

Mental Health Services Act Plan of Correction

1.	County/City:	Alpine/Markleeville
2.	POC Submitted for:	Alpine County Behavioral Health
3.	Date of Audit/Performance Review	July 15, 2025
4.	Name of Preparer:	
5.	Preparer Contact Email:	
6.	Preparer Contact Telephone:	

#	Finding #	Finding	Recommendation	Action Taken to Correct Finding (Identify Timeline / Evidence of Correction)
7.	Finding # 1	Alpine County did not include a narrative analysis of the mental health needs of unserved, underserved/inappropriately served, and fully served county residents who qualify for Mental Health Service Act (MHSA) service in the adopted Fiscal Year (FY) 2023-26 Three-Year Program and Expenditure Plan (Plan). (California Code of Regulations, title 9, sections 3650(a)(1)).	To correct this Finding, Alpine County does not need to amend the Three-Year Program and Expenditure Plan (Plan). In the Amended PR Report that accompanies this letter, DHCS recommends that an appropriate corrective action is for Alpine County to provide a narrative analysis for the current fiscal year (FY 2025-26) that focuses on the mental health needs of unserved, underserved/inappropriately served, and fully served county residents who qualify for MHSA	According to the most recent data, Alpine County has a total population of 1,098 residents with most being concentrated in the eastern part of the county. The two main communities in eastern Alpine County are Markleeville, population 178, and the Washoe Tribal community of Hung-a-lel-ti, population 268 (census data 2007). Diamond Valley Elementary school serves children from Kindergarten through 8 th grade and is located in Markleeville. The total

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			services per the cited authority.	enrollment for FY 2025-26 is 60 students, 53.3% of which identify as Indigenous children (Washoe or other tribes), 28.3% identify as Caucasian, 11.7% identify as Hispanic or Latino, 1.7% identify as African American, and 1.7% identify as Filipino. According to the 2020 census, the median income for Alpine County was \$110, 781 and the per capita average was \$53, 247. According to the DHCS data for June of 2025, Alpine County had 323 Medi-Cal beneficiaries. Alpine County Behavioral Health currently serves 19 beneficiaries. Because of the small number of beneficiaries, we cannot identify specific numbers enrolled as SUD clients, numbers enrolled in FSP, numbers who are medications management only, and numbers enrolled as mental health clients. Alpine County serves all clients,

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				not just individuals who meet medical necessity criteria for specialty mental health services (SMHS). We have one full time clinician licensed as a substance use disorders counselor and as an Associate Professional Clinical Counselor (APCC). Most who meet medical necessity criteria for SMHS receive comprehensive services including access to prevention programs which are intended to mitigate risk factors for increased symptoms including depression, anxiety, increased substance use, and psychotic episodes. At our weekly Create the Good lunches, we provide classes and programs for wellness such as nutrition for optimal recovery, online yoga classes, in-person yoga classes, access to water exercises at the local pool, online movement and wellness classes, traditional healing groups such

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				as beading, traditional story-telling, fly-tying classes, suicide awareness and prevention, and trauma-healing presentations. These programs are held at the Hung-a-lel-ti community firehouse and at Alpine County Behavioral Health and are intended to serve the unserved and underserved community members, those at risk for isolation and loneliness due to the remoteness of our county, and indigenous community members who have experienced trans-generational trauma as the result of colonization and genocide. Alpine County's MHSA community services and supports programming encompasses wellness programs in Bear Valley which on the western side of the county and includes Create the Good dinners where presentations are

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				given by local agencies such as Suicide Prevention Network, Live Violence Free, the Bear Valley Parents group, and law enforcement. CSS funds a community garden for kids and families and the fix-a-bike program to encourage community members to socialize and reduce isolation. Alpine County residents report that primary mental health challenges are related to historical and present-day trauma for indigenous community members, compounded by COVID-related trauma and a massive wildfire that occurred in that same time. The Tamarack fire of 2021 destroyed over 68,000 acres and required the evacuation of 800 community members in and around Markleeville. Many of our community members are over the age of 65 and

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				experience isolation because of the disintegration of social groups and events post-COVID and post-wildfire. Our MHSA-funded prevention programs and services using CSS funding are intended to create new opportunities for socializing and preventing depression, substance use disorders, and suicidal ideation. We promote community involvement in our Behavioral Health Advisory Board meetings, inter-agency meetings and health and wellness events to ensure we hear from our community members and consumers as to emergent needs and to get feedback on whether our services are meeting demonstrated needs. It is very difficult to engage people and requires consistent invitations and utilizing opportunities such as Create the

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				Good to invite participation.
8.	Finding # 2	Alpine County did not provide an estimate of the number of clients in each age group (children, transitional age youth (TAY), adults, and older adults) to be served in the Full-Service Partnership (FSP) category for each fiscal year of the adopted FY 2023-26 Plan. (Cal. Code Regs., tit. 9, § 3650(a)(3)).	DHCS amended the PR Report to recommend correcting this Finding by providing the estimated number of clients, in each age group, to be served in the FSP category for FY 2025-26.	Narrative: Alpine County is seeking a contract with Sierra Child and Family Services to expand Wellness Center services to the Hung-a-lel-ti tribal community in FY2026. Sierra Child and Family Services is currently funded by a state educational grant to operate the wellness center at the Diamond Valley School in Markleeville. We anticipate serving more children and families in our FSP program when we can execute the contract. Estimated number of children to be served in FSP program in FY 2025-26 – 2 Estimated number of Transition Age Youth Estimated to be served in FSP program in FY

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				2025-26 – 1 Estimated number of adults to be served in FSP program in FY 2025-26 – 5 Estimated number of older adults to be served in FSP program in FY 2025-26 - 3
9.	Finding # 3	Alpine County did not indicate the number of children, TAY, adults and older adults to be served and did not provide the cost per person for Prevention and Early Intervention (PEI) in the adopted FY 2023-26 Plan. Specifically, the county only provided an estimated cost per person for FY 2023-24. (Welfare and Institution Code section 5847(e)).	DHCS is seeking the estimated number of children, TAY, adults, and older adults who will be served in the PEI programs that offer direct services to individuals and groups for each fiscal year. Additionally, DHCS seeks the cost per person for these programs. The county was able to provide the estimated cost per person for FY 2023-24. However, Alpine did not provide estimates for FY 2024-25 or FY 2025-26. Furthermore, the estimated	09.15.25 – MHP response: The finding and recommendation is for estimates on clients participating in direct services under the PEI program. The definition of direct services means a time-limited structured group focused on prevention and early intervention or individual services such as EPSDT in a school setting or at a wellness center which Alpine County has not done. We have events funded by MHSA PEI such as Create the Good and other

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			number of clients to be served was not identified by age groups. DHCS amended the PR Report to recommend that an appropriate corrective action would be to specify the number of clients to be served by age group and to provide the estimated cost per person to be served for FY 2025-26, as per the cited authority. For example, the county may leverage data from the previous year, including the number of clients they served by age group and the costs per person that was expended to estimate what the next year's numbers would be. If there were a total of 50 individuals attending PEI programs with direct services the previous year and the county estimated that they would not have any new clients, the estimate for the future year would be 50 clients. If the 50	events where prevention of mental illness, suicide, and substance are presented as topics. Alpine County has also used PEI funding in its suicide prevention programming for trainings such as SafeTalk and ASIST that are open to anyone in Alpine County to attend. Participants are not necessarily clients or at risk for mental illness or SUD; homelessness, or worsening mental health symptoms. If DHCS considers events such as these to be "direct services," then I can provide estimates. PEI Estimates for FY 2025-26 In FY 2024-25, Foundations of Wellness program total cost was \$91,530. There were 432 participants Cost per person = \$182.33

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			clients in the previous year were broken down by the age group (i.e., 5 children, 25 TAY, 15 adults and 5 older adults) and there was no anticipated change in the number of attendees, then the future number of attendees per age group would be the same. If there was no expected change in the number of attendees, there may be no expected change in cost per person. To determine cost per person, the county would need to know the previous year's expenditures for PEI programs with direct services.	In FY 2025-26, MHP is expanding its prevention programming in Foundations of Wellness which includes suicide awareness and prevention. Estimated total cost is \$120,000, estimated number of participants = 500 \$240 per person
10.	Finding # 4	Alpine County did not explain for each PEI, Access and Linkage to Treatment Program, how individuals, and as applicable, their parents, caregiver, or other family members will be linked to county mental health services, a primary care provider, or other	DHCS does not require Alpine County to amend its Plan. Rather, DHCS requires the county to come into compliance for FY 2025-26. DHCS amended the PR Report to recommend that an appropriate corrective action is	09.15.25 – MHP response In its BHSA Integrated Service Plan, MHP will describe Access and Linkage for clients and family members to primary care providers, traditional healing practices, and other services to support recovery and mental

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		mental health treatment in the adopted Plan; and how the Program will follow up with the referral to support engagement in treatment in the adopted FY 2023-26 Plan. (Ca. Code Regs., tit. 9, §§ 3755(h)(4), 3755(h)(5)).	to provide P&Ps or other documentation demonstrating how the county meets the requirements of the cited Alpine County Page 6 August 27, 2025 authority in the Finding. Alternatively, Alpine County could acknowledge that this information was not presented in the past and, describe the county's approach moving forward to fulfill this regulation for each Access and Linkage to Treatment program for FY 2025-26. If there are no Access and Linkage to Treatment programs planned for FY 2025-26 or if these programs will terminate with the transition to BHSA, the county should specify this information in their CAP.	health. At every event, MHP currently offers access and linkage to eligibility workers for clients who need Medi-Cal by holding Medi-Cal sign-up events. MHP provides access and linkage with suicide awareness and prevention services, domestic violence education and prevention services, child-care resources, parenting classes; linkage to adult education resources, yoga, water exercise classes, and creative expression groups

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11.	Finding # 5	The County must provide evidence of compliance of either the Annual PEI report or the Three-Year PEI Evaluation report for FY 2023-24. Reports should be clearly labeled, indicating what years are being reported. DHCS recommends the county submit the report and include a cover page for the Annual PEI report or Three-Year PEI Report with the title Annual PEI Report or Three-Year PEI Evaluation Report FY XXXX to XXXX Note: The Annual PEI Report is not due in years in which a Three-Year Prevention and Early intervention Evaluation Report is due.	There are three distinct Prevention and Early Intervention (PEI) reporting requirements for MHSA: 1. PEI Component of the adopted Plan and Update (Cal. Code Regs., tit. 9, § 3755) 2. Annual PEI report – submitted to MHSAOAC (Cal. Code Regs., tit. 9, § 3560.010) 3. Three-year PEI Evaluation report - submitted to MHSAOAC (Cal. Code Regs., tit. 9, § 3560.020) In 2018 there were new requirements to complete an Annual PEI report and Three-Year Prevention and Early Intervention Evaluation report which are to be submitted to MHSAOAC. These reports may also be included in the Annual Update or the Plan but must be	09/15/25 MHP response: Please see the 2025-26 MHSA Annual Update submitted to DHCS MOVEit portal into the following folder: /DHCS-MHMPPOB/MHSA Documents/Alpine/Additional Documents

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			a separate addendum. These reports are not intended to replace the PEI components in the Plan. As described in the Amended PR Report, an appropriate corrective action is to provide the most recent Annual PEI report or 3-Yr PEI Evaluation report that was Alpine County submitted to the Behavioral Health Services Oversight and Accountability Commission (BHSOAC), formerly MHSOAC.	

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Instructions: Complete the MHSA Plan of Correction (POC) to address Findings from the Fiscal Audit Report or Performance Review Report.

Row 1: Enter County/City name.

Row 2: Select from the drop down menu if this POC is submitted in response to a Fiscal Audit or a Performance Review.

Row 3: Enter the date that the Fiscal Audit or Performance Review was conducted.

Row 4: Enter the name of the person who prepared the Plan of Correction or is responsible for responding to inquiries about the Plan of Correction.

Row 5: Enter the contact email address of the person who prepared the Plan of Correction or is responsible for responding to inquiries about the Plan of Correction.

Row 6: Enter the contact telephone number of the person who prepared the Plan of Correction or is responsible for responding to inquiries about the Plan of Correction.

Rows 7-28, Column A: Enter the number of the specific Finding from the Fiscal Audit Report or Performance Review Report.

Rows 7-28, Column B: Enter the specific Finding from the Fiscal Audit Report or Performance Review Report.

Rows 7-28, Column C: Enter the specific recommendation from the Fiscal Audit Report or Performance Review Report.

Rows 7-28, Column D: Enter the description of the actions taken to correct the Finding. Must include 1) timeline for implementation and/or completion of actions; 2) proposed (or actual) evidence of correction to be submitted to DHCS.

This completed form must be submitted to MHSA@dhcs.ca.gov.