

Proposition 1: A Bed and Care Instead of Tents, the Street or Death for our Most Mentally Vulnerable

Improving Community Care, Sub-Acute and Acute
Behavioral Health Care

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Acronyms and Phrases

Acute Level of Care—Refers to the locked Psychiatric Ward level of care for children (ages 0-11), adolescents (ages 12-17), and adults (ages 18 and above)

AOD—Alcohol and Other Drugs: Behavioral Health portion of Mental Health dept.

BHSA—if approved by voters at the March 5, 2024 Primary election, would rename the Mental Health Services Act (MHSA) the Behavioral Health Services Act (BHSA).

Community Assistance, Recovery & Empowerment (CARE) Court

CCBHS—Contra Costa Behavioral Health Services

IMD—Institute of Mental Diseases (civil locked facility)

MHRC—Mental Health Rehabilitation Center (civil locked care facility)

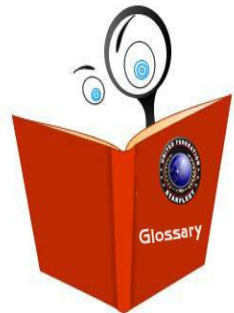
IST—Incompetent to Stand Trial connected to the Dept. of State Hospitals (DSH)

Sub-acute level of care—civil law locked services and care facility for persons on an LPS (Mental Health) Conservatorship. They are placed in an IMD MHRC.

Community based care—unlocked state licensed and unlicensed care housing, services and treatment for mentally ill persons needing it.

TAY—Transition Age Youth (State: Ages 16-25)

WIC—Welfare & Institutions Code



High Level Prop. 1 Summary

- ▶ Per very narrow passage by the voters at the March 5, 2024 Primary, Proposition 1 will do several things:
 - Rename the Mental Health Services Act (MHSA) the Behavioral Health Services Act (BHSA).
 - Collapse the current 5 MHSA Categories into 3 BHSA categories without increasing state funding.
 - Authorize a \$6.38B housing Bond to cover either building new or refurbishing existing housing for up to 13,000 full spectrum of care (including civil locked acute and sub-acute level facility) beds.
 - Through the Housing Bond, also create 27,000 Outpatient Treatment slots primarily for Substance Use Disorder treatment.
- ▶ Focus County Behavioral Health Depts. & Svc. Providers to fully serve their Severely Mentally Ill population.

Key Points: Proposition 1

Financial Changes:

- ▶ The state will take some functions from the counties and thus, decrease each county's BHSA allocation from the present 95% to 90% (\$140M annually statewide) for the following purposes:
 - 4%—Behavioral Health workforce expansion (previously Workforce Education & Training [WET])
 - 3%—State run Prevention program (previously county run)
 - 3%—State BHSA Administration (down from 5 %)
- ▶ The current MHSA Categories are:
 - Community Services and Supports (CSS)—50% minimum
 - Prevention & Early Intervention (PEI)—5% minimum
 - Innovation (INN)—5% minimum
 - Workforce Education & Training (WET)—1% minimum
 - Capital Facilities/Info. Technology (CF/TN)—1% min

Key Points: Proposition 1 (cont'd)

- ▶ Will be “folded” into:
 - Housing Intervention—30%
 - Full Services Partnerships (FSPs + AOT)—35%
 - Behavioral Health Services & Supports (BHSS)—35%
 1. 51% of BHSS must be used for Early Intervention (EI)
 2. 51% of Early Intervention (EI) must serve persons under 25 years of age.
 - As I understand it, these changes will take effect July 1, 2026
- Housing bond of \$6.38B critical to help prevent further homelessness, jail, or death for persons who, at times, need:
 1. Acute psychiatric bed care, Respite Care, and/or
 2. Civil locked facility care help to keep them out of the criminal justice system and off the streets or death.
 3. Proper step-up and step down community care to avoid, as much as possible, justice involved locked facility care.
 4. Especially important for the Black Indigenous Persons of Color (BIPOC) communities in Contra Costa County.

Contra Costa Behavioral Health Services (CCBHS) Budget (2022–2023)

- ▶ Fed. Fin. Participat.(Medi-Cal): \$101,109,300--33%
- ▶ 1991 & 2011 Realignment: \$ 87,025,700—29%
- ▶ Mental Health Services Act: \$ 63,520,000—21%
- ▶ Alcohol and Other Drugs: \$ 33,136,000—11%
- ▶ County portion: \$ 17,305,000— 6%
- ▶ TOTAL: \$ 302,096,000

- ▶ Public Guardian (LPS Conservat.): \$4,500,000
- ▶ MHSA (FSP+AOT--Community): \$33,647,090
- ▶ 1991 & 2011 Realignment: \$87,025,700
- ▶ TOT. High Need Care Costs: \$125,172,790—41%

- ▶ Persons involved: 900–1,000/year

CC County MHSA/BHSA Budget Categories

Current MHSA Categories

▶ Com. Support Services (CSS):	\$ 48,149,000—75.8%
▶ Prevent. & Early Interv. (PEI):	\$ 9,849,000—15.5%
▶ Innovation (INN):	\$ 2,329,000— 3.7%
▶ Workforce Educ./Train. (WET):	\$ 2,943,000— 4.6%
▶ Cap. Fac./Tech Needs (CF/TN):	\$ 250,000— 0.4%
▶ TOTAL:	<u>\$ 63,520,000</u>

Proposed BHSA Categories

▶ Housing Interventions—30%:	\$19,056,000
▶ Full Service Partnerships (FSP)—35%:	\$22,232,000
▶ Behav. Health Svcs.&Sup. (BHSS)—35%:	<u>\$22,232,000</u>
▶ TOTAL:	\$63,520,000

Source: 2022–2023 Actual CCBHS Published budget and then “recast” into the new proposed BHSA Categories.

Housing Needs: CC County

- ▶ **Current Budget Provided (High Need persons):**
- ▶ MHPA (FSP+AOT & Housing): \$33,640,090
- ▶ 1991 and 2011 Realignment: \$87,025,700
 - \$20M/yr. of state Realignment funding used for State Hospital and Institute of Mental Diseases (IMD) care
- ▶ County Jail--\$50M/yr. per Prison Law Office settlement
- ▶ State Prison: Unknown
- ▶ **Persons involved (Ages 18 & above): 1,200–1,250 (incl. jail & State Hosp.)**
- ▶ MHPA (Community Unlocked): 650 (FSP & AOT)
- ▶ 1991 Realign. LPS Conserv. MHRC Care: 139–180+
- ▶ State Hosp.+ Condit. Release (CONREP): 75+
- ▶ County Jail: 300 (out of 700 persons—40% have a severe mental illness and co-occurring Substance Use Disorder)
- ▶ State Prison: Unknown
- ▶ **Unhoused in CC County: 2,000–2,500/year, 50%+ of whom have co-occurring severe mental illness and substance use disorder issues. This is especially the population Prop. 1 seeks to reach and serve.**

General Prop. 1 CC Housing & Treat. Needs

▶ Community Based Care:

1. Peer Respite:
2. Substance Use Disorder Treatment slots:

▶ Mental Health Rehab. Center Care & SUD Care:

1. Forensic (IST and LPS Murphy):
2. LPS Conservatorship (incl. CARE Court, if nec.):
3. Additional Discovery House type Care:

▶ Possible Ratio of Community Beds to MHRC Beds:

- 2 “step down” beds for every 1 “step up” MHRC bed to 4 step down” beds for every 1 “step up” MHRC bed.
 - “Sweet spot” could be 3 “step down” beds for every 1 “step up” MHRC bed.
- ▶ **KEY:** Unclog the “Human log jam” at both ends of the housing continuum.
- ▶ Slide 14 further touches on these concerns.

Prop.1 Bond Measure Dollars for Statewide Housing Categories

- ▶ Chap. 4: Behav. Health Infrastructure Bond Act of 2024—pp. 102–105
- 1. Homeless or “At risk of” veterans: \$1.065B
- 2. Gen. pop.—Homeless or at risk of: \$ 922M
- 3. Short Term Crisis, Acute, Sub–Acute, Com.: \$1.500B
- 4. Gen. pop.—Crisis, Acute, Sub–Acute, Com: \$2.893B
- ▶ TOTAL: \$6.380B

NOTE; I understand all rounds of funding will be via the Behavioral Health Care Continuum Infrastructure Program (BHCIP) competitive bid process.

Prop. 1 Housing Bond Beds & Outpatient Treatment Slots Involved Statewide

1. Veterans (In Community):	2,350
2. General Population (incl. SUD):	2,000
3A. Crisis (incl. Acute Care & Peer Respite):	2,050
3B. Sub-Acute:	2,700
3C. Community (incl. SUD):	2,050
4. Gen. Pop., including 3A, 3B, 3C:	<u>1,850</u>
TOTAL:	13,000
Outpatient Treatment slots (prim. SUD):	27,600

Source: CA Public & Policy Center website—
Understanding Proposition 1

Pos. Prop. 1 Housing Bond Effects on CC County

Dollars—Approx., CCC 2.4% of state pop. & Medi-Cal recipients

1. Veterans (Community—Incl. AOD):	\$28,755,000
2. General Pop. (Community):	\$24,894,000
3. Crisis, Sub-Acute, & Community:	\$40,500,000
4. Gen. Population (Com., incl. 3):	<u>\$78,111,000</u>
TOTAL Approx. Prop. 1 Dollars for CCC:	\$172,260,000

Beds—Approx., CCC 2.4% of state pop&M-Cal recipients

1. Veterans (Community):	64
2. General Population (Community):	54
3A. Crisis & Stabilization:	56
3B. Sub-Acute (LPS Conserv.):	73
3C. Community:	56
4. Gen. Pop., incl. 3A, 3B & 3C:	<u>43</u>
TOT. Approx. Prop. 1 Beds for Contra Costa County:	346

VERY PRELIM: Only based on county pop. & M-Cal recip.

Background Prop. 1 Contra Costa Issues

- ▶ CARE Court coming Dec. 1, 2024
 - LPS Conservatorship “the default” if person “fails” CARE Court.
 - How many persons could be involved?
- ▶ Felony Incompetent to Stand Trial (FIST) 18 month county housing and treatment services
 - \$9M+ in state funding provided thru the DSH.
 - To be provided for up to 100 persons–6/30/28.
 - LPS Conservatorship housing part of the the “continuum of care” as needed.
 - How many persons could be involved?

Ongoing issues

▶ BHSA

- With funding not increased, stress on current funding for Core Services, such as treatment and housing, esp. for historically underserved communities (BIPOC & LGBTQUI). **Focus: “Braided” Medi-Cal funding.**
- CCBHS has attempted to get around this by putting as much money as possible in the 2023–2026 3 Yr. Plan for Housing (approx. \$66M in this plan time period).

▶ Housing Bond

- \$310M/yearly in bond payments over 30 years means a cost of \$9.38B over 30 years for this \$6.3B Bond.
- Will slightly strain the General Fund for other programs.
- Overall, a very worthwhile “trade-off” for persons who really need this care. The tragic alternative is often the criminal justice system, homelessness, or death, especially for families of loved ones in Black Indigenous Persons of Color (BIPOC) communities in this county.