

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: Public Health

Department No.: 041

For Agenda Of: December 17, 2024
Placement: Administrative

Estimated Time:

Continued Item: N_0

If Yes, date from:

Vote Required: 4/5

TO: Board of Supervisors

FROM: Department Mouhanad Hammami, Director

Director(s) Public Health Department

Contact Info: Paola Hurtado, Assistant Deputy Director 805-698-2418

Primary Care and Family Health

SUBJECT: Providing Access and Transforming Health Capacity and Infrastructure

Transition, Expansion, and Development Grant Funds

<u>County Counsel Concurrence</u>

Auditor-Controller Concurrence

As to form: Yes As to form: Yes

Other Concurrence: Human Resources; CEO Budget Other Concurrence: Risk Management

As to form: Yes As to form: Yes

Recommended Actions:

That the Board of Supervisors:

- a) Approve, ratify, and authorize the Public Health Department Director to execute the attached Agreement with Cottage Health (CH), a California not-for-profit public hospital system, to accept and receive reimbursement funding from CH for Providing Access and Transforming Health (PATH) Capacity and Infrastructure Transition, Expansion, and Development (CITED) Round 3 Initiative grant activities for the project period of September 1, 2024, through August 31, 2026, in the amount of \$1,294,245.96 (Attachment A);
- b) Approve and authorize Budget Revision BJE #0010177 in the amount of \$431,400 to establish appropriations for unanticipated revenue through an agreement with CH (Attachment B);
- c) Adopt a resolution amending the Salary Resolution (Attachment C) to allocate six (6) legal positions to the Public Health Department, effective December 9, 2024; and
- d) Determine that the recommended actions are not a "Project" with the meaning of the California Environmental Quality Act ("CEQA") and is exempt per CEQA Guideline section 15378(b)(4), since the recommended actions are government fiscal activities which do not involve commitment to any specific project which may result in a potentially significant physical impact on the environment.

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Summary Text:

This item is on the Agenda to authorize the PHD to execute the attached Agreement with CH and accept reimbursement for the activities that support delivering Enhanced Care Management (ECM) services for individuals involved in the justice system, children and youth who are experiencing homelessness, at risk for avoidable hospital or emergency department utilization, and with serious mental illness and/or substance use disorder needs.

Background:

The PHD has a long-standing partnership with CH built on trust, shared goals, and transparency. PHD recently collaborated with CH and the American Indian Health & Services (AIH&S) to apply for the PATH CITED Round 3 grant funds. The total grant request of \$2,487,291.61 was awarded, of which \$1,294,245.96 was designated for PHD and will be administered by CH as the Administrative Hub.

The State of California is in the process of transforming its Medicaid program, known as Medi-Cal, to make it more equitable, coordinated, and person-centered. This transformation, called California Advancing and Innovating Medi-Cal (CalAIM), aims to focus on the individual needs of each enrollee by coordinating clinical and support services to address their physical, developmental, behavioral, service, dental, and social support needs. CalAIM also aims to address Social Determinants of Health, which are various situational factors that affect health, functioning, and quality of life outcomes.

The PATH initiative was designed to allocate funding for services to members during the transition to CalAIM and to provide tools and resources to community-based providers, including public hospitals, county, and city government agencies, justice agencies, community-based organizations, Medi-Cal Tribal and Designees of Indian Health Programs, and others to ensure successful implementation. PATH consists of multiple coordinated initiatives supporting the implementation of ECM and community supports services in various ways.

The PHD currently has an agreement with CenCal Health, our Medicaid Managed Care Plan, to provide ECM services to serve people experiencing homelessness and persons at risk for avoidable hospital or emergency department care.

With the approval of the above recommended actions, PHD will use the PATH CITED Round 3 funds to achieve the following goals:

- 1. Initiating ECM services for children and youth who are experiencing homelessness, at risk for avoidable hospital or emergency department utilization, and with serious mental illness and/or substance use disorder needs. PHD already provides a wide range of healthcare and other services to underserved populations, including tribal communities. Based on a caseload estimate of 40 per Lead Care Manager, an estimated 360 ECM clients will be served.
- 2. Establishing ECM services for individuals involved in the justice system. PHD has already collaborated with other county departments to design pre-release, behavioral health linkages, and warm handoff services in anticipation of adding ECM. This will facilitate connections with the existing system and create a model for other local providers serving this population. In addition to the 360 individuals in goal one, an estimated 240 individuals will be served annually.
- 3. Establishing the necessary teams, workflows, data analytics, reporting, and infrastructure for local providers. By engaging with the larger Children's System of Care, including Child Welfare Services, Behavioral Wellness, Probation, and community-based organizations currently serving children and families, best practices will be identified to make ECM available to eligible children throughout the community and support others in becoming ECM providers by sharing tools and methods we design.

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The approval of the recommended actions will also allow the PHD to add the following positions to implement ECM for children and youth and justice involved adults:

- 1. Two (2) 1.0 FTE Staff Nurses
- 2. Three (3) 1.0 FTE Health Service Aides
- 3. One (1) 1.0 FTE Department Business Specialist

Performance Measure:

The PATH CITED Round 3 grant has requirements, including submitting quarterly reporting on the expected grant deliverables outlined in Exhibit A, Exhibit A-1, and according to Exhibit B.

Fiscal and Facilities Impacts:

Budgeted: No

Fiscal Analysis:

Approving and authorizing the Public Health Director to accept, from CH the PATH CITED Round 3 grant funds in the amount of \$1,294,245.96 will allow the PHD to continue to support and expand the ECM services. The funds will be used to hire two (2) Staff Nurses, three (3) Health Service Aides and one (1) Department Business Specialist. The attached salary resolution, with the acceptance of the Board, will add these positions to the PHD. Additional costs covered through this funding are renovation costs, trainings, supplies and other costs needed to support the positions and ECM services.

This award is a collaborative award, the part that will correspond to the PHD is \$1,294,245.96. PHD will have two County fiscal years to spend down the funds. Therefore, the BJE included with this action is only for \$431,400.00 rather than \$1,294,200.00 because the funding period of the grant crosses over two County fiscal years. It is estimated that \$431,400.00 will be spent in FY 2024-25 and the remaining \$862,800.00 will be spent in FY 2025-26 and will be included in the Recommended budget for the PHD as shown in the following table. The two (2) additional staff nurses and three (3) Health Services Aides will provide ECM services to the patient population described above, and the PHD will utilize program income generated by ECM services to fund the salaries and benefits of the six (6) additional positions.

Funding Sources	 Current FY 2024- 2025 Cost:		Annualized -going Cost:	Total One-Time Project Cost	3
General Fund					
State					
Federal					
Fees					
Other: Cottage Hospital	\$ 431,400.00	\$	862,800.00		
Total	\$ 431,400.00	\$	862,800.00	\$ -	

Key Contract Risks:

CH, with its finance team, will serve as the Administrative Hub of the PATH CITED Round 3 grant funds. CH will use a standard invoicing methodology building upon the extensive, rigid, formal fiscal systems and controls already in place for CH, AIH&S, and PHD. Additionally, CH is committed to rigorously monitoring and reviewing all grant-related expenses, including its own expenditures, which are tracked in a specific cost center.

CH has established clear lines of communication with grant partners to emphasize the importance of transparency. CH will remain in constant dialogue with grant partners through regular partner meetings,

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ensuring awareness of all funding streams available to them and the intended purpose of each. By maintaining an open and cooperative environment, the grant partners will work together to prevent any potential overlap or duplication of funding.

Additionally, all three organizations are federally funded and subject to strict regulations. They also participate in external audits, which have revealed no findings of duplicative funding.

Staffing Impacts:

Legal Positions: FTEs:
Add 6 new Add 6.0

The salary resolution requests the addition of 6.0 FTE. Funding for these positions are anticipated to be covered by ongoing ECM billing with CenCal Health.

Special Instructions:

Please return one (1) electronic copy of the Minute Order and one (1) copy of the fully executed salary resolution to the PHD Contracts Unit at phdcu@sbcphd.org and (1) copy of the fully executed salary resolution and one (1) copy of the minute order to Stefan Brewer, Senior Workforce Planning Analyst, Human Resources Department at SBrewer@countyofsb.org.

Attachments:

- A. PATH CITED Agreement
- B. Budget Revision Request BJE #0010177
- C. Salary Resolution
- D. CITED Award Letter

Authored by:

Paola Hurtado, Assistant Deputy Director, Public Health Department