

DHCS Form 5510**MHSA Three-Year Program and Expenditure Plan or Update Extension FY 2021-22****Background and Instructions**

Welfare and Institutions (W&I) Code section 5847(h), allows a county that is unable to complete and submit a Three-Year Program Expenditure Plan (Plan) or annual update (update) for fiscal year (FY) 2020-21 due to the COVID-19 Public Health Emergency to extend the effective time frame of its currently approved Plan or update to include FY 2021-22, and submit the subsequent Plan or Update on July 1, 2022.

This document provides notification to DHCS that the County is extending the effective time frame of its currently approved Plan or Update to include FY 2021-22, per W&I Code section 5847(h).

Please enter the requested information in the fields below and submit a completed form electronically to DHCS at MHSA@DHCS.ca.gov.

Section I: County Information

a. Type of Plan or Update Plan

b. Date current Plan/Update was approved 12/1/2021

Section II: Stakeholder Notification

Stakeholders have been notified that the County is extending the effective time frame of its currently approved Plan or update to include FY 2021-22 as of: NA (please see below)

Section III: Extension Justification

Provide a brief summary describing how the COVID-19 Public Health Emergency inhibited the County's ability to complete and submit its Three-year Plan or annual update for FY 2021-22.

Lassen County Behavioral Health (LCBH) did not complete a FY 2020-23 Plan, and is asking for a retro extension. LCBH was unable to notify stakeholders due COVID-19 shelter in place restrictions, the county lost its only in county printed newspaper, and in the summer/fall of 2021 Lassen County as well as neighboring counties were devastated and displaced by the Dixie Fire. During these times LCBH staff duties were redirected to other county agencies (i.e. Lassen County Public Health, Lassen County Sheriff's Department, and the staffing of emergency shelters)

Lassen County has completed a FY2021-24 Three Year Plan, and is currently operating in an approved FY 2024-26 Two Year Plan to comply with the directions of DHCS extension track.

Section IV: Certification

The undersigned certifies that the information included in this form is complete and accurate to the best of their ability.

County Behavioral Health Director Signature

Printed Name

Date

8-29-2024