

### Prop. 1 – Behavioral Health Services Act (BHSA) Transition Taskforce





#### Welcome & Introductions

 Please share your name, pronouns, and affiliation in the chat



#### Taskforce Meetings

4 x 90-minute hybrid meetings, every other month (12 hours total time commitment)

#### **Meeting #1** 4/3/2025

- Introduction to Prop 1 – BH Transformation
- Community
   Program
   Planning (CPP)
   Framework

#### **Meeting #2** 6/5/2025

- Prop. 1 BHSA Overview
- BHSA Planning and Program Requirements



#### **Meeting #3** 8/7/2025

Community
 Input Session
 with the
 Transition
 Taskforce

#### **Meeting #4** 10/2/2025

- Themes from Community Input Sessions & Survey
- The Behavioral Health Continuum of Care

<sup>\*</sup> Visit www.smchealth.org/mhsa, under the "Announcement" tab for most up-to-date information

#### Agenda & Objectives

#### **Agenda**

- 1. Welcome & Logistics
- 2. General Public Comments
- 3. Input Session Overview
- 4. Input Session Breakouts
- 5. General Q & A
- 6. Adjourn

#### **Objectives**

- Priority Goals that will guide the input session discussions
- Facilitate space for BHSA
  Transition Taskforce members
  to provide input on strategies
  to address gaps across the
  Priority Goals

#### Glossary of Key Terms

- Serious mental illness (SMI) and/or Substance use disorder (SUD) are mental health challenges and/or recurrent use of alcohol and/or drugs resulting in serious functional impairment, which substantially interferes with major life activities.
- Specialty Mental Health Services (SMHS) and Drug Medi-Cal Organized Delivery System (DMC-ODS) primarily provided by County Behavioral Health Plans are intensive mental health and SUD services provided to clients that meet medical necessity criteria.
- Non-Specialty Mental Health Services (NSMHS) primarily provided by Managed Care Plans focus on individuals with mild to moderate needs, County Behavioral Health Plans also provide NSMHS through early intervention strategies.
- **Penetration Rates** are the percentage of Medi-Cal eligible individuals who receive specific behavioral health services and can indicate how effectively a program or system reaches and serves its intended population.
- **Co-occurring capacity** focuses on the ability of providers to address mental health and substance use disorders; integrated services provides care concurrently, rather than being referred to separate programs or services.
- Continuum of care is a comprehensive range of health and support services to individuals ensuring seamless transitions between different levels of need.
- Evidence-based practices (EBPs) have documented (e.g., peer-reviewed studies, and publications) effectiveness on improving behavioral health. Community-defined evidence practices (CDEPs) are an alternative or complement to EBPs, that offers culturally anchored interventions.
- Medi-Cal billing is the process of submitting claims to California's Medicaid program, Medi-Cal, for reimbursement of services provided.



#### A few logistics...

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

#### 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 Comments (10 min)



#### How to Give Public Comment



- Online Form:
  - www.surveymonkey.com/r/MHSAPu blicComment
- Email: mhsa@smcgov.org
  - optional <u>form</u> can be downloaded from <u>www.smchealth.org/MHSA</u>, under "Announcements" tab
- Phone message: (650) 573-2889

\*Quick Tips – How to Give Public Comment at a public meeting

## BHSA Community Input Sessions Overview



#### State Required Priority Goals







Justice-Involvement



Homelessness



Removal of Children
From Home



Untreated Behavioral Health Conditions





# Community Input Session Topics

Visit www.smchealth.org/mhsa, for the most up-to-date information

#### Prop. 1 - Behavioral Health Services Act (BHSA) Community Input Sessions

#### Join behavioral health staff, providers, clients and families to provide input.

Share your input at a Community Input Session this summer where we will review San Mateo County's status on each of the required Prop. 1 Priority Goals and discuss strategies to address identified needs.

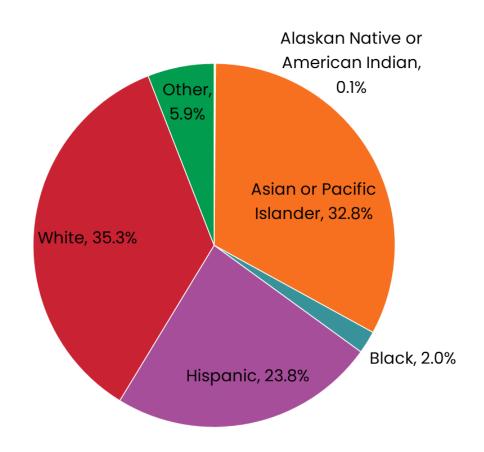
Group	Priority Goal (all sessions will discuss Access to Care + add'l topic)	Date	Time	Meeting Information
Diversity and Equity Council	Untreated Behavioral Health Conditions	8/1/2025	11:00am - 12:00pm	Zoom link Meeting ID: 840 4489 5737 Passcode: DEC BHRS
Children and Youth System of Care (CYSOC)	Removal of Children from Home	8/4/2025	3:30pm - 4:30pm	Closed Session
Lived Experience Education Workgroup (LEEW)	Institutionalization	8/5/2025	3:30pm - 4:30pm	Closed Session
BHSA Transition Taskforce	Homelessness, Justice Involvement, Social Connection	8/7/2025	3:00pm - 4:30pm	Zoom link
North County Outreach Collaborative	Access to Care – Early Interventions	8/8/2025	9:30am - 10:30am	TBD
East Palo Alto Community Service Area	Access to Care – Early Interventions	8/28/2025	1:00pm - 2:00pm	TBD
Coastside Collaborative	Institutionalization	8/18/2025	4:00pm - 5:00pm	Zoom link Meeting ID: 952 6730 6599 Passcode: Coastside
Housing Operations and Policy (HOP) Committee	Homelessness	8/14/2025	9:00am - 10:00am	Zoom link
Peer Providers	Untreated Behavioral Health Conditions	8/12/2025	4:30pm - 5:30pm	Zoom link
Contractors Association	Untreated Behavioral Health Conditions	8/21/2025	9:00am - 10:00am	Closed Session
Alcohol and Other Drug (AOD) Providers	TBD	9/4/2025	10:30am - 11:30am	Closed Session
Behavioral Health Commission (BHC) AOD Committee	Homelessness	9/10/2025	4:00pm - 5:00pm	Teams link Mtg ID: 299 707 975 332 Passcode: cw79zA3m
BHC Adult Recovery Committee	Justice Involvement	9/17/2025	10:30am - 11:30am	Zoom link
BHC Older Adult Committee	Institutionalization	9/17/2025	1:00pm - 2:00pm	Zoom link
BHC Youth Committee	TBD	TBD		

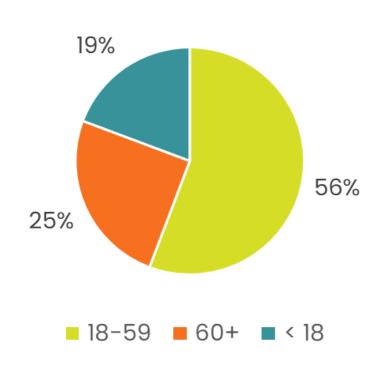
\*Please check back regularly for most up-to-date information— last updated 7/28/25

#### Input Session Breakouts

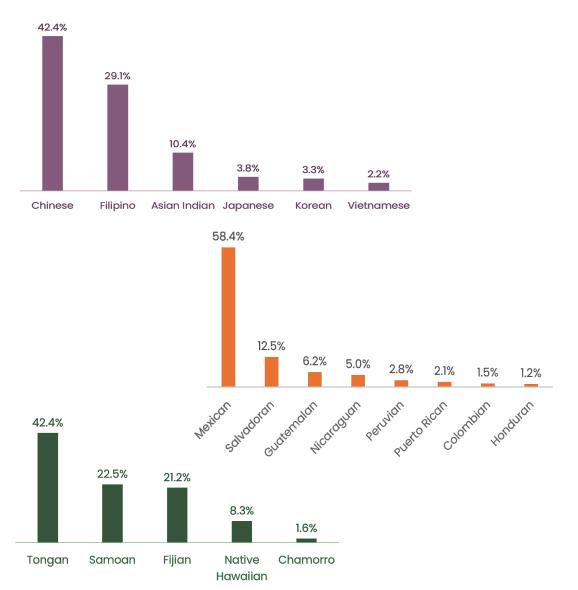


### San Mateo County Demographic Overview





#### Race/Ethnicity Overview: San Mateo County



- San Mateo County is an ethnically diverse community mostly split in thirds between Asian, White, and Latino/a/x communities.
- When we talk about Asian communities, we are talking largely about Chinese,
   Filipino/a/x, and Asian Indian ethnicities.
- Our Latino/a/x community largely corresponds to Mexican and Central American ethnicities.
- In San Mateo County, Pacific Islander communities are largely Tongan,
   Samoan, and Fijian ethnicities.

## Why does this matter?

Behavioral health outcome analyses will employ an equity-oriented approach and allow us to identify disparities in outcomes by specific demographics (age, race\*).

\*While the race categories have been determined by the state, when we talk about San Mateo County consider the specific makeup of ethnic communities.



#### **Breakout Options:**

 Each breakout session will start with short data overview and followed by facilitated discussion to brainstorm strategies.

Room #1

Access to Care

Room #2

Social Connection

Room #3

Justice Involvement In Person

Social Connection / Homelessness

#### Access To Care



## Definition & Rationale

Access to care is defined as the timely and appropriate use of health services to achieve the best possible health outcomes, inclusive of all modalities. Improving Californians' access to care is necessary for improving outcomes. Compliance with provider availability as outlined in network adequacy requirements, strategies for navigating the complex care delivery system, and improving wait times for appointments will enable Californians to better access the right care at the right time.

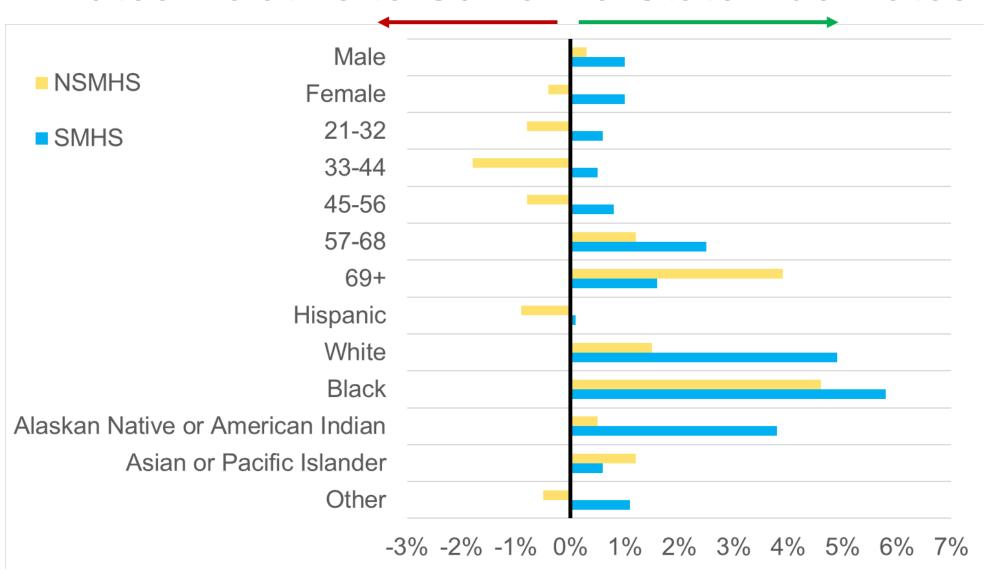


#### Understanding Adult Access to Services

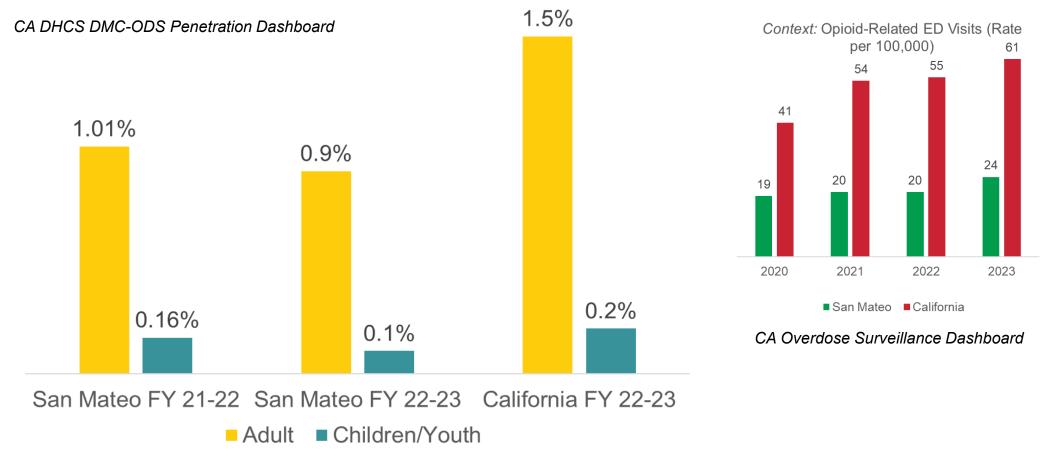
- 1. San Mateo County has **higher penetration rates** for Specialty Mental Health Services
- 2. San Mateo County has **lower penetration rates** for Non-Specialty Mental Health Services

 Notably, data shows that younger adults, women, and Latino/a/x community members have <u>lower</u> rates of access.

### San Mateo Adult Mental Health Services Penetration Rates Relative to California Statewide Rates



#### San Mateo Adult DMC-ODS\* Penetration Rates



DMC-ODS penetration rates have decreased from FY 21-22 to FY 22-23, despite an increase in Opioid-Related Emergency Department visits

\* See glossary of terms

#### Understanding Youth Access to Services

- 1. San Mateo County has **lower penetration rates** for Specialty Mental Health Services\*\*\*
- 2. San Mateo County has **higher penetration rates\*** for Non-Specialty Mental Health Services\*\*

These two data points could be related! It may be that the high access to Non-Specialty Mental Health Services is substituting or preventing access of higher intensity Specialty Mental Health Services.



#### Input Session Questions

- 1. Based on the data shared, your knowledge, observations and experiences in the community...
  - a) What is needed (strategies) to improve community outcomes?
    - Is there work to sustain/expand or new work needed?
  - b) What partnerships are needed to support the strategies?



#### Homelessness

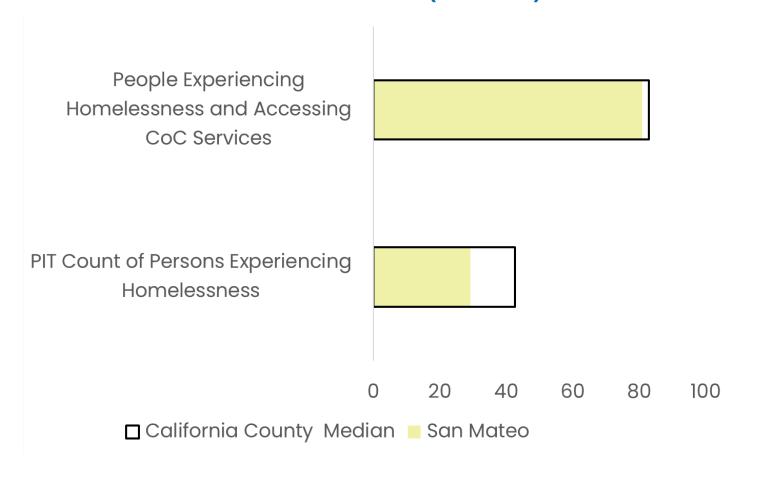


## Definition & Rationale

**Homelessness** is defined below in Section 7.C.4.1.1 of the Housing Interventions chapter. Addressing the increase in statewide homelessness is crucial to ensuring unhoused individuals living with significant behavioral health needs receive regular access to behavioral health treatment and safe and stable housing where they can recover.



#### San Mateo County has fewer persons identified as Homeless in the Point In Time (PIT) data but comparable to other Counties of persons accessing Continuum of Care (CoC) Services





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#### Justice Involvement

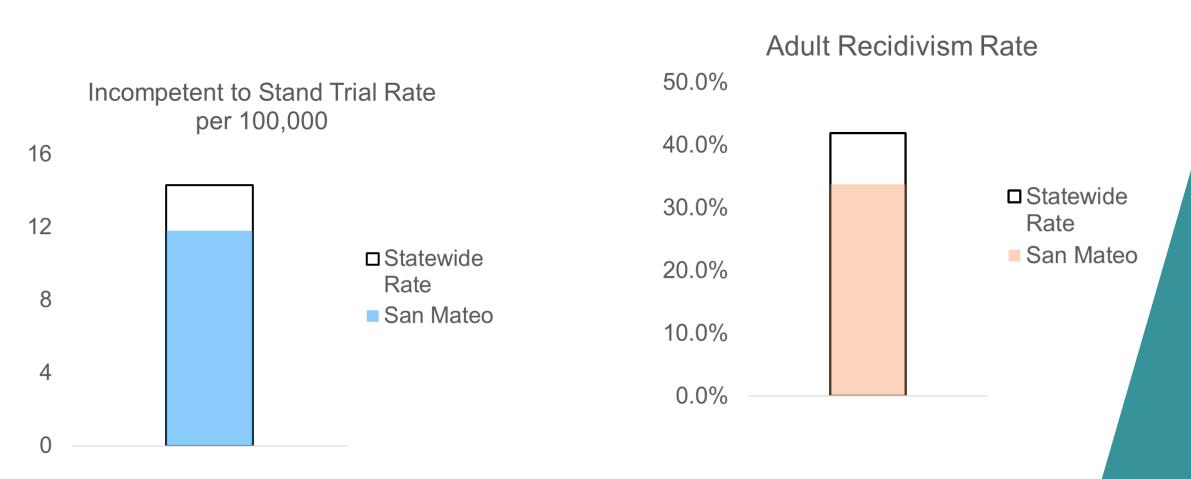


## Definition & Rationale

Reducing justice involvement refers to reducing adults and youth living with behavioral health needs who are involved in the justice system - including those who have been arrested, are living in, who are under community supervision, or who have transitioned from a state prison, county jail, youth correctional facility, or other state, local, or federal carcel settings where they have been in custody of law enforcement authorities. More than 50 percent of incarcerated individuals are living with a behavioral health condition. Promoting coordinated systems of care between the legal system and behavioral health plans and providers can have an impact on reducing justice involvement and improving outcomes for those who are justice-involved.



### San Mateo rate of arrests is comparable to California, but other key measures outperform the state average



Latino/a/x rate of arrests has been steadily increasing in the past years.



#### Input Session Questions

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#### **Social Connection**



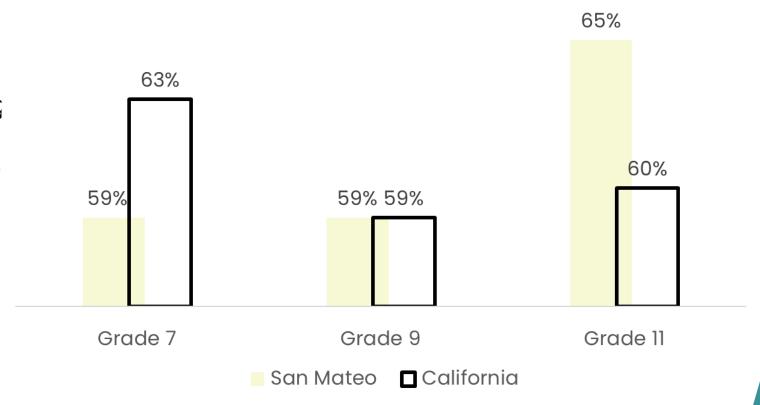
## Definition & Rationale

**Social connection** refers to the degree to which an individual has the number, quality, and variety of relationships that they want to feel and have belonging, support, and care. Establishing and maintaining supportive relationships is vital for preventing and managing significant behavioral health needs along with other behavioral health conditions associated with loneliness and isolation



### In San Mateo County, 7<sup>th</sup> graders are less likely to report a caring adult relationship in school.

Latino/a/x students
 consistently report among
 the lowest rates of %
 Caring Adult Relationship





#### Input Session Questions

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  - a) What is needed (strategies) to improve community outcomes?
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#### **Next Steps**



#### **Community Program Planning (CPP) Framework**

January – April 2025

March - September 2025

October 2025-June 2026



Community engagement at every stage

Promote & identify diverse stakeholders to sit

• Launch Taskforce

on Taskforce

•BHSA transition education & training

> **BHSA Transition** Taskforce



- Analyze data per DHCS priority goal performance measures
- Review reports to identify community needs and gaps



interviews with hard-to-reach stakeholders

Strategy

- Align with state-wide goals
- •Launch survey to prioritize community strategies

Integrated Plan

- Develop Plan
- •Release Plan for a 30-day public comment period
- Host Public Hearing
- Obtain BOS approval and submit Plan



Collaboration

**Assessment and Strategy** 

**Planning** 

#### **Looking forward**

Continue to work with all partners across the **Behavioral Health Continuum of Care** 

Ongoing improvement of the CPP Process to engage across all service categories

#### Additional Input Activities



- Key Informant Interviews
- Community Survey (Fall 2025)



#### Thank You!

- Subscribe to stay up-to-date and receive opportunities to get involved in MHSA and Prop.1 planning: <a href="www.smchealth.org/MHSA">www.smchealth.org/MHSA</a>
- Contact: mhsa@smcgov.org
- Let us know how we can improve:

https://www.surveymonkey.com/r/BHSA Transition







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