



# Behavioral Health Continuum Infrastructure Program and Community Care Expansion Listening Session

Hosted by:

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# Listening Session Format

## **For each topic, DHCS will:**

1. Present the information specified in BHCIP
2. Provide a prompt related to the policy decisions for the BHCIP grant making
3. Solicit stakeholder verbal or written feedback via chat on the prompt
4. DHCS is gathering information and will not be responding to questions during the listening session



# How to Provide Feedback

1. “Raise your hand” to provide verbal feedback during the Listening Session
2. Submit your feedback in writing:
  - Type your feedback/comments in the chat box located on your control panel
  - Send an email to [bhcip@dhcs.ca.gov](mailto:bhcip@dhcs.ca.gov) with the subject line “Listening Session”.  
Feedback is accepted through October 15, 2021



# CA Infrastructure Investment

- California is making a significant investment in infrastructure by providing competitive grants to qualified entities to construct, acquire, and rehabilitate real estate assets
- \$3 billion in infrastructure funding opportunities are available through the Behavioral Health Continuum Infrastructure Program at DHCS and the Community of Care Expansion Program and the California Department of Social Services (CDSS)



# Collaboration

DHCS and CDSS are closely collaborating on the BHCIP and CCE infrastructure grants

- Combined stakeholder meetings with counties and tribal entities
- Joint Planning Grant for Counties and Tribal Entities
- Leveraging TA resources
- Alignment on policy, when feasible
- Timing RFA releases to support local efforts



# CA Homeless/ Housing Efforts

- These infrastructure investments are part of a larger effort to rebuild the state's portfolio of housing and treatment options for people with severe behavioral health challenges who are at risk of or experiencing homelessness
- California is investing \$12B over the next two years to end and prevent homelessness including flexible funding to local governments with strong accountability measures and investments in the social safety net and healthcare delivery system



# Need for BH Infrastructure

- The majority of Californians with behavioral health (BH) conditions self-reported they were not receiving treatment. (California Health Care Foundation [Mental Health Almanac 2018](#) and [SUD Almanac 2018](#).)
- Inpatient psychiatric bed capacity in California is 21 beds/100,000 people whereas experts estimate 50 beds/100,000 people is needed to meet the need across the state. ([CA Hospital Association](#))
- Number of SUD treatment facilities has decreased by 13 percent over the last three years (down to 874 licensed facilities in 2020 compared to 1,009 in 2018).



# BHCIP Vision

- BHCIP offers a tremendous opportunity to create new capacity within the BH facility infrastructure in California
- DHCS is excited to lead out such a significant project that will have a lasting impact on the BH field
- BHCIP will align with DHCS' other efforts around integration, CalAIM, Children and Youth Behavioral Health Initiative, address homelessness and expanding BH access





# BH Needs Assessment

- DHCS will publish a behavioral health capacity and gap analysis in November 2021.
  - Assessment of the current state's BH continuum of care, including mental health and SUD systems
  - Determine the need for expanding existing capacity and/or proposing enhancements to the existing continuum
  - Inform the BHCIP rounds of grant applications, in addition to the SMI/SED IMD waiver.
  - The Needs Assessment will be one source of information to determine the need for statewide capacity.



# BHCIP Overview

- Passed in FY 2021-22 State budget.
- \$2.2B total for the BHCIP
- Amends [Welfare and Institutions Code](#)
- Provides competitive grants for counties, tribal entities, non-profit and for-profit entities to build new or expand existing capacity in the continuum of public and private BH facilities
- Funding will be **only** for new or expanding infrastructure (brick and mortar) projects and not BH services



# BHCIP Overview

- DHCS will release Request for Applications (RFAs) for BHCIP through multiple rounds
- Rounds will target various gaps in California's BH facility infrastructure
- Rounds will remain open until funds are awarded
- Different entities will be able to apply in each round for specific projects to address identified infrastructure gaps
- Stakeholder engagement will occur throughout the project



# Facility Types

- BH Wellness Centers
- Short-term crisis stabilization
- Acute and subacute care
- Crisis residential
- Community-based MH residential
- Substance use disorder residential
- Peer respite
- Mobile crisis
- Community and outpatient
- Other clinically enriched longer term treatment and rehabilitation options for persons with BH disorders in the least restrictive and least costly setting



# Feedback

1. In order to expand CA's BH continuum of care, what other BH facilities would you like to have considered for funding?



# Requirements in Law

Part 1, Chapter 7, Section 5960.15. An entity shall meet all of the following conditions in order to receive grant funds pursuant to Section 5960.5(a), to the extent applicable and as required by the department:

- (a) Provide matching funds or real property
- (b) Expend funds to supplement and not supplant existing funds to construct, acquire, and rehabilitate real estate assets.
- (c) Report data to the department within 90 days of the end of each quarter for the first five years.
- (d) Operate Medi-Cal services in the financed facility for the intended purpose for a minimum of 30 years.

## Proposed Additional Requirements

- DHCS will also require that Medi-Cal beneficiaries are served in grant funded facilities
- The 30 years begins after construction is completed



# Exemptions

5960.30. (a) Notwithstanding any other law, a facility project funded by a grant pursuant to this chapter shall be deemed consistent and in conformity with any applicable local plan, standard, or requirement, and allowed as a permitted use, within the zone in which the structure is located, and **shall not** be subject to a conditional use permit, discretionary permit, or to any other discretionary reviews or approvals.

(b) Notwithstanding any other law, the California Environmental Quality Act (Division 13 (commencing with Section 21000) of the Public Resources Code) **shall not apply** to any facility project, including a phased project, funded by a grant pursuant to this chapter if all of the following requirements, if applicable, are satisfied



# BHCIP Proposed Rounds

Round 1: Mobile Crisis \$150M (July 2021)

Round 2: Planning Grants \$8M (Nov 2021)

Round 3: Launch Ready \$585M (Jan 2022)

Round 4: Children and Youth \$460M (*Aug 2022*)

Round 5: Addressing Gaps #1 \$462M (*Oct 2022*)

Round 6: Addressing Gaps #2 \$460M(*Dec 2022*)





# Proposed BHCIP Timeline

<b>July 2021</b>	Release Round 1: Mobile Crisis RFA
<b>September 2021</b>	Award Round 1: Mobile Crisis Projects
<b>Sept/October 2021</b>	Re-Release Round 1: Mobile Crisis RFA Part 2
<b>October 2021</b>	BHCIP/DSS Listening Session
<b>November 2021</b>	Release BH Assessment Report
<b>November 2021</b>	Release Round 2: Planning Grants RFA
<b>January 2022</b>	Award Round 2: Planning Grants
<b>January 2022</b>	Release Round 3: Launch Ready RFA
<b>April 2022</b>	BHCIP Listening Session for Rounds 4-6
<b>May 2022</b>	Award Round 3: Launch Ready Grants
<b>August 2022</b>	Release Round 4: Children and Youth RFA
<b>October 2022</b>	Release Round 5: Addressing Gaps #1 (TBD)
<b>December 2022</b>	Release Round 6: Addressing Gaps #2 (TBD)



# BHCIP Funding Available

- *FY 21/22: \$743.5M total*
  - \$150M      Mobile Crisis
  - \$593.5M    General BHCIP
- Obligate \$300M Coronavirus Fiscal Recovery Fund (CFRF) by June 2024 and liquidate by December 2026.
- Expend \$443.5M in State General Fund (SGF) by June 30, 2026.



# BHCIP Funding Available

*FY 22/23: \$1.38B total*

- \$1.16B General BHCIP Infrastructure
- \$218.5M from Coronavirus Fiscal Recovery Fund (CFRF)
- Obligate CFRF funds by June 2024 and liquidate by December 2026.
- Expend \$1.16B in State General Fund by 2027.



## **CDSS Community Care Expansion**

- The CCE program will fund the acquisition, construction, and rehabilitation of adult and senior care facilities that serve applicants and recipients of Social Security Income (SSI) including individuals who are at risk of or experiencing homelessness and those who have behavioral health conditions



## Overlapping Characteristics of the CCE and BHCIP

- BHCIP facility types are broader but include adult and senior care facilities
- CCE aims to serve the SSI population, but is inclusive of individuals with behavioral health conditions
- Like the BHCIP, the CCE will require a match and a commitment of long term use of the facility for the intended purpose



# BHCIP and CCE Coordination

- DHCS and CDSS are working collaboratively on the design and implementation of these programs and will continue to engage stakeholders jointly
- Applicants are encouraged to consider both funding streams when planning for system of care enhancements



# Advocates for Human Potential (AHP)

- AHP will assist DHCS with overall BHCIP project implementation including:
  - Planning grants (contracts/funding/TA)
  - Applicant and grantee assistance including preparation of proposals for rounds
  - Real estate TA for grantees (land use zoning, permitting, real estate acquisition, applicable exemptions)
  - Additional TA
  - DHCS project management



# Feedback

1. What are the TA needs for counties and tribes for the planning grants?
2. How could TA help in preparing the proposals?
3. How could TA assist in implementing grants?





# Required Match

- Matching funds or real property will be required
- Match requirements are still in development
- Initial recommendations:
  - Lower for counties/tribal entities
  - Lower for non-profits with county contracts
  - Higher for private entities



# Feedback

1. What funds would entities propose to use for the match?
2. Any comments about the real property match option?



# Grant Funding

Maximum funding could be determined based on:

- Set amount available per facility type rehabilitated for expansion
  - Per bed
  - Per increase in outpatient capacity
- Set amount available for newly constructed facility type
  - Per bed
  - Per increase in outpatient capacity
- Priorities determined by the state
  - For example - reduces hospitalization, incarceration and/or institutionalization



# Feedback

1. What are the funding limit recommendations for each eligible facility type?
2. Are there other factors that could be considered to determine funding levels?



# Round One: Mobile Crisis

- RFA's released in July 2021 to counties and Tribal entities for crisis care mobile units (CCMU).
- Entities could apply for up to \$1M per CCMU team from September 2021 – June 30, 2025
- Awards will be made in early October 2021



# Round One: Mobile Crisis

DHCS will re-release the Round One: Mobile Crisis RFA for new county and tribal applicants.

- Entities already awarded may apply, but new applicants will receive priority funding.
- RFA will be released in Oct.



# Round Two: Planning Grants

- Eligibility limited to counties and Tribes (638s and Urbans) \$8M Total
- Planning will encompass all rounds, incorporate DSS grant opportunities and other planning efforts such as expanding workforce
- Up to \$100K per Planning Grant
- Counties and tribal entities may apply as a regional model
- TA will be provided
- Release RFA Oct 21, Due Nov 21, Award Jan 22
- Project period Jan 22-Dec 22



# Feedback

What comments do you have regarding the Planning Grant round?





# Round Three: Launch-Ready

- All entities will be eligible including counties, Tribes, non-profit, and private entities
- Funding will be for launch-ready BH facilities outlined by DHCS in the RFA which meet the gaps identified in the BH Needs Assessment
- County letter of support/acknowledgement may be required
- Additional requirements will be forthcoming
- Release RFA Jan 22, Due Mar 22, Initial Award of projects May 22
- Project period from May 22-June 26



# Feedback

What information can DHCS provide to assist with planning efforts for this RFA?



# Rounds Four-Six

- Future stakeholder feedback opportunities will be available for rounds four-six of the BHCIP.
  - Round 4: Children and Youth \$460M (Aug 2022)
  - Round 5: Addressing Gaps #1 \$462M (Oct 2022)
  - Round 6: Addressing Gaps #2 \$460M (Dec 2022)
  - Addressing Gaps rounds may include other state priorities such as justice involved and other special populations.
- General comments are accepted through the BHCIP mailbox; however, more details will be available as these rounds are developed.



# Contact Information

Current information regarding the implementation of BHCIP can be found online: [BHCIP-Home \(ca.gov\)](https://www.cdss.ca.gov/Programs/OPHS/OPHS-Related/OPHS-Related-Programs/BHCIP/OPHS-Related-Programs-BHCIP-Home.aspx)

Written comments and feedback can be submitted to the BHCIP mailbox at: [BHCIP@dhcs.ca.gov](mailto:BHCIP@dhcs.ca.gov)

Written comments for the CDSS CCE Project at: [housing@dss.ca.gov](mailto:housing@dss.ca.gov)