%) from innovation and technology projects.
- Identify other funding sources (Realignment, MediCal, Net County, etc.) and enhance State billing to increase reimbursement for BHRS provided services
- Re-prioritize services and review current program criteria to best leverage BHSA funding requirements
- Opportunity for staff, agency partners, and community to provide input



MHSA Steering Committee Role

- A Taskforce will be initiated in early 2025 to allow for broader engagement.
- Starting July 1, 2026, there will be changes to the Steering Committee:
 - Much broader stakeholder engagement will be required.
 - Participation in other planning process Mental Health Plan's "Population Needs Assessment" and County's "Community Health Needs Assessments" will be required, to inform BHSA funding.
 - Corrective action plans and monetary sanctions will apply if we do not follow planning requirements.
 - We will keep you informed as we learn more!
- The Behavioral Health Commission (BHC) participation in 30-day public comment periods for BHSA plans will continue to be a requirement.
 - BHSA subcommittee structure can continue for commissioners and stakeholder input.



3. Accountability

- Expanded and reformed community planning process
- Fiscal transparency and reporting of ALL BHRS revenues
- Program and client outcome reporting for ALL BHRS services

What does this mean for San Mateo County?

- There are gaps in our system related to **operational** staffing and **administrative** supports (data, fiscal, IT, contracts, etc.)
 - New team and supports focused on client and performance outcome reporting
 - Re-configuration of EHR
 - Enhanced fiscal supports (tracking and reporting infrastructures)
 - BHRS-wide strategic planning
 - New contracting requirements







Get Involved!

- Subscribe to stay up-to-date and receive opportunities to get involved in MHSA planning:

 www.smchealth.org/MHSA
- Check out these BHRS-wide opportunities:

https://www.smchealth.org/get-involved

Thank you!

Jean Perry, BHC Commissioner Leticia Bido, BHC Commissioner Doris Estremera, MHSA Manager

Email: mhsa@smchealth.org

Website: www.smchealth.org/MHSA

Let us know how we can improve:

www.surveymonkey.com/r/MHS
A_MtgFeedback_2024







