ALAMEDA COUNTY
BOARD OF SUPERVISORS' HEALTH COMMITTEE

Monday, January 22, 2018
9:30 a.m.

Supervisor Wilma Chan, Chair
Supervisor Keith Carson

Location: Board of Supervisors Chambers – Room 512 5th floor
County Administration Building, 1221 Oak Street, Oakland, CA 94612

Summary/Action Minutes

I. Full Service Partnership Update
Attachment

Carol F. Burton, LMSW, Interim Director, Behavioral Health Care Services and CEO of Jeweld Legacy Group, James Wagner, LMFT/LPCC, Deputy Director, Behavioral Health Care Services and Fiona Branagh, Director, Network Office, Behavioral Health Care Services presented a PowerPoint presentation on the Behavioral Health Care Services Full Service Partnership.

The Mental Health Services Act based the Full Service Partnership (FSP) program model on the Assertive Community Treatment for adults and wraparound for children.

The foundation for an FSP is doing “whatever it takes” to help individuals on their path to wellness, recovery, and resilience. An FSP includes a “collaborative relationship with the client and when appropriate the client’s family to plan for and provide the full spectrum of community services so that the client can achieve the identified goals.” (CCR, Title 9, Section 3200.130)

Full Service Partnerships (FSPs) are a priority of the Mental Health Services Act (MHSA) and include the core MHSA values of:
- Community collaboration
- Cultural competence
- Consumer and family driven services
- Focus on wellness, recovery, and resilience
- Integrated service experience for consumers, clients, and family members

At least fifty-one percent of the Community Services and Supports funding of the MHSA must be dedicated to FSP. Full Service Partnerships may help an individual find employment (Independent Placement and Support, or IPS), with outpatient mental health services in addition to peer support (people who have lived experience with chronic and severe mental health issues), rent subsidies and housing.

Reimbursement

FSPs were initially set up on a cost reimbursement basis, in fiscal year 2017-18, FSP providers were the foundation of a provider group that is piloting alternative reimbursement methods which share financial risk with the County. BHCS anticipates this change in reimbursement method will generate revenue through increased Medi-Cal claiming, creating a pool of funds to be used for incentivizing provider performance.

In the long term, goals for the fiscal design are to prepare for a capitated model, reimbursing providers on a per-client, per-month basis. BHCS is converting FSP contracts from cost reimbursement to Medi-Cal compliant fee for service reimbursement to accomplish the following goals:
- To assure full compliance with our federal and state Medi-Cal contractual obligations and as a result achieve maximum federal financial participation for covered services.
- To utilize the enhanced federal revenue once realized to expand FSP services to underserved beneficiaries.
To create provider incentives to minimize unnecessary cost and maximize access and service intensity for beneficiaries served by their programs.

To take full advantage of the ACA expansion of Medi-Cal coverage to adults and children.

The target populations for FSPs include:

- Transition Age Youth 18-25 (2 programs)
- Adults 25-59 (2 programs)
- Chronically Homeless Adults 18+ (2 programs)
- Criminal Justice involved adults (2 programs)
- Older Adults 59+ (1 program)

Current Requests for Proposal (RFP)

Total funding released for the RFP will be $22 million. Planning for this RFP began three years ago with an internal group that included BHCS executive, clinical, finance, and procurement managers. The planning group reviewed experience with FSPs to date including outcomes, recent literature on evidence-based practice, particularly for housing, employment and assertive community treatment. In addition to demographic and cost data and utilization patterns.

FSPs’ role in serving high acuity individuals within the broader systems of care
- RFP was delayed for one year to allow for pilot of new funding model to start
- Request for Interest was released in March 2017 to seek provider input

Consumer program transitions

Behavioral Health Care Services has considerable experience in sensibly dealing with contractors and clients when an existing program is terminated. Should an existing provider not be selected as a result of the RFP, its FSP program will receive funding for a further three months. During that three-month period, the newly awarded contractors will be starting up programs, BHCS clinicians will be working closely with any newly awarded programs and existing programs to ensure that consumers are transitioned in a manner that is clinically appropriate to their needs.

Purpose:
- Report progress
- Advocacy or Education
- Request Health Committee Recommendation or Position
- Other:

This item was informational only and required no Committee action.

PUBLIC COMMENT

None.