MAKING SENSE OF MENTAL HEALTH FUNDING OF BEHAVIORAL HEALTH SERVICES FOR FOSTER YOUTH



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PURPOSE OF TODAY

- Introductory overview of mental health funding, examples of mental health programs offered by counties and how to access these programs.
- Presenters will discuss how to effectively collaborate with your Behavioral Health Department including leveraging developing funded programs.
- Participants will:
 - Develop a general understanding of mental health funding, particularly as it relates to children and youth in county systems.
 - Identify a range of mental health programs that are offered in varying counties which might be relevant for probation youth
 - · Gain insight into strategies that have effectively leveraged funding for probation youth
 - · Learn about ways to effectively collaborate with their county behavioral health partners.

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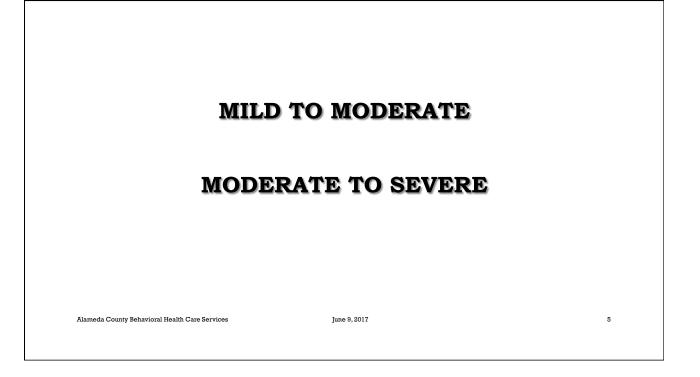
FUNDING FOR MENTAL HEALTH SERVICES

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- Medi-Cal primary funding for service
- Mental Health Services Act (MHSA)
- Grants for example, SAMHSA
- General Fund
- Local bond initiatives
- Blended Funding in Alameda
 - · Special Education covers some cost of services
 - · Probation and CFS cover some cost of services

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SPECIALTY MENTAL HEALTH SERVICES MEDICAL NECESSITY CRITERIA

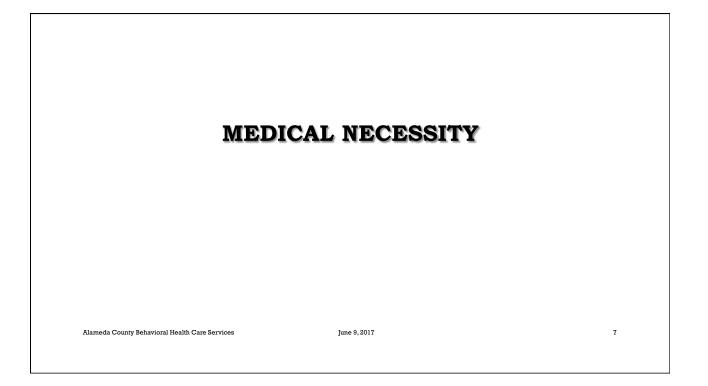
· An enrollee is eligible for MHP services if he or she meets all of the following criteria

- Has an included diagnosis
- Has a significant impairment in an important area of life functioning, or a reasonable probability of significant deterioration in an important area of life functioning – a reasonable probability of not progressing as individually appropriate (for beneficiaries under 21 who meet criteria for EPSDT)
- · The focus of the proposed treatment is to address the impairments
- The expectation that the proposed treatment will significantly diminish the impairment, prevent significant deterioration in an important area of life function
- · The condition would not be responsive to physical health care-based treatment

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Role of TFC Parent as a Provider of SMHS Service Activities

The TFC parent serves as a key participant in the trauma-informed, rehabilitative treatment of the child or youth, as set forth in the client plan. The TFC parent provides a range of service activities which include implementing the risk management/safety components of the child's or youth's client plan.

The TFC parent provides one or more of the following TFC service model SMHS service activities:

• Plan development (limited to when it is part of the CFT): The TFC parent will participate as a member in the CFT in care planning, monitoring, and review processes. The TFC parent also will observe, monitor, and alert the TFC Agency and members of the CFT about changes in the child's or youth's needs.

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Role of TFC Parent as a Provider of SMHS Service Activities

• Rehabilitation: The TFC parent will implement in-home informed practices which include trauma-informed rehabilitative treatment strategies set forth in the child's or youth's client plan. Examples of services to be provided include: providing skills-based interventions (including coaching and modeling); developing functional skills to improve self-care; and improving self-management in areas of anger management or self-esteem or peer relations;

• Collateral: The TFC parent will meet the needs of the child or youth in achieving his or her client plan goals by reaching out to significant support person(s) and providing consultation and/or training for needed medical, vocational, or other services to assist in better utilization of SMHS by the child or youth.

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Intensive Care Coordination (ICC)

ICC is available through the EPSDT benefit to all children, youth, and young adults under the age of 21 who are eligible for full scope Medi-Cal, meet medical necessity for specialty mental health services, and who meet service criteria for this program. It is an intensive form of care coordination that identifies ancillary supports and systems which assist with client stabilization. It is delivered through a specific form of collaboration, called the Child and Family Team (CFT), which requires active, integrated and collaborative participation by provider(s), family, and natural supports to ensure that the complex behavioral health needs of the client are being met.

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MENTAL HEALTH PROGRAMS

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- Wrap Around
- Evidence-Based Programs
 - Multi-Systemic Therapy
 - Multi-Dimensional Family Therapy
 - Motivational Interviewing
 - Cognitive Behavioral Therapy (CBT)
 - Triple P Positive Parenting Program

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ALAMEDA COUNTY ACCESS Services to Probation • School-based behavioral health care • Services to Child & Family Services · Birth to five services Special Education • Underserved ethnic language Crisis Stabilization populations Psychiatric Hospitalization TBS ICC and IHBS Alameda County Behavioral Health Care Services June 9, 2017 14

ALAMEDA COUNTY PROGRAMS DEVELOPED FOR PROBATION YOUTH

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- All programs developed in collaboration with Probation Department
- Probation involved in developing the programs from RFP to roll-out of services
- Programs for youth at risk of Probation Involvement
 - Sheriff Dept. Youth Services
 - Truancy Courts

- Current programs for probation high needs/high risk youth
 - Wrap Around
 - Multi-Dimensional Family Therapy
 - Collaborative Court Intensive Case
 Management
 - Multi-Systemic Therapy
 - First three programs are Blended Funding programs

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KEYS TO COLLABORATION · Ethos of these are collectively our youth · Relationships, relationships, relationships Having resources helps · Each agency/department gives something not one-sided EPSDT Expansion IV-E Waiver Face time Understanding the mandates, rules, strengths **Collaborative Projects** ٠ and limitations of each other's agency Sharing Resources: trainings, conferences ٠ · Imbedding BHCS managers and staff in (Beyond the Bench) Probation Return calls and email · Always be willing to help out when a partner agency reaches out to you Alameda County Behavioral Health Care Services June 9, 2017 16

