



BOARD OF SUPERVISORS  
AGENDA LETTER

Agenda Number:

Clerk of the Board of Supervisors  
105 E. Anapamu Street, Suite 407  
Santa Barbara, CA 93101  
(805) 568-2240

**Department Name:** Behavioral Wellness  
**Department No.:** 043  
**For Agenda Of:** June 21, 2016  
**Placement:** Administrative  
**Estimated Time:** N/A  
**Continued Item:** No  
**If Yes, date from:**  
**Vote Required:** Majority

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**TO:** Board of Supervisors

**FROM:** Department Alice Gleghorn, PhD, Director  
Director(s) Behavioral Wellness 681-5220

Contact Info: Pam Fisher, Deputy Director – Clinical Operations, 681-5220  
John Doyel, Alcohol and Drug Program Manager, 681-5220

**SUBJECT:** Fiscal Year 16-19 Mental Health and Alcohol, Drug Program Contract Renewals

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**County Counsel Concurrence**

As to form: Yes

Other Concurrence: Risk Management

As to form: Yes

**Auditor-Controller Concurrence**

As to form: Yes

**Recommended Actions:**

That the Board of Supervisors:

- A. Approve and Authorize the Chair to execute an Agreement for Services of Independent Contractor with **Good Samaritan Shelter, Inc.** (a local vendor), for the provision of substance use disorder and shelter services, for a total contract amount not to exceed **\$1,743,529** for the period of July 1, 2016 through June 30, 2017.
- B. Approve and authorize the Chair to execute and Agreement for Services of Independent Contractor with **Telecare Corporation** (a local vendor), for the provision of adult mental health services, not to exceed **\$1,737,188** per fiscal year, for a total contract amount not to exceed **\$5,211,564** for the period of July 1, 2016 through June 30, 2019.
- C. Determine that the above actions are organizational or administrative actions of government that will not result in direct or indirect physical changes in the environment, pursuant to section 15378(b)(5) of the California Environmental Quality Act (CEQA) guidelines.

**Summary Text:**

The Santa Barbara County Department of Behavioral Wellness provides a continuum of mental health and substance use disorder services to Santa Barbara County residents, in part through contracted providers including Community-Based Organizations (CBOs). Approval of the recommended actions will allow Behavioral Wellness to continue to provide mandated health, substance use, and ancillary services.

**Background:**

Behavioral Wellness provides services to individuals with substance use issues in Santa Barbara County per its contract with the State of California, Department of Healthcare Services, for Substance Use Disorder services. Behavioral Wellness provides services to individuals with substance use issues primarily through contracted providers. Alcohol and Other Drug (AOD) treatment services provided by contracted providers include outpatient treatment, specialized perinatal substance use treatment and prevention services. The contracts being considered for approval provide AOD treatment services as well as various specialty mental health services to adults with serious mental illness, including mental health services such as therapy and rehabilitation services.

**Good Samaritan Shelter Services, Inc. (Good Samaritan)**

ADP Services: Good Samaritan provides services in North County including outpatient individual and group counseling, residential detoxification, and drug testing. Good Samaritan provides perinatal treatment services including transitional living centers and individual and group counseling for pregnant and parenting women.

Mental Health Services: Good Samaritan provides shelter beds for homeless clients with mental illness and also provides 1.0 FTE Mental Health staff each in Lompoc and Santa Maria, to provide mental health services to clients residing in Good Samaritan’s residential and temporary shelter programs. Telecare Corporation (Telecare) provides an array of mental health services to adults in the Santa Maria area. The Santa Maria Assertive Community Treatment (ACT) program is an evidence-based psychiatric treatment rehabilitation and support service for clients with serious mental illness who demonstrate the need for this most intensive level of nonresidential community service. Telecare also provides twenty-four (24) hour, structured mental health rehabilitation services, residential care, and room and board to adults at McMillian Ranch.

**Performance Measure:**

**Good Samaritan** has many contracted programs and generally demonstrated good outcomes in the first 6 months of FY15/16. The average number of clients served per quarter in Outpatient Drug Free (ODF) treatment was 98 in Santa Maria, 73 in perinatal and 42 in Lompoc.

Outpatient Drug-Free: Good Samaritan Santa Maria exceeded the targets of 75% for 30+ days in treatment, 48% for 90+ days in treatment, and 37% for the number of clients successfully completing treatment. The Lompoc program is newly established. The program did not meet targets, but outcomes improved between Quarters 1 and 2. As can be seen in the table below, the Perinatal program had positive outcomes, but did not achieved expected goals.

ODF	30+ Days	90+ Days	Successful
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	<b>Goal</b>	<b>Avg</b>	<b>Goal</b>	<b>Avg</b>	<b>Goal</b>	<b>Avg</b>
Good Sam SM	75%	82.5%	48%	54%	37%	55%
Good Sam Lompoc	75%	52%	48%	15%	37%	29%
*Perinatal	91%	80%	70%	54.5%	66%	46%

\*Includes: Good Sam Premie and Good Sam Shelter-Turning Point

**Perinatal:** Good Samaritan served an average of 156 women per quarter, 25 of whom were pregnant and celebrated 100% (5/5) drug free births. An average of 81 children were served per quarter.

**Non-Medical Detox:** Good Samaritan has positive outcomes in the Santa Maria and Lompoc detox programs, where they served an average of 108 clients per quarter. Of the clients that discharged from the program, 91% discharged with a negative drug test and 80% were referred to a treatment program.

**Drug Overdose Prevention Education (DOPE)** – Good Samaritan is meeting DOPE expectations.

**Telecare** provided ACT services to an average of 99 clients in Quarter 1 and 2 of FY 15/16, and an average of 11.5 clients in the residential program at McMillan Ranch. Incarcerations rates for both programs were very low. There were no incarcerations for McMillian Ranch and only 5 (2.5%) at ACT. McMillan Ranch did not have any psychiatric inpatient admissions, but there were a total of 4 (2%) admissions for ACT clients across Quarter 1 and 2, which exceeded their target of 5 or less per quarter. ACT and McMillan Ranch were both successful in maintaining clients in stable/permanent housing. No McMillian clients became homeless, and ACT averaged 91% of clients maintaining stable/permanent housing in Quarters 1 and 2. Both programs aim to increase the percent of clients enrolled in educational activities, employed or volunteering. The goal for ACT was 10% and 22% for McMillan Ranch. ACT had an average of 8.5% of clients across both quarters involved in purposeful activities, and McMillian Ranch achieved the goal of 22% in Quarter 2. ACT and McMillian Ranch met or exceeded their goals for increasing the number of clients graduating to lower levels of care. Finally, the ACT program has goals of reducing the number of physical health-related emergency room visits and hospitalizations. ACT exceeded the target of 9% per quarter, having 8 (4%) physical health hospitalizations. However, the number of physical health-related emergency room visits was higher than the target of 8 (17 in Q1 and 12 in Q2). The ACT program has many clients that are elderly or infirm, as well as long histories of substance abuse, which is beginning to manifest in declining physical health. Telecare recognized this problem and is in the process of implementing the Whole Person Care curriculum to help staff identify health, nutrition and substance abuse needs, and assist clients with obtaining services to address their physical health issues. **Fiscal and Facilities Impacts:**

Budgeted: Yes

**Fiscal Analysis:**

<b>Funding Sources</b>	<b>FY 16-17</b>	<b>FY 17-18</b>	<b>FY 18-19</b>
General Fund			
State	\$ 1,740,358.50	\$ 868,594.00	\$ 868,594.00
Federal	\$ 1,740,358.50	\$ 868,594.00	\$ 868,594.00
Fees			
Other:			
<b>Total</b>	<b>\$ 3,480,717.00</b>	<b>\$ 1,737,188.00</b>	<b>\$ 1,737,188.00</b>

Narrative: The above referenced contracts are funded by State and Federal funds. The funding sources are included in FY 2016-2017 Proposed Budget.

**Key Contract Risks:**

As with any contract funded by State and Federal sources, there is a risk of future audit disallowances and repayments. The dollars Behavioral Wellness collects from the Centers for Medicare and Medicaid Services (CMS) via the State for specialty mental health services provided to Medi-Cal beneficiaries are subject to a complex and lengthy cost settlement process. Behavioral Wellness is required to submit an annual cost report which reports all costs associated with providing mental health services for a given Fiscal Year (actual cost). The actual cost is one component that the State reviews when it performs its “cost settlement” process. In this process, the State settles to the lower of actual cost or Published Charges, which are the fees charged to the general public (as adopted by the contractor’s Board of Directors). The cost settlement process results in a preliminary settlement, which typically takes place two years after the close of a Fiscal Year; however, the settlement process is not complete until the State completes the final audit. State audits for Medi-Cal funds for specialty mental health services typically occur five years after the end of the fiscal year being audited. To address these risks and to minimize settlement amounts with contract providers, Behavioral Wellness calculates rates for Medi-Cal services provided by organizational providers on a quarterly basis. Regular reports to contractors on unclaimed and denied units allow providers to correct errors and maximize Medi-Cal penetration rates. Even with these measures, there is the risk that the State will disallow units of service or determine costs to be non-allowable, resulting in repayment. Behavioral Wellness contracts include language requiring contractors to repay any amounts disallowed in audit findings, minimizing financial risks to County.

**Special Instructions:**

Please send one (1) signature page and one (1) minute order to: [admhscontractsstaff@co.santa-barbara.ca.us](mailto:admhscontractsstaff@co.santa-barbara.ca.us).

**Attachments:**

Attachment A: Good Samaritan FY 16-17

Attachment B: Telecare FY 16-19 BC

**Authored by:**

Q. Lopez