



## **Status Update: Behavioral Health Continuum Infrastructure Program and Community Care Expansion Program**

### **April 2022**

#### **Summary**

The 2021-22 California State Budget provided once-in-a-generation investments in infrastructure funding alongside significant new state and federal resources to address homelessness, support healthcare delivery reform, and strengthen the social safety net. Together these commitments will address historic gaps in the behavioral health continuum to meet growing demand for services and supports. Infrastructure resources, led out by the Department of Health Care Services (DHCS) and Department of Social Services (CDSS), will ensure care can be provided in the least-restrictive settings by creating a wide range of options including outpatient alternatives, urgent care, peer respite, wellness centers, social rehabilitation models and licensed community care facilities. A variety of care placements can provide a vital off-ramp from intensive behavioral health service settings and transition the most vulnerable Californians to community living as well as provide housing options for older adults and people with disabilities.

#### **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 children and youth and seniors and adults with disabilities
- Increase options across the lifespan that serve as an alternative to incarceration, hospitalization, homelessness, and institutionalization
- 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 on-going sustainably
- Leverage the historic state investments in housing and homelessness

### **CDSS Community Care Expansion (CCE)**

\$805M for acquisition, construction, and rehabilitation to preserve and expand adult and senior care facilities that serve SSI applicants and recipients including those who are homeless or at risk of homelessness. Funds may also be used for capitalized operating subsidy reserves (COSR) in these facilities. As of the 2022-23 Governor's Budget, below is a breakdown of funding

- \$805M in FY 21/22, including \$570M for expansion and \$195M for preservation
  - \$450M ARPA/SFRF to obligate by June 2024 and liquidate by December 2026
  - \$355M GF to obligate by June 2027 and liquidate by June 2029, subject to legislative approval in the 2022 Budget Act (the 2021 Budget Act required expenditure by June 2024 and liquidation by June 2026)

### **DHCS Behavioral Health Continuum Infrastructure Program (BHCIP)**

\$2.1B in competitive grants (\$2.2B total with the inclusion of mobile crisis response funding) to construct, acquire and rehabilitate real estate assets to expand the behavioral health continuum of treatment and service resources in settings that serve Medicaid beneficiaries.

- \$755M in FY 21/22, \$1.45B in FY 22/23 and \$1.5M in FY 23/24 (\$150M Mobile Crisis, \$1.676B general BHCIP, \$300M CYBHI, \$77.3M state ops)
  - \$530 ARPA/Coronavirus Fiscal Recovery Fund to obligate by June 2024 and liquidate by December 2026
  - \$445M GF, expend by June 30, 2026, and \$1.23B GF by June 30, 2027
- A substantial portion of the BHCIP funding will prepare the state for the implementation of the Serious Mental Illness/Serious Emotional Disturbance (SMI/SED) demonstration waiver. DHCS will submit this waiver in late 2022 for CMS approval.
- Applicants for BHCIP funding include counties, cities, tribal entities, and nonprofit and for-profit organizations. Grantees must provide matching funds and must commit to use restrictions for the property per the BHCIP guidelines.

- Six Rounds of request for applications (RFA) which include:
  - #1 Mobile Crisis \$205M<sup>1</sup>
  - #2 County and Tribal Planning Grants \$16M
  - #3 Launch Ready: New Infrastructure Projects \$518.5M
  - #4 Children & Youth \$480.5M
  - #5 BH Needs Assessment Phase One \$480M
  - #6 BH Needs Assessment Phase Two \$480M

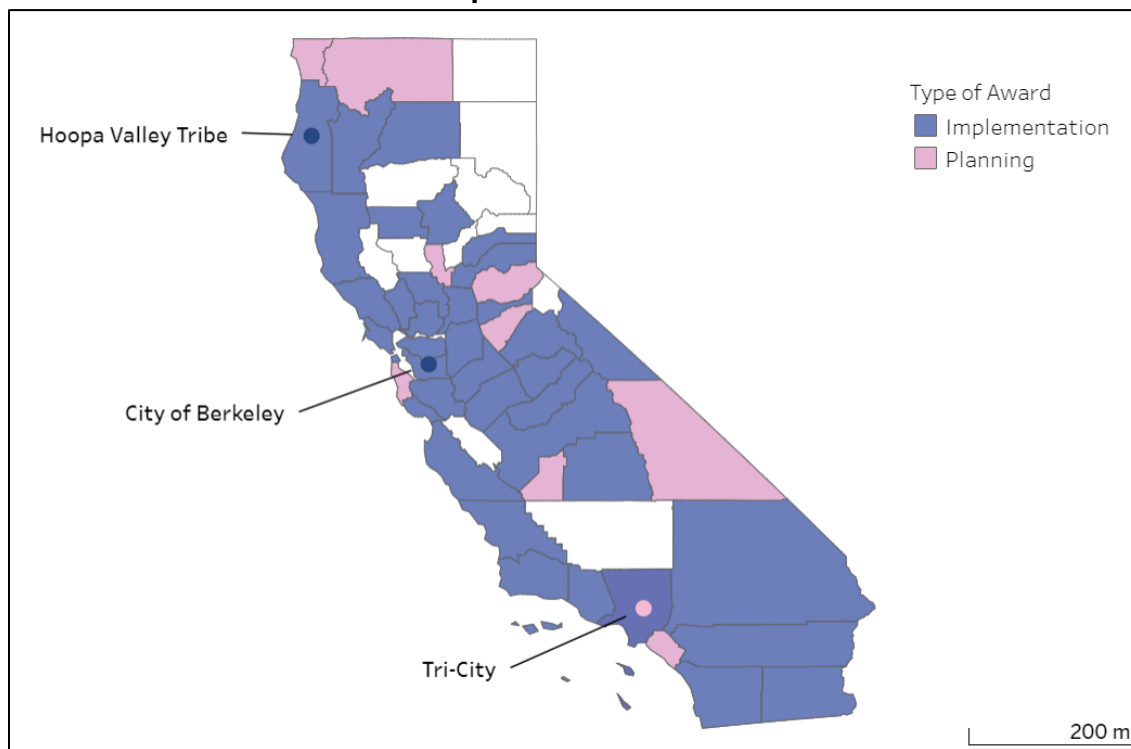
<b>BHCIP Timeline</b>	
<b>July 2021</b>	Released BHCIP Round 1A: Mobile Crisis RFA
<b>October 2021</b>	Released BHCIP Round 1B: Mobile Crisis RFA
<b>October-November 2021</b>	Conducted BHCIP and CCE Listening Sessions
<b>November 2021</b>	<ul style="list-style-type: none"> <li>• Awarded BHCIP Round 1A: Mobile Crisis</li> <li>• Released BHCIP Round 2A: BHCIP and CCE Planning Grants RFA</li> </ul>
<b>January 2022</b>	<ul style="list-style-type: none"> <li>• Released BH Assessment Report</li> <li>• Awarded BHCIP Round 2A: Planning Grants</li> <li>• Released BHCIP 2B: Planning Grants</li> <li>• Released joint BHCIP Round 3: Launch Ready and CCE RFA</li> </ul>
<b>February 2022</b>	Awarded BHCIP Round 1B: Mobile Crisis
<b>March 2022</b>	Conducted BHCIP Listening Session for Round 4
<b>April 2022</b>	Awarded BHCIP: Round 2B Planning Grants
<b>June 2022</b>	Award Round 3: Launch Ready grants
<b>June 2022</b>	Release Round 4: Children and Youth RFA
<b>October 2022</b>	Award Round 4: Children and Youth grants
<b>October 2022</b>	Release Round 5: Addressing Gaps #1 RFA
<b>January 2023</b>	Release Round 6: Addressing Gaps #2 RFA

<sup>1</sup> Fifty-five million in Substance Abuse and Mental Health Services Administration (SAMHSA) mobile crisis response funding

## BHCIP Round 1 Update – Mobile Crisis (Counties, Cities, and Tribal Entities)

The Mobile Crisis program grants are being awarded to California county, city, and tribal entity behavioral health authorities to implement or expand mobile crisis infrastructure and limited direct services. DHCS awarded \$140 million to 45 applicants through the Round 1A: Mobile Crisis, resulting in 219 new or enhanced mobile crisis teams throughout California. The Round 1B: Mobile Crisis closed on January 4, 2022, and DHCS awarded \$17.7 million to six county mobile crisis programs to fund 18 new or enhanced mobile crisis teams. Through Rounds 1A and 1B, DHCS has awarded \$157.7 million to 51 entities to fund 237 new or enhanced mobile crisis teams. The map below identifies all 51 awarded entities, which includes 48 awarded counties as well as the City of Berkeley, Tri-City Mental Health Authority, and Hoopa Valley Tribe. Mobile Crisis contracts are in the final stage of development and activities began in January 2022.

### BHCIP Mobile Crisis Award Map



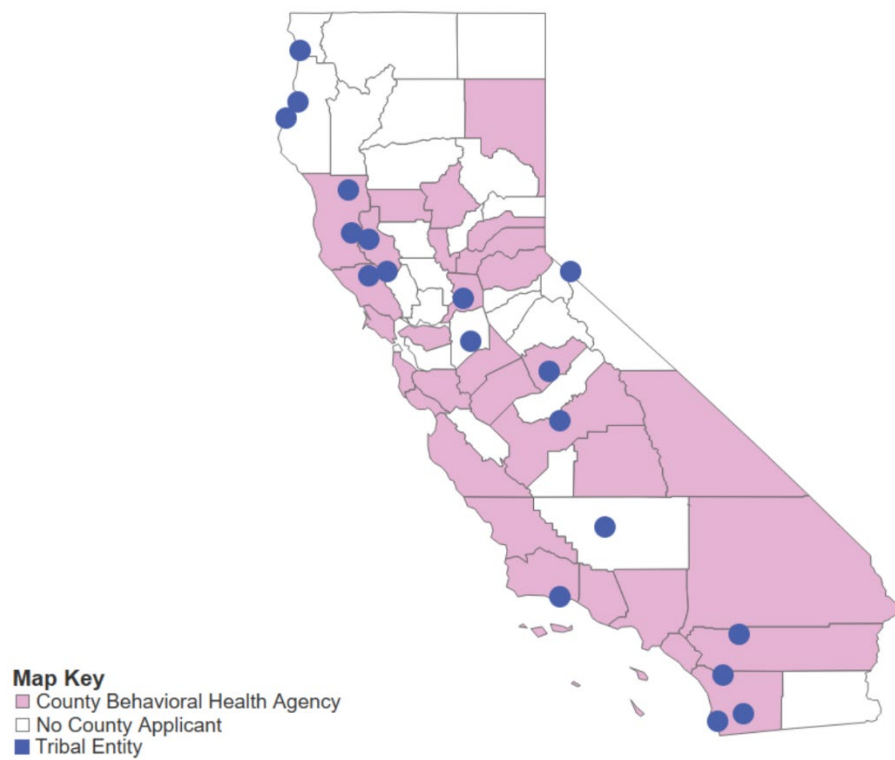
## BHCIP Round 2 Update – Planning Grants (Counties and Tribal Entities)

This round of funding is intended to support preparation activities to plan for the acquisition and expansion of BH infrastructure throughout the state. DHCS awarded a total of \$5.4 million through the Round 2A: Planning Grant RFA to 36 applicants, nine which are tribal entities. In April, DHCS awarded a total of \$2

million through the Round 2B: Planning Grant RFA to 15 applicants, 10 of which are tribal entities. In Rounds 2A and 2B, DHCS awarded a combined total of \$7.4 million to 51 applicants, 19 of which are tribal entities. Each received \$150,000 to initiate and support BHCIP planning efforts in their communities.

This round of funding is intended to support preparation activities to plan for the acquisition and expansion of behavioral health infrastructure. Technical assistance (TA) will continue to be provided to awardees throughout the grant period. The map below includes all 51 awarded entities. Contracts for Round 2A are in development and activities began in February 2022.

### BHCIP Behavioral Health Planning Grant Award Map



### Community Care Expansion and BHCIP Round 3 Update – Launch Ready (Cities, Counties, Tribal Entities, Nonprofit Organizations, and For-Profit Organizations)

In January 2021, DHCS and the Department of Social Services (DSS), released a coordinated application for the BHCIP Round 3: Launch Ready and Community Care Expansion Program (CCE) Capital Expansion funding opportunities. This has been an important joint effort between the two departments. Applicants were

invited to apply for either funding opportunity, or both. Applications are currently under review, and BHCIP and CCE award announcements are anticipated in June. BHCIP applicants were required to demonstrate projects expansion with the behavioral health continuum of treatment and services in settings that serve Medi-Cal beneficiaries, and have a valid planning process to ensure projects are ready for implementation (“launch ready”). CCE applicants must demonstrate expansion of residential care settings that serve seniors and adults with disabilities, who are applicants or recipients of SSI/SSP or CAPI benefits, with priority for people experiencing or at risk of homelessness. CCE applicants have the opportunity to apply for funds for pre-development costs to assist projects from concept or vision to launch readiness.

All applicants were required to schedule and attend a pre-application consultation to determine their understanding of the RFA requirements. The consultation allowed applicants to demonstrate how their proposed project meets local and/or regional gaps identified through the [DHCS Assessing the Continuum of Care for Behavioral Health Services in California](#), incorporates long term sustainability of the project, as well as how it addresses the state’s priorities (listed on pages 1-2, above).

The deadline for BHCIP Round 3: Launch Ready applications was April 8 (a second round may be offered, if funds remain after application review), with 149 applicants requesting \$2.1 billion. Applicants are spread across 30 counties. Application reviews are currently underway. DHCS expects to announce BHCIP Round 3: Launch Ready awards June 2022.

CCE applications are accepted on a rolling basis and will continue to be awarded until funds are exhausted. DSS expects to announce a statewide summary of initial awards in mid- to late-June 2022.

A Notice of Funding Availability (NOFA), announcing \$195 million in non-competitive allocations for counties with existing licensed adult and senior care facilities serving SSI/SSP recipients will be released in the coming weeks. The NOFA will include \$55 million for operating payment subsidies administered by counties and intended to immediately preserve licensed facilities at risk of closure.

## **BHCIP Round 4 Update – Children and Youth (Cities, Counties, Tribal Entities, Nonprofit Organizations, For-Profit Organizations)**

Round 4: Children and Youth focuses on children and youth ages 25 and younger, including pregnant and postpartum women and their children, children, and transition-age youth (TAY), as well as their families. All applicants will need to demonstrate how their infrastructure project will expand behavioral health services for this population exclusively. Applicants can provide services for any of the subpopulations in this age group, along with family-based clinical services. Regional models or collaborative partnerships to expand behavioral health facilities for children and youth will be encouraged to apply.

DHCS held a [Listening Session](#) in March 2022. The RFA for Round 4: Children and Youth will be released in early June and the application deadline will be August 2022. Award announcements are expected in Fall 2022. DHCS has released a [program update](#) as a supplement to the upcoming RFA) for BHCIP Round 4 funding. As in Round 3, applicants required to undergo a pre-application consultation. They will be expected to demonstrate “project readiness,” as detailed in the forthcoming RFA, and will be funded according to which of three pre-construction phases their project is in. Full project funding will be contingent on completion of all three phases of development planning.

## **BHCIP Rounds 5 and 6 Updates**

Rounds 5 and 6 are currently in active development, based on an analysis of outstanding gaps in the behavioral health continuum. This process includes a thorough review of data from several sources, including but not limited to DHCS’ “Assessing the Continuum of Care for Behavioral Health Services in California,” RAND Corporation’s “Adult Psychiatric Bed Capacity, Need, and Shortage Estimates in California—2021,” facilities data from the California Health and Human Services Open Data Portal, Medi-Cal eligibility data, and projections of potential coverage from BHCIP Round 3: Launch Ready and BHCIP Round 4: Children and Youth. Information about these rounds will be available in the coming months.