County of Los Angeles
Health and Mental Health Services

FESIA A. DAVENPORT
Chief Executive Officer

DATE: Wednesday, May 26, 2021
TIME: 10:00 a.m.

DUE TO CLOSURE OF ALL COUNTY BUILDINGS,
MEETING WILL BE HELD BY PHONE.
TO PARTICIPATE IN THE MEETING, PLEASE CALL AS FOLLOWS:
DIAL-IN NUMBER: 1 (323) 776-6996
CONFERENCE ID: 479494149#
MS Teams link (Ctrl+Click to Follow Link)
THIS TELECONFERENCE WILL BE MUTED FOR ALL CALLERS. PLEASE DIAL *6 TO UNMUTE YOUR PHONE WHEN IT IS YOUR TIME TO SPEAK.

AGENDA

Members of the Public may address the Health and Mental Health Services Meeting on any agenda item. Two (2) minutes are allowed for each item.

I. Call to order

II. **NOTICE OF CLOSED SESSION - (Set for 9:30am)**
CS-1 CONFERENCE WITH LEGAL COUNSEL – EXISTING LITIGATION
Government Code Section 54956.9(a)
Virginia Cuevo, et al. vs. County of Los Angeles, et al.
Los Angeles Superior Court Case No. 19STCP02357
Department of Health Services

III. **Information Item(s)** (Any Information Item is subject to discussion and/or presentation at the request of two or more Board offices)**:**

a. DHS: Request approval for acceptance of the Whole Person Care Award from the California Department of Health Care Services and approve related action necessary to continue the Whole Person Care Programs and any new Programs

b. DPH: Authorization to Accept Two Grant Awards and Future Awards and/or Amendments from the Centers for Disease Control and Prevention for Integrated HIV Programs for Health Departments to Support Ending the HIV

Epidemic in the United States for the Period of August 1, 2020 Through July 31, 2025 and Approval to Amend A Sole Source Contract with the City of Long Beach Department of Health and Human Services for the Period of Date of Board Approval Through December 31, 2024 (#5740)

c. **DPH:** Approval to Execute an Amendment to Domestic Violence Supportive Services Contract with New Star Family Center (#5736)

IV. **Presentation Item(s):**

a. **DHS:** Request approval of allocation methodology of Measure B funds for non-County trauma hospitals and to extend Trauma Center Service Agreements through June 30, 2022.

b. **DMH:** Adoption of the Department of Mental Health's Mental Health Services Act Three-Year Program and Expenditure Plan

c. **DMH:** Approval to Execute New Legal Entity Contracts for Fiscal Years 2021-22, 2022-23, and 2023-24 for the Provision of Specialty Mental Health Services

d. **DMH:** Approval To Execute A Sole Source Contract With The MST Services, LLC to Provide Program Support, Training, and Licensure

V. Items Continued from a Previous Meeting of the Board of Supervisors or from the Previous Agenda Review Meeting

VI. Items not on the posted agenda for matters requiring immediate action because of an emergency situation, or where the need to take immediate action came to the attention of the Department subsequent to the posting of the agenda

VII. Public Comment

VIII. Adjournment

BOARD LETTER FACT SHEET

Agenda Review Date: May 26, 2021
Board Meeting Date: June 8, 2021
Sup. Dist. / SPA No.: All

Choose Approval

DEPARTMENT: ***Department of Health Services (DHS)***

SUBJECT: Approve acceptance of a temporary, one-year extension of Whole Person Care funding from the California Department of Health Care Services and approve related actions necessary to implement the extension of Whole Person Care to continue serving the County's most vulnerable populations.

I. PUBLIC BENEFIT (precise description, mandated or non-mandated)

The acceptance of the extension award will support Whole Person Care's (WPC) effort to better serve the County's most vulnerable populations to ensure they have the resources and support they need to live healthy and productive lives.

II. RECOMMENDED ACTIONS (summarized)

Delegate authority to: 1. Director of DHS (Director) to accept an award from the California Department of Health Care Services (DHCS), in the amount of approximately $135.3 million over a twelve month period from January 1, 2021, through December 31, 2021, and sign an agreement and all other documents with DHCS in order to extend the WPC Pilot; 2. The Director to execute any future amendments to the aforementioned agreement and related documents with DHCS necessary to extend the WPC Pilot Program; 3. The Director to enter into and implement agreements with the State of California and sign all necessary documents for an intergovernmental transfer agreement for a total aggregate amount in 2021 estimated to be $150 million to provide the local match for the WPC Pilot Program; 4. The Director of DHS and DMH, to execute new agreements and/or amend existing agreements with community care residential facilities; 5. The Director, (i) execute a no-cost agreement with the Metropolitan Transportation Authority for the Immediate Needs Transportation Program to receive transportation vouchers; (ii) execute agreements with providers of Information Technology platforms that simplify the provision of transportation services for WPC clients with medical transportation needs; 6. The Director, to execute any forthcoming agreements, amendments and/or related documents with DHCS necessary to close out WPC and/or begin the transition from WPC to California Advancing and Innovating Medi-Cal.

III. COST AND FUNDING SOURCES

Cost: $52,409

Funding: The anticipated award funding from DHCS is $135.3 million.

IV. BACKGROUND (critical and/or insightful)

On November 1, 2016, the Board approved DHS, to accept $450 million in Federal funds to enter into a five-year agreement with DHCS to implement WPC. WPC is a five-year program authorized under the California Medi-Cal 2020 Demonstration Pilot approved by the Centers for Medicare and Medicaid Services. A second round of competitive funding for WPC was released in early 2017 and DHS was awarded funding in the amount of $180.2 million. WPC was scheduled to end along with the 1115 Medicaid Waiver at the end of 2020, due to the pandemic and the delay in implementing the new waiver in 2021, the 1115 Waiver and WPC were extended for another year through 2021. An additional year of Federal funding brings the total Federal funding to roughly $765.5 million for the six years. Collectively these funds target six priority populations consisting of: homeless, re-entry, substance use disorder (SUD), mentally ill, medically complex, and perinatal high-risk through 15 different programs employing a variety of cross-cutting strategies. WPC braids health, public health and mental health care along with supportive services to advance the County's policy goals on homelessness, diversion and re-entry, SUD treatment, mental health care, medically complex acute care hospitalizations, and perinatal care for the County's most vulnerable and at-risk populations to ensure they have the resources and support they need to live healthy and productive lives.

V. POTENTIAL ISSUE(S)

N/A

VI. DEPARTMENT & COUNTY COUNSEL CONTACTS

DHS - Leslie Blacher, Chief Operating Officer, DHS Whole Person Care, lblacher@dhs.lacounty.gov
Clemens Hong, M.D., Acting Director of Community Programs, CHong@dhs.lacounty.gov
County Counsel - Sharon Reichman, Assistant County Counsel, sreichman@counsel.lacounty.gov

June 8, 2021

DRAFT
DHS LETTERHEAD

The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, CA 90012

Dear Supervisors:

APPROVE ACCEPTANCE OF A TEMPORARY, ONE-YEAR EXTENSION OF WHOLE PERSON CARE FUNDING FROM THE CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES AND APPROVE RELATED ACTIONS NECESSARY TO IMPLEMENT THE EXTENSION OF WHOLE PERSON CARE TO CONTINUE SERVING THE COUNTY'S MOST VULNERABLE POPULATIONS
(ALL SUPERVISORIAL DISTRICTS)
(3 VOTES)

SUBJECT

Approve acceptance of a temporary, one-year extension award from the California Department of Health Care Services to sustain Whole Person Care programs in the amount of approximately $135.3 million in federal funds over 2021 and approve related actions to continue operating the Whole Person Care continuum of integrated care initiatives to address high-risk utilizers of homeless, re-entry, substance use disorder, mental health, medically complex, and perinatal services and to approve certain transition activities in anticipation of the new Waiver California Advancing and Innovating Medi-Cal, the successor to Whole Person Care and the 1115 Waiver, in an effort to better serve the County's most vulnerable populations to ensure they have the resources and support they need to live healthy and productive lives.

IT IS RECOMMENDED THAT THE BOARD:

1) Delegate authority to the Director of Health Services (Director), or designee to accept an award from the California Department of Health Care Services (DHCS), in the amount of approximately $135.3 million over a twelve month period from January 1, 2021, through December 31, 2021, and sign an agreement with DHCS effective January 1, 2021, and expiring on June 30, 2022 and sign all other documents with DHCS in order to extend the Los Angeles County Whole Person Care (WPC) Pilot pursuant to the one-year extension of the California Medi-Cal 2020 Demonstration Pilot Program, subject to prior review and approval by County Counsel.

2) Delegate authority to the Director or designee, to execute any future amendments to the aforementioned agreement and related documents with DHCS necessary to extend the WPC Pilot Program, including but not limited to additional funding, on condition that the amendments and related documents do not materially alter the County's legal obligations under the base agreement with DHCS, subject to review and approval by County Counsel, and with notice to the Board and CEO.

3) Delegate authority to the Director or designee to enter into and implement an agreement or agreements with the State of California (State) and sign all attestations, certifications and other necessary documents for an intergovernmental transfer (IGT) agreement for a total aggregate amount in 2021 estimated to be $150 million to provide the local match for the WPC Pilot Program.

4) Delegate authority to the Directors of Health Services and Mental Health (DMH), or their respective designees, to execute new agreements and/or amend existing agreements with community care residential facilities, including revisions to statements of work, extension of agreement terms and/or increasing contract sums to provide additional 24-hour residential board and care services to eligible WPC clients, provided such actions do not exceed Board approved funding for WPC, subject to the prior review and approval as to form by County Counsel.

5) Delegate authority to the Director or designee to: (i) execute a no-cost agreement with the Metropolitan Transportation Authority (MTA), or its related/contracted entities for the Immediate Needs Transportation Program (INTP) to receive transportation vouchers and/or transit tokens/SCRIP for non-emergency transportation needs for eligible WPC clients; and (ii) execute agreements with providers of Information Technology (IT) platforms that simplify the provision of transportation services for WPC clients with medical transportation needs, in addition to Community Workers who lack transportation to accompany or meet clients at appointments, via an expedited procurement process provided such actions do not exceed Board approved funding for WPC, subject to the prior review and approval as to form by County Counsel.

6) Delegate authority to the Director or designee, to execute any forthcoming agreements, amendments and/or related documents with DHCS necessary to close out WPC and/or begin the transition from WPC to California Advancing and Innovating Medi-Cal (CalAIM), the Statewide successor to WPC, including but not limited to data sharing agreements, IT agreements, and Supportive and/or Housing Services Master agreements and/or related documents subject to review and approval by County Counsel.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

Background

On November 1, 2016, the Board approved DHS, as the lead entity for the County, to accept $450 million in federal funds to enter into a five-year agreement with DHCS to implement WPC. WPC is a five-year program authorized under the California Medi-Cal 2020 Demonstration Pilot approved by the Centers for Medicare and Medicaid Services (CMS). The vision of WPC is to ensure that the County's most vulnerable Medi-Cal beneficiaries have the resources and support they need to thrive. WPC partners health and social service delivery entities to build a more client and community-centered system of care to develop the foundational infrastructure necessary to deliver seamless, coordinated services to the County's Medi-Cal population.

A second round of competitive funding for WPC was released in early 2017 and DHS, on behalf of the County, submitted an application. This second round of WPC funding in the amount of $180.2 million, brings the County's total federal award among the two funding cycles to $630.2 million to support WPC programming. WPC was scheduled to end along with the 1115 Medicaid Waiver at the end of 2020. Due to the pandemic and the delay in implementing the new waiver in 2021, the 1115 Waiver and WPC were extended for another year through 2021. An additional year of federal funding brings the total federal funding to roughly $765.5 million for the six years.

Collectively these funds target six priority populations consisting of: homeless, re-entry, substance use disorder (SUD), mentally ill, medically complex, and perinatal high-risk through 15 different programs employing a variety of cross-cutting strategies. To date, 108,090 unique County residents have been served in one or more WPC programs. WPC engages clients using "no wrong door" approach meeting clients where they are to address the complex needs of these target populations. DHS, as it has with all clinical services, will provide the WPC services to non-Medi-Cal clients deemed otherwise eligible for a WPC program. WPC braids health, public health and mental health care along with supportive services to advance the County's policy goals on homelessness, diversion and re-entry, SUD treatment, mental health care, medically complex acute care hospitalizations, and perinatal care for the County's most vulnerable and at-risk populations to ensure they have the resources and support they need to live healthy and productive lives.

Recommendations

Approval of the first recommendation will enable the Director or designee, to accept a one-year extension award and sign an agreement with DHCS for a twelve-month period effective January 1, 2021 through December 31, 2021.

Approval of the second recommendation will authorize the Director or designee, to accept and execute any future amendments and related documents with DHCS necessary to

sustain the WPC Pilot Program throughout the extension term on the condition that the amendments and related documents do not materially alter the County's legal obligations under the base agreement with DHCS.

Approval of the third recommendation will delegate authority to the Director or designee, to enter into agreement(s) with the State and sign all attestations, certifications and other necessary documents for an intergovernmental transfer agreement in order to effectuate the local match for the WPC Pilot Program. The non-federal share portion of the program will be funded with an IGT by DHS.

Approval of the fourth recommendation will enable the Directors of DMH and DHS, or their designees, to execute new or amend existing agreements with community care residential facilities, including revisions to statement of work, extension of agreement term and/or increase funding to provide additional 24-hour residential placement options to seriously mentally ill clients awaiting release from acute psychiatric hospitals or jails.

Approval of the fifth recommendation will enable the Director, or designee, to execute a no-cost agreement with the MTA or its related/contracted entities for the INTP to receive vouchers and/or transit tokens/SCRIP for non-emergency transportation needs for eligible WPC clients. This recommendation will also allow the Director, or designee to execute agreements with providers of IT platforms that simply the provision of transportation services for WPC client with medical transportation needs, in addition to Community Workers who lack transportation to accompany or meet clients at appointments, via an expedited procurement process.

Approval of the sixth recommendation will allow the Director, or designee, to execute any forthcoming agreements, amendments and/or related documents with DHCS necessary to close out WPC and/or begin the transition from WPC to CalAIM, the Statewide successor to WPC, including but not limited to data sharing agreements, IT agreements, and Supportive and/or Housing Services Master agreements.

Implementation of Strategic Plan Goals

The recommended actions support “Goal I, Make Investments that Transform Lives, Strategies I.2.2 Streamline Access to Integrated Health Services, and I.2.3 Integrate Substance Use Disorder (SUD) Treatment Services” and “Goal III, Realize Tomorrow’s Government Today, Strategies III.1.1 Develop Staff Through High Quality Multi-Disciplinary Approaches to Training, III.2.1 Enhance Information Technology Platforms to Securely Share and Exchange Data, and III.3.1 Maximize Revenue” of the County’s Strategic Plan.

FISCAL IMPACT/FINANCING

DHS and DMH will include the necessary appropriation and revenue changes during the Supplemental Budget Resolution (SBR) Budget process for Fiscal Year 2021-22, and in future fiscal years as needed to implement WPC programs.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

The WPC award agreement and any future amendments and/or related documents, as well as all agreements and amendments allowed under the aforementioned recommendations will be reviewed and approved as to form by County Counsel prior to execution.

CONTRACTING PROCESS

DHS and DMH will continue to manage the WPC contracts to ensure service delivery to clients, including, but not limited to, agreements supporting community care residential facilities, Supportive and/or Housing Services Master Agreements, IT agreements, and data sharing agreements throughout the term of WPC.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Approval of the recommendations will ensure that the County is able to meet time sensitive requirements of the WPC award and support the Board's integrated care initiatives to continue targeting the most vulnerable and under-served populations in the County.

Respectfully submitted,

Christina R. Ghaly, M.D.
Director

CRG:CH:lb

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors
Department of Mental Health

BOARD LETTER FACT SHEET

Agenda Review Date: May 26, 2021
Board Meeting Date: June 8, 2021
Sup. Dist. / SPA No.: ALL

DRAFT

DEPARTMENT: ***Public Health- Division of HIV and STD Programs***

SUBJECT: Authorization to accept 2 grants and future awards from CDC for Integrated HIV Programs for Health Depts. and amend a sole source contract with the City of Long Beach Depart. of Health and Human Services to support HIV Epidemic (EHE) activities.

I. PUBLIC BENEFIT (precise description, mandated or non-mandated)

Support the County's local EHE activities such as: surveillance infrastructure, HIV testing infrastructure, the Pre-exposure Prophylaxis (PrEP) patterns for high risk populations, and the mental health service landscape and HIV services.

II. RECOMMENDED ACTIONS (summarized)

Public Health is requesting approval to accept two Grant Notices of Award (NA) issued from the CDC for Integrated HIV Programs for Health Departs. to support ending the HIV Epidemic in the US for 8/1/20 - 2/28/2. Funding for this grant is included only in one of the two NAs, in the amount of $3,360,658 and the remaining NA is budget submission approvals. In addition, Public health is requesting approval to amend a sole source contract with the City of Long Beach Department of Public Health (CLB), Contract Number PH-003492 in the amount of $547,083, effective date of Board approval through 12/31/22, to support EHE activities that include partner services and linkage to care activities. Funding will be used to hire two additional staff to support linkage to care and data management activities, in addition to offsetting current positions to enhance EHE activities.

III. COST AND FUNDING SOURCES

Cost: $3,360,658 in CDC EHE Funds and $547,083 in HRSA Ryan White Program Part A
Funding: Centers for Disease Control and Prevention (CDC)

IV. BACKGROUND (critical and/or insightful)

On 1/23/20, CDC released Notice of Funding Opportunity Announcement (NOFO) for a 5-year grant period, effective 8/1/20 - 7/31/25. The purpose of the NOFO is to implement comprehensive HIV programs, that complement programs, such as the Ryan White program and other Health and Human Services programs, designed to support ending the HIV epidemic in US by leveraging powerful data, tools and resources to reduce new HIV infections by 75% in 5 years. The strategies and activities are designed to be complementary to the strategies and activities funded by *PS18-1802: Integrated HIV Surveillance and Prevention Programs for Health Departments*, a grant in which Public Health already receives funding. On 12/19/17, your Board approved a sole source contract with CLB for HIV/STD Prevention in the amount of $3,175,000, effective 1/1/18 - 12/31/22 in

V. POTENTIAL ISSUE(S)

Failure to approve the these actions will not allow Public Health to implement key strategies tied to EHE that will benefit persons living with HIV in the County. Including, but not limited to: increasing knowledge of HIV status and decreasing the number of undiagnosed persons within the community are areas of focus, build surveillance system capacity and facilitate expedited data sharing activities and would limit the ability of the County to reach the overall EHE goal of reducing new HIV infections by 75% in 5 years.

VI. DEPARTMENT & COUNTY COUNSEL CONTACTS

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County Counsel: Margaret Ambrose (213) 974-0491 mambrose@counsel.lacounty.gov

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DRAFT

June 8, 2021

The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, California 90012

Dear Supervisors:

AUTHORIZATION TO ACCEPT TWO GRANT AWARDS AND FUTURE AWARDS AND/OR AMENDMENTS FROM THE CENTERS FOR DISEASE CONTROL AND PREVENTION FOR INTEGRATED HIV PROGRAMS FOR HEALTH DEPARTMENTS TO SUPPORT ENDING THE HIV EPIDEMIC IN THE UNITED STATES FOR THE PERIOD OF AUGUST 1, 2020 THROUGH JULY 31, 2025 AND APPROVAL TO AMEND A SOLE SOURCE CONTRACT WITH THE CITY OF LONG BEACH DEPARTMENT OF HEALTH AND HUMAN SERVICES FOR THE PERIOD OF DATE OF BOARD APPROVAL THROUGH DECEMBER 31, 2024
(ALL SUPERVISORIAL DISTRICTS) (3 VOTES)

SUBJECT

Provide authorization to accept two grant awards and future awards and/or amendments from the Centers for Disease Control and Prevention for Integrated HIV Programs for Health Departments to support Ending the HIV Epidemic in the United States for the period of August 1, 2020 through July 31, 2025 and approval to amend a sole source contract with the City of Long Beach Department of Health and Human Services.

IT IS RECOMMENDED THAT THE BOARD:

1. Authorize and instruct the Director of the Department of Public Health (Public Health), or designee, to accept two grant awards issued from the Centers for

Disease Control and Prevention (CDC), Assistance Listing Number 93.940, for Integrated HIV Programs for Health Departments to support

Ending the HIV Epidemic (EHE) in the United States for the period of August 1, 2020 through July 31, 2021: 1) Grant Award Number 1 NU62PS924619-01-00 (Exhibit I), issued July 23, 2020, in the amount of $3,360,658 and; 2) Grant Award Number 6 NU62PS924619-01-01 (Exhibit II), issued October 9, 2020, which approves Public Health's September 1, 2020 budget revision request.

2. Delegate authority to the Director of Public Health, or designee, to accept future awards and/or amendments that are consistent with the grant requirements of the CDC Grant Award, as referenced in Recommendation 1, that extend the term at amounts determined by CDC through July 31, 2025, or for an extended term beyond July 31, 2025, as determined by CDC; reflect revisions to the award's terms and conditions; allow for the rollover of unspent funds and/or redirection of funds; and/or provide an increase or decrease in each term's annual base amount, at amounts to be determined by CDC, subject to review and approval by County Counsel, and notification to your Board and the Chief Executive Office (CEO).

3. Authorize and instruct the Director of Public Health, or designee, to approve a sole source amendment to increase funding, in the amount of $547,083, to Contract Number PH-003492 with the City of Long Beach Department of Health and Human Services (CLB), consisting of $182,361 for the period of date of Board approval through December 31, 2021, increasing the annual maximum obligation from $637,972 to $820,333; and $364,722 for the period of January 1, 2022 through December 31, 2022, increasing the annual maximum obligation from $637,972 to $1,002,694; 100 percent funded by the CDC EHE and Health Resources and Services Administration (HRSA) Ryan White Program (RWP) Part A funds.

4. Delegate authority to the Director of Public Health, or designee, to extend Contract Number PH-003492 with CLB, at the revised annual maximum obligation through July 31, 2025; and/or provide an increase or decrease in funding up to 10 percent above or below each term's revised annual base maximum obligation, effective upon amendment execution or at the beginning of the applicable contract term, and make corresponding service adjustments, as necessary, subject to review and approval by County Counsel, and notification to your Board and the CEO.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

Approval of Recommendation 1 will allow Public Health to accept two grant awards from CDC to provide EHE activities in Los Angeles County.

Acceptance of the CDC grant award will allow Public Health to support the local EHE initiative. The framework principle for EHE in Los Angeles County is the *Right Data, Right Tools, and Right Leadership*. This grant award will support a number of assessment activities including, but not limited to: surveillance infrastructure, HIV testing

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infrastructure, the Pre-exposure Prophylaxis (PrEP) patterns for high risk populations, the mental health service landscape, the feasibility of routine opt-out testing, and community acceptance of recency testing. Recency testing, as part of HIV surveillance efforts, is a laboratory-based test that detects whether an HIV infection is recent, i.e., less than six months or not. In addition, the grant funds will support new program activities such as a partner services hotline, home HIV test kits, community engagement activities by non- HIV- focused community-based organizations (CBOs), and recency testing, as well as new Public Health staff dedicated to EHE activities.

The grant award will support community engagement and mobilization services, including mobilizing and empowering local stakeholders and community members, and recruiting new voices to help innovate, develop, organize, and sustain efforts to address HIV prevention, care, and treatment related issues in alignment with EHE goals and strategies.

Public Health will purchase home HIV test kits to be distributed to HIV testing agencies to maintain or expand HIV testing volume and in response to the Coronavirus Disease 2019 (COVID-19) epidemic's impact on in-person testing. This strategy is in alignment with EHE goals as increasing knowledge of HIV status and decreasing the number of undiagnosed persons within the community are areas of focus. The home HIV test kits will also be distributed by the Linkage and Re-Engagement Program and the Partner Services Program operating within Public Health.

Grant awards will also support EHE in the City of Long Beach and help expand and improve access to HIV treatment, especially for clients either newly diagnosed with HIV or clients not engaged in care; build surveillance system capacity and facilitate expedited data sharing activities; and further increase promotion of and collaboration among Ryan White Program-supported provider services.

Funds will also be used to augment existing Biomedical HIV Prevention Master Agreement Work Orders that are designed to accelerate efforts to increase PrEP use (particularly for populations with the highest rates of new HIV diagnoses and low rates of PrEP coverage) by adopting new strategies tied to client retention and PrEP navigation.

The Los Angeles County Commission on HIV, the federally mandated community HIV planning council, will be supported under the grant award to further enhance EHE efforts, including promotion of the EHE Plan, increased community engagement, and monitoring and feedback on activities associated with two of the four EHE Pillars: Diagnose and Prevent.

Funds will also enhance support for six syringe services programs (SSP) agencies funded through Public Health's Substance Abuse and Prevention Control Division. A key EHE strategy is to prevent new HIV infections through the increased availability, use, and access to comprehensive SSPs. Public Health will increase the capacity of SSPs, improve the provision or linkage of SSP clients to HIV and STD prevention and treatment services, and expand the availability of contingency management services to persons with substance use disorder, including persons with methamphetamine use disorder.

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The grant award will cover translation services for all EHE-related documents including the EHE Plan, EHE Executive Summary of the Plan, and programmatic materials (documents tied to the Emergency Financial Assistance Program for People Living with HIV); stipends for EHE Steering Committee Members for fulfilling the role and responsibilities of serving as a catalyst for collective action to help end the HIV epidemic; and advance projects and activities within their organizations and networks to improve health related HIV outcomes.

Public Health will also use grant funds to increase Public Health's capacity to develop, implement, monitor, and evaluate strategies outlined in the EHE Plan as determined by federal partners.

EHE funds will be used to offset two existing positions (1.0 Full Time Equivalent (FTE) Health Program Analyst II and 1.0 FTE Health Program Analyst I), and finance four temporary positions secured by utilizing a temporary personnel work order solicitation which will be developed to supplement staffing needs integral to EHE implementation and success. The proposed new temporary staff include: one 1.0 FTE Health Program Analyst I to oversee EHE HIV prevention strategies, two 1.0 FTE Health Educators to increase HIV-related education among community members and service providers, and one 0.5 FTE Health Program Analyst II to increase HIV-related communication and messaging among key stakeholders.

Approval of Recommendation 2 will allow Public Health to accept future awards and/or amendments that are consistent with the requirements of the grant that extend the term at amounts determined by the CDC; reflect revisions to the terms and conditions of the award; rollover unspent funds and/or redirect funds; and/or provide an increase or decrease in each term's annual base amount.

Approval of Recommendation 3 will allow Public Health to amend Contract Number PH-003492 with CLB to increase funding to cover EHE and linkage to care activities and support the enhancement of staff to carry out EHE and linkage to care activities.

Approval of Recommendation 4 will allow Public Health to execute amendments to Contract Number PH-003492 with CLB to extend the term of the contract through July 31, 2025 at the revised annual maximum obligation and/or increase or decrease funding up to 10 percent above or below the annual revised base maximum obligation, effective upon amendment execution or at the beginning of the applicable contract term, and make corresponding service adjustments, as necessary.

Recommendation 4 will also enable Public Health to amend Contract PH-003492 with CLB to allow for the provision of additional units of funded services that are above the service level identified in the current contract and/or the inclusion of unreimbursed eligible costs, based on the availability of grant funds and grant funder approval. While the County is under no obligation to pay a contractor beyond what is identified in the executed contract, the County may determine that the contractor has provided evidence of eligible costs for qualifying contracted services and that it is in the County's best interest to increase the maximum contract obligation as a result of receipt of additional grant funds or a determination that funds should be reallocated.

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Implementation of Strategic Plan Goals

The recommended actions support Strategy I.2, Enhance Our Delivery of Comprehensive Interventions, of the County's Strategic Plan.

FISCAL IMPACT/FINANCING

The total funding accepted under Recommendation 1 is $3,360,658 for the period of August 1, 2020 through July 31, 2021; 100 percent funded by CDC EHE funds. The total increased funding to Contract Number PH-003492 with CLB under Recommendation 3 is $547,083, consisting of $182,361 for the period of date of Board approval through December 31, 2021, increasing the annual maximum obligation from $637,972 to $820,333; and $364,722 for the period of January 1, 2022 through December 31, 2022, increasing the annual maximum obligation from $635,972 to $1,002,694, to support EHE activities; 100 percent funded by CDC EHE and HRSA RWP Part A funds.

A budget adjustment was completed for fiscal year (FY) 2020-21. Public Health will roll over any unused funds from Year 1 into Year 2, which begins August 1, 2021. Funds will be included in future FYs, as necessary.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

On January 23, 2020, CDC released Notice of Funding Opportunity Announcement (NOFO) – CDC PS20-2010, with applications due to CDC May 1, 2020, for a five-year grant period, effective August 1, 2020 through July 31, 2025.

The purpose of the NOFO is to implement comprehensive HIV programs that complement programs, such as the Ryan White program and other Health and Human Services programs, designed to support ending the HIV epidemic in America by leveraging powerful data, tools, and resources to reduce new HIV infections by 75% in five years. The strategies and activities included in Component A, EHE of the NOFO are designed to be complementary to the strategies and activities funded by *PS18-1802: Integrated HIV Surveillance and Prevention Programs for Health Departments*. Component B: HIV Incidence and Surveillance and Component C: Scaling up HIV Prevention Services in STD Clinics were optional activities under the NOFO and were contingent upon applications submitted for Component A.

Public Health submitted an application on May 1, 2020 that included a proposal to conduct EHE activities to support a number of assessment activities (surveillance infrastructure, HIV testing infrastructure, PrEP environment for high risk populations, mental health landscape, feasibility of routine opt-out testing, and community acceptance of recency testing); new program activities (partner services hotline, home test kits, community mobilization by non-HIV CBOs, and recency testing); and new staff dedicated to EHE activities.

On July 23, 2020, Public Health received notification of funding from CDC for EHE.

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As required under Board Policy 5.100, your Board was notified on May 5, 2021 of Public Health's intent to amend a sole source contract with CLB.

Attachment A is the Sole Source Checklist signed by the CEO.

CONTRACTING PROCESS

On December 19, 2017, your Board approved a sole source contract with CLB for HIV/STD Prevention in the amount of $3,175,000, consisting of $635,000 annually for the period of January 1, 2018 through December 31, 2022. Approval of the sole source contract was in response to a CDC grant requirement to allocate resources received for HIV/STD prevention and surveillance to the other local health jurisdiction that is heavily impacted by HIV disease, as the California Department of Public Health, Office of AIDS direct funding to CLB ceased as of December 31, 2017.

On April 18, 2018, Public Health exercised the delegated authority approved by your Board on December 19, 2017, to execute a sole source contract with CLB for the period of January 1, 2018 through December 31, 2022, and to provide an increase in funding up to 10 percent above each term's annual base maximum obligation of $635,000. The executed contract included a 0.47 percent increase from the annual base maximum obligation of $635,000 to $637,972. The increase was due to shifts in the budget that included an HIV and STD Coordinator to provide oversight of the contract.

Under this Board action, Public Health is requesting approval to amend Contract Number PH-003492 with CLB to add additional funding to help EHE efforts in the City of Long Beach to expand and improve access to HIV treatment, especially for clients either newly diagnosed with HIV or clients not engaged in care; build surveillance system capacity and facilitate expedited data sharing activities;

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Approval of the recommended actions will allow Public Health to implement key strategies tied to EHE that will benefit persons at risk for and living with HIV in Los Angeles County.

Respectfully submitted,

Barbara Ferrer, Ph.D., M.P.H., M.Ed.
Director

BF:lc
BL #05740

Enclosures

c: Chief Executive Officer
County Counsel
Executive Officer, Board of Supervisors

DRAFT

Attachment A

SOLE SOURCE CHECKLIST

Department Name: Public Health

☐ New Sole Source Contract

☒ Sole Source Amendment to Existing Contract

☒ Date Existing Contract First Approved
12/19/17

Check (√)	JUSTIFICATION FOR SOLE SOURCE CONTRACTS Identify applicable justification and provide documentation for each checked item.
	➢ Only one bona fide source (monopoly) for the service exists; performance and price competition are not available. A monopoly is an *"Exclusive control of the supply of any service in a given market. If more than one source in a given market exists, a monopoly does not exist."*
	➢ Compliance with applicable statutory and/or regulatory provisions.
	➢ Compliance with State and/or federal programmatic requirements.
√	➢ Services provided by other public or County-related entities. ***The sole source contract is with the City of Long Beach, which is a public-sector government entity that does not come under the Los Angeles County Code's bidding requirements for contracts with private businesses.***
	➢ Services are needed to address an emergent or related time-sensitive need.
	➢ The service provider(s) is required under the provisions of a grant or regulatory requirement.
	➢ Additional services are needed to complete an ongoing task and it would be prohibitively costly in time and money to seek a new service provider.
	➢ Services are needed during the time period required to complete a solicitation for replacement services; provided services are needed for no more than 12 months from the expiration of an existing contract with has no available option periods.
	➢ Maintenance and support services are needed for an existing solution/system during the time to complete a solicitation for a new replacement solution/system; provided the services are needed for no more than 24 months from the expiration of an existing maintenance and support contract which has no available options periods.
	➢ Maintenance and service agreements exist on equipment which must be serviced by the original equipment manufacturer or an authorized service representative.
	➢ It is more cost-effective to obtain services by exercising an option under an existing contract.
	➢ It is in the best economic interest of the County (e.g., significant costs to replace an existing system or infrastructure, administrative cost savings and excessive learning curve for a new service provider, etc.) In such cases, departments must demonstrate due diligence in qualifying the cost-savings or cost-avoidance associated with the best economic interest of the County.

Erika Bonilla
Chief Executive Office

5/3/21
Date

BOARD LETTER FACT SHEET

Agenda Review Date: May 26, 2021
Board Meeting Date: June 8, 2021
Sup. Dist. / SPA No.: SD2, SD4 / SPA 8

CEO DA Approval

DEPARTMENT: ***Public Health***

SUBJECT: **APPROVAL TO EXECUTE AN AMENDMENT TO DOMESTIC VIOLENCE SUPPORTIVE SERVICES CONTRACT WITH NEW STAR FAMILY CENTER**

I. PUBLIC BENEFIT (precise description, mandated or non-mandated)

Domestic Violence Supportive Services are provided to survivors of domestic violence in Los Angeles County.

II. RECOMMENDED ACTIONS (summarized)

Request approval to execute a contract amendment to Domestic Violence Supportive Services (DVSS) Contract Number PH-004255 with New Star Family Center to decrease the contract annual maximum obligation by $36,351 from $88,760 to $52,409 for the period of July 1, 2020 through June 30, 2021.

III. COST AND FUNDING SOURCES

Cost: $52,409
Funding: CalWORKs funding passed through the Department of Public Social Services

IV. BACKGROUND (critical and/or insightful)

Through contracts, Public Health supports the delivery of DVSS and Domestic Violence Shelter-Based Program services to domestic violence survivors.

On July 27, 2020, DVSS Contract Number PH-004255 with New Star Family Center was executed in the annual amount of $177,520 to provide services in Supervisorial Districts (SD) 2 and 4. On April 14, 2021, Public Health exercised delegated authority to reduce their contract's funding by 50% as it did not have the required Walk-in/Drop-in center in SD 4 where DVSS would be provided. Public Health is returning to the Board to request approval to execute another amendment to the contract as the funding adjustment needed exceeds our current delegated authority approved by the CEO on September 15, 2020.

V. POTENTIAL ISSUE(S)

No potential issues anticipated at this time.

VI. DEPARTMENT & COUNTY COUNSEL CONTACTS

DPH Director Government Affairs - Joshua Bobrowsky (213) 288-7871 jbobrowsky@ph.lacounty.gov
County Counsel: Craig Kirkwood, Jr. (213) 974-1751, CKirkwood@counsel.lacounty.gov

COUNTY OF LOS ANGELES
Public Health

BARBARA FERRER, Ph.D., M.P.H., M.Ed.
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BOARD OF SUPERVISORS

Hilda L. Solis
First District

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Kathryn Barger
Fifth District

DRAFT

June 8, 2021

The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, CA 90012

Dear Supervisors:

APPROVAL TO EXECUTE AN AMENDMENT TO DOMESTIC VIOLENCE SUPPORTIVE SERVICES CONTRACT WITH NEW STAR FAMILY CENTER (SUPERVISORIAL DISTRICTS 2 AND 4) (3 VOTES)

SUBJECT

Request approval to execute a contract amendment to the Domestic Violence Supportive Services Contract with New Star Family Center, in order to reflect funding adjustments for the period of July 1, 2020, through June 30, 2021.

IT IS RECOMMENDED THAT THE BOARD:

Approve and instruct the Director of the Department of Public Health (Public Health), or designee, to execute a contract amendment, substantially similar to Exhibit I, to Domestic Violence Supportive Services (DVSS) Contract Number PH-004255 with New Star Family Center to decrease the contract annual maximum obligation by $36,351 from $88,760 to $52,409 for the period of July 1, 2020, through June 30, 2021.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

Public Health is the administrator of the County's DVSS program that provides case management and legal services to survivors of domestic violence who are eligible participants in CalWORKs, General Relief (GR), and General Relief Opportunities for Work (GROW) programs in Los Angeles County. Collectively, these services are known as DVSS.

On June 30, 2020, the Chief Executive Office (CEO) exercised Board delegated authority and approved Public Health to execute new contracts for the provision of DVSS effective July 1, 2020, through June 30, 2023. Under this authority, Public Health executed Contract Number PH-004255 with New Star Family Center for the period of July 1, 2020, through June 30, 2023, for the provision of DVSS in Supervisorial Districts (SD) 2 and 4.

Subsequently, New Star Family Center notified Public Health that it was unable to provide DVSS in SD4 as it did not operate the required Walk-in/Drop-in Center where DVSS would be provided, Monday through Friday. To ensure that DVSS in SD4 were not impacted, Public Health determined that funds allocated to New Star Family Center in SD4 needed to be redistributed to other contractors with the required Walk-in/Drop-in Center, in order to provide services in that SD.

Public Health worked with New Star Family Center as well as with the other DVSS contractors regarding the need to make funding adjustments to 32 DVSS contractors to maximize funding allocation, based on service needs.

Consequently, on April 14, 2021, Public Health exercised Board delegated authority approved by the CEO on September 15, 2020 to reflect necessary funding adjustments for the period of July 1, 2020 through June 30, 2021 to 32 DVSS contracts. This action reflected a reduction in funding for New Star Family Center taking into account that New Star Family Center was providing DVSS in SD2 only, and the funds reduced from the contract were reallocated to another SD 4 provider. The overall adjustments to the 32 DVSS contracts had no impact on funding level within the SDs served by the DVSS contractors.

Public Health is returning to your Board to request approval to execute an amendment to the DVSS contract with New Star Family Center, as the additional funding adjustment needed exceeds our current delegated authority approved by the CEO on September 15, 2020.

Approval of the above Recommendation will allow Public Health to execute an amendment to Contract Number PH-004255 with New Star Family Center, in order to further decrease the contract annual maximum obligation for the period of July 1, 2020 through June 30, 2021. This amendment will allow the necessary funding adjustments

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to better align with current capacity to provide DVSS in SD2. This adjustment to this contract will not impact the funding level within SD 2.

Implementation of Strategic Plan Goals

The recommended actions support Goal I, Make Investments that Transform Lives; and Strategy I.2, Enhance Our Delivery of Comprehensive Interventions, of the County's Strategic Plan.

FISCAL IMPACT/FINANCING

DVSS Contract Number PH-004255 with New Star Family Center was executed in the annual amount of $177,520 to provide services in SDs 2 and 4. As a result of changes in the capacity of the contractor to provide services in SD 4 as described above, a contract amendment was executed to reduce FY 2020-21 funding by 50 percent to $88,760.

The recommended amendment will reduce the current FY 2020-21 annual funding by $36,351 from $88,760 to $52,409; 100 percent offset by the California Work Opportunity and Responsibility to Kids (CalWORKs) funding passed through DPSS. This additional adjustment is part of the FY 2020-21 reallocation of DVSS dollars based on service utilization. New Star Family Center's annual DVSS allocation will return to the original SD2 allocation of $101,440 for FY 2021-22.

Funding for this contract is included in Public Health's FY 2020-21 Adopted Budget, and will be included in future FYs, as necessary.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

County Counsel has approved Exhibit I as to form.

CONTRACTING PROCESS

On June 30, 2020, the CEO exercised Board delegated authority and approved Public Health to execute 47 new contracts selected under a Request for Applications solicitation, for the provision of DVSS, effective July 1, 2020, through June 30, 2023; and, delegated authority to execute amendments to extend the term and make necessary funding and other adjustments. Subsequently, one agency declined to move forward with the execution of their contract resulting in 46 DVSS contractors.

On September 15, 2020, Public Health returned to your Board to request approval to execute amendments to 17 DVSS contracts that exceeded our delegated authority and to request additional delegated authority which included the ability to adjust funding up to 50 percent.

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IMPACT ON CURRENT SERVICES (OR PROJECTS)

Approval of the recommended action will allow Public Health to continue to support the delivery of the County's DVSS program to DV survivors.

Respectfully submitted,

Barbara Ferrer, Ph.D., M.P.H., M.Ed.
Director

BF:vv
BL #05736

Enclosures

c: Chief Executive Officer
County Counsel
Executive Officer, Board of Supervisors

DRAFT

BOARD LETTER FACT SHEET

Agenda Review Date: May 26, 2021

Board Meeting Date: June 8, 2021

Sup. Dist. / SPA No.: ALL

CEO DA Approval

DEPARTMENT: ***DHS***

SUBJECT: **APPROVAL OF SUCCESSOR MEMORANDUM OF AGREEMENTS FOR NON-COUNTY TRAUMA CENTER PROVISIONS FOR REIMBURSEMENT**

I. PUBLIC BENEFIT (precise description, mandated or non-mandated)

Approval of funding and Memorandum of Agreement's allows the County's funding to trauma hospitals continuance of emergency care access for Medi-Cal beneficiaries and stabilizes the provision of trauma care services in Los Angeles County, and allow sufficient time for development of a funding methodology for FY 2021-22.

II. RECOMMENDED ACTIONS (summarized)

1) Approve the funding methodology and allocation for the Fiscal Year (FY) 2020-21 MOA, and approvethe Trauma Center Provisions for Reimbursement (TCPR Memorandum of Agreements (MOAs) with thirteen (13) non-County trauma hospitals for the period of July 1, 2021 through June 30, 2022 to include the funding terms for the one-year period from July 1, 2020 through June 30, 2021; 2) Authorizea maximum of $35.76 million of the Measure B funds to be used as an Intergovernmental Transfer(IGT) to the California Department of Health Care Services to draw down federal matching dollars for supplemental Medi-Cal payments to eligible non-County trauma hospitals; 3) Approve the allocation of $0.12 million from Richie's Fund to the two (2) County Pediatric Trauma Centers listed ; and 4)Delegate authority to the DHS Director, or designee, to execute the TCPR MOAs with the non-County designated trauma hospitals, for a one-year period effective July 1,2021 through June 30, 2022.

III. COST AND FUNDING SOURCES

Cost: Approx. County obligation: $48.87 million

Funding: $46.61 mil. Measure B, $1.43 mil. Maddy EMS , and $0.83 mil. Richie's Fund

IV. BACKGROUND (critical and/or insightful)

On June 01, 2020, the Board of Supervisors (Board) approved the FY 2019-2020 funding methodology for payments to non-County trauma hospitals with a one-year extension period through June 30, 2021 to the existing Trauma Center Services (TCS) Agreements. This extension, however, did not include new funding provisions, but allowed for the continuation of the hospitals' trauma designation. This provided additional time for the non-County trauma hospitals and the Department of Health Services (DHS) to develop the funding methodology for FY 2020-21.

The existing TCS Agreements are due to expire on June 30, 2021. These Agreements served the purpose to designate a hospital as a Trauma Center and to provide reimbursement provisions to designated hospitals as a means to provide supplemental funding to offset operating expenses related to maintaining trauma center designation and treating trauma patients. Moving forward, DHS is proposing to split the two actions under the expiring Agreements and execute new TCPR MOAs for the continued implementation of reimbursement provisions for designated trauma centers. The trauma center designation for each hospital will be added, by way of an amendment, and under delegated authority by the Board, to the Specialty Care Center Designations Master Agreement (SCCDMA). On June 11, 2019, the Board approved the SCCDMA and authorized the Director, or designee to execute the agreements with private and public hospitals or healthcare facilities as a means to better manage any designations granted to qualified hospitals or healthcare facilities. The first designation included in the SCCDMA was for Paramedic Base Hospitals. DHS obtained delegated authority from the Board to execute future amendments to add other applicable Specialty Care Center Designations mandated by the State of California or the Federal Government, or otherwise required to support.

V. POTENTIAL ISSUE(S)

Delays in approval of the recommendations may cause non-County trauma hospitals in theCounty's trauma network financial hardship and jeopardize continued participation.

VI. DEPARTMENT & COUNTY COUNSEL CONTACTS

Kay Fruhwirth, Nursing Director
EMS Agency
(562) 378-1596

- Brian Chu, Principal Deputy County Counsel
(213) 974-1925
Bchu@counsel.lacounty.gov

June 8, 2021

DRAFT
DHS LETTERHEAD

The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, California 90012

Dear Supervisors:

APPROVAL OF SUCCESSOR MEMORANDUM OF AGREEMENTS FOR NON-COUNTY TRAUMA CENTER PROVISIONS FOR REIMBURSEMENT (ALL SUPERVISORIAL DISTRICTS) (3 VOTES)

SUBJECT

Request approval of a methodology to allocate trauma funding to non-County trauma hospitals for Fiscal Year 2020-21, delegation of authority to execute memoranda of agreement with non-County trauma centers, which contain corresponding reimbursement provisions for the period of July 1, 2021 to June 30, 2022, and approve an allocation of funds to County hospitals.

IT IS RECOMMENDED THAT THE BOARD:

1. Approve the funding methodology and allocation for the Fiscal Year (FY) 2020-21 MOA, and approve and delegate authority to the Director of Health Services (Director), or designee, to execute the Trauma Center Provisions for Reimbursement (TCPR) Memorandum of Agreements (MOAs), substantially similar to Exhibit I, with thirteen (13) non-County trauma hospitals for the period of July 1, 2021 through June 30, 2022, to include the funding terms for the one-year period from July 1, 2020 through June 30, 2021, for a total County obligation of approximately $48.87 million (comprised of $46.61 million from the Measure B funds, $1.43 million from the Maddy Emergency Medical Services Fund (Maddy Fund), and $0.83 million from the Richie's Fund), as set forth in Attachment A and described below.

2. Approve and authorize the Director, or designee, to allocate up to a maximum of $35.76 million of the Measure B funds to be used as an Intergovernmental Transfer (IGT) to the California Department of Health

Care Services to draw down federal matching dollars for supplemental Medi-Cal payments to eligible non-County trauma hospitals.

3. Approve and authorize the Director, or designee, to allocation of $0.12 million from Richie's Fund to the two (2) County Pediatric Trauma Centers listed in Attachment A.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTIONS

On June 01, 2020, the Board of Supervisors (Board) approved the FY 2019-2020 funding methodology for payments to non-County trauma hospitals with a one-year extension period through June 30, 2021 to the existing TCS Agreements. This extension, however, did not include new funding provisions, but allowed for the continuation of the hospitals' trauma designation. This provided additional time for the non-County trauma hospitals and the Department of Health Services (DHS) to develop the funding methodology for FY 2020-21.

Impact of Affordable Care Act (ACA) on Trauma Funds Distribution

Prior to the implementation of the ACA in January 2014, trauma funding was distributed to the non-County trauma hospitals largely based on trauma claims for the uninsured population.

After the ACA was implemented and its impact became more widespread, there was a significant reduction in the volume of uninsured trauma claims. Beginning in FY 2014-15, the number of uninsured trauma claims was too minimal to allow the full allocation of Measure B funds based on the traditional uninsured claims methodology. In view of the significant and continuing decrease in the number of uninsured, the non-County trauma hospitals expressed concerns and wanted to ensure they would continue to receive the same level of trauma funding as in years prior to the ACA. On May 3, 2016, the Board approved an amendment to the TCS Agreements for FY 2014-15 which continued trauma funding to the non-County trauma hospitals for the same funding amounts received by the trauma hospitals in FY 2013-14.

Post-ACA Continuing Impact on Trauma Funds Distribution

Given the significant and continuing impact of the ACA, and to ensure prior funding levels would be maintained, the non-County trauma hospitals deemed it necessary to develop a new basis for distributing trauma funds. Pursuant to discussions between the non-County trauma hospitals and DHS, a new funding methodology for FY 2015-16 was developed; incorporating new categories for reimbursement. The FY 2015-16 methodology was approved by the Board on November 1, 2016. During FY 2016-17, the same guiding principle was expressed by the non-County trauma hospitals (i.e., that funding levels should be maintained at levels similar to

prior fiscal years), despite the severe decline in uninsured trauma patients. The funding methodology that was approved for that fiscal year was based on the following: the level of indigent services, the provision of base station services, and a flat amount to support infrastructure. In addition, and recognizing the continuing ACA impact, the non-County trauma hospitals identified other add-on factors to be used as a basis for the distribution of the FY 2016-17 trauma funds at levels similar to prior years. The add-ons selected by the non-County trauma hospitals and approved by DHS were as follows: 1) an adjustment for the volume of trauma patients; 2) an adjustment for the level of acuity of trauma patients; and 3) an adjustment for the number of Medi-Cal days and visits, which serves as a proxy for the underinsured population. Lastly, to address concerns that the application of the proposed FY 2016-17 formula would impact each hospital to a greater or lesser degree, a parity adjustment was made in proportion to the degree of positive or negative impact to assure that no hospital would be affected disproportionately. The FY 2016-17 methodology was approved by the Board on May 16, 2017.

FY 2017-18 Distribution Methodology

DHS, in conjunction with all 13 non-County trauma hospitals, reached a consensus for utilizing the basic components from the FY 2016-17 methodology for FY 2017-18. The methodology included a parity adjustment to reduce the decrease in funding received by a trauma hospital in comparison to the prior fiscal year, with the modification that information of services to patients brought in by law enforcement was included with the Medi-Cal information to determine the component related to underinsured populations. Additionally, for FY 2017-18, the allocation of pediatric trauma payments to each pediatric hospital from Richie Funds for pediatric trauma services was based on the facility type. Since Northridge Hospital Medical Center is the only pediatric hospital in Los Angeles County operating as a community hospital, it was given a larger allocation than the remaining pediatric hospitals, which are tertiary hospitals.

FY 2018-19 Distribution Methodology

DHS and all 13 non-County trauma hospitals reached a consensus for utilizing the same components used in the FY 2017-18 methodology as for FY 2018-19. FY 2018-19 funding also included a one-time allocation of unspent Measure B funds from FY 2017-18 for the trauma hospitals as recommended by the Measure B Advisory Board (MBAB) and was presented by the Chief Executive Office (CEO) to the Board on March 12, 2019.

FY 2019-20 Distribution Methodology

DHS again reached consensus with the 13 non-County trauma hospitals to use the funding methodology for FY 2019-20 as was used in the previous FY, including a one-time allocation of unspent Measure B funds from FY 2018-19, which was

recommended by the MBAB and presented by the CEO to the Board on February 11, 2020.

FY 2020-21 Distribution Methodology

DHS again reached consensus with the 13 non-County trauma hospitals to use the funding methodology for FY 2020-21 as was used in the previous FY, but without the one-time allocation of unspent and unallocated Measure B funds, as recommended by the MBAB.

The proposed FY 2020-21 payments to each non-County trauma hospital are summarized in Attachment A.

Trauma Center Services (TCS) Agreements Background

The existing TCS Agreements are due to expire on June 30, 2021. These Agreements served the purpose to designate a hospital as a Trauma Center and to provide reimbursement provisions to designated hospitals as a means to provide supplemental funding to offset operating expenses related to maintaining trauma center designation and treating trauma patients. Moving forward, DHS is proposing to split the two actions under the expiring Agreements and execute new TCPR MOAs for the continued implementation of reimbursement provisions for designated trauma centers. The trauma center designation for each hospital will be added, by way of an amendment, and under delegated authority by the Board, to the Specialty Care Center Designations Master Agreement (SCCDMA). On June 11, 2019, the Board approved the SCCDMA and authorized the Director, or designee to execute the agreements with private and public hospitals or healthcare facilities as a means to better manage any designations granted to qualified hospitals or healthcare facilities. The first designation included in the SCCDMA was for Paramedic Base Hospitals. DHS obtained delegated authority from the Board to execute future amendments to add other applicable Specialty Care Center Designations mandated by the State of California or the Federal Government, or otherwise required to support or participate in the County of Los Angeles' Emergency Medical Services System.

Approval of Recommendations 1 through 3 will approve the TCPR MOAs, substantially similar to Exhibit I, to include financial terms for FY 2020-21; allow DHS to execute the reimbursement TCPR MOAs and process payments for FY 2020-21; and submit an IGT to draw down federal matching funds for those portions of the payments that are to be made as Medi-Cal supplements to ensure emergency room access to Medi-Cal beneficiaries.

The MOA allows the County's funding to trauma hospitals continuance of emergency care access for Medi-Cal beneficiaries and stabilizes the provision of trauma care services in Los Angeles County, and allow sufficient time for development of a funding methodology for FY 2021-22.

Implementation of Strategic Plan Goals

The recommended actions support Strategy III.3, "Pursue Operational Effectiveness, Fiscal Responsibility, and Accountability", of the County's Strategic Plan.

FISCAL IMPACT/FINANCING

The total maximum payment for the above recommended actions under the MOA for FY 2020-21 is approximately $84.75 million, including $48.99 million of County funds (Measure B: $46.61 million; Maddy Fund: $1.43 million; Richie's Fund: $0.95 million which includes funds for County hospitals) and $35.76 million of federal matching funds, which was calculated based on federal matching rate of 50%. Funding for the County responsible portion of the TCPR MOAs is included in DHS' FY 2020-21 Final Budget.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

Pursuant to the authority under California Health and Safety (H&S) Code Section 1798.160, the County maintains trauma facilities as part of the regional trauma care system for the treatment of potentially seriously injured persons. Division 2.5 of the H&S Code authorizes the local Emergency Medical Services Agency to designate trauma centers as part of the regional trauma care system. Since March 1, 2017, there have been 13 non-County and two County-operated trauma centers.

The TCPR MOAs are designed to provide supplemental funding to offset the significant expenses related to maintaining trauma designation and treating trauma patients. The FY 2020-21 TCS Agreements are funded by Measure B, Maddy Fund and Richie's Fund, and contemplate the State making IGT-funded supplemental Medi-Cal payments to non-public trauma hospitals in Los Angeles County.

Measure B Funds

Measure B, passed by the voters on November 5, 2002, authorized the County to levy a tax on structural improvements within the County, in part, to provide funding to strengthen the Los Angeles County trauma network, particularly those trauma hospitals operated by the County, and expand it if possible; and to fund emergency medical services and bioterrorism preparedness. Subsequent to Measure B's passage, the Board approved multiple proposals to allocate Measure B funds among the non-County trauma hospitals. The Board also approved payments to reimburse trauma hospitals for costs associated with serving as a base hospital in the Emergency Medical Services system.

Maddy and Richie's Funds

The County receives funds derived from penalties assessed on fines and bail forfeitures that the Superior Court collects for certain criminal offenses and motor vehicle violations. As permitted by California Government Code Section 76000.5 and H&S Code Section 1797.98a, these funds are placed in the County's Maddy Fund and used by DHS for trauma and emergency services. A portion of the Maddy Fund is designated by statute for support of pediatric trauma programs and is segregated as the Richie's Fund. The remaining Maddy Fund dollars are available to support trauma and emergency services provided by hospitals and physicians.

Medi-Cal Payments

The California State Plan, starting at page 51 of Attachment 4.19B, permits the California Department of Health Care Services to make supplemental Medi-Cal payments to non-public trauma hospitals in Los Angeles County. The County makes recommendations regarding the amount of the supplemental payments and provides the funding for the non-federal share of such payments through an IGT.

County Counsel has reviewed and approved Exhibit I as to form.

CONTRACTING PROCESS

N/A.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Approval of the recommendations will assure continued participation of non-County trauma hospitals in the County's trauma network and continue trauma funding for FY 2020-21.

Respectfully submitted,

Christina R. Ghaly, M.D.
Director

CRG:MD:JW

Enclosures

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors

COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES

LOS ANGELES COUNTY TRAUMA CARE SYSTEM

PROPOSED PAYMENTS TO NON-COUNTY TRAUMA HOSPITALS
FISCAL YEAR 2020-21

	Patient-Based	Pediatric	Designation Support		Add-Ons				Total Payment (1) thru (8)
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	
Hospitals	UNINSURED (Volume)	PEDIATRIC TRAUMA (Fixed Rate)	BASE STATION (Fixed Rate)	INFRASTRUCTURE (Fixed Rate)	TRAUMA (Volume)	ACUITY (Adjustment)	UNDERINSURED (Adjustment)	PARITY (Adjustment)	
Antelope Valley Hospital	$ 287,552	$ -	$ 700,000	$ 1,200,000	$ 1,299,453	$ 487,608	$ 1,826,226	$ (152,005)	$ 5,648,834
California Hospital Medical Center	1,567,932	-	700,000	1,200,000	1,748,023	707,194	4,439,389	517,804	10,880,342
Cedars-Sinai Medical Center	996,164	57,832	700,000	1,200,000	1,693,162	893,591	2,945,458	(775,249)	7,710,958
Children's Hospital Los Angeles	-	57,832	-	1,200,000	702,437	240,559	1,016,346	(84,538)	3,132,636
Henry Mayo Newhall Memorial	249,592	-	700,000	1,200,000	773,433	332,521	779,292	(41,999)	3,992,839
Huntington Memorial Hospital	184,419	-	700,000	1,200,000	1,283,318	478,894	1,199,177	34,589	5,080,397
Long Beach Memorial Medical Center	259,600	57,832	700,000	1,200,000	1,447,901	605,549	2,072,318	243,092	6,586,292
Northridge Hospital Medical Center	1,395,739	600,000	700,000	1,200,000	1,128,416	513,672	1,785,905	(387,805)	6,935,927
Pomona Valley Hosp. Medical Center	187,382	-	700,000	1,200,000	1,758,780	855,477	3,094,225	(579,075)	7,216,789
Providence Holy Cross Medical Center	2,094,861	-	700,000	1,200,000	1,312,362	571,000	2,200,925	149,200	8,228,348
Ronald Reagan UCLA Medical Center	193,682	57,832	700,000	1,200,000	1,189,731	562,810	1,427,195	349,355	5,680,605
St. Francis Medical Center	647,246	-	700,000	1,200,000	1,777,067	747,565	3,646,195	714,208	9,432,281
St. Mary Medical Center	132,213	-	700,000	1,200,000	642,197	286,537	1,127,574	12,423	4,100,944
Subtotal	**$ 8,196,382**	**$ 831,328**	**$ 8,400,000**	**$ 15,600,000**	**$ 16,756,280**	**$ 7,282,977**	**$ 27,560,225**	**$ 0**	**$ 84,627,192**
County Hospitals									
LAC+USC Medical Center	$ -	$ 57,832	$ -	$ -	$ -	$ -	$ -	$ -	$ 57,832
Harbor-UCLA Medical Center	-	57,832	-	-	-	-	-	-	57,832
Subtotal	**$ -**	**$ 115,664**	**$ -**	**$ -**	**$ -**	**$ -**	**$ -**	**$ -**	**$ 115,664**
Grand Total	**$ 8,196,382**	**$ 946,992**	**$ 8,400,000**	**$ 15,600,000**	**$ 16,756,280**	**$ 7,282,977**	**$ 27,560,225**	**$ 0**	**$ 84,742,856**

Notes:

Col (1) - Payment is based on each hospital's share in the total value of the FY 19-20 indigent claims submitted by non-County trauma hospitals to the County (net of FY 18-19 disallowed claims), multiplied by the total funding allocated for this cate

Col (2) - Payment is based on facility type. Northridge Hospital Medical Center receives a larger allocation due to its State-designated status as a Pediatric Community Hospital.

Col (3) - Fixed payment for each hospital that provides base hospital service meeting the requirement of County's Emergency Medical Services Agency.

Col (4) - Infrastructure is a fixed payment for each trauma hospital to defray the trauma call panel, specialist physicians and trauma program costs.

Col (5) - Trauma payment is based on each hospital's percentage in the total trauma patient volume of non-County trauma hospitals (reported by County's TEMIS for CY 2019) multiplied by the total funding allocated for this category.

Col (6) - Acuity payment is based on each hospital's percentage in the total patient days of non-County trauma hospitals (reported by County's TEMIS for CY 2019) that are adjusted for severity factors, multiplied by the total funding allocated for this

Col (7) - Under-insured payment is based on each hospital's percentage in the total Medi-Cal and In-Custody patient days of non-County trauma hospitals (reported by County's TEMIS for CY 2019), multiplied by the total funding allocated for this ca

Col (8) - Parity adjustment is to redistribute a portion of the surplus of payments received by some hospitals, to mitigate the loss of payments experienced by other hospitals. Each hospital's surplus or loss is determined by the difference between its current year
and prior year payments.

COUNTY OF LOS ANGELES - DEPARTMENT OF HEALTH SERVICES
LOS ANGELES COUNTY TRAUMA CARE SYSTEM

PROPOSED PAYMENTS TO PEDIATRIC TRAUMA HOSPITALS
FISCAL YEAR 2020-21

NON-COUNTY PEDIATRIC TRAUMA CENTERS

1)	Cedars-Sinai Medical Center	$	57,832
2)	Children's Hospital Los Angeles		57,832
3)	Long Beach Memorial Hospital		57,832
4)	Northridge Hospital Medical Center		600,000
5)	Ronald Reagan UCLA Medical Center		57,832
	Subtotal (also shown in Attachment A, Col 2)	$	831,328

COUNTY PEDIATRIC TRAUMA CENTERS

6)	LAC+USC Medical Center	$	57,832
7)	Harbor-UCLA Medical Center		57,832
	Subtotal	$	115,664
	GRAND TOTAL	**$**	**946,992**

BOARD LETTER FACT SHEET

Agenda Review Date: May 26, 2021
Board Meeting Date: June 8, 2021
Sup. Dist. / SPA No.: All

DRAFT

CEO DA Approval

DEPARTMENT: ***Mental Health***

SUBJECT: Adoption of the Department of Mental Health's Mental Health Services Act Three Year Program and Expenditure Plan

I. PUBLIC BENEFIT (precise description, mandated or non-mandated)

Adoption of plan allows for the continued provision of specialty mental health services utilizing Mental Health Service Act (MHSA) funding.

II. RECOMMENDED ACTIONS (summarized)

Adopt DMH's Mental Health Services Act (MHSA) Three-Year Program and Expenditure Plan for Fiscal Years 2021-22, 2022-23 and 2023-24.

III. COST AND FUNDING SOURCES

Cost: No $$$ associated with the adoption of the plan
Funding: Mental Health Services Act Revenues

IV. BACKGROUND (critical and/or insightful)

Assembly Bill (AB) 1467, chaptered into law on June 27, 2012, implemented changes to the MHSA law. AB 1467 requires each county mental health program to prepare the MHSA Three-Year Program and Expenditure Plan and have it adopted by corresponding county's board of supervisors prior to the submission to the Mental Health Services Oversight and Accountability Commission. Accordingly, DMH is seeking your Board's approval of its MHSA Three-Year Program and Expenditure Plan in order to comply with the requirements.

V. POTENTIAL ISSUE(S)

N/A

VI. DEPARTMENT & COUNTY COUNSEL CONTACTS

Gregory Polk, Chief Deputy Director, GPolk@dmh.lacounty.gov- (213) 738-4926
Emily Issa, County Counsel, EIssa@counsel.lacounty.gov, - (213) 974-1827

DEPARTMENT OF MENTAL HEALTH

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JONATHAN E. SHERIN, M.D., Ph.D.
Director

Gregory C. Polk, M.P.A.
Chief Deputy Director

Curley L. Bonds, M.D.
Chief Medical Officer

Lisa H. Wong, Psy.D.
Senior Deputy Director

June 8, 2021

The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, California 90012

Dear Supervisors:

ADOPTION OF THE DEPARTMENT OF MENTAL HEALTH'S MENTAL HEALTH SERVICES ACT THREE-YEAR PROGRAM AND EXPENDITURE PLAN

(ALL SUPERVISORIAL DISTRICTS)
(3 VOTES)

SUBJECT

Request adoption of the Department of Mental Health's Mental Health Services Act Three-Year Program and Expenditure Plan for Fiscal Years 2021-22, 2022-23, and 2023-24.

IT IS RECOMMENDED THAT YOUR BOARD:

1. Adopt the Department of Mental Health's (DMH) Mental Health Services Act (MHSA) Three-Year Program and Expenditure Plan for Fiscal Years (FYs) 2021-22, 2022-23, and 2023-24 (Attachment I). The MHSA Three-Year Program and Expenditure Plan has been certified by the County's Mental Health Director and the Auditor-Controller (A-C) to meet specified MHSA requirements in accordance with Welfare and Institutions Code (WIC) Section 5847.

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PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

In accordance to WIC Section 5847, DMH shall prepare and submit the MHSA Three-Year Program and Expenditure Plan to the County Board of Supervisors for adoption. Board approval of the recommended action will allow DMH to submit the MHSA Three-Year Program and Expenditure Plan to the State of California's Mental Health Services Oversight and Accountability Commission per WIC Section 5847.

Additionally, WIC Section 5848 requires the County's DMH to post the draft MHSA Three-Year Program and Expenditure Plan, for at least 30 days, for the stakeholders and public to review and provide comments. As such, DMH posted the draft MHSA Three-Year Program and Expenditure Plan on its website on March 19, 2021. At the close of the 30-day public review period, DMH and the Mental Health Commission convened a virtual Public Hearing on April 22, 2021 where DMH presented the Plan to stakeholders and the public. At the conclusion of the Public Hearing event, the Mental Health Commission voted to approve the MHSA Three-Year Program and Expenditure Plan.

The MHSA Three-Year Program and Expenditure Plan has been certified by the County's Mental Health Director and the A-C attesting that the County has complied with all fiscal accountability requirements as directed by the State Department of Health Care Services, and that all expenditures are consistent with the MHSA requirements.

Implementation of Strategic Plan Goals

The recommended actions are consistent with the County's Strategic Plan Goal I, Make Investments that Transform Lives, specifically Strategy I.1 — Increase Our Focus on Prevention Initiatives, and Strategy I.2 — Enhance Our Delivery of Comprehensive Interventions.

FISCAL IMPACT/FINANCING

There is no fiscal impact/financing associated with this action.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

Assembly Bill (AB) 1467, chaptered into law on June 27, 2012, implemented changes to the MHSA law. AB 1467 requires each county mental health program to prepare the MHSA Three-Year Program and Expenditure Plan and have it adopted by the County's Board of Supervisors prior to the submission to the Mental Health Services Oversight and Accountability Commission. Accordingly, DMH is seeking your Board's approval of its MHSA Three-Year Program and Expenditure Plan in order to comply with these requirements.

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The updated MHSA Three-Year Program and Expenditure Plan was originally set to be certified at the beginning of FY 2020-21. However, due to the Covid-19 pandemic the State of California allowed counties to extend the timeline.

The public hearing notice requirements referenced in WIC Section 5848, subdivisions (a) and (b) have been fulfilled and are recorded in MHSA Three-Year Program and Expenditure Plan.

The MHSA Three-Year Program and Expenditure Plan for FYs 2021-22, 2022-23, and 2023-24 contains a summary of MHSA programs for FY 2019-20, including clients served by MHSA programs and Service Area as well as program outcomes.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Board adoption of the MHSA Three-Year Program and Expenditure Plan for FYs 2021-22, 2022-23, and 2023-24 will ensure compliance with AB 1467 requirements and ensure that DMH clients continue to have access to the appropriate services.

Respectfully submitted,

JONATHAN E. SHERIN, M.D., Ph.D.
Director

JES:GCP:SK
MP:atm

Attachment

c: Executive Officer, Board of Supervisors
Chief Executive Office
County Counsel
Chairperson, Mental Health Commission

DRAFT

BOARD LETTER FACT SHEET

Agenda Review Date: May 26, 2021
Board Meeting Date: June 8, 2021
Sup. Dist. / SPA No.: All SupervisorialDistricts

DRAFT

BOS Approval

DEPARTMENT: ***Mental Health***

SUBJECT: Request approval to extend and/or execute new Legal Entity Contracts for the provision of Specialty Mental Health Services as the current Legal Entity Contracts will expire on June 30, 2021.

I. PUBLIC BENEFIT (precise description, mandated or non-mandated)

The provision of Specialty Mental Health Services (SMHS) to LA County residents in accordance with Welfare and Institutions Code (WIC) Sections 14712 and 5650 and the Mental Health Services Act (MHSA).

II. RECOMMENDED ACTIONS (summarized)

Authorize the Director of Mental Health (Director) to execute new Department of Mental Health (DMH) Legal Entity (LE) Contracts for the provision of SMHS with 131 LE Contractors; execute new DMH Institutions for Mental Disease (IMD) LE Contracts with 11 LE Contractors; and execute separate LE Contracts with 9 LE Contractors for SMHS at Psychiatric Health Facilities and Enriched Residential Services. Authorize the Director to execute new negotiated LE Contract with The Regents of the University of California, Los Angeles or extend on a month-to-month basis. Delegate authority to the Director to execute future new LE Contracts; execute future amendments and delegate authority to the Director to terminate the contract in accordance with the termination provisions.

III. COST AND FUNDING SOURCES

Cost: Total aggregate amount of all contracts is $1,493,261,000.
Funding: Various federal, State, and local revenues

IV. BACKGROUND (critical and/or insightful)

In accordance with WIC Section 14712, DMH is responsible for the delivery of SMHS to the County's eligible Medi-Cal beneficiaries through the contractual agreement between the State and the County under the Mental Health Plan (MHP) Agreement. The MHP Agreement sets comprehensive requirements for DMH to provide or arrange for the provision of all covered, medically necessary SMHS to Medi-Cal beneficiaries in the County. Additionally, pursuant to WIC Section 5650, DMH has a Performance Contract with the State for Short-Doyle Services, as well as MHSA, other federal grants, and/or County mental health programs. DMH provides MHS through contracted providers in addition to its directly-operated clinics. Services include, but are not limited to, crisis intervention/stabilization, diagnosis, evaluation, treatment, medication support, and case management.

V. POTENTIAL ISSUE(S)

N/A

VI. DEPARTMENT & COUNTY COUNSEL CONTACTS

Stella Krikorian, DMH Contracts Division Manager, SKrikorian@dmh.lacounty.gov, (213) 738-4023
Emily Issa, County Counsel, EIssa@counsel.lacounty.gov, (213) 974-1827

DEPARTMENT OF MENTAL HEALTH

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JONATHAN E. SHERIN, M.D., Ph.D.
Director

Gregory C. Polk, M.P.A.
Chief Deputy Director

Curley L. Bonds, M.D.
Chief Medical Officer

Lisa H. Wong, Psy.D.
Senior Deputy Director

June 8, 2021

The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, CA 90012

Dear Supervisors:

APPROVAL TO EXECUTE NEW LEGAL ENTITY CONTRACTS FOR FISCAL YEARS 2021-22, 2022-23, AND 2023-24 FOR THE PROVISION OF SPECIALTY MENTAL HEALTH SERVICES (ALL SUPERVISORIAL DISTRICTS) (3 VOTES)

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SUBJECT

Request approval to extend and/or execute new Legal Entity Contracts for the provision of Specialty Mental Health Services as the current Legal Entity Contracts will expire on June 30, 2021.

IT IS RECOMMENDED THAT YOUR BOARD:

1. Approve and authorize the Director of Mental Health (Director), or his designee, to prepare, sign, and execute new Department of Mental Health (DMH) Legal Entity (LE) Contracts, with 131 LE Contractors listed in Attachment I. The LE Contracts, substantially similar to Attachment II, will be for the provision of Specialty Mental Health Services (SMHS). The term of these LE Contracts will be effective July 1, 2021 through June 30, 2022, with two automatic renewal periods for Fiscal Years (FY) 2022-23 and 2023-24. The Maximum Contract Amounts (MCA) for each of the LE Contracts for each fiscal year are listed in Attachment I. The aggregate amount for the 131 LE Contracts is $1,349,742,208 for FY 2021-22 and $1,347,706,619 for FY 2022-23 and FY 2023-24, fully funded by various federal, State of California (State), and local revenues.

2. Approve and authorize the Director, or his designee, to prepare, sign, and execute new DMH Institutions for Mental Disease (IMD) Contracts for Skilled Nursing Facilities (SNF) and Mental Health Rehabilitation Centers (MHRC), substantially similar to Attachment II, with 11 IMD Contractors listed in Attachment I. The term of these IMD Contracts will be effective July 1, 2021 through June 30, 2022, with two optional renewal periods for FYs 2022-23 and 2023-24. IMD Contracts do not have a MCA, as reimbursement will be in accordance with the daily bed rates. The projected aggregate amount for the 11 IMD LE Contracts is $112,073,297, fully funded by 2011 Realignment revenue.

3. Approve and authorize the Director, or his designee, to prepare, sign, and execute separate LE Contracts, substantially similar to Attachment II, with nine LE Contractors included in Recommendation 1 for Psychiatric Health Facilities (PHF) and Enriched Residential Services (ERS). The term of these nine LE Contracts will be effective July 1, 2021 through June 30, 2022, with two optional renewal periods for FYs 2022-23 and 2023-24. The MCAs for each of the LE Contracts for each FY are listed in Attachment I. The aggregate annualized amount for the nine LE Contracts is $29,567,462, fully funded by various federal, State, and local revenues.

4. Approve and authorize the Director, or his designee, to prepare, sign, and execute a new negotiated LE Contract, substantially similar to Attachment I with The Regents of the University of California, Los Angeles (The Regents), to provide SMHS. The term of The Regents LE Contract will be effective July 1, 2021, or upon execution, whichever is later, through June 30, 2022, with two automatic renewal periods for FYs 2022-23 and 2023-24. The MCA for The Regents for each fiscal year is $1,878,033, fully funded by various federal, State, and local revenues as listed in Attachment I.

5. Approve and authorize the Director, or his designee, to prepare, sign, and execute an amendment, substantially similar to Attachment III, to extend the current LE Contract with The Regents if we are not ready to execute the new LE Contract in Recommendation 4 before July 1, 2021. The extension will be on a month-to-month basis only until the new LE Contract is ready, at which time, we will allow the current LE Contract to terminate in order to execute the new LE Contract. The current LE Contract is, and will continue to be, fully funded by various federal, State, and local revenues.

6. Delegate authority to the Director, or his designee, to prepare, sign, and execute future new LE Contracts substantially similar to Attachment II with qualified LE providers not listed in Recommendations above, for SMHS and/or IMD SMHS, effective upon execution, provided that: 1) sufficient funds are available; 2) County Counsel approves the LE Contract as to form; and 3) the Director, or his designee, provides a written notification to the Board and the Chief Executive Officer (CEO). The term of these

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contracts will be effective upon execution and have the same term as the LE Contracts in Recommendation 1.

7. Delegate authority to the Director, or his designee, to prepare, sign, and execute future amendments to the LE Contracts in Recommendations 1, 2, 3, 4, and 6 to: 1) revise the language; 2) revise the annual MCAs; 3) add, delete, modify, or replace the Service Exhibits and/or Statements of Work; 4) reflect federal, State, and County regulatory and/or policy changes; and 5) roll over certain federal and/or State grant funds from one fiscal year to the next fiscal year, as appropriate, provided that: 1) the County's total payment to each LE Contractor will not exceed an increase of more than 25 percent of the applicable MCA ; 2) sufficient funds are available; and 3) prior review and approval as to form by County Counsel, with written notice the Board and CEO.

8. Delegate authority to the Director, or his designee, to make non-material modifications to the LE Contracts in Recommendations 1, 2, 3, 4, and 6 through administrative amendments or change notices for the following and other similar reasons, as appropriate: change the LE Contractor's business name and/or headquarter address; change, revise, add, or delete the LE Contractor's provider site address(es), site number(s), and/or site name(s); make technical corrections; revise County and Contractor Administration Exhibits; and/or shift funds between currently contracted funded programs, so long as such shift(s) will not cause an increase in the MCA.

9. Delegate authority to the Director, or his designee, to terminate any LE Contract described in Recommendations 1, 2, 3, 4, 5, and 6 in accordance with the Contract's termination provisions, including Termination for Convenience. The Director, or his designee, will notify the Board and CEO in writing of such termination action.

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PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

Board approval of Recommendation 1 will allow DMH to execute new LE Contracts with 131 LE Contractors as the existing LE Contracts will expire on June 30, 2021. The LE Contractors provide a broad range of SMHS and crisis stabilization services, activities, and programs, including the California Work Opportunity and Responsibility to Kids (CalWORKs) program, and STRTP that include, but are not limited to, diagnosis, evaluation, treatment, day care, respite care, living arrangements, community skills training, referrals, consultation, community services, crisis intervention/stabilization, medication support, and case management.

As a long-term response to the County's shortage of mental health hospital beds, DMH is in the process of developing and releasing a Request for Statement of Qualifications (RFSQ) solicitation to establish a pool of qualified and licensed IMD, SNF, MHRC, PHF, and ERS providers. Board approval of Recommendations 2 and 3 will allow DMH to

execute new LE Contracts for the provision of acute and subacute inpatient services in the meantime to provide SMHS for individuals with serious mental illnesses discharged from the County, State, and private inpatient hospital psychiatric units, County jails, or State prisons, and who are not clinically ready to live independently or in supportive residential facilities.

Board approval of Recommendations 4 and 5 will allow DMH to execute a new DMH negotiated LE Contract with The Regents, whose existing LE Contract will expire on June 30, 2021, or to extend the current LE Contract with The Regents if we are not ready to execute the new LE Contract before July 1, 2021. The Regents are currently making a final review of the new LE Contract and negotiated provisions.

Board approval of Recommendation 6 will allow DMH to execute future new DMH LE Contracts with qualified LE Contractors for the provision of SMHS.

Board approval of Recommendations 7 and 8 will allow DMH to amend and update the LE Contracts in a timely manner, as necessary, for the continuous provision and expansion of mental health services without interruption to clients who are in need of these services.

Recommendation 9 will allow DMH to terminate the LE Contracts in accordance with the LE Contract's termination provisions, including Termination for Convenience, in a timely manner, as necessary.

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Implementation of Strategic Plan Goals

The recommended actions are consistent with the County's Strategic Plan Goal I, Make Investments that Transform Lives, specifically Strategy I.1 – Increase Our Focus on Prevention Initiatives, and Strategy I.2 – Enhance Our Delivery of Comprehensive Interventions.

FISCAL IMPACT/FINANCING

The FY 2021-22 annual MCA for each LE Contract is listed in Attachment I with a total aggregate amount of $1,349,742,208, fully funded by various federal, State, and local revenues.

For FY 2021-22, the projected aggregate amount for the IMD LE Contracts listed in Attachment I is $112,073,297, fully funded by 2011 Realignment revenue.

For FY 2021-22, the projected aggregate amount for the provisions of PHF and ERS LE Contracts are listed in Attachment I, with a total aggregate amount of $29,567,462, fully funded by various federal, State, and local revenues.

For FY 2021-22, the aggregate amount for The Regents is $1,878,033, fully funded by various federal, State, and local revenues.

Funding for FY 2021-22 is included in DMH's proposed budget. Funding for future fiscal years will be requested through DMH's annual budget request process.

There is no net County cost impacted associated with the recommended actions.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

All 142 Contractors listed in Attachment I have existing LE Contracts with DMH, which are set to expire on June 30, 2021. These LE Contracts are necessary to ensure continuous, uninterrupted SMHS for clients throughout Los Angeles County. Additionally, in 2018 DMH began an effort to transform the Full Service Partnership (FSP) program, one program within the LE Contracts. FSP is DMH's most intensive outpatient program, providing 24/7 services for our highest acuity clients. The foundation of FSP is doing "whatever it takes" to help individuals on their path to recovery and wellbeing, with an emphasis on reducing homelessness, hospitalization, and justice involvement. This transformation was spurred by a $2.4 million investment from the Ballmer Group to engage Third Sector Capital Partners, experts in the field, to guide DMH in shifting our FSP programs to an outcomes orientation. It will include an emphasis on serving our most vulnerable and at-risk clients, lower client to staff ratios, practice improvements, training and technical assistance, and provider incentives based on focal outcomes related to homelessness, hospitalization, and justice involvement. That effort launched an overall examination of the program across both our directly-operated clinics and contracted providers, and a series of updates to both the clinical and contracting model that we believe will result in improved life outcomes for our consumers and their families. To that end, LE Contractors that provide FSP services will receive the updated FSP SOW. This overall investment in transforming the FSP program has also led to an investment in FSP programming across the State.

The Regents requested mutual indemnification language be added to the County's standard indemnification provision. As such, the Regents would be responsible for any loss arising from this Contract, unless the loss or damage is caused by the County. The Regents is a constitutionally created State institution; therefore, the proposed indemnification provision is within reason and does not significantly impact the County. Additionally, the Regents requested a change to the following County provisions: 1) Compliance with County's Jury Service Program; 2) Consideration of Hiring County Employees Targeted for Layoff or Re-Employment List; 3) Consideration of Hiring Greater Avenues for Independence/General Relief Opportunity for Work (GAIN/GROW) Participants; and 4) Time Off for Voting. The requested changes provide that the Regents will comply with the aforementioned provisions to the extent that they do not conflict with

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the Collective Bargaining Agreements negotiated on behalf of its employees. The proposed changes are within reason and do not significantly impact the County.

Attachment I lists the LE Contractors, their headquarter addresses, Supervisorial District(s), Service Area(s) and the annual MCAs.

Attachment II is the LE Contract and Attachment III is for The Regents. Attachments II and III include the latest County updates and are approved as to form by County Counsel.

Welfare and Institutions Code (WIC) Section 14712 directs the State to implement and administer the Managed Mental Health Care for Medi-Cal eligible residents for the State. This WIC section requires a contractual agreement between the State and the County to operate as the Mental Health Plan (MHP) responsible for the delivery of SMHS to the County's eligible Medi-Cal beneficiaries. Through the MHP Agreement, DMH agrees to operate the MHP for the County. The MHP Agreement sets comprehensive requirements for DMH to provide or arrange for the provision of all covered, medically necessary SMHS to Medi-Cal beneficiaries in the County. Additionally, pursuant to WIC Section 5650, DMH is required to enter into a Performance Contract with the State for Short-Doyle Services, as well as those provided under the Mental Health Services Act, other federal grants, and/or County mental health programs. As such, DMH provides such SMHS through its directly-operated clinics as well as contractors through its 142 LE Contracts.

On March 30, 2016, the Centers of Medicare and Medicaid Services issued the Parity Rule in the Federal Register to strengthen access to mental health and substance use disorder services for Medi-Cal beneficiaries. The Parity Rule mandates that MPHs ensure access to care through an adequate provider network without unreasonable limitations to the scope or duration of mental health benefits. In order to comply with these requirements, DMH must ensure an adequate network of providers and that services are available throughout the County.

On April 19, 2021, DMH requested exemption to Board Policy No. 5.120 (Authority to Approve Increase to Board-Approved Contract Amounts) (Attachment IV) for increases to the LE Contracts over 10%, and in accordance with the Policy, DMH considers this request approved, as we did not hear otherwise.

Since Medi-Cal is a federal entitlement, the need to amend as expeditiously as possible is essential in order to meet the federal requirement under the Parity Rule, provided that the County has sufficient funds to match these federal funds. Therefore, the delegated authority to increase the MCA up to 25% will allow DMH to amend the LE Contacts in a timely manner for the continuous provision and expansion of mental health services without interruption to clients who are in need of these services/programs.

Additionally, on July 14, 2020, DMH requested an exemption to Board Policy No. 5.100 (Sole Source Contracts) (Attachment V) from your Board for notification requirements for

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DMH LE Contracts for the same reason stated above, and in accordance with the Board Policy, DMH considers this request approved, as we did not hear otherwise.

As mandated by your Board, the performance of all contracts are evaluated by DMH on an annual basis to ensure the compliance with all contract terms and performance standards.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Board approval of the recommended actions will allow DMH to provide continuous SMHS and allow DMH to efficiently incorporate changes to LE Contracts in a timely manner.

Respectfully submitted,

JONATHAN E. SHERIN, M.D., Ph.D.
Director

JES:GCP:SK
RLR:SC:atm

Attachments (5)

c: Executive Office, Board of Supervisors
Chief Executive Office
County Counsel
Chairperson, Mental Health Commission

DRAFT

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
LIST OF LEGAL ENTITY CONTRACTS
FISCAL YEARS 2021-22, 2022-23, AND 2023-24

CONTRACTOR NAME CONTRACTOR'S HEADQUARTER ADDRESS	L.E.#	Supervisorial District Service Location	MCA FY 2021-22	MCA FY 2022-23	MCA FY 2023-24	**Program Notes
1736 FAMILY CRISIS CENTER 2116 Arlington Avenue, Suite 200 Los Angeles, CA 90018	00256	2, 4	$ 405,582	$ 405,582	$ 405,582	C
AIDS PROJECT LOS ANGELES, INC. DBA APLA HEALTH & WELLNESS 611 South Kingsley Drive Los Angeles, CA 90005	00269	2	$ 33,902	$ 33,902	$ 33,902	
ALCOTT CENTER FOR MENTAL HEALTH SERVICES 1433 S. Robertson Blvd. Los Angeles, CA 90035	00177	2, 3	$ 3,494,691	$ 3,521,873	$ 3,521,873	A, C
ALMA FAMILY SERVICES 900 Corporate Center Drive, Suite 350 Monterey Park. CA 91754	00173	1, 4, 5	$ 14,216,583	$ 13,566,099	$ 13,566,099	A, C
AMANECER COMMUNITY COUNSELING SVS, A NON-PROFIT CORP. 1200 Wilshire Blvd., Suite 400 Los Angeles, CA 90017	00180	1, 2	$ 12,674,037	$ 12,686,369	$ 12,686,369	
ASC TREATMENT GROUP DBA THE ANNE SIPPI CLINIC 2457 Endicott Street Los Angeles, CA 90032	00409	3	$ 693,389	$ 693,389	$ 693,389	
ASIAN AMERICAN DRUG ABUSE PROGRAM, INC. (AADAP) 2900 S. Crenshaw Blvd. Los Angeles, CA 90016	01167	2	$ 185,953	$ 185,953	$ 185,953	
ASIAN PACIFIC HEALTH CARE VENTURE, INC. 4216 Fountain Ave Los Angeles, CA 90029	01800	1	$ 142,142	$ 142,142	$ 142,142	
ASPIRA NET 400 Oyster Point Blvd. San Francisco, CA 94080	00467	4	$ 2,071,200	$ 2,071,200	$ 2,071,200	
BARBOUR AND FLOYD MEDICAL ASSOCIATES 2610 Industry Way, Suite A Lynwood, CA 90262	00175	2	$ 5,324,979	$ 5,408,061	$ 5,408,061	A
BAYFRONT YOUTH & FAMILY SERVICES 324 East Bixby Rd Long Beach, CA 90807	01273	4	$ 4,442,199	$ 4,442,199	$ 4,442,199	A
BEHAVIORAL HEALTH SERVICES, INC. 15519 Crenshaw Boulevard Gardena, CA 90249	01150	1, 3	$ 1,340,798	$ 1,360,132	$ 1,360,132	A
BOURNE, INC. 2235 N. Lake Ave., Suite 212 Altadena, CA 91001	02232	5	$ 1,536,000	$ 1,536,000	$ 1,536,000	D
BOY REPUBLIC 1907 Boys Republic Drive Chino Hills, CA 91709	02038	1, 5, Out of County	$ 7,296,000	$ 7,296,000	$ 7,296,000	D
BRASWELL REHAB INST FOR DEV. OF GROWTH DBA BRIDGES 279 East Arrow Highway, Suite 102 San Dimas, CA 91773	00274	1, 2	$ 4,172,746	$ 3,894,228	$ 3,894,228	A

** Programs Note Key:

(A) - Full Service Partnership (FSP)

(B) - Institutions for Mental Disease (IMD)

(C) - California Work Opportunity and Responsibility to Kids (CalWORKs)

(D) - Short Term Residential Therapeutic Program (STRTP)

(E) - Enriched Residential Services (ERS)

(F) - Psychiatric Health Facilities (PHF)

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
LIST OF LEGAL ENTITY CONTRACTS
FISCAL YEARS 2021-22, 2022-23, AND 2023-24

CONTRACTOR NAME CONTRACTOR'S HEADQUARTER ADDRESS	L.E.#	Supervisorial District Service Location	MCA FY 2021-22	MCA FY 2022-23	MCA FY 2023-24	**Program Notes
CALIFORNIA INSTITUTE OF HEALTH & SOCIAL SVC, INC. DBA ALAFIA MENTAL HEALTH INSTITUTE 8929 S. Sepulveda Blvd., Suite 201 Los Angeles, CA 90045	01192	2, 5	$ 2,551,318	$ 2,551,318	$ 2,551,318	
CENTER FOR INTEGRATED FAMILY & HEALTH SERVICES, INC. 540 S. Eremland Drive Covina, CA 91723	01209	1, 5	$ 1,776,096	$ 1,776,096	$ 1,776,096	
CHILD & FAMILY CENTER 21545 Centre Point Parkway Santa Clarita, CA 91350	00210	5	$ 10,994,816	$ 10,986,421	$ 10,986,421	A
CHILD AND FAMILY GUIDANCE CENTER 9650 Zelzah Avenue Northridge, CA 91325	00207	3, 5	$ 34,793,796	$ 34,747,850	$ 34,747,850	A, C
CHILDHELP, INC. 6730 N. Scottsdale Road, Suite 150 Scottsdale, AZ 85253	00660	Out of County	$ 384,000	$ 384,000	$ 384,000	D
CHILDNET YOUTH & FAMILY SERVICES, INC. 4155 Outer Traffic Circle Long Beach, CA 90804	00783	4	$ 17,203,931	$ 17,099,931	$ 17,099,931	A
CHILDREN'S BUREAU OF SOUTHERN CALIFORNIA 1910 Magnolia Avenue Los Angeles, CA 90007	00668	1, 2, 4, 5	$ 26,543,458	$ 25,543,458	$ 25,543,458	A
CHILDREN'S HOSPITAL OF LOS ANGELES 4650 Sunset Blvd. Los Angeles, CA 90027	00179	2, 3	$ 17,243,660	$ 17,250,099	$ 17,250,099	A
CHILDREN'S INSTITUTE INC. 2121 W. Temple St. Los Angeles, CA 90026	00591	1, 2, 4	$ 34,395,245	$ 34,270,245	$ 34,270,245	A, C
COMMUNITY FAMILY GUIDANCE CENTER 10929 South Street, Suite 208-B Cerritos, CA 90703	00181	1, 4	$ 6,586,148	$ 6,586,148	$ 6,586,148	A
COUNSELING & RESEARCH ASSOCIATES. INC.DBA MASADA HOMES 108 W. Victoria Street Gardena, CA 90248	00779	2, 4, 5	$ 18,989,171	$ 19,034,620	$ 19,034,620	A
COUNSELLING4KIDS 601 S. Glenoaks Blvd., Suite 200 Burbank, CA 91502	00694	4, 5	$ 7,875,691	$ 7,875,691	$ 7,875,691	
D' VEAL CORPORATION DBA D'VEAL FAMILY AND YOUTH SERVICES 2750 East Washington Blvd., Suite 230 Pasadena, CA 91107	00778	1, 5	$ 9,378,905	$ 9,378,905	$ 9,378,905	
DANGERFIELD INSTITUTE OF URBAN PROBLEMS, INC. 3870 Crenshaw Blvd., Suite 212 Los Angeles, CA 90008	02220	2	$ 2,304,800	$ 2,304,800	$ 2,304,800	D

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COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
LIST OF LEGAL ENTITY CONTRACTS
FISCAL YEARS 2021-22, 2022-23, AND 2023-24

CONTRACTOR NAME CONTRACTOR'S HEADQUARTER ADDRESS	L.E.#	Supervisorial District Service Location	MCA FY 2021-22	MCA FY 2022-23	MCA FY 2023-24	**Program Notes
DAVID & MARGARET HOME, INC. 1350 Third Street La Verne, CA 91750	01227	3	$ 1,469,274	$ 1,469,274	$ 1,469,274	A, D
DELIANN LUCILE CORPORATION DBA DELILU ACHIEVEMENT HOME 5731 W. Slauson Avenue, Suite 210 Culver City, CA 90230	02255	2	$ 1,280,000	$ 1,280,000	$ 1,280,000	D
DIDI HIRSCH PSYCHIATRIC SERVICE 4760 S. Sepulveda Blvd. Culver City, CA 90230	00183	1, 2, 5	$ 36,455,532	$ 36,637,449	$ 36,637,449	A, C
DIGNITY HEALTH DBA CALIFORNIA HOSPITAL MEDICAL CENTER 1401 S. Grand Avenue Los Angeles, CA 90015	01285	1, 2	$ 3,806,824	$ 3,806,824	$ 3,806,824	
DISABILITY COMMUNITY RESOURCE CENTER 12901 Venice Blvd. Los Angeles, CA 90066	00316	2	$ 203,903	$ 203,903	$ 203,903	
DREAM HOME CARE, INC. 20695 S. Western Ave., Suite #132 Torrance, CA 90501	02230	4	$ 1,152,000	$ 1,152,000	$ 1,152,000	D
DREW CHILD DEVELOPMENT CORPORATION 1770 E. 118th Street Los Angeles, CA 90059	01181	2	$ 3,784,521	$ 3,784,521	$ 3,784,521	
EGGLESTON YOUTH CENTER INC. 256 West Badillo Street Covina, CA 91723	01853	1, 2	$ 5,687,181	$ 5,687,181	$ 5,687,181	D
EL CENTRO DE AMISTAD, INC. 7038 Owensmouth Avenue Canoga Park, CA 91303	00185	3	$ 4,949,190	$ 4,399,190	$ 4,399,190	C
EL CENTRO DEL PUEBLO, INC. 1157 Lemoyne Street Los Angeles, CA 90026	01250	1, 2	$ 4,013,720	$ 4,013,720	$ 4,013,720	
EMOTIONAL HEALTH ASSOCIATION DBA SHARE! THE SELF-HELP AND RECOVERY EXCHANGE 6666 Green Valley Circle Culver City, CA 90230	01311	1, 2	$ 2,018,573	$ 2,018,573	$ 2,018,573	
ENKI HEALTH AND RESEARCH SYSTEMS, INC. 150 E. Olive Ave., Suite 203 Burbank, CA 91502	00188	1	$ 37,588,473	$ 37,686,762	$ 37,686,762	A, C
ETTIE LEE HOMES, INC. 5146 N. Maine Ave. Baldwin Park, CA 91706	00995	1	$ 1,777,052	$ 1,777,052	$ 1,777,052	
EXCEPTIONAL CHILDREN'S FOUNDATION 5350 Machado Rd Culver City, CA 90230	01567	2	$ 1,906,892	$ 1,906,892	$ 1,906,892	

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COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
LIST OF LEGAL ENTITY CONTRACTS
FISCAL YEARS 2021-22, 2022-23, AND 2023-24

CONTRACTOR NAME CONTRACTOR'S HEADQUARTER ADDRESS	L.E.#	Supervisorial District Service Location	MCA FY 2021-22	MCA FY 2022-23	MCA FY 2023-24	**Program Notes
EXODUS RECOVERY, INC. 9808 Venice Blvd., Suite 700 Culver City, CA 91105	00527	1, 2, 4	$ 19,216,661	$ 19,491,785	$ 19,491,785	A
FIELDS COMPREHENSIVE YOUTH SERVICES, INC. 8780 19th Street, Suite 196 Alta Loma, CA 91701	02082	Out of County	$ 384,000	$ 384,000	$ 384,000	D
FILIPINO-AMERICAN SERVICE GROUP, INC. 135 N. Park View Street Los Angeles, CA 90026	00302	1	$ 86,882	$ 86,882	$ 86,882	
FIVE ACRES - THE BOYS & GIRLS AID SOCIETY OF LA COUNTY 760 W. Mountain View Street Altadena, CA 91001	00647	1, 5	$ 24,079,191	$ 24,079,191	$ 24,079,191	A, D
FLEMING & BARNES, INC DBA DIMONDALE ADOLESCENT CARE FACILITY 23860 Hawthorne Blvd., Suite 200 Torrance, CA 90505	02294	2, 4, 5	$ 4,608,000	$ 4,608,000	$ 4,608,000	D
FLORENCE CRITTENTON SERVICES OF ORANGE COUNTY, INC. 801 East Chapman Ave., Suite 203 Fullerton, CA 92831	00870	1, 2, 4, Out of County	$ 11,412,301	$ 11,312,301	$ 11,312,301	A, D
FOOTHILL FAMILY SERVICE 2500 E. Foothill Blvd., Ste. 300 Pasadena, CA 91107	00724	1, 5	$ 14,150,234	$ 14,150,234	$ 14,150,234	A
FOR THE CHILD, INC. 4565 California Ave. Long Beach, CA 90807	00300	4	$ 2,196,331	$ 2,196,331	$ 2,196,331	
GARCES RESIDENTIAL CARE SERVICES 7349 Millliken Ave., Ste. 140-223 Rancho Cucamonga, CA 91730	02235	1	$ 384,000	$ 384,000	$ 384,000	D
GATEWAYS HOSPITAL & MENTAL HEALTH CENTER 1891 Effie St. Los Angeles, CA 90026	00190	1, 2	$ 21,908,928	$ 21,908,928	$ 21,908,928	A
HAMBURGER HOME DBA AVIVA CENTER 7120 Franklin Ave. Los Angeles, CA 90046	00174	2, 3	$ 15,450,539	$ 15,450,539	$ 15,450,539	A
HATHAWAY SYCAMORES CHILD & FAMILY SERVICES 100 W. Walnut St., Ste. 375 Pasadena, CA 91124	00192	1, 2, 3, 5	$ 50,681,345	$ 50,368,130	$ 50,368,130	A, D
HAYNES FAMILY OF PROGRAMS, INC. 233 W. Baseline Rd., La Verne, CA 91750	00697	5	$ 6,512,187	$ 6,512,187	$ 6,512,187	D
HEALTHRIGHT 360 1563 Mission St. San Francisco, CA 94103	00348	1	$ 8,572,846	$ 8,637,790	$ 8,637,790	A, C

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COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
LIST OF LEGAL ENTITY CONTRACTS
FISCAL YEARS 2021-22, 2022-23, AND 2023-24

CONTRACTOR NAME CONTRACTOR'S HEADQUARTER ADDRESS	L.E.#	Supervisorial District Service Location	MCA FY 2021-22	MCA FY 2022-23	MCA FY 2023-24	**Program Notes
HELPLINE YOUTH COUNSELING, INC. 14181 Telegraph Rd. Whittier, CA 90604	01232	4	$ 3,288,500	$ 3,288,500	$ 3,288,500	
HERITAGE CLINIC & THE COMMUNITY ASSISTANCE PROGRAM FOR SENIORS 447 N. El Molino Ave. Pasadena, CA 91101	00965	2, 4, 5	$ 7,586,074	$ 7,697,001	$ 7,697,001	A
HERITAGE GROUP HOMES, INC. 158 Gentry St, Pomona, CA 91767	02194	1, 5	$ 3,456,000	$ 3,456,000	$ 3,456,000	D
HILLSIDES 815 Colorado Blvd. Los Angeles, CA 90041	00321	1, 5	$ 30,812,130	$ 30,842,400	$ 30,842,400	A, C, D
HILLVIEW MENTAL HEALTH CENTER, INC. 12450 Van Nuys Blvd., Ste. 200 Pacoima, CA 91331	00194	3	$ 11,762,893	$ 11,835,989	$ 11,835,989	A, C
HOMES FOR LIFE FOUNDATION 8939 S. Sepulveda Blvd., Ste. 460 Los Angeles, CA 90045	00508	2, 4, 5	$ 1,621,484	$ 1,621,484	$ 1,621,484	
HUMANISTIC FOUNDATION, INC. DBA NEW CONCEPT GROUP HOME 3731 Stocker St. Ste. 208 Los Angeles, CA 90008	02205	2	$ 512,000	$ 512,000	$ 512,000	D
INSTITUTE FOR FAMILY CENTERED SERVICES INC. DBA CALIFORNIA MENTOR 9166 Anaheim Pl, Suite 200 Rancho Cucamonga, CA 91730	01981	2, 3, 4, 5	$ 9,134,400	$ 9,134,400	$ 9,134,400	
INSTITUTE FOR MULTICULTURAL COUN. & EDU. SVCS, INC. (IMCES) 3580 Wilshire Blvd., Ste. 2000 Los Angeles, CA 90010	00699	1, 2, 5	$ 11,569,986	$ 11,643,795	$ 11,643,795	A
JEWISH FAMILY SERVICES OF LOS ANGELES 3580 Wilshire Blvd., Ste. 700 Los Angeles, CA 90010	01521	2, 3	$ 2,602,946	$ 2,602,946	$ 2,602,946	
JWCH INSTITUTE, INC. 5650 Jillson St. Commerce, CA 90040	01563	2, 4	$ 1,919,874	$ 1,931,456	$ 1,931,456	A
KEDREN COMMUNITY HEALTH CENTER, INC. DBA KEDREN 4211 S. Avalon Blvd. Los Angeles, CA 90011	00197	2	$ 38,897,846	$ 38,993,711	$ 38,993,711	A
KOREAN AMERICAN FAMILY SERVICES CENTER 3727 West 6th St., Ste. 320 Los Angeles, CA 90020	01794	3	$ 313,741	$ 313,741	$ 313,741	
KOREATOWN YOUTH & COMMUNITY CENTER, INC. 3727 West 6th St., Ste. 320 Los Angeles, CA 90020	00326	4	$ 883,526	$ 883,526	$ 883,526	

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COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
LIST OF LEGAL ENTITY CONTRACTS
FISCAL YEARS 2021-22, 2022-23, AND 2023-24

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LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE (LACADA) 12070 Telegraph Road, Ste. 207 Santa Fe Springs, CA 90670	02130	4	$ 2,352,702	$ 2,352,702	$ 2,352,702	
LOS ANGELES LGBT CENTER 1625 N. Schrader Blvd. Los Angeles, CA 90028	00304	5	$ 1,104,422	$ 1,104,422	$ 1,104,422	D
LUVLEE'S RESIDENTIAL CARE DBA NEW DAWN 20723 Walnut Valley Dr Walnut, CA 91789	02083	1, Out of County	$ 768,000	$ 768,000	$ 768,000	D
MARYVALE 7600 E. Graves Ave. Rosemead, CA 91770	01034	5	$ 3,580,232	$ 3,580,232	$ 3,580,232	A
MCKINLEY CHILDREN'S CENTER, INC. DBA MCKINLEY 762 W. Cypress St. San Dimas, CA 91773	00971	1, 5	$ 8,073,921	$ 8,097,149	$ 8,097,149	A, D
MENTAL HEALTH AMERICA OF LOS ANGELES 200 Pine Ave., Ste. 400 Long Beach, CA 90802	00200	4, 5	$ 21,669,813	$ 22,094,004	$ 22,094,004	
NEW DIRECTIONS, INC. 11303 Wilshire Blvd., VA Bldg. 116 Los Angeles, CA 90073	01142	3	$ 826,837	$ 845,319	$ 845,319	A
OLIVE CREST TREATMENT CENTERS, INC. 2130 E. Fourth St., Ste. 200 Santa Ana, CA 92705	00518	4, 5	$ 4,438,901	$ 4,438,901	$ 4,438,901	
ONE IN LONG BEACH, INC. 2017 E. 4th St. Long Beach, CA 90814	00859	4	$ 296,309	$ 296,309	$ 296,309	
OPTIMIST BOYS' HOME & RANCH INC. 6957 N. Figueroa St. Los Angeles, CA 90041	00781	1, 2, 3, 4, 5	$ 18,283,448	$ 18,283,448	$ 18,283,448	A, D
PACIFIC ASIAN COUNSELING SERVICES 8616 La Tijera Blvd., Ste. 200 Los Angeles, CA 90045	00579	2, 3, 4	$ 5,348,495	$ 5,391,404	$ 5,391,404	A, C
PACIFIC CLINICS 800 S. Santa Anita Ave. Arcadia, CA 91006	00203	1, 2, 4, 5	$ 91,546,617	$ 91,283,921	$ 91,283,921	A, C
PARA LOS NINOS 5000 Hollywood Blvd. Hollywood, CA 90027	01169	1, 2	$ 2,830,735	$ 2,830,735	$ 2,830,735	
PASADENA UNIFIED SCHOOL DISTRICT 351 S. Hudson Ave., Room 206 Pasadena, CA 91109	01228	5	$ 2,660,959	$ 2,660,959	$ 2,660,959	
PATHWAYS COMMUNITY SERVICES, LLC. 4281 Katella Ave., Ste. 201 Los Alamitos, CA 90720	00801	4, 5	$ 7,961,760	$ 7,987,973	$ 7,987,973	A, C

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LIST OF LEGAL ENTITY CONTRACTS
FISCAL YEARS 2021-22, 2022-23, AND 2023-24

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PEDIATRIC & FAMILY MEDICAL CENTER DBA EISNER PEDIATRIC & FAMILY MEDICAL CENTER 1500 S. Olive St. Los Angeles, CA 90015	00711	1	$ 1,127,638	$ 1,127,638	$ 1,127,638	
PENNY LANE CENTERS 15305 Rayen St. North Hills, CA 91343	00201	1, 3, 5	$ 41,212,289	$ 41,248,788	$ 41,248,788	C, D
PERSONAL INVOLVEMENT CENTER, INC. 8220 S. San Pedro St. Los Angeles, CA 90003	01194	2, 5	$ 6,620,305	$ 6,647,487	$ 6,647,487	A
PHOENIX HOUSES OF LOS ANGELES, INC. 11600 Eldridge Ave. Lake View Terrace, CA 91342	00805	3	$ 4,135,554	$ 4,135,554	$ 4,135,554	D
PRIME HEALTHCARE SERVICES - ST. FRANCIS, LLC 3630 E. Imperial Highway Lynwood, CA 90262	01366	2	$ 1,868,991	$ 1,868,991	$ 1,868,991	
PROJECT RETURN PEER SUPPORT NETWORK 2677 Zoe Ave., Ste. 304 Huntington Park, CA 90255	01961	1	$ 2,912,073	$ 2,912,073	$ 2,912,073	
PROVIDENCE SAINT JOHN'S HEALTH CENTER 1339 20th St. Santa Monica, CA 90404	00217	3	$ 3,467,207	$ 3,467,207	$ 3,467,207	
RANCHO SAN ANTONIO BOY HOME, INC. 21000 Plummer St. Chatsworth, CA 91311	02172	5	$ 7,568,000	$ 7,568,000	$ 7,568,000	D
SAN FERNANDO VALLEY COMMUNITY MHC, INC. 16360 Roscoe Blvd., 2nd Fl. Van Nuys, CA 91406	00208	3	$ 42,298,547	$ 42,486,189	$ 42,486,189	A, C
SAN GABRIEL CHILDREN'S CENTER, INC. 2200 E. Route 66, Ste. 100 Glendora, CA 91740	00320	1, 5	$ 4,630,890	$ 4,630,890	$ 4,630,890	A, D
SHIELDS FOR FAMILIES 11601 S. Western Ave. Los Angeles, CA 90047	00558	2, 4	$ 10,488,036	$ 10,500,427	$ 10,500,427	C
SOCIAL MODEL RECOVERY SYSTEMS, INC. 223 E. Rowland St. Covina, CA 91723	00212	1, 5	$ 5,440,063	$ 5,456,277	$ 5,456,277	A
SOUTH BAY CHILDREN'S HEALTH CENTER ASSOCIATION, INC. 410 Camino Real Redondo Beach, CA 90277	00213	4	$ 1,125,100	$ 1,125,100	$ 1,125,100	
SOUTHERN CALIFORNIA HEALTH AND REHABILITATION PROGRAM (SCHARP) 2610 Industry Way, Ste. A Lynwood, CA 90262	00506	2, 4	$ 20,494,535	$ 20,732,116	$ 20,732,116	A, C

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LIST OF LEGAL ENTITY CONTRACTS
FISCAL YEARS 2021-22, 2022-23, AND 2023-24

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SPECIAL SERVICE FOR GROUPS 905 E. 8th St. Los Angeles, CA 90021	00214	1, 2, 3, 4, 5	$ 55,460,754	$ 55,768,003	$ 55,768,003	A, C
SPIRITT FAMILY SERVICES, INC. 8000 Painter Ave. Whittier, CA 90602	01160	1, 4	$ 3,442,228	$ 3,262,726	$ 3,262,726	
ST. ANNE'S MATERNITY HOME 155 N. Occidental Blvd. Los Angeles, CA 90026	01186	1, 2	$ 10,703,379	$ 10,703,379	$ 10,703,379	A, D
ST. JOSEPH CENTER 204 Hampton Dr. Venice, CA 90291	00218	2, 3	$ 8,467,596	$ 8,399,593	$ 8,399,593	A
STAR VIEW BEHAVIORAL HEALTH, INC. 1501 Hughes Way, Ste. 150 Long Beach, CA 90810	00543	1, 2, 3, 4	$ 57,152,365	$ 57,219,803	$ 57,219,803	A
STEP-UP ON SECOND STREET, INC. 1328 Second St. Santa Monica, CA 90401	00215	3	$ 11,222,056	$ 11,354,700	$ 11,354,700	A
STIRLING ACADEMY, INC. 6931 Van Nuys Blvd., Ste. 102 Van Nuys, CA 91405	00216	3	$ 2,624,906	$ 2,624,906	$ 2,624,906	
TARZANA TREATMENT CENTER, INC. 18646 Oxnard St. Tarzana, CA 91356	01156	3, 4, 5	$ 13,392,423	$ 13,454,217	$ 13,454,217	A
TELECARE CORPORATION 1080 Marina Village Parkway, Ste. 100 Alameda, CA 94501	00108	1, 4	$ 16,083,741	$ 16,335,791	$ 16,335,791	A
TESSIE CLEVELAND COMMUNITY SERVICES CORPORATION 8019 S. Compton Ave. Los Angeles, CA 90001	01379	2, 5	$ 20,840,744	$ 20,938,160	$ 20,938,160	
THE CHILDREN'S CENTER OF ANTELOPE VALLEY 45111 Fern Ave. Lancaster, CA 93534	01066	5	$ 2,822,550	$ 2,822,550	$ 2,822,550	
THE GUIDANCE CENTER 1301 Pine Ave. Long Beach, CA 90813	00191	2, 4	$ 17,020,007	$ 17,020,007	$ 17,020,007	A, C
THE HELP GROUP CHILD AND FAMILY CENTER 13130 Burbank Blvd. Sherman Oaks, CA 91401	00198	2, 3	$ 17,267,824	$ 17,267,824	$ 17,267,824	A, C, D
THE INSTITUTE FOR THE REDESIGN OF LEARNING 205 Pasadena Ave., Suite 300 South Pasadena, CA 91030	00171	1, 5	$ 12,080,485	$ 12,080,485	$ 12,080,485	A
THE PEOPLE CONCERN 1453 16th St. Santa Monica, CA 90404	00305	1, 3	$ 9,645,954	$ 9,751,443	$ 9,751,443	A

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LIST OF LEGAL ENTITY CONTRACTS
FISCAL YEARS 2021-22, 2022-23, AND 2023-24

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THE TEEN PROJECT, INC. 8140 Sunland Blvd. Sun Valley, CA 91352	02129	3	$ 2,352,703	$ 2,352,703	$ 2,352,703	
THE VILLAGE FAMILY SERVICES, INC. 6736 Laurel Canyon Blvd., Ste. 200 North Hollywood, CA 91606	01224	1, 3	$ 8,798,396	$ 8,848,224	$ 8,848,224	A
THE WHOLE CHILD - MENTAL HEALTH & HOUSING SERVICES 10155 Colima Rd. Whittier, CA 90603	00195	1, 4	$ 8,470,299	$ 8,474,772	$ 8,474,772	A
TOBINWORLD 912 E. Broadway Glendale, CA 91205	01171	5	$ 1,622,854	$ 1,622,854	$ 1,622,854	
TOPANGA-ROSCOE CORP. DBA TOPANGA WEST GUEST HOME 22115 Roscoe Blvd. Canoga Park, CA 91304	00630	5	$ 844,594	$ 844,594	$ 844,594	
TRINITY YOUTH SERVICES 201 N. Indian Hill Blvd., Ste. A-201 Claremont, CA 91711	01026	1, Out of County	$ 9,251,755	$ 9,251,755	$ 9,251,755	
UNITED AMERICAN INDIAN INVOLVEMENT, INC. 1125 W. 6th St., Ste., 103 Los Angeles, CA 90017	00938	1	$ 2,256,744	$ 2,256,744	$ 2,256,744	
UNIVERSITY MUSLIM MEDICAL ASSOCIATION, INC. 711 W. Florence Ave. Los Angeles, CA 90044	01806	2	$ 587,170	$ 587,170	$ 587,170	A
UPLIFT FAMILY SERVICES 251 Llewellyn Ave. Campbell, CA 95008	00120	2, 3	$ 8,618,256	$ 8,618,256	$ 8,618,256	A
VICTOR TREATMENT CENTERS, INC. DBA WILLOW CREEK TREATMENT CENTER 1360 E. Lassen Ave. Chico, CA 95973	00118	5	$ 3,195,781	$ 3,195,781	$ 3,195,781	D
VIP COMMUNITY MENTAL HEALTH CENTER, INC. (VIP CMHC) 1721 Griffin Ave. Los Angeles, CA 90031	01044	1	$ 11,135,190	$ 9,935,190	$ 9,935,190	
VISTA DEL MAR CHILD & FAMILY SERVICES 3200 Motor Ave. Los Angeles, CA 90034	00196	2, 3	$ 15,064,276	$ 14,664,276	$ 14,664,276	A, D
WATTS LABOR COMMMUNITY ACTION COMMMITTEE (WLCAC) 10950 S. Central Ave. Los Angeles, CA 90059	00310	2	$ 412,721	$ 412,721	$ 412,721	
WAYFINDER FAMILY SERVICES 5300 Angeles Vista Blvd. Los Angeles, CA 90043	01798	2, 4	$ 4,280,121	$ 4,176,121	$ 4,176,121	D

** Programs Note Key:

(A) - Full Service Partnership (FSP)

(B) - Institutions for Mental Disease (IMD)

(C) - California Work Opportunity and Responsibility to Kids (CalWORKs)

(D) - Short Term Residential Therapeutic Program (STRTP)

(E) - Enriched Residential Services (ERS)

(F) - Psychiatric Health Facilities (PHF)

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
LIST OF LEGAL ENTITY CONTRACTS
FISCAL YEARS 2021-22, 2022-23, AND 2023-24

CONTRACTOR NAME CONTRACTOR'S HEADQUARTER ADDRESS	L.E.#	Supervisorial District Service Location	MCA FY 2021-22	MCA FY 2022-23	MCA FY 2023-24	**Program Notes
WELLNEST EMOTIONAL HEALTH & WELLNESS 3787 S. Vermont Ave. Los Angeles, CA 90007	00199	1, 2	$ 29,638,740	$ 29,652,356	$ 29,652,356	A
WEST COVINA FOSTER FAMILY AGENCY DBA HOMES OF HOPE FOSTER FAMILY AGENCY 1107 S. Glendora Ave. West Covina, CA 91790	02245	1, Out of County	$ 704,000	$ 704,000	$ 704,000	D
TOTAL FOR LEGAL ENTITIES:			**$ 1,349,742,208**	**$ 1,347,706,619**	**$ 1,347,706,619**	
THE REGENTS OF THE UNIVERSITY OF CALIFORNIA, LOS ANGELES 10889 Wilshire Boulevard, Suite 700 Los Angeles, CA 90095	00984	3	$ 1,878,033	$ 1,878,033	$ 1,878,033	

** Programs Note Key:

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(D) - Short Term Residential Therapeutic Program (STRTP)

(E) - Enriched Residential Services (ERS)

(F) - Psychiatric Health Facilities (PHF)

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
LIST OF LEGAL ENTITY CONTRACTS
FISCAL YEARS 2021-22, 2022-23, AND 2023-24

INSTITUTIONS FOR MENTAL DISEASE (IMD) LEGAL ENTITY CONTRACTS

CONTRACTOR NAME CONTRACTOR'S HEADQUARTER ADDRESS	L.E.#	Supervisorial District Service Location	MCA FY 2021-22	MCA FY 2022-23	MCA FY 2023-24	**Program Notes
ALPINE SPECIAL TREATMENT CENTER, INC. DBA HABORVIEW CENTER, LLC 2120 Alpine Blvd. Alpine, CA 91901	01321	Out of County	N/A	N/A	N/A	B
AMADA ENTERPRISES, INC. DBA VIEW HEIGHTS CONVALESCENT HOSPITAL 12619 S. Avalon Blvd. Los Angeles, CA 90061	00324	2	N/A	N/A	N/A	B
CRESTWOOD BEHAVIORAL HEALTH, INC. 520 Capitol Mall, Ste. 800 Sacramento, CA 95814	00949	Out of County	N/A	N/A	N/A	B
KF COMMUNITY CARE, LLC 2335 S. Mountain Ave. Duarte, CA 91010	01727	5	N/A	N/A	N/A	B
LANDMARK MEDICAL SERVICES, INC. 2030 N. Garey Ave. Pomona, CA 91767	00313	1	N/A	N/A	N/A	B
SAN GABRIEL VALLEY CONVALESCENT HOSPITAL, INC. DBA PENN MAR THERAPEUTIC CENTER 260 E. Brown St., Ste. 315 Birmingham, MI 48009	00308	1	N/A	N/A	N/A	B
SUNBRIDGE BRASWELL ENTERPRISES, LLC DBA OLIVE VISTA A CENTER FOR PROBLEMS OF LIVING, LAUREL PARK & SIERRA VISTA 2335 S. Towne St. Pomona, CA 91766	00279	1, Out of County	N/A	N/A	N/A	B
SUNBRIDGE MEADOWBROOK REHABILITATION CENTERS, LLC DBA MEADOWBROOK MANOR 3951 East Blvd. Los Angeles, CA 90066	00314	2	N/A	N/A	N/A	B
SUNBRIDGE SHANDIN HILLS REHABILITATION CENTER, LLC DBA SHANDIN HILLS BEHAVIOR THERAPY CENTER 4164 N. 4th Ave. San Bernardino, CA 92408	01207	Out of County	N/A	N/A	N/A	B
SYLMAR HEALTH & REHABILITATION CENTER, INC. 13347 Ventura Blvd. Sherman Oaks, CA 91423	01922	3	N/A	N/A	N/A	B
TELECARE CORPORATION 1080 Marina Village Parkway, Ste. 100 Alameda, CA 94501	00108	4	N/A	N/A	N/A	B

** Programs Note Key:

(A) - Full Service Partnership (FSP)

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(D) - Short Term Residential Therapeutic Program (STRTP)

(E) - Enriched Residential Services (ERS)

(F) - Psychiatric Health Facilities (PHF)

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
LIST OF LEGAL ENTITY CONTRACTS
FISCAL YEARS 2021-22, 2022-23, AND 2023-24

ENRICHED RESIDENTIAL SERVICES (ERS) LEGAL ENTITY CONTRACTS

CONTRACTOR NAME CONTRACTOR'S HEADQUARTER ADDRESS	L.E.#	Supervisorial District Service Location	MCA FY 2021-22	MCA FY 2022-23	MCA FY 2023-24	**Program Notes
ASC TREATMENT GROUP DBA THE ANNE SIPPI CLINIC 2457 Endicott Street Los Angeles, CA 90032	00409	3	$ 938,445	$ 938,445	$ 938,445	E
BRASWELL REHAB INST FOR DEV. OF GROWTH DBA BRIDGES 279 East Arrow Highway, Suite 102 San Dimas, CA 91773	00274	1	$ 762,114	$ 762,114	$ 762,114	E
GATEWAYS HOSPITAL & MENTAL HEALTH CENTER 1891 Effie St. Los Angeles, CA 90026	00190	1	$ 4,990,451	$ 4,990,451	$ 4,990,451	E
HOMES FOR LIFE FOUNDATION 8939 S. Sepulveda Blvd., Ste. 460 Los Angeles, CA 90045	00508	4	$ 518,983	$ 518,983	$ 518,983	E
JWCH INSTITUTE, INC. 5650 Jillson St. Commerce, CA 90040	01563	2	$ 216,007	$ 216,007	$ 216,007	E
SPECIAL SERVICE FOR GROUPS 905 E. 8th St. Los Angeles, CA 90021	00214	1, 2, 5	$ 4,795,239	$ 4,795,239	$ 4,795,239	E
TELECARE CORPORATION 1080 Marina Village Parkway, Ste. 100 Alameda, CA 94501	00108	4	$ 6,156,819	$ 6,156,819	$ 6,156,819	E
Sub-Total for Enriched Residential Services (ERS) Legal Entity Contracts:			**$ 18,378,058**	**$ 18,378,058**	**$ 18,378,058**	

** Programs Note Key:

(A) - Full Service Partnership (FSP)

(B) - Institutions for Mental Disease (IMD)

(C) - California Work Opportunity and Responsibility to Kids (CalWORKs)

(D) - Short Term Residential Therapeutic Program (STRTP)

(E) - Enriched Residential Services (ERS)

(F) - Psychiatric Health Facilities (PHF)

PSYCHIATRIC HEALTH FACILITIES (PHF) LEGAL ENTITY CONTRACTS

CONTRACTOR NAME CONTRACTOR'S HEADQUARTER ADDRESS	L.E.#	Supervisorial District Service Location	MCA FY 2021-22	MCA FY 2022-23	MCA FY 2023-24	Program Notes
EXODUS RECOVERY, INC. 9808 Venice Blvd., Suite 700 Culver City, CA 91105	00527	2	$ 5,374,009	$ 5,374,009	$ 5,374,009	F
STAR VIEW BEHAVIORAL HEALTH, INC. 1501 Hughes Way, Ste. 150 Long Beach, CA 90810	00543	4	$ 2,000,000	$ 2,000,000	$ 2,000,000	F
TELECARE CORPORATION 1080 Marina Village Parkway, Ste. 100 Alameda, CA 94501	00108	4	$ 3,815,395	$ 3,815,395	$ 3,815,395	F
Sub-Total for PHF Legal Entity Contracts:			**$ 11,189,404**	**$ 11,189,404**	**$ 11,189,404**	
TOTAL FOR ERS AND PHF LEGAL ENTITY CONTRACTS:			**$ 29,567,462**	**$ 29,567,462**	**$ 29,567,462**	

DEPARTMENT OF MENTAL HEALTH

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JONATHAN E. SHERIN, M.D., Ph.D.
Director

Gregory C. Polk, M.P.A.
Chief Deputy Director

Curley L. Bonds, M.D.
Chief Medical Officer

Lisa H. Wong, Psy.D.
Senior Deputy Director

April 19, 2021

TO: Supervisor Hilda L. Solis, Chair
Supervisor Holly J. Mitchell
Supervisor Sheila Kuehl
Supervisor Janice Hahn
Supervisor Kathryn Barger

FROM: for Jonathan E. Sherin, M.D., Ph.D.
Director

SUBJECT: **REQUEST AN EXEMPTION TO BOARD POLICY NO. 5.120 FOR DEPARTMENTAL LEGAL ENTITY CONTRACTS THAT PROVIDE MENTAL HEALTH SERVICES TO MEDI-CAL ELIGIBLE BENEFICIARIES**

In accordance with Los Angeles County Board of Supervisors' (Board) Policy No. 5.120 (Authority to Approve Increases to Board Approved Contract Amounts), the Department of Mental Health (DMH) is required to provide a written notice to your Board, with a copy to the Chief Executive Officer, at least two weeks prior to the Board Meeting at which the request to exceed 10 percent of the Maximum Contract Amounts (MCA) will be presented.

More specifically, in May 2021, DMH will be presenting to your Board a letter for approval to execute new contracts with its network of Legal Entity (LE) providers that deliver Specialty Mental Health Services (SMHS) to both Medi-Cal beneficiaries and non-Medi-Cal beneficiaries funded by various federal, State, and County revenues to ensure that continuous services and programs are available for Los Angeles County residents. This memo is to request an exemption to the delegated authority limitations under Board Policy No. 5.120 for DMH LE Contracts as follows:

1. For all SMHS provided under DMH LE Contracts to Medi-Cal eligible beneficiaries funded by Medi-Cal federal and State revenues to be exempt from Board Policy No. 5.120.

2. For all SMHS and programs funded by other than Medi-Cal federal and State revenues, DMH requests delegated authority for a 25 percent increase of the applicable MCAs consisting of the non-Medi-Cal funds for three fiscal years, the term of the newly executed LE Contracts.

JUSTIFICATION

Welfare and Institutions Code (WIC) Section 14712 directs the State of California (State) to implement and administer the Managed Mental Health Care for Medi-Cal eligible residents for the State. This WIC section requires a contractual agreement between the State and the County to operate as the Mental Health Plan (MHP) responsible for the delivery of SMHS to the County's eligible Medi-Cal beneficiaries. Through the MHP Agreement, DMH agrees to operate the MHP for the County. The MHP Agreement sets comprehensive requirements for DMH to provide or arrange for the provision of all covered, medically necessary SMHS to Medi-Cal beneficiaries in the County. As such, DMH provides such SMHS services through its directly operated clinics as well as through its 131 LE contractors.

On March 30, 2016, the Centers of Medicare and Medicaid Services (CMS) issued the Parity Rule in the Federal Register to strengthen access to mental health and substance use disorder services for Medi-Cal beneficiaries. The Parity Rule mandates that MHPs ensure access to care through an adequate provider network without unreasonable limitations to the scope or duration of mental health benefits. In order to comply with these requirements, DMH must ensure that an adequate network of providers and services are available throughout Los Angeles County.

Since Medi-Cal is a federal entitlement, the need to amend as expeditiously as possible is essential in order to meet the federal requirement under the Parity Rule, provided that the County has sufficient funds to match these federal funds. Therefore, the authority to exempt Medi-Cal funded services/programs from the Board Policy No. 5.120 for DMH's LE Contracts, will allow DMH to amend the LE Contacts in a timely manner for the continuous provision and expansion of Mental Health services without interruption to clients who are in need of these services/programs.

If your Board grants the exemption, it will allow DMH to omit the Medi-Cal funds from the calculation of delegated authority of the applicable MCA for the three fiscal years term of the LE Contracts. All other funded programs included in the MCA will be subject to the 25 percent delegated authority, if approved by your Board.

If you have any questions or concerns, please contact me at (213) 738-4601 or your staff may contact Stella Krikorian, Division Manager, Contracts Development and Administration Division, at (213) 738-4023.

JES:GCP:SK
RLR:SC:atm

c: Executive Office, Board of Supervisors
Chief Executive Office
County Counsel

DEPARTMENT OF MENTAL HEALTH

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JONATHAN E. SHERIN, M.D., Ph.D.
Director

Gregory C. Polk, M.P.A.
Chief Deputy Director

Curley L. Bonds, M.D.
Chief Medical Officer

July 14, 2020

TO: Supervisor Kathryn Barger, Chair
Supervisor Hilda L. Solis
Supervisor Mark Ridley-Thomas
Supervisor Sheila Kuehl
Supervisor Janice Hahn

FROM: Jonathan E. Sherin, M.D., Ph.D.

SUBJECT: **REQUEST AN EXEMPTION OF NOTIFICATION REQUIREMENT UNDER BOARD POLICY NO. 5.100 - SOLE SOURCE CONTRACTS FOR DEPARTMENTAL LEGAL ENTITY CONTRACTS THAT PROVIDE MENTAL HEALTH SERVICES TO MEDI-CAL ELIGIBLE BENEFICIARIES**

In accordance with Los Angeles County Board of Supervisors' (Board) Policy No. 5.100, the Department of Mental Health (DMH) is required to notify your Board six months in advance of amendments to existing contracts when DMH does not have delegated authority to "increase the maximum amount of the current contract."

This memo is to request an exemption to the notification requirement under Policy No. 5.100, for Legal Entity (LE) Contracts for the provision of specialty mental health service and programs which Medi-Cal eligible beneficiaries are entitled to receive.

JUSTIFICATION

Welfare and Institutions (W&I) Code Section 14712 directs the State of California (State) to implement and administer the Managed Mental Health Care for Medi-Cal eligible residents for the State. This W&I Code section requires a contractual agreement between the State and the County to operate as the Mental Health Plan (MHP) responsible for the delivery of specialty mental health services to the County's eligible Medi-Cal beneficiaries. Through the MHP Agreement, DMH agrees to operate the MHP for the County. The MHP Agreement sets comprehensive requirements for DMH to provide or arrange for the provision of all covered, medically necessary Specialty Mental Health Services (SMHS) to Medi-Cal beneficiaries in the County. As such, DMH provides such SMHS services

through its directly-operated clinics as well as contractors through its numerous LE Contracts.

On March 30, 2016, the Centers of Medicare and Medicaid Services (CMS) issued the Parity Rule in the Federal Register to strengthen access to mental health and substance use disorder services for Medi-Cal beneficiaries. The Parity Rule mandates that MPHs ensure access to care through an adequate provider network without unreasonable limitations to the scope or duration of mental health benefits. In order to comply with these requirements, DMH must ensure that an adequate network of providers and services are available throughout the County.

On June 6, 2018, the Board authorized the Director of DMH to execute new Legal Entity Contracts with its community-based providers. Additionally, the Board granted the Director of DMH the authority to amend the LE Contracts and increase the approved Maximum Contract Amounts (MCA) by 25 percent. However, from time-to-time, these LE Contracts require an amendment to increase the MCA beyond the initial 25 percent authority. This happens for various reasons, including LE Contractors providing services to new beneficiaries; providing additional services to existing beneficiaries; and/or expanding the scope of existing services. Additionally, this could happen at any time during the fiscal year, therefore, necessitating DMH to amend LE Contracts throughout a given fiscal year.

Under the revised Sole Source Policy No. 5.100, DMH is now required to give the Board a six-month advance notification. Since these LE Contractors provide a federal entitlement to beneficiaries, the need to amend as expeditiously as possible is essential. Although DMH has to obtain Board approval when it exceeds its delegated authority, seeking an additional six-month advance notification to the Board is an unnecessary layer of bureaucracy that may delay federally entitled services and expose the department to liability. Therefore, DMH is requesting that your Board make an exception to the six-month advance notification requirement for these contracts only.

If you have any questions or concerns, please contact me at (213) 738-4601, or your staff may contact Stella Krikorian, Division Manager, Contracts Development and Administration Division, at (213) 738-4023.

JES:GP:ES:sk

c:	Executive Office, Board of Supervisors	Gregory Polk
	Chief Executive Office	Edgar Soto
	County Counsel	Stella Krikorian

BOARD LETTER FACT SHEET

Agenda Review Date: May 26, 2021
Board Meeting Date: June 8, 2021
Sup. Dist. / SPA No.: All SupervisorialDistricts

DRAFT

CEO DA Approval

DEPARTMENT: ***Mental Health***

SUBJECT: Request approval to execute a sole source contract with MST Services, LLC for 5 years, to provide program support (consultation), training and licensure for mental health clinicians practicing multisystemic therapy in Los Angeles County.

I. PUBLIC BENEFIT (precise description, mandated or non-mandated)

A non-mandated training and consultation program designed for Los Angeles County clinicians to provide multisystemic therapy, an evidence based practice for at-risk youth and their families.

II. RECOMMENDED ACTIONS (summarized)

Approve and authorize the Director of Mental Health (Director) to execute a sole source contract with MST Services, LLC. This Contract will be effective from July 1, 2021 through June 30, 2022, with four automatic one-year renewal periods. Delegate authority to the Director to execute future amendments to this Sole Source Contract and to also terminate the Sole Source Contract described in accordance with the Contract's termination provisions.

III. COST AND FUNDING SOURCES

Cost: $91,500 for each fiscal year and a total amount of $457,500 for the five-year period.

Funding: Juvenile Justice Crime Prevention Act (JJCPA) (Intrafund transfer from Probation Dept.)

IV. BACKGROUND (critical and/or insightful)

The current Agreement with MST Services, LLC (MST Services) is expiring June 30, 2021. DMH has a responsibility to ensure Los Angeles County (LAC) clinicians have the training and knowledge to deliver specialized services to a vulnerable population: at-risk youth who are involved with the juvenile justice system. Approval of this Contract with MST Services will provide the required technical support and licensure so that LAC multisystemic therapy service providers can deliver community and family-based therapies that ultimately target and decrease antisocial behavior, incarceration, and drug abuse. In addition, MST Services owns the copyrighted trademark for MST and is the only qualified vendor to provide this training and consultation.

V. POTENTIAL ISSUE(S)

n/a

VI. DEPARTMENT & COUNTY COUNSEL CONTACTS

Karen Streich, Mental Health Program Manager III, KStreich@dmh.lacounty.gov, (213) 738-2895
Emily Issa, County Counsel, EIssa@counsel.lacounty.gov, (213) 974-1827

DEPARTMENT OF MENTAL HEALTH

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JONATHAN E. SHERIN, M.D., Ph.D.
Director

Gregory C. Polk, M.P.A.
Chief Deputy Director

Curley L. Bonds, M.D.
Chief Medical Officer

Lisa H. Wong, Psy.D.
Senior Deputy Director

June 8, 2021

The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, CA 90012

Dear Supervisors:

APPROVAL TO EXECUTE A SOLE SOURCE CONTRACT WITH MST SERVICES, LLC TO PROVIDE PROGRAM SUPPORT, TRAINING, AND LICENSURE (ALL SUPERVISORIAL DISTRICTS) (3 VOTES)

DRAFT

SUBJECT

Request approval to execute a sole source contract with MST Services, LLC, for five years, to provide program support (consultation), training and licensure for mental health clinicians practicing multisystemic therapy in Los Angeles County.

IT IS RECOMMENDED THAT YOUR BOARD:

1. Approve and authorize the Department of Mental Health (DMH) Director, or his designee, to prepare, sign, and execute a sole source contract substantially similar to Attachment I with MST Services, LLC (MST Services). This Contract will be effective from July 1, 2021 through June 30, 2022, with four automatic one-year renewal periods. The Total Contract Amount (TCA) will be $104,450 for each fiscal year for a total amount of $522,250 for the five-year period, fully funded by the Juvenile Justice Crime Prevention Act (JJCPA), an Intrafund Transfer from the Probation Department.

2. Delegate authority to the Director, or his designee, to prepare, sign, and execute future amendments to the Sole Source Contract in Recommendation 1 to revise the language; revise the TCA; add, delete, modify, or replace the Statement of Work; and/or, reflect federal, State, and County regulatory and/or policy changes, provided that: 1) the County's total payment for each fiscal year to the Contractor will not exceed an increase of more than 10 percent of the TCA; 2) sufficient funds are available; and 3) the amendments are subject to the prior review and approval as to form by County Counsel, with written notification to your Board and the Chief Executive Officer (CEO).

3. Delegate authority to the Director, or his designee, to terminate the Sole Source Contract described in Recommendation 1 in accordance with the Contract's termination provisions, including Termination for Convenience. The Director, or his designee, will notify your Board and CEO, in writing, of such termination.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTIONS

The current Agreement with MST Services is expiring June 30, 2021. The MST treatment model provided under this Contract is an evidence-based practice that is dedicated to serving at-risk adolescents involved with the juvenile justice system and combines community and family-based therapies to target and decrease antisocial behavior, incarceration, and drug abuse.

Board approval of the first Recommendation will authorize DMH to execute a new Sole Source Contract with MST Services to allow for uninterrupted service provision of Los Angeles County (LAC) MST Services and supports to high-risk youth and their families.

Board approval of the second Recommendation will allow DMH to amend the Contract expeditiously, as needed, without interruption to services.

Board approval of the third Recommendation will allow DMH to terminate the Contract in accordance with the Contract's termination provision, including Termination for Convenience, in a timely manner, as necessary.

Implementation of Strategic Plan Goals

The recommended actions support the County's Strategic Plan Goal I, Make Investments that Transform Lives, via Strategy I.2 – Enhance our Delivery of Comprehensive Interventions.

FISCAL IMPACT/FINANCING

DRAFT

The annual funding for this Contract is $104,450 fully funded by the JJCPA, an Intrafund Transfer from the Probation Department. Funding for future fiscal years will be requested through DMH's annual budget request process. There is no net County cost impact associated with the recommended actions.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

Established in 1996, MST Services is the only organization licensed for the dissemination of MST. MST Services also holds the copyrighted trademark for MST. MST Services has neither allowed nor authorized any other entity to provide the rigorous level of training, supervision, and licensure required to deliver MST.

MST research has proven the importance of treatment adherence and ongoing quality assurance, as evidenced in three large multisite studies on the replication of MST involving more than 7,000 families. This further highlights the need for MST Services to continue providing technical support to the LAC MST clinicians and to ensure positive outcomes for youth and families. By having MST Services provide ongoing quality assurance, it ensures LAC MST providers practice MST in accordance with the interventions described in the original trials conducted by MST Services and holds LAC MST providers accountable for achieving change.

For the last 20 years, MST has been a part of the County's Comprehensive Multi-Agency JJCPA Plan for Assembly Bill 1913 (also known as the Schiff-Cardenas Crime Prevention Act of 2000), due to rigorous clinical trials that demonstrate effective and long lasting outcomes. MST has also been included in the more recent revisions of the County's Comprehensive Multi-Agency JJCPA, and the use of MST has been expanded to include the Los Angeles County Office of Education Community Schools Initiative.

MST Services has studied more than 58,000 families through 79 outcome/implementation studies and produced more than 150 peer reviewed journal articles. Overall, MST research has demonstrated improved family functioning, fewer mental-health problems for youth, higher levels of client satisfaction, and cost savings. These national and international outcomes were consistent with the annual evaluations of the LAC MST program led by the Research and Development Corporation (RAND). In fact, these consistent results led to RAND publishing research specifically about the LAC MST program. In Fiscal Year 2019-20, 107 adolescents were enrolled in the LAC MST program, with 86 percent successfully completing the program. Upon discharge, those adolescents that completed the MST program showed an increase on the following outcome measures: 91 percent showed improved family relationships and were living at home, 86 percent exhibited success in an education or vocation setting, and 87 percent showed pro-social behavior with peers and other social activities.

DRAFT

In accordance with Board Policy No. 5.100 (Sole Source Contracts), DMH submitted Attachment II to your Board on December 7, 2020. The required Sole Source Checklist (Attachment III), approved by the CEO, is also attached.

As mandated by your Board, the performance of all contracts are evaluated by DMH on an annual basis to ensure the compliance with all contract terms and performance standards.

The attached Contract (Attachment I) has been approved as to form by County Counsel.

IMPACT ON CURRENT SERVICES OR PROJECTS

Board approval of this new Contract will ensure DMH and Probation will be able to carry out the County's Comprehensive Multi-Agency JJCPA Plan as approved by the State and also utilize the associated funding to ultimately empower at-risk youth and their families to function responsibly over the long term.

Respectfully submitted,

Jonathan E. Sherin, M.D., Ph.D.
Director

JES:GCP:SK
JH:atm

Attachments (3)

c: Executive Officer, Board of Supervisors
Chief Executive Office
County Counsel
Chairperson, Mental Health Commission

DRAFT