

## **Measure B Program Funding Suggestions**

A collaboration of the Behavioral Health Advisory Board, Behavioral Health and Recovery Services, and the Mendocino County National Alliance on Mental Illness are submitting the following recommendations on how Measure B dollars should be spent to support the local mental health system of care.

The collaboration would like to see a focus on prevention and early intervention and aftercare services. We also want to acknowledge the parity issues that exist between Medi-Cal and private insurance, which affects the services available to individuals living in Mendocino County and would like to recommend the Mendocino County Board of Supervisors push for legislative change that creates parity for all individuals needing mental health services.

*Housing* – Housing is a needed resource within Mendocino County, especially for our vulnerable mental health population. It has been proven that providing housing allows individuals with mental health conditions to improve their lives and succeed with recovery. Housing is the first step in prevention and early intervention. It creates stability that allows people to begin and succeed in recovery. It is really hard for an individual to maintain without stable housing. We propose that Measure B allocate a one-time allocation of One Million Three Hundred Thousand Dollars (\$1,300,000) to purchase and renovate or build permanent housing for individuals on the coast that are homeless, chronically homeless, or at risk of chronic homelessness who have a mental health condition.

*Community Education, Awareness, and Support (CEAS)* – Individuals with mental health conditions experience discrimination and stigma on a daily basis. There is a need in our community to provide education and awareness around mental health conditions to law enforcement, physicians, community leaders, and community members as a whole to reduce discrimination and stigma. Discrimination and stigma impacts an individual's desire to seek services and get the help they need. Families and individuals with mental health conditions also need assistance navigating the community resources and support systems. We recommend that Measure B allocate Three Hundred Fifty Thousand Dollars (\$350,000) per year for four (4) years. We also recommend the selected provider apply for grants and seek additional funding opportunities during that four (4) year period to sustain in future years.

*Crisis Assessment and Psychiatric Hospitalization Aftercare (Aftercare)* – On regular basis individuals are discharged from an acute psychiatric hospital stay or received a crisis (5150) assessment. Individuals that have Medi-Cal or are indigent are offered follow-up services for at least 60-days to get them connected to services. If an individual has private insurance or Medicare there is no guarantee the individual will get the needed follow-up services to be sure they are connected to services. This lack of follow-up services increases the risk for re-

hospitalization. The collaboration recommends that Measure B allocate Two Hundred Sixty Thousand Dollars (\$260,000) per year for 4 years to provide follow-up services to all individual not eligible for county services being discharged from a psychiatric hospital stay or receiving a crisis (5150) assessment. We also recommend that outcome statics are tracked and reported, so that information can be provided on the success of this program and allow for advocacy with private insurance and Medicare to fund these services for their clients.

*Mobile Crisis Team* – This recommendation proposes a pilot program that would shift from a Mobile Outreach and Prevention Services to a Mobile Crisis Team that would provide three Mental Health Rehabilitation Specialists to respond and ride along with the Mendocino County Sheriff's Office. Data is available that shows these teams can be very effective and supportive for the individual involved in a mental health crisis. The collaboration recommends that Measure B allocate Three Hundred Forty Thousand Dollars (\$340,000) per year for 4 years to fund three Mental Health Rehabilitation Specialist for the Mobile Crisis Team program. We also recommend that outcome statics are tracked and reported, so that information can be provided on the success of this program.

*Crisis Residential Treatment Facility (CRTF)* – Mendocino County could benefit from having a Crisis Residential Treatment Facility within the county. The collaboration would suggest that the county contract with an operator that will work with other counties, such as Lake and private insurance companies to help with meeting capacity and operating costs. However, we included the potential cost of operating a CRTF in the projections provided to Measure B, if the selected contractor pursued no other means of payment. This collaboration projects the reimbursement for Medi-Cal and County realignment funds to be around \$600,000 with the proposed Measure B dollars of \$500,000; the cost of operations would total \$1,100,000, which is consistent with operation cost reported by other CRTF programs.

*Psychiatric Hospital Facility (PHF)* – Mendocino County could benefit from having an acute psychiatric facility within the county. The collaboration would suggest that the county contract with an operator that can run a facility independent of additional monies from Measure B beside that cost of building or renovation of the facility. We would also suggest that the selected contractor work with other counties such as Lake, private insurance companies and Medicare to help with meeting capacity and operating cost. This proposal would also require any agency using the facility to place an individual to cover the cost, if not allowable by insurance. If this facility is operated similar to other private facilities, the collaboration believes the facility would be able to operate without Measure B dollars to support operational cost. Therefore, we did not project any Measure B dollars for a PHF.

**Projected Overall Financial Analysis of Proposed Programs and Projected Proceeds**

	<b>FY 18/19</b>	<b>FY 19/20</b>	<b>FY 20/21</b>	<b>FY 21/22</b>	<b>FY 22/23</b>	<b>FY 23/24</b>
Projected Proceeds	\$2,000,000	\$2,125,000	\$1,750,000	\$1,813,000	\$1,875,000	\$2,000,000
Proceed Carry Over Prior Year(s)	\$0	\$2,000,000	\$4,125,000	\$3,625,000	\$4,238,000	\$4,663,000
Proceed Cumulative Total	\$2,000,000	\$4,125,000	\$5,875,000	\$5,438,000	\$6,113,000	\$6,663,000
<b>Proposed Program Cost</b>						
Housing	\$0	\$0	\$1,300,000	\$0	\$0	\$0
CEAS	\$0	\$0	\$350,000	\$350,000	\$350,000	\$350,000
Aftercare	\$0	\$0	\$260,000	\$260,000	\$260,000	\$260,000
Mobile Crisis	\$0	\$0	\$340,000	\$340,000	\$340,000	\$340,000
CRTF	\$0	\$0	\$0	\$250,000	\$500,000	\$500,000
PHF	\$0	\$0	\$0	\$0	\$0	\$0
Total Cost	\$0	\$0	\$2,250,000	\$1,200,000	\$1,450,000	\$1,450,000
<b>Cumulative Unspent Proceeds</b>						
	\$2,000,000	\$4,125,000	\$3,625,000	\$4,238,000	\$4,663,000	\$5,213,000