



California Behavioral Health Planning Council

ADVOCACY • EVALUATION • INCLUSION

CHAIRPERSON
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MS 2706

December 9, 2024

Department of Health Care Services
Director's Office
Attn: Tyler Sadwith
P.O. Box 997413, MS 0000
Sacramento, California 95899-7413

RE: BH-CONNECT Addendum Community Transition In-Reach Teams

Dear Mr. Sadwith:

The California Behavioral Health Planning Council (CBHPC) strongly recommends maintaining Occupational Therapists (OTs) as a required component of the Community Transition In-Reach teams, as originally specified in the Behavioral Health Community-Based Network of Equitable Care and Treatment (BH-CONNECT) Section 1115 Addendum Application. While we acknowledge concerns about capacity constraints and workforce shortages, we believe making OTs as optional providers on these in-reach teams could significantly diminish the quality and efficacy of these vital services which are crucial for the wellbeing of individuals and communities across the state. Moreover, if OTs are labeled as optional rather than required, there is a high likelihood that they will not be selected for the in-reach teams at all, further exacerbating the issue.

CBHPC has long advocated for the [inclusion of OTs](#) as licensed mental health professionals (LMHP) in California's Specialty Mental Health (SMH) Medi-Cal Services and as a Licensed Practitioner of the Healing Arts (LPHA) in the Drug Medi-Cal Organized Delivery System (DMC-ODS).

Occupational Therapists play a valuable role in providing community-based services. Their education equips them to support psychological, cognitive, and physical health and wellness through rehabilitation, habilitation, and recovery-oriented approaches. OTs engage individuals in occupations that impact their physical and mental wellbeing, health, and quality of life. Every Occupational Therapy curriculum and fieldwork placement incorporates mental health training, enabling OTs to implement therapeutic interventions across various community settings including work, education, skills training, health and wellness, and cognitive



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remediation and adaptation. This unique skill set is essential for facilitating seamless transitions and promoting long-term success as clients reintegrate into their communities.

To address the concerns regarding workforce capacity, we propose the following recommendations:

- Establish a collaborative partnership with the Occupational Therapy Association of California to bolster recruitment efforts and identify qualified OTs interested in joining these teams.
- Leverage the resources and initiatives of the Department of Health Care Access and Information (HCAI) for workforce development to expand capacity, mirroring successful efforts in other healthcare professions where capacity has also been a pressing concern.
- County behavioral health departments first attempt to recruit OTs for the Community Transition In-Reach Teams. If they are unable to recruit OTs in good faith, the county may request a waiver for the requirement until the OT may be recruited to the team.

Given these considerations, we respectfully urge DHCS to maintain OTs as required members within these in-reach teams. Their expertise is integral to the success of the program.

CBHPC thanks DHCS again for the opportunity to provide feedback on the BH-CONNECT Addendum and welcomes further discussion of our thoughts and concerns at your convenience.

If you have any questions regarding this letter, please contact our Executive Officer, Jenny Bayardo, at (916) 750-3778 or Jenny.Bayardo@cbhpc.dhcs.ca.gov.

Sincerely,

Deborah Starkey
Chairperson



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CC: Paula Wilhelm, Deputy Director of Behavioral Health, DHCS
Erika Cristo, Assistant Deputy Director of Behavioral Health, DHCS
Ivan Bhardwaj, Chief, Medi-Cal Behavioral Health Policy Division,
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