

# Alcohol Drug & Mental Health Services

INPATIENT SERVICES



# WHEN MUST COUNTY FUND MENTAL HEALTH SERVICES?

SERVICE REQUIRED BY STATE CONTRACT?

**YES**

NO

**YES**

**MUST** \*

MAY

*ELIGIBLE  
MEDI-CAL  
BENEFICIARY?*

NO

MAY

MAY

\* Funding required may be limited by Welfare & Institutions § 5703

**EXCEPTIONS:** COUNTY ALSO MUST PROVIDE MENTAL HEALTH SERVICES IF:

- Welfare & Institutions Code § 5150: patient needs mental health services, but not admitted to PHF
- Penal Code § 1370.01: misdemeanor defendant court-ordered for mental competence restoration
- Welfare & Institutions Code § 14714(j): patient not eligible for Medi-Cal, but only if funds available

# INPATIENT INCREASES DRIVERS

- Lack of psychiatric beds state & nation
- Increase in patients
  - Court Ordered Incompetent to stand trial
  - 5150 detentions
- Reduction in available local beds & increase in use of acute hospital and IMD beds
- Standard is 10 inpatient acute beds per 100K population. Santa Barbara County estimates need for 40 inpatient acute beds
- Safe and Stable housing beds in the community has decreased by 50 beds since the year 2007
- Change in level of Federal reimbursement for SNF facilities
- Non acute court ordered clients, ordered to the PHF
  - Impacts of legal status and court dates prolonging stay at PHF

# What Services *Must* ADMHS Provide?

## A. Medi-Cal Beneficiaries

ADMHS has an agreement with the Department of California Health Care Services effective May 1, 2013 through June 30, 2018 to administer the Mental Health Plan for Santa Barbara County.

Under this agreement, ADMHS is responsible to provide or arrange for the provision of specialty mental health services for eligible Medi-Cal beneficiaries.

# What Services *Must* ADMHS Provide? (cont'd)

## B. People Who Meet 5150 criteria

**Before PHF** When a person, as a result of a mental health disorder, is a danger to others, or to himself or herself, or gravely disabled, he/she *may* be placed in custody for a period of up to 72 hours for assessment, evaluation, and crisis intervention, or placement for evaluation and treatment in a facility designated by the county for evaluation and treatment.

**After PHF** If not admitted, but in need of mental health services, shall be offered all available evaluation, crisis intervention, or other services.

# What Services *May* ADMHS Provide?

## Non-Medi-Cal Beneficiaries

The County's maximum obligation for services to persons not eligible for Medi-Cal shall be no more than the amount of funds remaining in the mental health subaccount after fulfilling the Medi-Cal contract obligations.

- Includes services to persons with no coverage
- Although the # of individuals eligible for Medi-Cal are increasing under the Affordable Care Act, there will always be individuals with no source of funding.

# What Populations Are Prioritized Under the Mental Health Plan?

To the extent resources are available, the primary goal of the use of funds deposited in the mental health account of the local health and welfare trust fund should serve:

1. Seriously emotionally disturbed children or adolescents.
2. Adults and older adults who have a serious mental disorder
  - ✓ Homeless persons who are mentally ill.
  - ✓ Persons requiring care in acute treatment facilities including state hospitals, acute inpatient facilities, institutes for mental disease, and crisis residential programs.
  - ✓ Persons arrested or convicted of crimes.
  - ✓ Persons who require acute treatment as a result of a first episode of mental illness with psychotic features.
  - ✓ California veterans in need of mental health services and who meet the existing eligibility requirements.

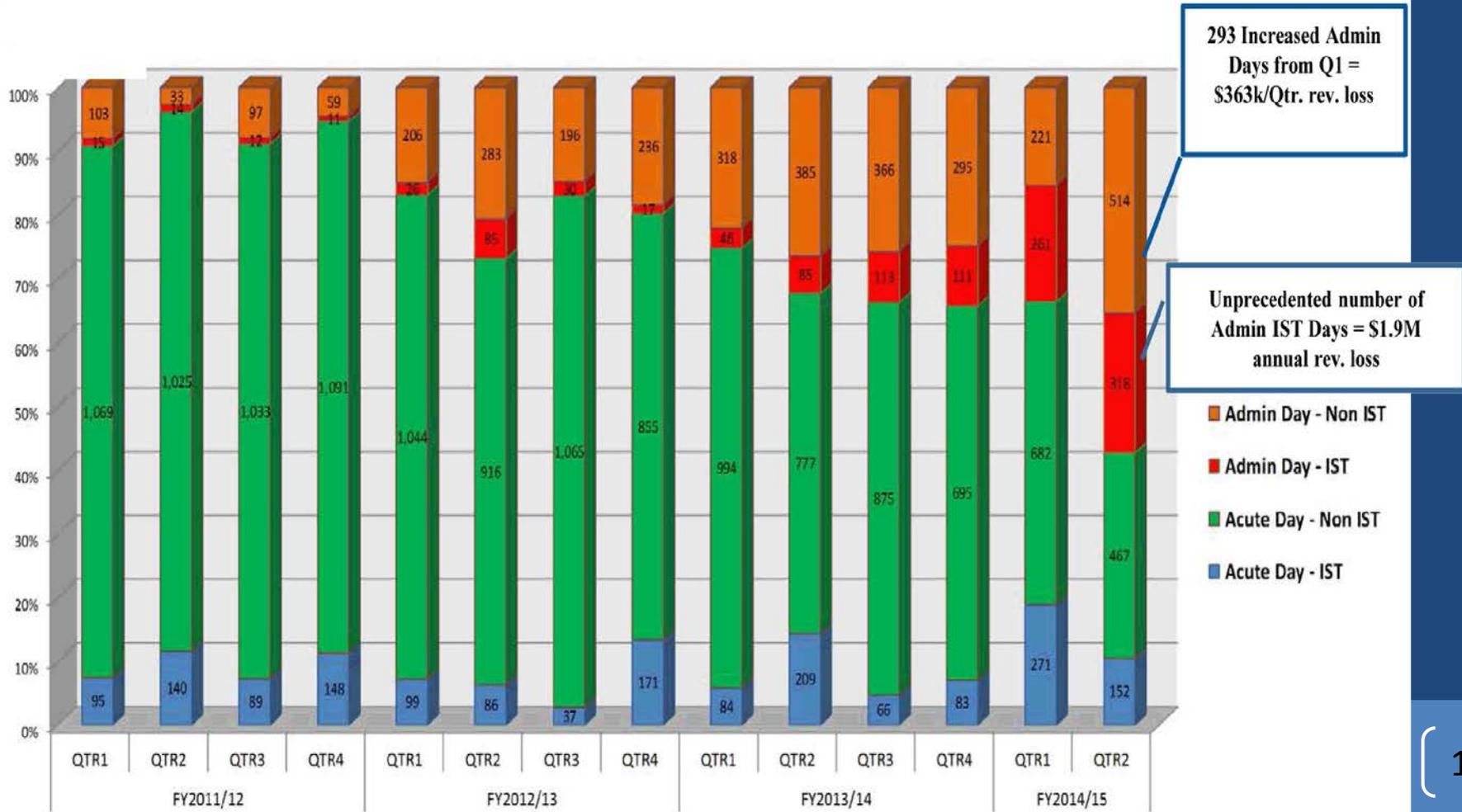
# What Populations Are Prioritized Under the Mental Health Plan? Cont.'d

3. Adults or older adults who require or are at risk of requiring acute psychiatric inpatient care, residential treatment, or outpatient crisis intervention because of a mental disorder with symptoms of psychosis, suicidality, or violence.
4. Persons who need brief treatment as a result of a natural disaster or severe local emergency.

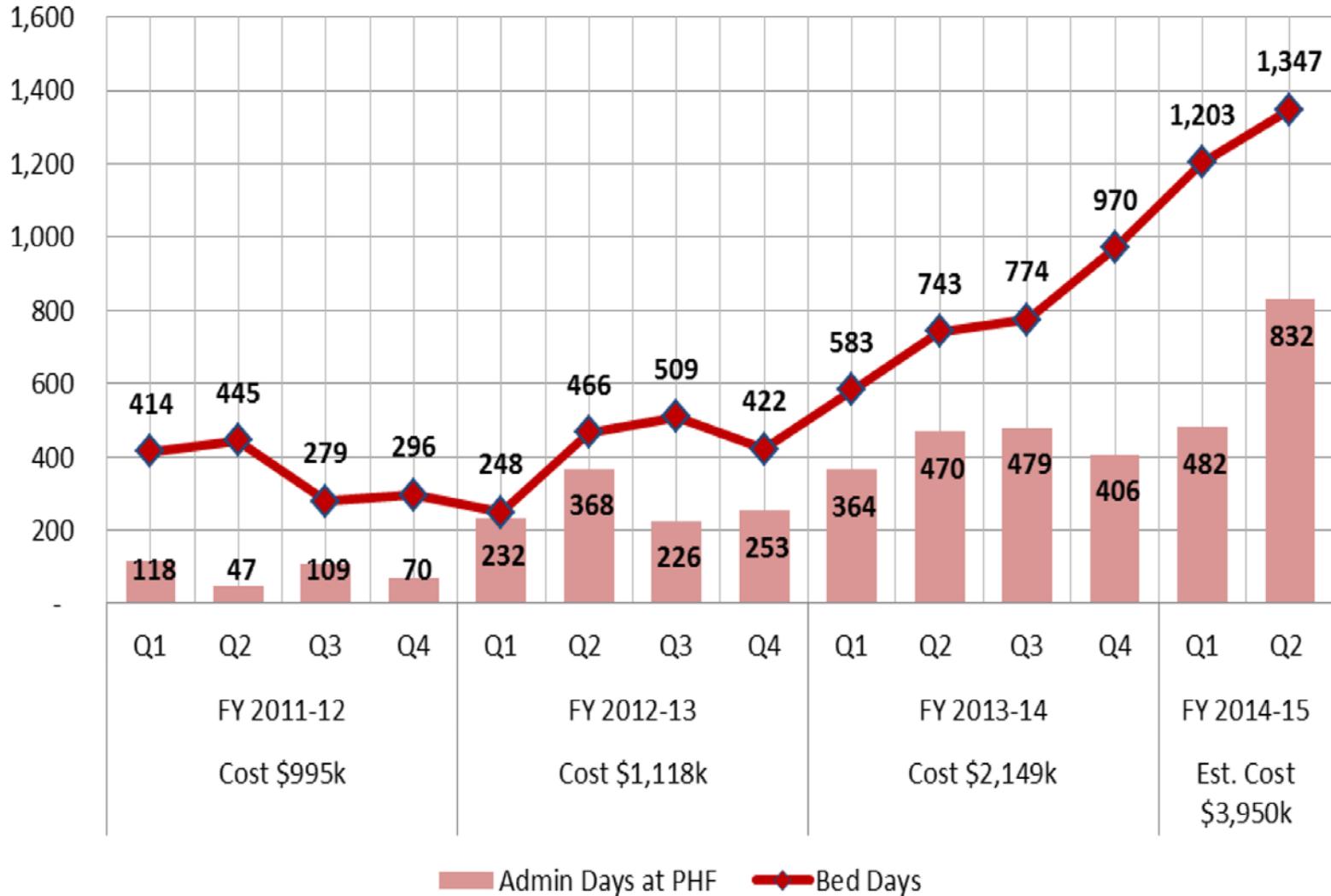
# Who serves Medi-Cal Beneficiaries with Mild-to-Moderate Mental Illness?

- The Affordable Care Act (ACA) builds on the mental health parity law by expanding mental health services for many patients, including those covered by the Medi-Cal Program. The State has provided funding for CenCal Health to cover mental health services for mild-to-moderate MH conditions
- CenCal Health has partnered with The Holman Group to administer the new mental health benefits on behalf of the CenCal Health.

# PHF Bed Days (Acute vs. Admin)

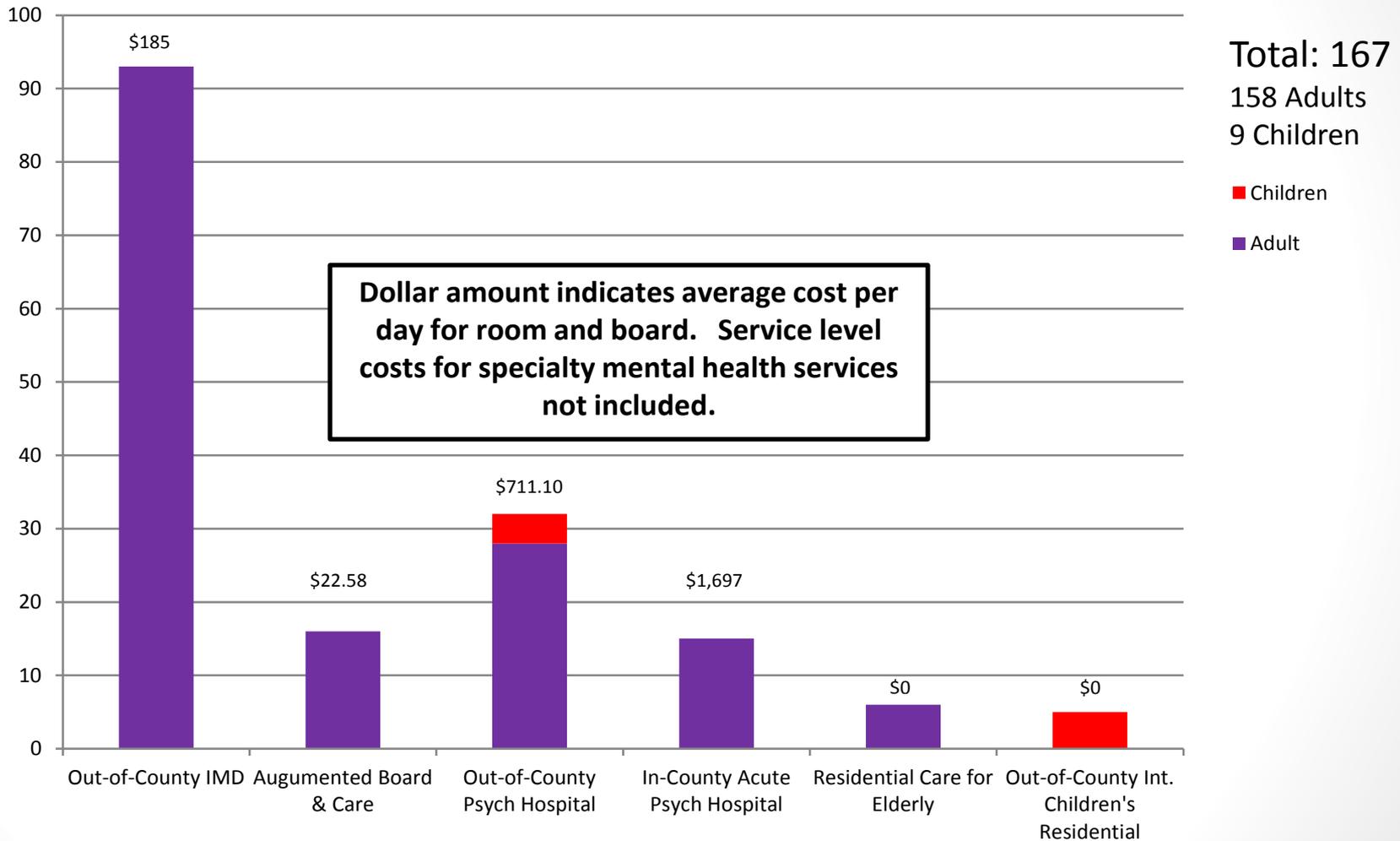


# Aurora Vista Inpatient Acute Bed Days

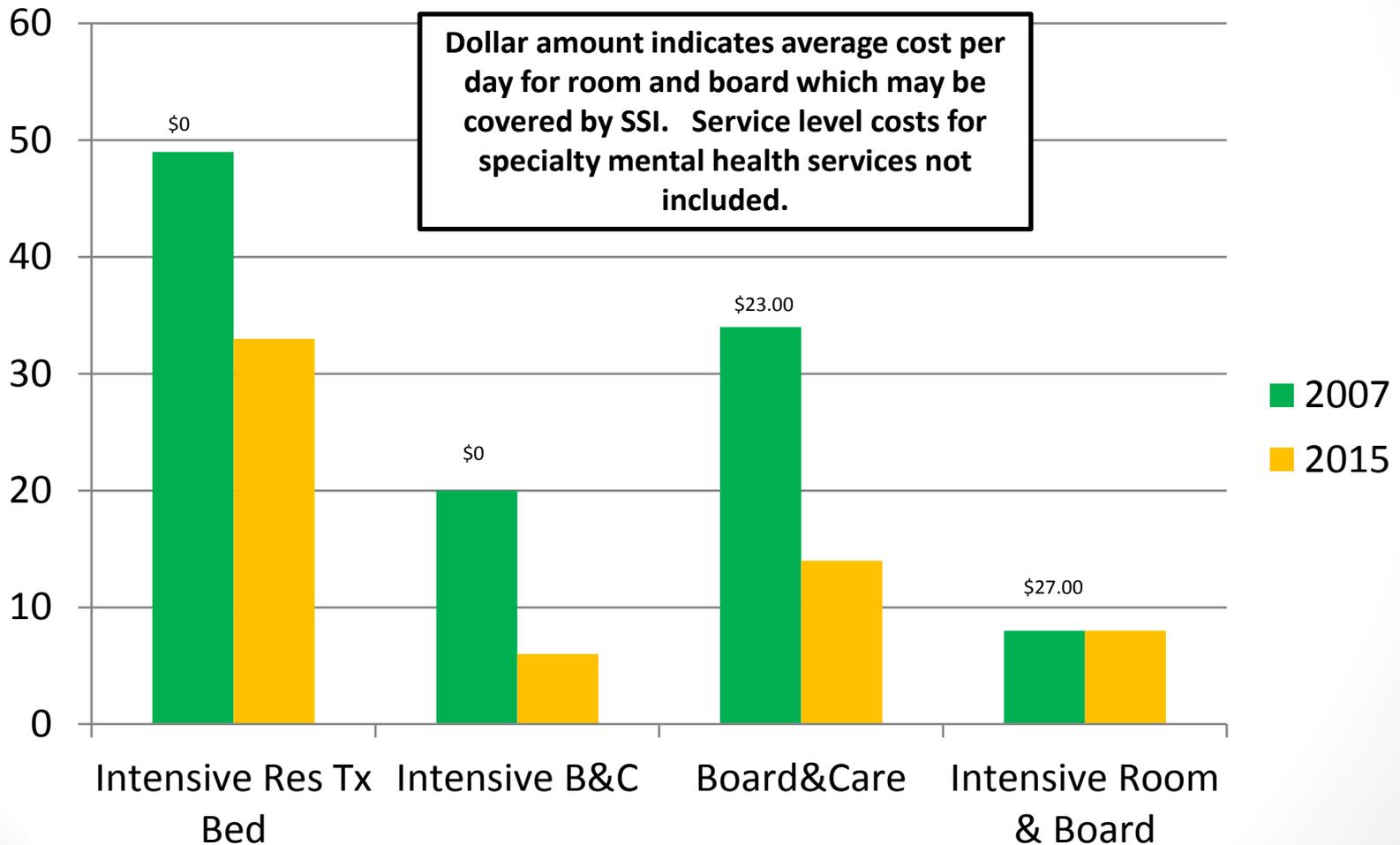


# Snapshot of Acute Care Placements

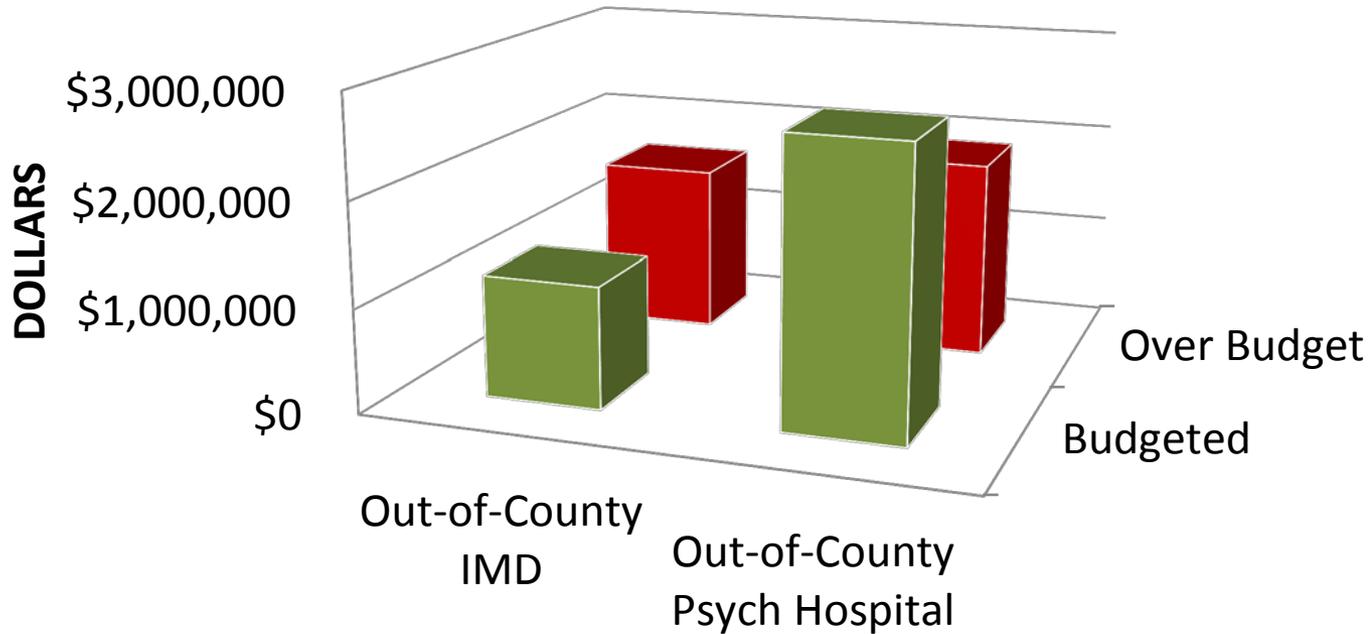
March 27, 2015



# Residential Bed Usage Comparison 2007-2015

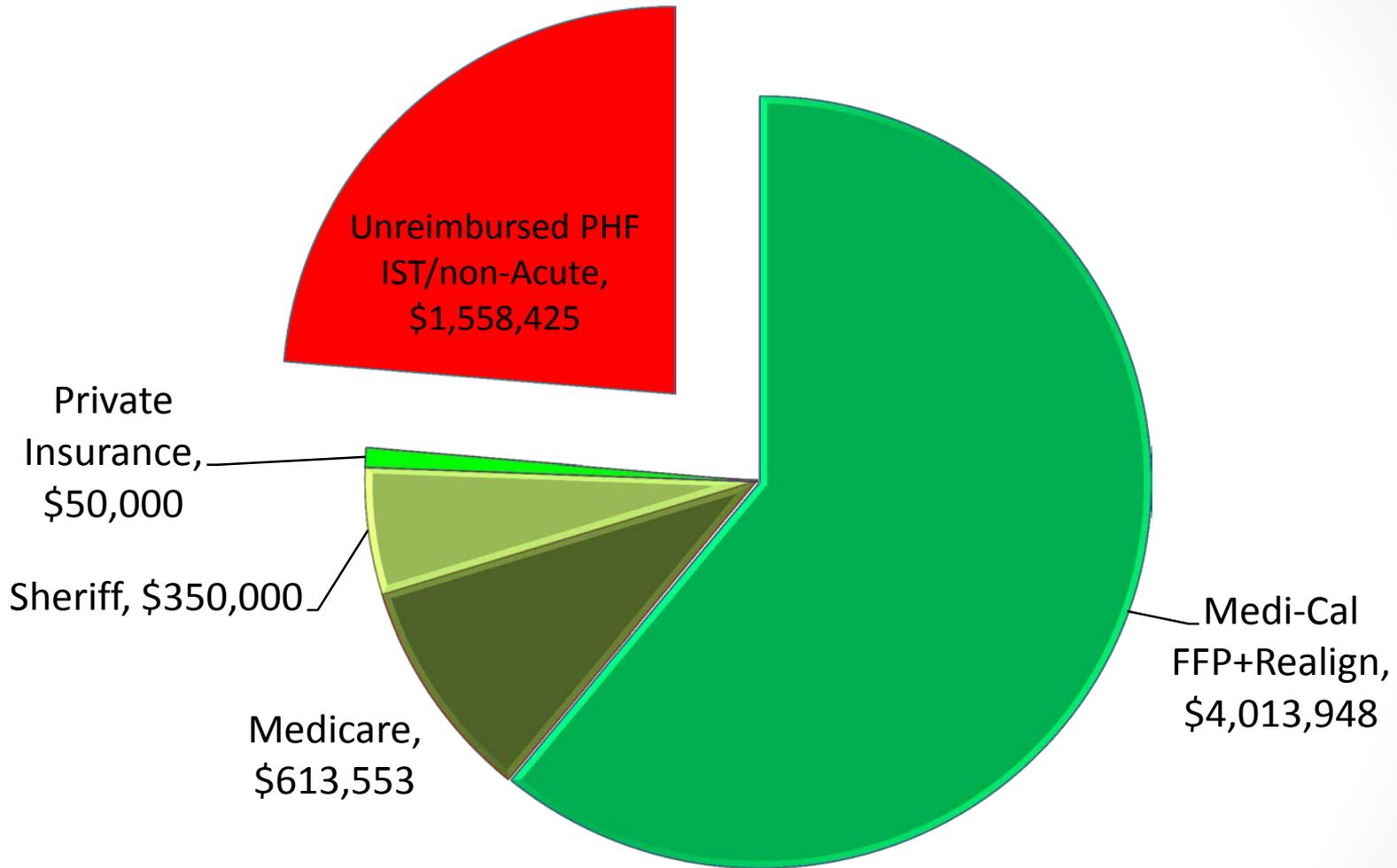


## Estimated Out of County Inpatient and Psych Hospital Costs FY 2014/15



	Out-of-County IMD	Out-of-County Psych Hospital
■ Budgeted	\$1,176,966	\$2,724,000
■ Over Budget	\$1,631,166	\$1,913,466

## PHF Projected FY14/15 Funding Mix



# Actions and Strategies

## Services:

- Fully implement Crisis Service System
  - **Crisis Services:** Crisis Stabilization Unit (CSU), Residential Respite Program, Triage teams countywide, Lompoc mobile crisis response – Forensic teams
  - **Facility:** Marian Hospital 26 bed expansion
- MIOCR grant application would add proactive mental health intervention in the jail
- Re-establish community based safe and stable housing options to the levels of 2007
- Explore options for In-County IMD / IMD Step down facility

# Potential Funding Sources

- TSAC
- MHSA funds for long term permanent housing
- 1991 realignment to the extent resources are available after specialty mental health service coverage is expended in pursuant to the Mental Health Plan (not currently an option)
- Future (2016) potential to use SAPT Block Grant funds for transitional housing for ADP clients
- General fund

# Thank you

QUESTIONS?