



Board Agenda Item 32

DATE: October 23, 2018

TO: Board of Supervisors

SUBMITTED BY: Dawan Utecht, Director, Department of Behavioral Health

SUBJECT: Retroactive Master Agreement for Cultural Specific Services

RECOMMENDED ACTION(S):

- 1. Approve and authorize the Chairman to execute a retroactive Master Agreement with providers of Cultural Specific Services, effective October 1, 2018 through June 30, 2023, which includes a two-year and nine-month base contract and two optional one-year extensions, total not to exceed \$10,723,130 (4/5 vote).**
- 2. Authorize the Director of the Department of Behavioral Health, or designee, to add and delete provider(s) to the Master Agreement, as necessary, with oversight and approval from Internal Services Department - Purchasing Division.**

Approval of the first recommended action will allow for the uninterrupted provision of cultural specific specialty mental health services currently provided to the Southeast Asian (SEA) adult and older adult population with serious mental illness (SMI), and for expansion of services to include more levels of care, additional cultural/ethnic/linguistic populations, and persons not currently being served. The second recommended action will allow for future additions and/or deletions of providers for other unserved and underserved populations. Funding reallocations within the Master Agreement with existing and/or new providers will allow them meet service needs, without exceeding the annual contract maximum.

It should be noted that because County employees have been performing cultural specific behavioral health services for certain cultural/ethnic/linguistic populations such as Asian Pacific Islanders (API) that have been identified as additional target populations to be served under Cultural Specific Services expansion, Section 13 of the County Charter specifies that a 4/5 vote is required for contract approval. Once a qualified provider of services under the Master Agreement has been identified, current County employees will be reassigned to provide support across all levels of care through expertise and language capacity, and to enhance cultural understanding, sensitivity and capacity across all Department of Behavioral Health treatment teams, resulting in zero layoffs.

The recommended Agreement will be funded by Mental Health Services Act (MHSA) Community Services and Supports (CSS) and Medi-Cal Federal Financial Participation (FFP), with no Net County Cost.

ALTERNATIVE ACTION(S):

There is no viable alternative action. If the first recommended action is not approved, comprehensive cultural specific specialty mental health services to underserved and unserved populations and community-based clinical training programs for bilingual student interns and unlicensed mental health practitioners will not be available. SEA adults and older adults currently receiving contracted cultural specific services may experience a gap and/or delay in services. Non-approval would also result in required Board

action to add providers to the Agreement as service needs dictate and to modify services and budget expense categories greater than ten percent within provider budgets.

RETROACTIVE AGREEMENT:

The recommended Agreement is retroactive to October 1, 2018 to ensure there is no gap and/or delay in existing services while contract negotiations for expanded services and associated costs were finalized. Agreement No. 13-392-2 for existing cultural specific mental health services for SEA adults and older adults ended September 30, 2018. Expanded services, including full service partnership services, are not expected to begin until January 1, 2019.

FISCAL IMPACT:

There is no increase in Net County Cost associated with the recommended actions. The maximum cost of the recommended Agreement will be fully funded by MHSA CSS and Medi-Cal FFP funds. The annual contract maximum for FY 2018-19 and each subsequent year is \$2,144,626 for all providers combined; \$10,723,130 for the four-year and nine-month term. Sufficient appropriations and estimated revenues are included in the Department's Org 5630 FY 2018-19 Adopted Budget and will be included in future budget requests for the duration of the term. Total expenditures will be determined by actual services provided.

DISCUSSION:

The MHSA allows the Department to provide specialty mental health services through new or expanded programs that are driven by a local stakeholder process and approved by the State. The results of the local stakeholder process prioritized enhancement of cultural specific services to the underserved and unserved communities of Fresno County. Additionally, a disparity was identified in cultural/ethnic/linguistic populations regarding numbers of licensed bilingual and bicultural mental health practitioners. This disparity has been identified as a cultural barrier to linguistic access and culturally competent mental health services that promote wellness and recovery.

In response to the stakeholder process, Fresno County contracted with Fresno Center for New Americans, now known as The Fresno Center, in 2013 for outpatient specialty mental health services to the SEA adult population as well as a clinical training program for SEA clinical graduate students. The existing contract, titled the "Living Well Program," was set to expire on September 30, 2018; therefore, a new competitive bidding process was conducted in order to seek on-going services as well as the expansion of services into other levels of care and additional cultural/ethnic/linguistic target populations. On April 2, 2018, County Purchasing released RFP No. 18-043 for Cultural Specific Services. The RFP closed on April 30, 2018 with three responses, each proposing to serve specific target populations. Only one response, The Fresno Center, was recommended for award to provide outpatient/intensive case management (OP/ICM) specialty mental health services and full service partnership (FSP) services to transition age youth (TAY), adult and older adults in the SEA population. Although the evaluation panel unanimously recommended The Fresno Center be awarded the contract due to proven cultural competence and clinical service delivery, additional contract development and negotiation was needed to clarify the expansion into FSP services, child/youth population and associated cost proposals. The Fresno Center will be able to serve a minimum caseload of 220 persons with an outpatient/intensive case management level of care and 30 persons with FSP services annually.

The recommended Agreement contains language which includes the provision to allow the DBH Director, or designee, to terminate without cause with 60 days advance written notice, and authorizes budget changes that do not exceed ten percent (10%) of the total contract amount. The second recommended action would allow the DBH Director, or designee, and County Purchasing to be able to add and/or delete providers based on community and service need, and to ensure the necessary flexibility within budgets for providers without a gap or delay in services. During the term of the recommended Agreement, the Department will privatize internal operated programs for cultural specific behavioral health services (i.e., Asian Pacific Islander Team

and Latino Team) once qualified providers are added. Staff within these cultural specific programs would be reassigned to other internal operated behavioral health programs within the Department, resulting in no reduction of staff or reduced level of services provided.

OTHER REVIEWING AGENCIES:

The Behavioral Health Board was informed of the recommended Agreement at its September 12, 2018 meeting.

REFERENCE MATERIAL:

BAI #32, June 12, 2018

BAI #27, June 21, 2016

BAI #49, June 18, 2013

ATTACHMENTS INCLUDED AND/OR ON FILE:

On file with Clerk - Master Agreement

CAO ANALYST:

Ronald Alexander