## Behavioral Health Continuum Infrastructure Program (BHCIP) Round 4: Children and Youth Listening Session

Hosted by:

Marlies Perez, Chief, Community Services Division

Department of Health Care Services

Patrick Gauthier, Director of AHP Healthcare Solutions Advocates for Human Potential



### **Listening Session Format**

- » For each topic, DHCS will:
  - 1. Present the information specified in the Behavioral Health Continuum Infrastructure (BHCIP) program
  - 2. Provide a prompt related to the policy decisions for Round 4: Children and Youth
  - Solicit stakeholder verbal or written feedback via chat on the prompt

» Please Note: DHCS is gathering information and will not be responding to questions during the listening session. We will only offer points of clarification.

#### **How to Provide Feedback**

- Type your feedback/comments in the chat box (click the chat icon located on your control panel).
- 2. Send an email to <a href="mailto:BHCIP@dhcs.ca.gov">BHCIP@dhcs.ca.gov</a> with the subject line "Round 4 Listening Session." Feedback will be accepted through March 30, 2022.

## Marlies Perez, Chief, Community Services Division Department of Health Care Services

## Assessing the Continuum of Behavioral Health Services in California

- » To provide data and stakeholder perspectives for DHCS as it implements major behavioral health initiatives and expands the behavioral health infrastructure through BHCIP
- » Released by DHCS on January 10, 2022
- » Assessing the Continuum of Care for BH Services in California

## The Behavioral Health and Well-being of California's Children and Youth

- » Data from the needs assessment demonstrates that the mental health and well-being of California's children (age 25 and younger) is a *rising* concern
- » One in 13 children has a serious emotional disturbance, with higher rates for low-income children and those who are Black or Latino
- The suicide rate among youth continues to rise and has been worsened by the pandemic
- » Visits to emergency departments due to a mental health crisis have climbed 31% for children between the ages of 12 and 17

#### Data from Needs Assessment

- » 75% of stakeholders report an urgent need for psychiatric acute care and inpatient treatment beds for youth
- 32% of outpatient facilities do not treat children and youth
- » 25% of counties report issues with finding providers who are willing to treat youth involved in the justice system
- » 75% of counties lack residential beds specifically for youth
- » 68% of counties lack providers with the training and experience to meet the needs of youth with SUDs

#### **Children and Youth BH Initiative (CYBHI)**

#### **Stakeholder Engagement**

- •School BH Incentive Program
- •BH Continuum Infrastructure Program
- CalHOPE Student Services
- Activate youth engagement forums
- Launch ACEs and toxic stress public awareness campaigns (OSG)
- Promote CYBHI via stakeholder engagement events and media appearances

FY 21/22

## FY 22/23

- •BH Workforce Expansion (HCAI)
- Scaling Evidence-based Practices Grants
- •School-linked Partnerships & Capacity Grants
- •Implementation of Dyadic Services Benefit
- Pediatric and Primary Care Training
- •Evaluate success/challenges of traumainformed training for educators (OSG)
- •Issue initial guidance for commercial plans (DMHC)
- •Launch public awareness and education campaign (CDPH)

- BH Virtual Services and E-consult Platform
- Statewide Fee Schedule & BH Provider Network
- •Begin enforcement of commercial plans (DMHC)
- Administer award cycles and begin program evaluation.

FY23/24

## **BHCIP Guiding Principles and Priorities**

- » Invest in behavioral health and community care options that advance racial equity
- » Seek geographic equity of behavioral health and community care options
- » Address urgent gaps in the care continuum for people with behavioral health conditions, including seniors, adults with disabilities, and children and youth
- » Increase options across the life span that serve as an alternative to incarceration, hospitalization, homelessness, and institutionalization

## **BHCIP Guiding Principles and Priorities**

- » Meet the needs of vulnerable populations with the greatest barriers to access, including people experiencing homelessness and justice involvement
- Ensure care can be provided in the least restrictive settings to support community integration, choice, and autonomy
- » Leverage county and Medi-Cal investments to support ongoing sustainability
- » Leverage the historic state investments in housing and homelessness

#### **BHCIP Overview**

- » Passed in FY 2021-22 State budget
- » \$2.1B total
- » Amends Welfare and Institutions Code
- » Provides competitive grants for counties, tribal entities, non-profit and for-profit entities to build new or expand existing capacity in the continuum of public and private BH facilities
- » Funding will be only for new or expanding infrastructure (brick and mortar) projects and not BH services

#### **BHCIP Overview**

- » DHCS will release Request for Applications (RFAs) for BHCIP through multiple rounds
- » Rounds will target various gaps in California's BH facility infrastructure
- » Rounds will remain open until funds are awarded
- » Different entities will be able to apply in each round for specific projects to address identified infrastructure gaps
- » Stakeholder engagement will occur throughout the project

#### Round 4: Children and Youth

- This round authorizes \$480.5 million in funding opportunities through competitive grants to qualified entities to construct, acquire and rehabilitate real estate assets for children and youth.
- >> The population for this round are children and youth ages 25 and younger. Applicants must demonstrate that facility expansion will only be for this population.

# Populations Considered for Round 4 Expansion

Perinatal

Children

Transition-age youth (TAY)

Family-based services

- 1. How can BHCIP: Round 4 support the infrastructure needs specific to different populations of children and youth?
- 2. How does DHCS ensure that it selects applicants that will primarily serve children and youth ages 25 and younger?

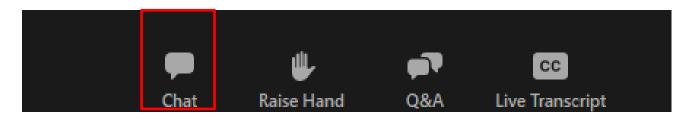


## Round 4 Potential Eligible Facilities

- Community mental health clinic
- Community treatment facility (CTF)
- Outpatient treatment for substance use disorders (SUD)
- Partial hospital for mental health
- Partial hospital for SUD
- Perinatal SUD facilities
- Psychiatric health facility
- Psychiatric acute care hospital

- Adolescent residential treatment facilities for SUD
- Crisis stabilization unit (CSU)
- Children's crisis residential program (CCRPs)
- Short-term residential therapeutic program (STRTP)
- Community wellness center
- Youth behavioral health prevention center
- Behavioral Health Wellness Centers

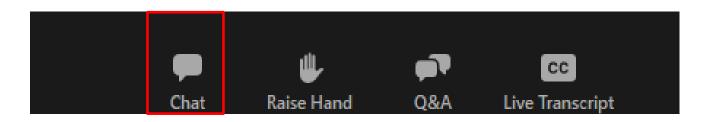
- 1. Are there other facilities that primarily provide BH services for children and youth not listed here for BHCIP Round 4 funding?
- 2. How can DHCS encourage regional approaches or collaborative partnerships to expand behavioral health facilities for children and youth?
- 3. What are the barriers to using this funding opportunity to expand behavioral health services for children and youth?



#### Match

- » Matching funds or real property will be required and are still under development
- » Launch Ready match guidelines were set according to applicant type
  - Tribal entities = 5% match
  - Counties, cities, and nonprofit providers = 10% match
  - For-profit providers and/or private organizations = 25% match
- » Services will not be allowed as a match

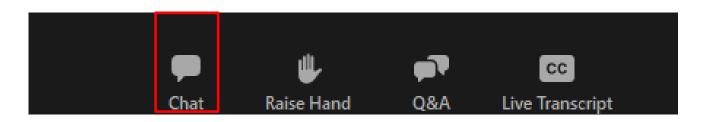
1. DHCS is considering using the same Launch Ready match requirements for Round 4. What is your feedback on the proposed match for Round 4: Children and Youth?



### **Grant Funding and Set Asides**

- 20% of funds available for BHCIP will be set aside for use in regions at the state's discretion to ensure funding is effectively aligned with need
- >> 5% of funds will be set aside for tribes
- » Amounts available per region will be determined based on the Behavioral Health Subaccount

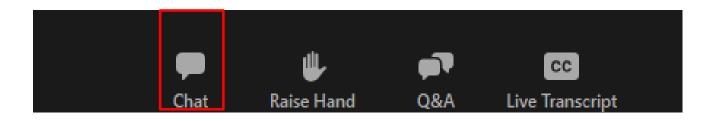
1. What is your feedback on the proposed funding methods for Round 4: Children and Youth?



#### **Technical Assistance**

- As administrative entity, Advocates for Human Potential is assisting DHCS with BHCIP project implementation, including:
  - Planning grants (contracts/funding/TA)
  - Applicant and grantee assistance including preparation of proposals for rounds
  - Real estate TA for grantees (land use zoning, permitting, real estate acquisition, applicable exemptions)
  - Additional TA
  - Data collection and program evaluation

1. What are the TA needs for applicants in administering Round 4: Children and Youth funds?



#### **For More Information**

https://www.infrastructure.buildingcalhhs.com/

BHCIP@dhcs.ca.gov