



VENTURA COUNTY

BEHAVIORAL HEALTH

A Department of Ventura County Health Care Agency

December 10, 2024

CALIFORNIA'S BEHAVIORAL HEALTH TRANSFORMATION (BHT)

Ventura County Implementation Update

Dr. Loretta Denering
Director

California Community Assistance, Recovery, and Empowerment (CARE) Act

CARE Act Update

The California Community Assistance, Recovery, and Empowerment (CARE) Act is a state initiative designed to assist people with untreated schizophrenia or other psychotic disorders. CARE creates a pathway to mental health and substance use disorder services. The CARE Act facilitates coordinated CARE agreements/plans, aiming to support individuals through voluntary agreements and judicially supervised services. Ventura County is a Cohort 2 County.

- ❖ **Mock Trial Conducted:** Mock Trial was scheduled from October 9th through October 23rd. Involved representatives from Ventura County Superior Court, County Counsel, Public Defenders, the CEO's Office, and County Behavioral Health. This mock trial tested protocols and coordination among stakeholders for CARE Act cases.
- ❖ **PIO Collaboration for Media Toolkit:** Worked with Public Information Officers (PIOs) to create a media and communications toolkit for consistent messaging and outreach.
- ❖ **Court Website Launch:** Developed a designated CARE Act webpage to centralize information and streamline public access to resources.
- ❖ **CalHHS CARE Act Convening:** On October 7th County staff participated in the California Health and Human Services (CalHHS) CARE Convening event, which brought together key stakeholders to discuss best practices and strategies for implementing the CARE Act.
- ❖ **CARE Act launched on 12/1/2024:** The CARE Act program went live on **December 1, 2024**. Ventura County Superior Court is now accepting petitions.

CARE Act Planning Structure & Key Contributors

Ventura County Executive Committee

Executive leadership from each Ventura County Department, including VCBH, met quarterly to discuss CARE Act implementation and progress status.

Agencies include:

- CEO
- District Attorney
- COURTS
- Public Defender
- County Counsel
- Sheriff's Office
- Probation
- Health Care Agency

CARE Act Steering Committee

In January 2024, VCBH gathered representatives provided from the Executive Leadership Committee to establish and facilitate a CARE Act Steering Committee from various agencies within Ventura County.

Agencies include:

- VCBH
- Public Defender's Office
- Court + Self-Help Center
- County Counsel
- District Attorney's Office
- Sheriff's Department
- Probation Agency
- CEO's Office
- Public Information Office

CARE Act Workgroups + Mock Trial

CARE Act Workgroups:

Workgroups were formed to address specific areas of implementation:

- **Courts/VCBH workgroup:** included PD Office & County Counsel
- **Communication Strategy Workgroup**

CARE Act Mock Trial:

In October, CARE Act Mock Trial proceedings were conducted with the following agencies:

- VCBH
- Court/Self-Help Center,
- Public Defender
- County Counsel

VCBH Implementation Committee

VCBH formed an internal CARE Act project team, including Operation/Clinical leads and project management staff, to drive implementation.

Weekly stakeholder workgroup were held to share team program, collaboration efforts, & updates On VCBH/Court activities.

Teams include:

- Managed Care Operations (QA, EHR/Informatics, QI, UR, Training, Compliance, Policy Office)
- Forensics, Justice, & Re-Entry Services
- Outpatient Clinical Operations
- Critical Care & Navigation Services
- Patients' Right/Client Advocate

Proposition 1: Senate Bill 326 & Assembly Bill 531 (Passed March 2024)

Ongoing Stakeholder Engagement

Established weekly and bi-weekly **key internal stakeholder** groups

Joined weekly **key external stakeholder** groups with report back mechanisms

Attend all **DHCS Listening sessions** and provide **public comment**

Discussions with **Prevention** providers to discuss impact of legislative changes related to **Prevention \$\$ going to California Dept of Public Health (CDPH)**

Discussions with **Early Intervention** providers to discuss **unfolding changes to Early Intervention**

Presented Prop 1 implications at **Board of Supervisors (December 2023 & May 2024)** and **BHAB (August 2024)** as well as other internal and external meetings

Working with Ventura County Community Health Improvement Collaborative (**VCCHIC**) on the development of the **Community Health Needs Assessment (CHNA)**

Meeting with **city managers** to orient them to Prop 1 including the **Behavioral Health Continuum Infrastructure Program (BHCIP)**

Meeting with **Continuum of Care (CoC)** on Housing Collaboration

Meeting with **Criminal Justice** Stakeholder group

Working to submit **two BHCIP applications** by December 13 for an BHCIP funding opportunities

As soon as more guidance (**expected early 2025**) from DHCS is provided, staff will engage with **increased stakeholder engagement**

Senate Bill 43: Expanding the Definition of “Grave Disability” Under the Lanterman-Petris-Short (LPS) Act

Senate Bill 43 Update

SB 43 amended the Grave Disability definition to the following: A condition in which a person, provided, a mental health disorder, a severe substance use disorder, or a co-occurring mental health disorder and a substance use disorder, is unable to provide for their basic personal needs for food, clothing, shelter, personal safety, or necessary medical care. This definition applies to 5150, 5250, 5270 holds and LPS conservatorships. Ventura County will “go live” by January 1, 2026. To date:

- ❖ **Attended SB 43 Workgroups:** Participated in weekly SB 43 Ad-Hoc Workgroups, which brought together fellow counties and key stakeholders from the California State Association of Public Administrators, Public Guardians, and Public Conservators and California Hospital Association to discuss best practices and strategies for implementing SB 43.
- ❖ **Kick-off Meeting:** A Ventura County Kick Off meeting was conducted on October 9, 2024. Involved representatives from Ventura County, County Counsel, Public Defenders, the CEO’s Office, Law Enforcement, members of the Hospital Association of Southern California, and County Behavioral Health. An overview of SB 43 was provided, and a steering committee was to be established as next steps.
- ❖ **Ventura SB 43 Steering Committee:** Beginning January 2025, VCBH will launch a series of planning meetings, including a steering committee and two focused workgroups comprised of first responders and hospital/medical stakeholders.

California Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment (BH-CONNECT)

BH-CONNECT: Incentive Program

The **BH-CONNECT incentive program** is a key “**carrot**” that DHCS is using to drive behavioral health delivery system reform. The incentive program aligns with the overall goals of BH-CONNECT and DHCS’ broad behavioral health reforms, and has three specific goals:

1

Strengthen county BHPs’ **managed care performance and quality improvement capabilities.**

2

Implement and scale new **evidence-based service models with fidelity.**

3

Improve member outcomes, especially for **high-risk populations experiencing disparities.**

BH-CONNECT: Managed Behavioral Healthcare Organization (MHBO) Assessment

Managed Behavioral Healthcare Organization (MHBO) Assessment

- **What is MBHO?**
 - MBHO is an NCQA certification focused on Quality Management, Improvement, and Care Coordination.
- **Purpose of the Self-Assessment**
 - DHCS partnered with NCQA to implement a targeted self-assessment to prepare counties for BH-CONNECT and its incentive program.
- **Ventura's Participation**
 - Ventura County declared participation by May 31 and completed the self-assessment process from August 1 to September 30, supported by DHCS and NCQA training.
- **Current Status**
 - DHCS is reviewing MBHO submissions and will use the results to shape BH-CONNECT policies and funding allocation.
- **Next Steps**
 - DHCS plans to announce BH-CONNECT guidance by December 31, aiming for cohesive and supportive implementation.

Gather and submit self-assessment evidence to NCQA by September 30, 2024

Participate in follow-up and assessment completion with NCQA in October and November 2024

Receive baseline assessment from NCQA and guidance from DHCS to establish a plan for addressing gaps and satisfying BH-CONNECT requirements for Statewide and EBP incentive programs beginning January 1, 2025

CalAIM Behavioral Health Administrative Integration

CalAIM Behavioral Health Administrative Integration Goals and Key Components

Purpose:

- Unite specialty mental health services (SMHS) and substance use disorder services (SUD) under one county contract with DHCS

Primary Goals

- Streamline Medi-Cal to be more person-centered and equitable
- Improve patient care experience and outcomes
- Ease administrative workload for counties and providers

Key Components for Early Implementation

- 24/7 Access Line: Single hotline for SMHS and SUD services
- Unified Contracts: Single, integrated contract with DHCS
- Cultural Competent and Quality Improvement Plans: Unified plans covering both SMHS and SUD
- Beneficiary Resources: Single provider directory and grievance process

Timeline Overview

- 2023-2024: Voluntary contract integration (Phase I)
- 2025-2026: Full county participation for early adopters (Phase II)
- 2027+: Statewide mandatory integration (Phase III)

Administrative Integration: Current Status

Implemented

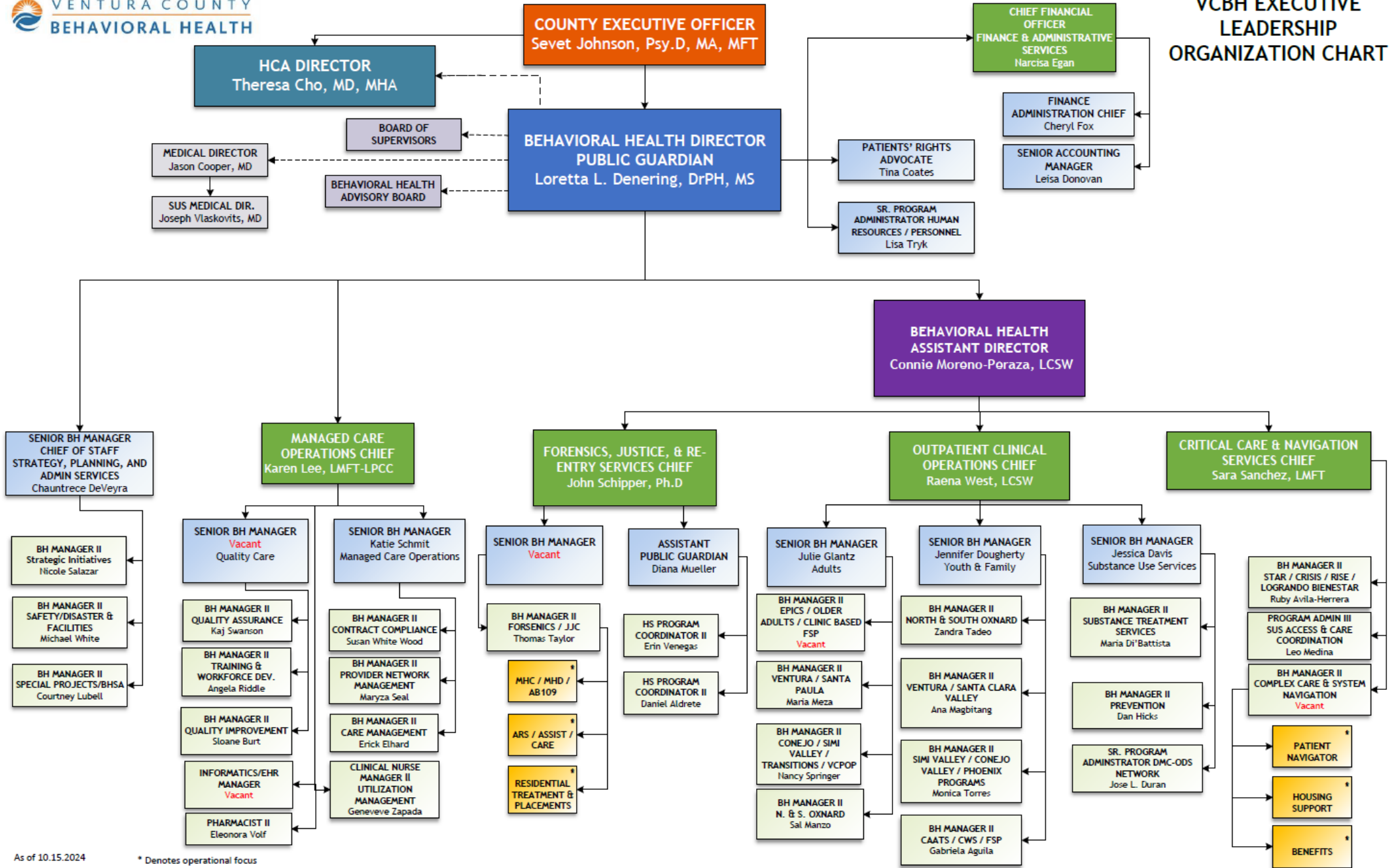
- Integrated Monitoring Activities (State Reviews)
- Integrated Grievance and Appeal Process
- Integrated QI, QA, UR, and other Managed Care Operations Functions
- Single Plan Member Enrollment Packet and Policy
- Single 24/7 Access Line

In Progress

- Integrated Contract with DHCS (early adopter)
- Integrated MOUs with MCPs
- Single Member Handbook
- Single Release of Information
- Universal Coverage Determinations, Appeals, and Grievances (CDAG)
- Operational Realignment
- Policy Realignment and Integration
- Utilization Management, Care Management, Compliance Oversight

Not Started

- Quality Payment/Incentive Programs
- Integrated tools, outcome measures, and other requirements expected from the State



Questions?

