



# California Behavioral Health Planning Council

ADVOCACY • EVALUATION • INCLUSION

## AGENDA

**Revised 1-3-2025**

January 14, 15, 16, and 17, 2025

Hilton La Jolla Torrey Pines

10950 North Torrey Pines Road, La Jolla, California 92037

Notice: All agenda items are subject to action by the Council. Scheduled times on the agenda are estimates and subject to change. If Reasonable Accommodation is required, please contact the Council at 916-701-8211 by **December 31, 2024**, to meet the request. All items on the Committee agendas posted on our website are incorporated by reference herein and are subject to action.

## COMMITTEE MEETINGS

### **Tuesday, January 14, 2025**

2:00pm [Performance Outcomes Committee](#)

### **Wednesday, January 15, 2025**

8:30am [Executive Committee](#)

10:30am [Patients' Rights Committee](#)

**12:00pm LUNCH (on your own)**

12:10am Children/Youth Workgroup (working lunch)

1:30pm [Workforce and Employment Committee](#)

1:30pm [Legislation and Public Policy Committee](#)

### **Thursday, January 16, 2025**

8:30am [Housing and Homelessness Committee](#)

8:30am [Systems and Medicaid Committee](#)

**12:00pm LUNCH (on your own)**

12:10pm Reducing Disparities Work Group (working lunch)

12:10pm Substance Use Disorder Workgroup (working lunch)

**Thursday, January 16, 2025**

**COUNCIL GENERAL SESSION**

**Room:** Fairway I & IV

**Conference Call:** (669) 900-6833 (Listen Only)

**Meeting ID:** 835 4781 4060 **Passcode:** 030067

- |                |   |              |
|----------------|---|--------------|
| <b>1:30 pm</b> | <b>Welcome and Introductions</b><br><i>Deborah Starkey, Chairperson</i>   |              |
| <b>1:40 pm</b> | <b>Election of 2025 Chairperson-Elect and Changing of the Officer (VOTE)</b><br><i>Nominating Committee Members: Liz Oseguera, Marina Rangel, Daphne Shaw, Deborah Starkey, Bill Stewart</i>  | <b>Tab I</b> |
| <b>1:40 pm</b> | <b>Acceptance of June 2024 Meeting Minutes</b><br><i>Tony Vartan, Chairperson</i>   | <b>Tab J</b> |
| <b>1:45 pm</b> | <b>Local Behavioral Health Services Overview</b><br><i>Leticia Plancarte-García Director, Behavioral Health Director &amp; Gabriela Jimenez, Deputy Director, Imperial County Behavioral Health Services</i>  | <b>Tab K</b> |
| <b>2:25 pm</b> | <b>Public Comment on County Presentation</b>  |              |
| <b>2:30 pm</b> | <b>10-MINUTE BREAK</b>  |              |
| <b>2:40 pm</b> | <b>Committee Report-Outs</b> <ul style="list-style-type: none"><li>• <b>Performance Outcomes:</b> Noel O'Neill, Chairperson</li><li>• <b>Patients' Rights:</b> Daphne Shaw, Chairperson</li><li>• <b>Executive:</b> Tony Vartan, Chairperson</li><li>• <b>Legislation and Public Policy:</b> Barbara Mitchell, Chairperson</li><li>• <b>Workforce and Employment:</b> Walter Shwe, Chairperson</li><li>• <b>Housing and Homelessness:</b> Deborah Starkey, Chairperson</li><li>• <b>Systems and Medicaid:</b> Uma Zykovsky, Chairperson</li><li>• <b>Children/Youth Workgroup:</b> Erin Franco</li><li>• <b>Reducing Disparities Workgroup:</b> Liz Oseguera</li><li>• <b>Substance Use Disorder Workgroup:</b> Javier Moreno</li></ul> |              |
| <b>3:30 pm</b> | <b>10-MINUTE BREAK</b>  |              |
| <b>3:40 pm</b> | <b>Department of Health Care Services Update</b><br><i>Paula Wilhelm, Deputy Director of Behavioral Health, CA Department of Health Care Services</i>   |              |
| <b>4:10 pm</b> | <b>Public Comment on DHCS Presentation</b>  |              |
| <b>4:15 pm</b> | <b>General Public Comment</b>   |              |

**4:30 pm      Recess**

**Public Comment:** Limited to a **3-minute maximum** to ensure all are heard.

Mentorship Forum for Council members, including Committee Chairpersons and Chair-Elects, will occur following Thursday's General Session in the same room. We respectfully ask those not participating to exit the meeting space to allow for Council business to occur.

**Friday, January 17, 2025**

**COUNCIL GENERAL SESSION**

**Room:** Fairway I & IV

**Conference Call:** (669) 900-6833 (Listen Only)

**Meeting ID:** 835 4781 4060 **Passcode:** 030067

- |                 |   |              |
|-----------------|---|--------------|
| <b>8:30 am</b>  | <b>Welcome Back &amp; Announcements</b><br><i>Tony Vartan, Chairperson</i>  |              |
| <b>8:35 am</b>  | <b>CBHPC 2023 Highlights and Accomplishments</b>  | <b>TAB L</b> |
| <b>8:45 am</b>  | <b>Older Adult Behavioral Health Overview</b><br><i>Susan DeMarois, Director, California Department of Aging</i>  | <b>TAB M</b> |
| <b>9:15 am</b>  | <b>Public Comment on Older Adult Presentation</b>   |              |
| <b>9:20 am</b>  | <b>Commission for Behavioral Health Update</b><br><i>Tom Orrock, Deputy Director of Operations</i>  |              |
| <b>10:00 am</b> | <b>Public Comment on Commission for Behavioral Health Update</b>  |              |
| <b>10:10 am</b> | <b>20-Minute Break</b>  |              |
| <b>10:30 am</b> | <b>San Diego County CARE ACT Implementation Update</b><br><i>Luke Bergmann, PhD, Director, Behavioral Health Services,<br/>County of San Diego Health &amp; Human Services Agency</i> | <b>TAB N</b> |
| <b>11:30 am</b> | <b>Public Comment on CARE ACT Presentation</b>  |              |
| <b>11:35 am</b> | <b>Commission for Behavioral Health Address to the Council</b><br><i>Al Rowlett, Vice Chair/Commissioner</i>  |              |
| <b>11:45 am</b> | <b>General Public Comment</b>   |              |
| <b>11:55 am</b> | <b>Closing Remarks</b><br><i>Tony Vartan, Chairperson</i>   |              |
| <b>12:00 pm</b> | <b>Adjourn</b>  |              |

**2025 Council Meeting Schedule**

April 15-18, 2025: [Lake Natoma Inn](#)

June 17-20, 2025: [DoubleTree Hotel Marina del Rey](#)

October 14-17, 2025: [Embassy Suites San Francisco Airport Waterfront](#)

**California Behavioral Health Planning Council  
General Session**

**Thursday, January 16, 2025**

**Agenda Item:** Election of 2025 Chairperson-Elect (VOTE) and Changing of the Officer

**Enclosures:** CBHPC Operating Policies and Procedures: SECTION 6

**Background/Description:**

The Council Chairperson is elected by Council Members for a two-year term. The Chairperson acts as the “President of the Planning Council” per section 6.1 of the California Behavioral Health Planning Council’s Operating Policies and Procedures.

Every two years, in alignment with the Changing of the Officers, the nominating committee selects a nominee. The nominating committee presents its proposed candidate. Additional nominations may be proposed by members of the Council. A vote on the Chair-Elect nomination will occur.

After the election of 2025 Chairperson Elect, there will be the “Changing of the Officer”. In January of 2023, Tony Vartan was elected as the Chairperson Elect. Outgoing Chairperson Deborah Starkey will pass the duties of Chairperson of the Council to Tony Vartan.

## CBHPC OPERATING POLICIES AND PROCEDURES

### 3.4 Use of a Proxy

A Planning Council member may use a proxy only if they have participated in a discussion and had to leave prior to the vote.

## 4. Requests from Members for Issues to be Placed on Agenda

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A Planning Council member may request that an issue be discussed during a Planning Council meeting through the following process:

- The member should consult with the Executive Officer prior to submitting a written request to place an item on the agenda
- The member must make a written request to the Executive Officer
- The member should provide background and any written material necessary to explain the issue

The Executive Officer will consult with the Officer Team of the Planning Council who will place the issue on the agenda of the full Planning Council or refer the issue to the Executive Committee or to one of the standing committees.

## 5. Frequency of Planning Council Meetings

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The full Planning Council meets quarterly. Additional meetings may be authorized by the Executive Committee if sufficient funds are available and there is an immediate need that cannot wait until the next quarterly meeting

The Planning Council's standing committees meet during each full Planning Council meeting if the agenda permits. Each committee may schedule monthly meetings in addition to the quarterly Planning Council meetings, when needed. Additional in-person meetings may be authorized by the Executive Officer, if sufficient funds are available.

The Executive Officer will establish a meeting schedule for each ad-hoc, workgroup or sub-committee on a case-by-case basis as the project dictates and as the budget permits.

## 6. Planning Council Officers

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The Planning Council has three officers: Chairperson, Chairperson-Elect, and Past Chairperson also known as the Officer Team.

# CBHPC OPERATING POLICIES AND PROCEDURES

## 6.1 Responsibility

### 6.1.1 Chairperson

The Chairperson is the President of the Planning Council. They have the general powers and duties of management usually invested in the office of the chairperson of a council, and has other powers and duties as prescribed by the Planning Council. They are the official spokesperson of the Planning Council. The Chairperson presides at all meetings of the Planning Council and the Executive Committee. [Attachment A](#) contains a job description for this position.

Per Section 5771.5 of the Welfare and Institutions Code, the Chairperson of the Council, with the concurrence of a majority of the members, shall appoint the Executive Officer of the California Behavioral Health Planning Council.

When the Executive Officer leaves state employment, the Chairperson shall arrange with Human Resources (HR) from the Department of Health Care Services (DHCS), the appointment of an interim Executive Officer for the Council while a selection process begins when the position will be vacant for more than 30 days. The Chairperson shall notify the Behavioral Health (BH) Deputy Director from the Department of Health Care Services (DHCS) of the temporary appointment.

The Chairperson of the Council is responsible for the recruitment and selection of the Executive Officer. The options available to the Council are outlined in the DHCS Policy and Procedures for the Executive Officer Recruitment. The Chairperson may select the most appropriate option. The Executive Committee will provide input on the selection process identified by the Chairperson and assist with the recruitment and selection of the Executive Officer as the recognized “congruence of the majority”.

The Chairperson shall formally notify both DHCS Human Resources and the BH Director of the appointment once the Executive Officer has been offered and accepted the position.

During the period of the interim Executive Officer’s term, and after the appointment of a permanent Executive Officer, the Chairperson, in conjunction with the Officer Team, shall provide direction to the Executive Officer. [Attachment B](#) contains the DHCS Policy and Procedures for the Executive Officer Recruitment.

### 6.1.2 Chairperson Elect

The Chairperson-Elect becomes the next Chairperson after the current Chairperson completes their term of office. The Chairperson-Elect performs the duties of the Chairperson in case of absence and performs additional duties as the Chairperson may designate.

### 6.1.3 Past-Chairperson

The Past-Chairperson is a member of the Executive Committee and performs additional duties as the Chairperson may designate.

## CBHPC OPERATING POLICIES AND PROCEDURES

### 6.2 Selection Criteria for Nominating the Chairperson-Elect

- a. The Chairperson-Elect nominee must meet the minimum qualifications in the job description contained in [Attachment A](#). The nominee must be able to meet the minimum qualifications in the Chairperson's job description in one year's time. The job description will contain both minimum and desirable qualifications for the office.
- b. A nominee must be willing to serve as an officer.
- c. It is recommended that a nominee have served as a chairperson of a committee for at least one year.
- d. The nominee should have been on the Council for at least one year and be active in the Planning Council with a good attendance record for Planning Council meetings and committee meetings.
- e. Consistent with the Planning Council's values, the Nominating Committee should consider including a direct consumer or family member in the slate of officers.
- f. In the fall, the Executive Officer will solicit volunteers to serve on the Nominating Committee.
- g. A Nominating Committee, appointed by the Officer Team, will nominate a Chairperson-Elect. The Nominating Committee shall consist of five members with one from each appointment category: direct consumer, family member, consumer-related advocate, professional/provider, and state department representative.
- h. The Nominating Committee will review the Operating Policies and Procedures, including the job description for the Chairperson, Council roster and list of prior Chairpersons to begin the discussion to identify potential nominees.
- i. Prior to the January meeting, the Chairperson of the Nominating Committee will approach identified Planning Council members and inquire if they would consider serving as an officer.

### 6.3 Election and Term

- j. During the January Planning Council meeting, the Nominating Committee will present its proposed Chairperson-Elect nominee. Additional nominations may be made from the floor at that time.
- k. Election of the Chairperson-Elect will occur at the opening of the January General Session. The newly elected officer will take office immediately after the election.

## CBHPC OPERATING POLICIES AND PROCEDURES

- I. The term of each office shall be no more than two years. A member may be nominated in the future for the same office.

### 7. Member Development/Mentorship Forum

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On Thursday afternoon of the quarterly face to face meeting, after both the committee meetings and General Session have occurred, there will be a Mentorship Forum open to all interested Council members. All Committee Chairpersons, Chairperson-elects and the Council Officers must attend.

The purpose of the Mentorship Forum is to provide development opportunities for members who are interested in becoming a chairperson of a committee and maybe eventually serving as Chairperson of the Council. Members can attend and ask questions, receive guidance on handling common facilitation situations and participate in discussions about topics for agendas, creating committee work plans and fulfilling statutory responsibilities while incorporating Council Vision, Mission and Guiding Principles. Roles and responsibilities of chairperson positions are discussed and materials may be shared.

### 8. Committees

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The Planning Council has an Executive Committee, Standing committees, and ad hoc committees or workgroups. The Executive Committee will review and evaluate the committee structure annually. The activities of the committees are based on the Council's mission, vision, guiding principles, and Welfare and Welfare and Institutions Codes.

#### 8.1 Executive Committee

The Executive Committee consists of the following members:

1. Chairperson
2. Chairperson-Elect
3. Past-Chairperson
4. Legislation Committee Chairperson and Chair-Elect
5. Workforce and Employment Committee Chairperson and Chair-Elect
6. Systems and Medicaid Committee Chairperson and Chair-Elect
7. Housing and Homelessness Committee Chairperson and Chair-Elect
8. Performance Outcomes Committee Chairperson and Chair-Elect
9. Patients' Rights Committee Chairperson and Chair-Elect

**TAB J**

**California Behavioral Health Planning Council  
General Session**

**Thursday, January 16, 2025**

**Agenda Item:** Acceptance of June 2024 Meeting Minutes

**Enclosures:** Draft June 2024 Meeting Minutes

**Background/Description:**

Attached are the draft June 2024 meeting minutes for member review.

**California Behavioral Health Planning Council (CBHPC)**  
**General Session Meeting Minutes**  
June 20-21, 2024  
Draft

**CBHPC Members Present Day 1:**

Amanda Andrews  
Susie Baker  
Karen Baylor  
John Black  
Stephanie Blake  
Jason L. Bradley (for Sarah Poss)  
Monica Caffey  
Dave Cortright  
Erin Franco  
Jessica Grove  
Steve Leoni\*  
Lynne Martin Del Campo  
Barbara Mitchell  
Catherine Moore  
Javier Moreno

Don Morrison  
Dale Mueller  
Jessica Ocean  
Noel O'Neill  
Elizabeth Oseguera  
Deborah Pitts  
Daphne Shaw  
Walter Shwe  
Maria Sierra  
Deborah Starkey  
Bill Stewart  
Arden Tucker  
Tony Vartan  
Susan Wilson\*  
Uma Zykovsky

\*=Remote Appearance

**CBHPC Members Absent**

Erika Cristo  
Veronica Kelley  
Marina Rangel  
Danielle Sena

Darlene Prettyman  
Karrie Sequeira  
Ali Vangrow

**Staff Present:** Jenny Bayardo, Naomi Ramirez, Justin Boese, Ashneek Nanua, Simon Vue

**Welcoming and Introductions**

Chairperson Deborah Starkey called the meeting to order. She welcomed Council Members and led self-introductions. A quorum was achieved with 30 of 37 Council Members present.

## **Approval of January Meeting Minutes (Action)**

Chairperson-Elect Tony Vartan facilitated the review of the January 2024 meeting minutes. The minutes were accepted as written with no edits.

## **San Bernardino Behavioral Health Services Overview**

Dr. Georgina Yoshioka, San Bernadino County Behavioral Health Director, shared her experience as a family member of individuals with behavioral health challenges. She introduced her Assistant Director Jennifer Alsina and Deputy Director Dr. Alyce Belford. Together they provided a brief overview of San Bernadino County's behavioral health services. They highlighted that in fiscal year 2022-23, their Department of Behavioral Health served approximately 43,639 unduplicated clients. They also highlighted that in fiscal year 2022-23 they served 14,716 adults with serious and persistent mental illness and children who have a serious emotional disturbance at their Community Mental Health Clinics. They have 6 community clinics, and all sites provide psychiatric and therapy services for adult and children.

Dr. Georgina shared about San Bernadino County's robust Hospital Aftercare Services, Children and Youth Continuum of Care, School Based Services, Transitional Age Youth (TAY) Programs, Adult Justice Involved Programs, Juvenile Justice Programs, Substance Use Disorder Services, Homeless and Supportive Housing Services, Clinic-Based Crisis Services, Field-Based Crisis Services, and Prevention and Early Intervention Services.

Dr. Georgina expressed her appreciation for the Mental Health Block Grant funds, which has contributed to funding for many programs and in some cases has fully funded programs. She highlighted their services paid for by the Mental Health Block Grant (MHBG) which include:

- First Episode Psychosis (FEP) Premier Program
- Juvenile Justice Community Reintegration
- Adult Continuing Care Program, Long Term Care
- Enhanced Board and Care Program
- Adult Forensic Program
- Housing Solutions Program
- Lakeside Special Care (Skilled Nursing Facility)
- Triage, Engagement, and Support Teams (TESTS)
- Placement After Stabilization
- Cedar House Residential Care
- Therapeutic Alliance Program

Dr. Georgina shared that the First Episode Psychosis (FEP) Premier Program serves consumers 18-30 years old experiencing first episode psychosis. This program served 8 clients in fiscal year 2022-23. She also reported that Cedar House Residential Care is a substance use residential care facility and the Therapeutic Alliance Program provides coordination with a contracted substance use residential treatment program to

addresses the needs of individuals with co-occurring substance use disorder and mental health challenges. These programs served 100 clients in fiscal year 2022-23.

### **Public Comment**

Denise El Amin stressed the importance of providing demographics in reports and when discussing the number of individuals served by programs. She also urged the presenters to include information about whether the jail populations are increasing or decreasing as a result of their programs.

Theresa Comstock, California Association of Local Behavioral Health Boards and Commissions (CALBHB/C) thanked the presenters for their presentation. She shared that she reviewed their data dashboard and applauded them for being a good example of a county collecting data and reporting it. She echoed the importance demographics and stated that she hopes to see a requirement in the Behavioral Health Services Act accountability measures.

Stacy Dalglish expressed support for Denise El Amin's comments.

Steve McNally stated that addressing self-stigma is the first step to eliminating stigma, so he is appreciative of the presenters for sharing their personal stories.

### **Break**

### **Committee Report-Outs**

**Performance Outcomes Committee:** Chairperson Susan Wilson reported that Samantha Spangler discussed her contract to analyze and present key findings from the 5 years of data collected in Part 1 of the Data Notebook. The final report is expected to be complete between April and June of 2025. Susan Wilson shared that the data from the 2023 Data Notebook on Stakeholder Engagement is being analyzed and the 2024 Data Notebook related to housing is being developed. The committee will meet in August to discuss the recommendations and Executive Summary for the 2023 Data Notebook, finalize the 2024 Data Notebook, and discuss revisions to the committee Charter.

**Patients' Rights Committee:** Chairperson Daphne Shaw reported that the Patients' Rights Committee were updated on Senate Bill 43 and Senate Bill 1238 from Deb Roth of Disability Rights California. The committee also discussed Assembly Bill 2154, Assembly Bill 2352, Senate Bill 402, and Senate Bill 1184 and recommended positions to the Legislation and Public Policy Committee. Daphne also stated that she provided an update on the issue of Patients' Right Advocacy ratios. She shared that a study is currently in process with Legislative Analyst's Office. The committee will monitor the study to discuss the outcomes.

**Executive Committee:** Deborah Starkey, Chairperson of the Council, reported that members were updated on the Council's expenditures, budget, and Council Member appointments. Deborah highlighted that the Council currently has the least number of vacancies they have had during her time on the Council. She shared that staff host tables at conferences to assist with filling vacancies. Deborah also informed members that Proposition 1 Ad Hoc committee has been developed to assist with quickly reviewing information related to Proposition 1. The ad hoc committee includes Council Members Susan Wilson, Javier Moreno, and Barbara Mitchell.

**Legislation and Public Policy Committee:** Chairperson Barbara Mitchell reported that Gail Gronert from the County Behavioral Health Directors Association of California (CBHDA) provided an update on the State's budget. Chad Costello from the California Association of Local Rehabilitation Agencies (CASRA) shared his member's perspective on the Behavioral Health Services Act. This was followed by a discussion of the committee. The committee took a position on 10 pieces of legislative. The committee is in support of Assembly Bill 1470, Senate Bill 997, and Senate Bill 1397. The committee also supports Assembly Bill 2479, if amended. The committee opposed AB 2154, Senate Bill 26, Senate Bill 402, and SB 1184. The committee opposes Assembly Bill 2352, unless amended. Lastly, the committee decided to watch Senate Bill 1043. Barbara Mitchell shared that Theresa Comstock from the California Association of Local Behavioral Health Boards and Commissions (CALBHB/C) provided an update on Senate Bill 1082. The bill is not moving forward this legislative cycle, however Theresa requested the Council's support in moving it forward during the next legislative session.

**Workforce and Employment Committee:** Walter Shwe shared that the Workforce and Employment Committee was on understanding the difference between Medi-Cal Peer Specialists, Community Health Workers, and Certified Wellness Coaches. The committee had presentations from the Department of Health Care Services and the Department of Health Care Access and Information (HCAI) to gain a better understanding of the different provider types. The presentation was followed by a panel discussion about the differences and overlap between the provider types. The panel included both State departments, the Director of Government Affairs for Quality & Behavioral Health for Local Health Plans of California, and the Director of Project Return Peer Support Network. Walter also reported that Council staff Ashneek Nanua provided an update on workforce budget cuts included in the May Revise.

**Housing and Homelessness Committee:** Chairperson Monica Caffey reported that Marcus Dillard, Chief of San Bernardino County Office of Homeless Services, provided an overview of the San Bernardino County Homeless Partnership's (SBCHP) work and initiatives to address homelessness in the County. The committee also heard from Nichole Fiore, Principal Associate from Abt Global, about their Project Roomkey Evaluation Final Report. The purpose of this report was to understand Project Roomkey's successes and challenges, and the experiences and outcomes of Project Roomkey participants. Monica also shared that committee members reviewed and updated the committee's 2023-2024 Workplan.

**Systems and Medicaid Committee:** Chairperson Uma Zykovsky reported that the committee had a presentation on the last California External Quality Review Organization annual report. The report provides a good overview of the Mental Health and Substance Use Disorder services provided in the state. This information is very useful to the committee as they think about statewide issues. Los Angeles County and Imperial County's presented their perspective of EQRO data report utilization, including challenges and successes. Staffing shortages were highlighted as a key challenge. The committee is developing input to submit on the California Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment (BH-CONNECT) waiver.

**Children/Youth Workgroup:** Council Staff Ashneek Nanua reported that the workgroup discussed their thoughts on the *Hiding in Plain Sight* documentary viewed at the April 2024 meeting. The group decided to host a screening of the film with a panel presentation in San Diego in January. The members will continue to meet to plan the details of the event.

**Reducing Disparities Workgroup:** Workgroup leader Uma Zykovsky reported that Council Member Monica Caffey talked about her work with the Black Health Equity Advisory Group (BHEAG). The group also discussed the presentation they received at the April 2024 meeting from the Department of Public Health Office of Health Equity and brainstormed ways to take actions. Uma also shared that the workgroup developed questions focused on bringing attention to statewide and local efforts that highlight reducing inequities and disparities in behavioral health care to provide all Council presenters. The workgroup is currently restricting some of the questions and is hoping to have them approved by the Executive Committee over the course of the next two quarterly meetings so they can start being provided to presenters at the beginning of 2025.

**Substance Use Disorder Workgroup:** Workgroup leader Javier Moreno reported that the workgroup discussed some of the challenges in accessing substance use disorder services. These included barriers to accessing medication assisted treatment, lack of resources, and provider shortages. This conversation was followed by a discussion on strategies to connect individuals to treatment and support. The group also had a presentation from Tom Orrock from the Mental Health Services Oversight and Accountability Commission about a pilot program they are working on to expand the number of substance use disorder providers.

## **Break**

## **Behavioral Health Transformation Discussion**

Stephanie Welch, MSW, Deputy Secretary of Behavioral Health, California Health and Human Services Agency provided an overview of the Behavioral Health Services Act and the Infrastructure Bond. The presentation focused on the funding allocation changes, some of the elements around enhanced accountability, stakeholder

engagement, and how the Planning Council can assist with better community engagement opportunities.

Stephanie reported that the Behavioral Health Infrastructure Bond Act is the \$6.4 billion general obligation bond. The funding under this Act will be administered by the Department of Health Care Services and the Department of Housing and Community Development. Stephanie stated \$4.4 billion goes to the Department of Health Care Services for treatment sites that focus on expansion of residential services. Of those funds, \$1.5 billion is for counties and cities and there's a \$30 million set aside for tribal communities. Stephanie explained that this funding is essentially a continuation of funding for the current Behavioral Health Continuum Infrastructure Program (BCHIP) program. She then explained that BCHIP is a competitive grant program and a request for applications is on schedule to be released in July. Funds will start to be awarded in early 2025.

Stephanie reported that \$1.972 billion of the funding under the Act is for Supportive Housing. These funds will be managed by the Department of Housing and Community Development (HCD), modeled after Project Homekey grants for housing with supportive services. The funding is intended for housing for individuals with extremely low income and behavioral health challenges who are experiencing or at risk of homelessness.

Stephanie provided an overview of the Behavioral Health Services Act funding allocations. She highlighted that 90% of the total funds are allocated to the Counties according to the following breakdown: 30% for housing interventions, 35% for Full Service Partnerships, and 35% for Behavioral Health Services and Supports (BHSS). She clarified that the Behavioral Health Services and Supports portion includes outreach and engagement as allowable service and that at least 51% of the funds in this category shall be used for Early Intervention. Stephanie then explained that the remaining 10% of the total funds is allocated for State level funding as follows: 4% for Statewide Population-Based Prevention (CDPH), 3% for Statewide Workforce (HCAI), and the remaining 3% for State Administration. She highlighted that the State Administration funding is reduced from 5% obligating the state to be more efficient.

Stephanie highlighted the Council's role in several areas of the Behavioral Health Services Act as follows:

- County BH Advisory Boards are required to review and comment on the county's performance outcome data and communicate its findings to the Council.
- The Department of Health Care Services in consultation with the Council, among others, is to develop reporting requirements that each county Behavioral Health system shall comply with.
- The Department of Health Care Services and the California Health and Human Services Agency, in consultation with the Council, among others, shall develop uniform definitions and formats for statewide, nonduplicative, client-based information system.
- County Behavioral Health systems, in consultation with the Council, among others, shall provide reports and data to meet the information needs of the state.

- Members of the Behavioral Health Services Oversight and Accountability Commission are members of the Council.
- The Behavioral Health Services Oversight and Accountability Commission shall work in collaboration with the Department of Health Care Services and the Council, and in consultation with County Behavioral Health Directors Association, to write a report that includes recommendations for improving and standardizing practices for the Behavioral Health Services Act.

Stephanie urged members to think about how the Council can assist throughout the planning process if the Council has specific committees that are best suited to help.

### **Public Comment**

Denise El Amin stated that she noticed there is not representation from Santa Barbara County on the Council. She asked questions about the length of Council member's appointment terms and urged councils, boards, and oversight committees to ensure there is a good balance of individuals represented on their bodies.

Steve McNally thanked Stephanie for her efforts and shared the importance of a true community engagement process.

### **Recess**

## **CBHPC Members Present Day 2:**

Amanda Andrews  
Susie Baker  
Karen Baylor  
John Black  
Stephanie Blake  
Jason L. Bradley (for Sarah Poss)  
Monica Caffey  
Dave Cortright  
Erin Franco  
Jessica Grove  
Ian Kemmer (for Veronica Kelley)  
Steve Leoni\*  
Lynne Martin Del Campo  
Barbara Mitchell  
Catherine Moore  
Javier Moreno\*

Don Morrison  
Dale Mueller  
Jessica Ocean  
Noel O'Neill  
Elizabeth Oseguera  
Deborah Pitts  
Karrie Sequeira  
Daphne Shaw  
Walter Shwe  
Maria Sierra  
Deborah Starkey  
Bill Stewart  
Arden Tucker  
Tony Vartan  
Susan Wilson\*  
Uma Zykovsky

\*=Remote Appearance

## **CBHPC Members Absent**

Erika Cristo  
Marina Rangel  
Danielle Sena

Darlene Prettyman  
Ali Vangrow

**Staff Present:** Jenny Bayardo, Naomi Ramirez, Justin Boese, Ashneek Nanua, Simon Vue

## **Welcome Back**

Chairperson Deborah Starkey called the meeting to order. Deborah welcomed Council Members back and led self-introductions. A quorum was achieved with 32 of 37 Council Members present.

## **Mental Health Services Oversight and Accountability Commission Update**

Tom Orrock, Deputy Director of Operations, Mental Health Services Oversight and Accountability Commission provided an overview of the Commission's current work around Children and Youth. Tom shared that the Commission has put in a significant amount of effort to start to build a continuum of care for children. They have done this through the Mental Health Student Services Act, the Alcove Youth Drop-in Center program, 0-5 Wellness, and the Early Psychosis Intervention Program to reduce the duration of untreated psychosis, which is critical for the state of California. Additionally,

Tom Orrock reported that the Commission has \$670,000 per year available for 9 specific populations. One of the populations is K12 students. The K12 Advocacy Project is the Commission's newest advocacy project which will enable young people to advocate for other young people. This project will launch through 3 to 4 statewide conferences over the next couple of years. The funding for this project is ongoing and will be distributed annually to support organizations who can help other youth get to the State Capitol to talk to their legislator or state senator and to the Board of Supervisors to talk to local decision makers to ensure that youth voice is current. Tom highlighted that this project provides an opportunity for collaboration between the Council and the Mental Health Services Oversight and Accountability Commission.

### **Senate Bill 43 Implementation Presentation & Discussion**

Tony Vartan, Stanislaus County Behavioral Health Director and Dr. Gary Tsai, Director of Substance Use Prevention and Control for Los Angeles provided an overview of the Lanterman-Petris-Short (LPS) Act and Senate Bill 43. Tony Vartan and Gary Tsai shared that they co-chair a statewide work group that assists all behavioral health directors and medical directors work together to figure out the implementation of Senate Bill 43. The group works together to ensure there is consistency and standardization as much as possible across the various counties.

Dr. Tsai stated it is important to understand the Lanterman-Petris-Short (LPS) Act to understand Senate Bill 43. LPS was first enacted in 1967 due to a widespread use of institutionalization prior to the 1960s and a long history of abuse and patients' rights concerns in state hospitals across the country. The LPS established due process to avoid the widespread inappropriate application of involuntary psychiatric care. Dr. Tsai explained the difference between a 5150 involuntary hold, 5250 involuntary hold, temporary conservatorship, and a permanent LPS conservatorship.

Senate Bill 43 was signed into law by Governor Newsom in Oct 2023 and is the most significant reform to the LPS Act since it was enacted in 1967. This legislation significantly expands California's criteria for involuntary detention and conservatorship for adults by creating a new set of eligibility criteria that are based solely on a person's mental health disorder or "severe" substance use disorder (SUD), if that disorder will result in someone being unable to provide for their basic needs of food, clothing, shelter, adding personal safety or necessary medical care. Dr. Tsai highlighted that Senate Bill 43 does not apply to children and youth.

Tony Vartan and Dr. Tsai highlighted potential implications of Senate Bill 43, which include:

- More 5150s overall and longer-term involuntary holds (5250s, conservatorships)
- LPS capacity constraints
  - Currently, there are no locked facility types for the treatment of SUD only diagnoses.
  - Currently, there is no evidence based clinical model of care for involuntary SUD treatment.

- Few designated facilities have comprehensive integrated medical care.
- Fidelity challenges
  - Determinations of grave disability based on “severe” SUD diagnosis and necessary medical care.
  - Most LPS designated people who place holds are law enforcement (and not clinicians).

## **Public Comment about Senate Bill 43 Implementation**

Mike Phillips expressed gratitude for the presentation and shared that his office is tasked with providing all trainings for the law enforcement providers, community, et cetera. He expressed concern that the new definition for gravely disabled would apply to minors after the first 72 hours and it will be used in ways it was not intended to be used which is an infringement on civil rights.

Denise El Amin expressed concern about patients’ rights, equity violations, and the demographic violations that will continue to happen because of SB 43.

Steve McNally expressed appreciation for the presentation and for the data Dr. Tsai provides in Los Angeles.

## **Break**

## **Department of Health Care Services Update**

Paula Wilhelm, Department of Health Care Services, Interim Deputy Director of Behavioral Health shared that she will transition from the interim Deputy Director of Behavioral Health into the permanent role in one week. Paula’s presentation focused on the Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment (BH-CONNECT) Demonstration amendment the Department is submitting.

In October 2023, the Department applied to the Centers for Medicare and Medicaid Services (CMS) for a new Section 1115 Demonstration to increase access to mental health services for Medi-Cal members living with significant behavioral health needs. BH-CONNECT takes advantage of CMS’s 2018 guidance that permits states to use 1115 waivers to receive federal matching funds for short-term care for members with a serious mental illness in Institutions for Mental Diseases (IMDs) if states establish a robust continuum of community-based care. Paula highlighted the BH-CONNECT will complement Behavioral Health Transformation and other ongoing behavioral health initiatives.

Through ongoing work with stakeholders, the Department identified additional gaps in the continuum of care for Medi-Cal members with significant behavioral health conditions who have long-term stays in institutions or need enhanced recovery-oriented care. As a result, the Department is proposing a BH-CONNECT amendment to be submitted in August 2024. As part of the amendment, DHCS is proposing to provide

community transition in-reach services to support individuals with significant behavioral health conditions with long-term stays who reside in institutions. The services provided will assist individuals with significant behavioral health conditions and specified risk factors in returning to the community, and/or room and board in enriched residential settings for up to six months.

Paula informed attendees that the draft BH-CONNECT Addendum application is available for public review with an opportunity to provide public comment period from June 14, 2024, through July 14, 2024.

### **Public Comment about DHCS Update**

Steve McNally thanked Paula for her presentation and suggested that the Department of Healthcare Services look at the open data portal and consider creating county level reporting.

Barbara Wilson from Los Angeles County expressed concerns about not hearing any conversation about protecting people that live in congregate settings. She is happy to hear the Department is working to broaden funding for various types of residential community care facilities but urges DHCS to also think about what consumer protections will exist.

Aaron Bailey asked Paula about the best way to bring up and engage on issues with outpatient substance use disorder (SUD) licensing certification.

Theresa Comstock expressed appreciation for all the work the Department has done on BH-Connect and the information provided during the presentation. Theresa then shared that her association has been advocating for increasing the operating revenue for adult residential facilities and residential care facilities for the elderly with the ability to break the Medicare or medical funding. She asked that the Department and the Council on this topic.

### **2024 Conference Sharing**

Walter Shwe reported on the California Association of Social Rehabilitation Agencies Spring Conference he attended in Sacramento representing the Workforce and Education committee. The main speaker was Bruce Anderson, Executive Director of Core Gift Institute. Walter found the presenter and workshops very interesting.

### **Public Comment**

Denise El Amin requested that the Council consider her for appointment because there is currently no representation from Santa Barbara County.

### **Closing Remarks & Announcements**

Deborah Starkey thanked Council staff for all their work preparing for the meetings and arranging for members arrival. She announced the next meeting will be in Milpitas in October.

### **Adjourn**

Chairperson Deborah Starkey adjourned the meeting at 11:30 a.m.

## California Behavioral Health Planning Council General Session

Thursday, January 16, 2025

**Agenda Item:** Local Behavioral Health Services Overview

**Enclosures:** None

### **Background/Description:**

Leticia Plancarte-García, Behavioral Health Director of Imperial County Behavioral Health Services, will provide a general overview of Imperial County's behavioral health services. The California Behavioral Health Planning Council is mandated in Welfare and Institutions Code 5772 to review and evaluate the effectiveness of California's public behavioral health services.

Behavioral Health directors from areas surrounding Council meetings are invited to present to the Council's full membership.

### **Imperial County Behavioral Health Services**

#### *Mission Statement:*

Imperial County Behavioral Health Services is dedicated to empowering individuals, families, and the community to improve their health and wellness by providing education, preventative care, and quality treatment.

□

#### *Vision:*

To provide inclusive, equitable and exceptional community-based mental health and substance use treatment.

### **Presenter Bio:**

Leticia Plancarte-Garcia has been with Imperial County Behavioral Health Services (ICBHS) since 1992, progressing through roles such as Mental Health Rehabilitation Specialist, Program Supervisor, Behavioral Health Manager, Deputy Director, Assistant Director, and now Director.



Throughout her career, Ms. Plancarte-Garcia has remained dedicated to improving mental health services by implementing innovative programs and expanding care for individuals of all ages. Her leadership has strengthened behavioral health initiatives and enhanced access to critical services in the community.

She holds a Bachelor's Degree in Criminal Justice Administration and a Master's Degree in Social Work from San Diego State University – Callexico Campus, as well as a Master's Degree in Public Administration from National University.

Guided by her passion to improve the well-being of her community, Ms. Plancarte-Garcia remains dedicated to fostering a supportive, inclusive, and compassionate environment while advancing the mission of ICBHS.

**California Behavioral Health Planning Council  
General Session**

**Friday, January 17, 2025**

**Agenda Item:** CBHPC 2023 Highlights and Accomplishments

**Enclosures:** [Council Priorities Documents](#)

[Council Member Representation in External Groups](#)

**Background/Description:**

Executive Officer Jenny Bayardo will present the highlights and accomplishments of the California Behavioral Health Planning Council for the 2024 calendar year.

Included in the presentation are updated priorities documents and a list of external groups where Council Members represent the California Behavioral Health Planning Council's priorities and positions.

**California Behavioral Health Planning Council  
General Session**

**Friday, January 17, 2025**

**Agenda Item:** Older Adult Behavioral Health Overview

**Enclosures:** None

**Background/Description:**

Susan DeMarois, Director of the California Department of Aging will provide an overview of the Department's services and supports for older adults with behavioral health needs and the potential impacts of the passage of Proposition 1. In March 2024 California voters passed Proposition 1, which is intended to modernize the state's behavioral health system. Some of the changes included in the initiative are the expansion of the use of Mental Health Services Act to include Substance Use Disorder (SUD) treatment; updates to the categorical funding buckets; and a requirement to spend 30 percent of Behavioral Health Services Act (BHSA) funds on housing services.

**Presenter Biography:**



Susan DeMarois was appointed by Governor Gavin Newsom to serve as Director of the California Department of Aging effective November 1, 2021. As Director, Ms. DeMarois is committed to stakeholder engagement; equity and inclusion; and system transformation to prepare our state for the year 2030 when one in four Californians will be aged 60 or older. Prior to joining CDA, Director DeMarois led public policy and advocacy for the national Alzheimer's Association in California, serving as the nonprofit organization's registered lobbyist in Sacramento where she advocated for legislative, budget, and regulatory changes at the state capitol. The

organization led the effort to enact the first dementia early detection initiative in the nation focused on the Medicaid population: SB 48 (Limón) signed into law by Governor Newsom. Ms. DeMarois served as an appointee to Governor Newsom's Alzheimer's Prevention and Preparedness Task Force, chaired by former First Lady Maria Shriver,

in addition to the Master Plan for Aging Stakeholder Advisory Committee, a workgroup established by Executive Order. In addition, she represented the Alzheimer's Association on the CalHHS Agency Secretary's Alzheimer's Disease and Related Disorders Advisory Committee. Before working for the Alzheimer's Association, Ms. DeMarois led government and community relations for the UC Davis Health System where she gained deep health policy and clinical workforce experience. Early in her career, she worked for LeadingAge California, the professional trade association representing not-for-profit housing, residential care and skilled nursing providers. A graduate of CSU Chico, Director DeMarois started her career working for the U.S. Congress and California State Assembly. She is a proud mom to two adult daughters, and draws inspiration for her work from her own mom's experience with dementia.

## California Behavioral Health Planning Council General Session

Friday, January 17, 2025

**Agenda Item:** San Diego County CARE ACT Implementation Update

**Enclosures:** [CARE Act Planning Resources – Cohort 1 \\$26 Million Allocation](#)

[CARE Act Planning Resources – All Counties \\$31 Million Allocation](#)

[CARE Act Process Flow Overview](#)

### **Background/Description:**

The Council is tracking the implementation of the Community Assistance, *Recovery*, and Empowerment (CARE) Act in order to provide timely input as implementation occurs. The Patient's Rights Committee is updated quarterly on CARE. The full Council received an update June of 2023 from the Health and Human Services Agency and Cohort 1 County representatives from Orange County and Stanislaus County. The full Council will be updated again as we enter the second phase of implementation.

San Diego County was one of the Cohort 1 counties in the implementation of CARE. Behavioral Health Director Luke Bergmann, Ph.D and his team will present on their counties activities.

### **Presenter Biography:**



Luke Bergmann, Ph.D, is the Director of Behavioral Health Services for the County of San Diego, Health and Human Services Agency. Prior to this position, Dr. Bergmann worked for 9 years in New York City. He most recently served as Assistant Vice President over Behavioral Health at NYC Health + Hospitals, the nation's largest public hospital system and before that, as Director of the Office of Program and Policy in the Bureau of Alcohol and Drugs at the NYC Department of Health. Dr. Bergmann has also held a variety of academic research and faculty positions, including at Oregon Health and Science

University, The University of Michigan and the City University of New York. Dr. Bergmann was trained at the University of Michigan, where he earned a Ph.D in Social Work and Cultural Anthropology. He completed post-doctoral fellowships at UC San Francisco's Institute for Health Policy and UC Berkeley's School of Public Health.

Additional Resources:

[CARE Act Celebrates Graduation in San Diego](#) (Video)