



FESIA A. DAVENPORT  
Chief Executive Officer

## County of Los Angeles Health and Mental Health Services

**DATE:** Wednesday, June 16, 2021  
**TIME:** 10:00 a.m.

**DUE TO CLOSURE OF ALL COUNTY BUILDINGS,  
MEETING WILL BE HELD BY PHONE.  
TO PARTICIPATE IN THE MEETING, PLEASE CALL AS FOLLOWS:  
DIAL-IN NUMBER: 1 (323) 776-6996  
CONFERENCE ID: 479494149#**

**[MS Teams link](#) (Ctrl+Click to Follow Link)**

**THIS TELECONFERENCE WILL BE MUTED FOR ALL CALLERS. PLEASE DIAL \*6 TO  
UNMUTE YOUR PHONE WHEN IT IS YOUR TIME TO SPEAK.**

### AGENDA

Members of the Public may address the Health and Mental Health Services Meeting on any agenda item. Two (2) minutes are allowed for each item.

- I. Call to order
- II. **Information Item(s)** (Any Information Item is subject to discussion and/or presentation at the request of two or more Board offices):
  - a. **DHS:** Approval of Amendment to the Affiliation Agreement with the Regents of the University of California to Adjust the Level of Physician Services, Training Programs, and Funding
  - b. **DMH:** Approval to Extend the Participation Agreement with the California Mental Health Services Authority for the Innovation Help@Hands Technology-Based Mental Health Solutions Program on a Sole Source Basis
- III. **Presentation Item(s):**
  - a. **DPH:** Approval to Execute a Master Agreement Work Order for the Provision of Temporary Personnel Services to Support the Home Visitation Program (#5765)

**b. CEO: Fiscal Year 2021-22 Final Changes Recommendations**

Alliance for Health Integration  
Diversion and Re-Entry  
Health Services  
Public Health  
Mental Health

- IV. Items Continued from a Previous Meeting of the Board of Supervisors or from the Previous Agenda Review Meeting
- V. Items not on the posted agenda for matters requiring immediate action because of an emergency situation, or where the need to take immediate action came to the attention of the Department subsequent to the posting of the agenda
- VI. Public Comment
- VII. Adjournment

## BOARD LETTER FACT SHEET

Agenda Review Date:

Board Meeting Date:

Sup. Dist. / SPA No.:

DEPARTMENT:

SUBJECT:

**I. PUBLIC BENEFIT** (precise description, mandated or non-mandated)

**II. RECOMMENDED ACTIONS** (summarized)

**III. COST AND FUNDING SOURCES**

Cost:

Funding:

**IV. BACKGROUND** (critical and/or insightful)

**V. POTENTIAL ISSUE(S)**

**VI. DEPARTMENT & COUNTY COUNSEL CONTACTS**

June 29, 2021

**DRAFT**  
**DHS Letterhead**

The Honorable Board of Supervisors  
County of Los Angeles  
383 Kenneth Hahn Hall of Administration  
500 West Temple Street  
Los Angeles, CA 90012

Dear Supervisors:

**APPROVAL OF AMENDMENT TO THE AFFILIATION AGREEMENT WITH THE  
REGENTS OF THE UNIVERSITY OF CALIFORNIA TO ADJUST THE LEVEL OF  
PHYSICIAN SERVICES, TRAINING PROGRAMS, AND FUNDING  
(2<sup>nd</sup> AND 5<sup>th</sup> SUPERVISORIAL DISTRICTS)  
(3 VOTES)**

**SUBJECT**

Request for the Board to make a finding that contracting for the provision of physician services can be performed more feasibly by contracting with the private sector; approval to amend the Affiliation Agreement with the Regents of the University of California to increase specified patient care services, adjust the number of residents enrolled in various physician training programs for Fiscal Year 2021-22, and increase the annual maximum obligation of the Agreement by \$982,500.

**IT IS RECOMMENDED THAT THE BOARD:**

1. Make a finding as required by Los Angeles County Code section 2.121.420 that contracting for the provision of physician services (trainee and non-trainee) at Harbor-UCLA Medical Center (H-UCLA MC) and Olive View-UCLA Medical Center (OV-UCLA MC), as described herein, can be performed more feasibly by contracting with the private sector.
2. Approve and instruct the Chair of the Board of Supervisors to execute Amendment No. 16 (Amendment) to the Affiliation Agreement No.76850 (Agreement) with the Regents of the University of California, on behalf of its Los Angeles Campus and School of Medicine (University), for the provision of physician medical education and patient care services at H-UCLA MC and OV-UCLA MC, effective upon Board approval, to: a) increase patient care services; b) adjust the number and compensation of County housestaff enrolled in various County and University physician-training programs at H-UCLA MC and OV-UCLA MC; and c) increase

the maximum obligation accordingly from \$38,839,000 to \$39,821,500 for the period July 1, 2021 through June 30, 2022.

3. Delegate authority to the Director of Health Services (Director), or designee, to execute future amendments, as follows: (a) add, delete, and/or change certain terms and conditions as required by federal or State law or regulation, County policy, the County's Board of Supervisors, and/or the Chief Executive Officer (CEO); (b) revise contract language to improve or update clinical or administrative operations within the Agreement's scope of services; (c) adjust purchased services and/or fixed/variable costs (excluding housestaff salaries described below) provided that such adjustment is based on current service needs at H-UCLA MC and OV-UCLA MC, with no increase to the maximum annual obligation; and (d) adjust the variable costs for future increases in housestaff salary up to five percent per year that the University may grant their housestaff at H-UCLA MC and OV-UCLA MC, and increase the maximum obligation under the Agreement accordingly, subject to review and approval by County Counsel, with notice to the Board and the CEO.

## **PURPOSE/JUSTIFICATION OF THE RECOMMENDED ACTION**

Approval of the first recommendation continues prior Board findings that contracting for the provision of physician services (trainee and non-trainee) under this Amendment at H-UCLA MC and OV-UCLA MC can still be performed more feasibly by contracting with the private sector.

Approval of the second recommendation will allow the Chair to execute an Amendment (Exhibit I) to this Agreement with the University to increase the volume and cost of physician medical education and patient care services, based on current clinical and operational needs, as described below.

### **H-UCLA MC**

H-UCLA MC plans to add a net total of 4.0 Full Time Equivalents (FTE) of County-housestaff in various County training programs at no cost to the Agreement, increase physician patient care services, and adjust funding for specific purposes as follows:

#### **County Training Programs**

Anesthesiology: Add 4.0 Full Time Equivalents (FTE) to increase the total number of Anesthesiology housestaff from 28.0 to 32.0 FTEs to improve the quality of anesthesia care and reduce the dependency and cost of utilizing Certified Registered Nurse Anesthetist (CRNA) registry agreements to provide similar services.

Internal Medicine (IM) – Dermatology: Add 1.0 FTE to increase the total number IM-Dermatology housestaff from 5.0 to 6.0 FTEs to ensure access, equity and quality for dermatology care across Los Angeles County.

Internal Medicine (IM) – Hematology/Oncology: Delete 1.0 FTE to reduce the total number of IM-Hematology/Oncology housestaff from 13.0 to 12.0 FTEs to reflect the City of Hope's decision to reduce funding of research performed at H-UCLA MC

Internal Medicine (IM) – Pulmonary and Critical Care: Add 1.0 FTE to increase the total number of IM-Pulmonary and Critical Care housestaff from 7.0 to 8.0 FTEs to provide medical intensive care coverage; meet Accreditation Council of Graduate Medical Education (ACGME) clinical training requirements and duty hour limitations; and increase service capacity due to the impact of the ongoing COVID-19 pandemic.

Pediatric Critical Care. Delete 1.0 FTE to reduce the total number of Pediatric Critical Care housestaff from 6.0 to 5.0 FTEs to reflect the sunseting of the program over the next few years.

#### University Training Programs

Pediatric Urology Surgery: Add Pediatric Urology Surgery patient care purchased services to enable H-UCLA MC's Level I Trauma Center to obtain physician coverage for the operating room and certain clinics for up to two days per month, including on call coverage all year, at a total annual cost of \$185,000. H-UCLA MC will fund this increase within existing resources.

Neuro-Interventional Radiology (Neuro-IR): Decrease the Neuro-IR patient care purchased services by \$140,000 from \$500,000 to \$360,000 annually. Such adjustment is recommended based on reduced clinical need.

#### Housestaff Compensation

Based upon the Local Bargaining Unit Agreement negotiated between the University and Committee of Interns and Residents/Service Employees International Union (CIR/SEIU), the University increased housestaff compensation levels for resident physicians. The negotiated salary and fringe benefits, when applied to the University housestaff full-time equivalents, amounts to a cumulative total increase of \$92,500 annually. The revised salary scale aims to ensure the University salaries remain competitive and that graduate medical education programs continue to attract qualified candidates into the University housestaff workforce that is integral to H-UCLA MC's training programs.

As a result of these changes, H-UCLA MC's variable cost under the Amendment will increase by \$137,500 that consists of a \$45,000 increase in physician patient care services from \$4,015,500 to \$4,060,500 in FY 2021-22 (\$185,000 increase for Pediatric

Urology Surgery; and decrease of \$140,000 for Neuro-IR) and \$92,500 for housestaff salary compensation. H-UCLA MC's fixed cost remains unchanged.

### **OV-UCLA MC**

OV-UCLA MC plans to increase housestaff compensation, as follows:

#### **Housestaff Compensation**

For the foregoing reasons described for H-UCLA MC, the University also increased housestaff compensation levels for resident physicians at OV-UCLA MC. The negotiated salary and fringe benefits, when applied to the University housestaff full-time equivalents, amounts to a cumulative total increase of \$845,000 annually. The revised salary scale aims to ensure the University salaries remain competitive and that graduate medical education programs continue to attract qualified candidates into the University housestaff workforce that is integral to OV-UCLA MC's training programs.

### **IMPLEMENTATION OF STRATEGIC PLAN GOALS**

The recommended actions support "Strategy III.3, Pursue Operational Effectiveness, Fiscal Responsibility, and Accountability" of the County Strategic Plan.

### **FISCAL IMPACT/FINANCING**

The County's maximum obligation under the Affiliation Agreement will increase from \$38,839,000 to \$39,821,500 in FY 2021-22 for a total increase of \$982,500 (H-UCLA MC \$137,500 increase and OV-UCLA MC \$845,000 increase). Funding for the increase to the Agreement will be requested in the DHS' FY 2021-22 Supplemental Budget Request, and will be requested in future fiscal years.

### **FACTS AND PROVISIONAL/LEGAL REQUIREMENTS**

DHS entered into the current Agreement with the University for the period July 1, 2006 through June 30, 2011, with automatic annual extensions, unless either party serves notice of non-renewal to the other party.

The recommended Amendment includes the changes in FTEs for County and University training programs, the specific volume and cost of academic purchased services, and housestaff compensation. On July 7, 2020, the Chief Executive Office, under delegated authority from the Board, made the most recent finding as required by Los Angeles County Code section 2.121.420 that contracting for the provision of physician services (trainee and non-trainee) can be performed more feasibly by contracting with the private sector.

The Honorable Board of Supervisors  
June 29, 2021  
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County Counsel has reviewed and approved Exhibit I as to form.

**CONTRACTING PROCESS**

Given the nature and scope of the services provided by the University under the Agreement, as well as the historic relationship between the County and the University, DHS determined that it was not feasible to competitively bid this Agreement.

**IMPACT ON CURRENT SERVICES (OR PROJECTS)**

The Agreement will continue the provision of clinical and academic services at H-UCLA MC and OV-UCLA MC.

Respectfully submitted,

Christina R. Ghaly, M.D.  
Director

CRG:ck

Enclosure

c: Chief Executive Office  
County Counsel  
Executive Office, Board of Supervisors



## BOARD LETTER FACT SHEET

Agenda Review Date: June 16, 2021

Board Meeting Date: June 29, 2021

Sup. Dist. / SPA No.: All Supervisorial Districts

**DRAFT**

CEO DA Approval

**DEPARTMENT:** *Mental Health*

**SUBJECT:** Approval to extend the existing Participation Agreement on a sole basis with California Mental Health Services Authority for the Mental Health Services Act - Innovation Help@Hands Technology-Based Mental Health Solutions program.

### **I. PUBLIC BENEFIT** (precise description, mandated or non-mandated)

Board approval of the extension will allow DMH to continue its partnership with California Mental Health Services Authority (CalMHSA) to increase access to mental health care and reduce the stigma associated with mental health treatment.

### **II. RECOMMENDED ACTIONS** (summarized)

Approve and authorize the Department of Mental Health's (DMH) Chief Deputy Director to sign and execute an amendment to the existing Participation Agreement with CalMHSA to continue development of the Mental Health Services Act (MHSA) Innovation Help@Hands Technology-Based Mental Health Solutions program, effective July 1, 2021 through June 30, 2023. Delegate authority to the Chief Deputy Director to execute future amendments or modifications to CalMHSA's Participation Agreement and delegate authority to the Chief Deputy Director to terminate the Participation Agreement in accordance with the termination provisions.

### **III. COST AND FUNDING SOURCES**

Cost: There is no financial impact associated with the recommended actions.

Funding: N/A

### **IV. BACKGROUND** (critical and/or insightful)

On February 20, 2018, your Board approved the Chief Deputy Director to execute a Participation Agreement with CalMHSA to implement the MHSA Innovation Technology-Based Mental Health Solutions Program, which is set to expire on June 30, 2021. Due to the challenges and restrictions experienced due to Covid-19, Board approval of the extension will allow DMH to continue its partnership with CalMHSA to increase access to mental health and supportive services focused on prevention, early intervention, family support, social connectedness, and decreased use of psychiatric hospital and emergency services. The extension will be effective July 1, 2021 through June 30, 2023 at no additional cost.

### **V. POTENTIAL ISSUE(S)**

N/A

### **VI. DEPARTMENT & COUNTY COUNSEL CONTACTS**

DMH: Gregory Polk, Chief Deputy Director - GPolk@dmh.lacounty.gov

County Counsel: Emily Issa, Elssa@counsel.lacounty.gov, (213) 974-1827



## DEPARTMENT OF MENTAL HEALTH

hope. recovery. wellbeing.

JONATHAN E. SHERIN, M.D., Ph.D.  
Director

Gregory C. Polk, M.P.A.  
Chief Deputy Director

Curley L. Bonds, M.D.  
Chief Medical Officer

Lisa H. Wong, Psy.D.  
Senior Deputy Director

June 29, 2021

The Honorable Board of Supervisors  
County of Los Angeles  
383 Kenneth Hahn Hall of Administration  
500 West Temple Street  
Los Angeles, CA 90012

Dear Supervisors:

**APPROVAL TO EXTEND THE PARTICIPATION AGREEMENT WITH  
THE CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY FOR THE  
INNOVATION HELP@HANDS TECHNOLOGY-BASED MENTAL HEALTH  
SOLUTIONS PROGRAM ON A SOLE SOURCE BASIS  
(ALL SUPERVISORIAL DISTRICTS)  
(3 VOTES)**

**SUBJECT**

Request approval to extend the term of the existing Participation Agreement on a sole source basis with the California Mental Health Services Authority to continue the statewide collaborative development of the Mental Health Services Act - Innovation Help@Hands Technology-Based Mental Health Solutions program. The current Participation Agreement is set to expire on June 30, 2021.

**IT IS RECOMMENDED THAT YOUR BOARD:**

1. Approve and authorize the Department of Mental Health's Chief Deputy Director (Chief Deputy Director), or his designee, sign, and execute an amendment (Attachment I) to the existing Department of Mental Health (DMH) Participation Agreement with the California Mental Health Services Act (CalMHSA) to continue development of the Mental Health Services Act (MHSA) Innovation Help@Hands Technology-Based Mental Health Solutions program and update Exhibit C – County-Specific Scope and Funding. The extension will be effective July 1, 2021 through June 30, 2023 at no additional cost.

2. Delegate authority to the Chief Deputy Director, or his designee, to prepare, sign, and execute future amendments or modifications to the Participation Agreement in Recommendation 1 to reaffirm the authority delegated by the Board on February 20, 2018, provided that: sufficient funds are available and any amendments will be subject to prior review and approval as to form by County Counsel, with written notice to the Board and Chief Executive Officer (CEO).
3. Delegate authority to the Chief Deputy Director, or his designee, to terminate the Participation Agreement described in Recommendation 1 in accordance with the termination provisions, including Termination for Convenience. The Chief Deputy Director, or his designee will notify the Board and CEO, in writing, of such termination action.

### **PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION**

On February 20, 2018, your Board approved the Chief Deputy Director to execute a Participation Agreement with CalMHSA to implement the MHSA Innovation Technology-Based Mental Health Solutions Program, which is set to expire on June 30, 2021. Under the delegated authority granted through the February 20, 2018 Board letter, DMH amended the Participation Agreement to rename the program to MHSA Innovation Help@Hands. Due to the challenges and restrictions experienced due to Covid-19, Board approval of the extension will allow DMH and CalMHSA to continue its statewide collaborative efforts to implement the MHSA Innovation Technology-Based Mental Health Solutions program called Help@Hands to improve access to mental health and supportive services focused on prevention, early intervention, family support, social connectedness and decreased use of psychiatric hospital and emergency services.

CalMHSA's Help@Hands is a collaborative multi-county and city collaborative project that provides innovative digital mental health solutions using technology to increase access to care and wellbeing as follows:

- Increase access to the appropriate level of care;
- Reduce stigma associated with mental illness by promoting mental wellness;
- Detect and acknowledge mental health symptoms sooner;
- Increase purpose, belonging, and social connectedness of individuals served; and
- Analyze and collect data to improve mental health needs assessment and service delivery.

Board approval of Recommendation 1 will authorize the Chief Deputy Director, or his designee, to extend the existing Participation Agreement with CalMHSA, effective July 1, 2021 through June 30, 2023 at no additional cost for the extension, and update Exhibit C – County-Specific Scope and Funding.

Board approval of the Recommendation 2 will allow DMH to amend the Participation Agreement to reaffirm previously approved delegated authority so that the Participation Agreement may be amended, as necessary.

Board approval of the third recommendation will allow DMH to terminate the Participation Agreement in accordance with the Agreement's termination provisions.

### **Implementation of Strategic Plan Goals**

The recommended actions are consistent with the County's Strategic Plan Goal I, Make Investments that Transform Lives, specifically Strategy I.2 – Enhance Our Delivery of Comprehensive Interventions and Strategic Plan Goal III, Realize Tomorrow's Government Today, Strategy III.2 – Embrace Digital Government for the Benefit of Our Internal Customers and Communities.

### **FISCAL IMPACT/FINANCING**

There is no financial impact associated with the recommended actions.

### **FACTS AND PROVISIONS/LEGAL REQUIREMENTS**

CalMHSA is a Joint Powers of Authority (JPA) formed in 2009 to jointly develop and fund mental health services and programs on a Statewide, regional, and local basis under the California Government Code Section 6500 et seq.. CalMHSA has provided an efficient and effective administrative and fiscal structure focused on collaborative partnerships in the development and implementation of mental health programs.

On May 11, 2010, your Board authorized DMH to sign the CalMHSA Joint Exercise Powers Agreement in order to jointly exercise powers with other participating CalMHSA county and city members. CalMHSA has helped counties and cities with mental health programs reduce administrative overhead by centralizing compliance with State reporting requirements through their research information and strategies, in addition to negotiating cost-effective rates with various subcontractors through the State of California. CalMHSA provides a mechanism to facilitate the efficient use of resources for multiple counties and cities by maximizing group purchasing power for products, jointly developing requests for proposals, and establishing contracts with providers to accomplish mutual goals related to the State MHSA regulations. Currently, CalMHSA consists of 58 member counties and cities, including Los Angeles County.

On February 20, 2018, your Board approved the Chief Deputy Director to execute an Agreement with CalMHSA to implement the Innovation Technology-Based Mental Health Solutions Program. Subsequently, under delegated authority granted through the above Board letter, DMH amended the Participation Agreement to rename the program Help@Hands. As the current Participation Agreement is set to expire on June 30, 2021, Board approval of the extension will allow DMH to continue its partnership with CalMHSA

to develop and implement MHSA Innovation Help@Hands Technology-Based Mental Health Solutions program to increase access to mental health care, promote early detection of mental health symptoms, and predict the onset of mental illness.

CalMHSA's MHSA Innovation Help@Hands Technology-Based Mental Health Solutions program was posted for public comment on March 19, 2021, and incorporated into the MHSA Three-Year Program and Expenditure Plan for Fiscal Years 2021-22, 2022-23, and 2023-24.

The Amendment format (Attachment I) has been reviewed and approved as to form by County Counsel.

The Director of Mental Health currently serves on the Board of Directors of CalMHSA's Joint Powers Agreement, but he is not compensated and does not benefit financially in any way from serving in that position. In addition, the Director did not participate in the approval process of the amendment with CalMHSA.

In accordance with Board Policy No. 5.100 (Sole Source Contracts), DMH notified your Board on December 21, 2020 (Attachment II) of its intent to extend the Participation Agreement with CalMHSA for the Innovation Technology-Based Mental Health Solutions program. The required Sole Source Checklist (Attachment III) identifying and justifying the need for a sole source has been approved by the CEO.

**IMPACT ON CURRENT SERVICES (OR PROJECTS)**

Board approval of the extension will allow DMH to continue its partnership with CalMHSA to increase access to mental health care and reduce the stigma associated with mental health treatment.

Respectfully submitted,

GREGORY C. POLK  
Chief Deputy Director

GCP:SK:RLR  
SC:atm

Attachments (3)

c: Executive Office, Board of Supervisors  
Chief Executive Office  
County Counsel  
Chairperson, Mental Health Commission

Agreement No. 316-ITS-2018PA-A1

CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY  
PARTICIPATION AGREEMENT AMENDMENT  
COVER SHEET

1. Los Angeles County ("Participant") desires to participate in the Program identified below.

Name of Program: MHSA Innovation Program (a.k.a. Help@Hands)

2. California Mental Health Services Authority ("CalMHSA") and Participant acknowledge that the Program will be governed by CalMHSA's Joint Powers Agreement and its Bylaws, and by this Participation Agreement Amendment. This Amendment revises the following exhibits and term from the initial Participation Agreement. This Amendment also incorporates provisions of the Standard Technology Services Agreement developed by CalMHSA in connection with the Program and makes related changes.

- ☐ Exhibit A Program Description
- ☒ Exhibit B General Terms and Conditions
- ☒ Exhibit C County-Specific Scope and Funding

3. The term of the Program is amended to **February 18, 2018** through **June 30, 2023**, reflecting an update to the termination date from June 30, 2021.

4. Authorized Signatures:

**CalMHSA**

Signed: \_\_\_\_\_ Name: Amie S. Miller, Psy.D., MFT

Title: Executive Director Date: \_\_\_\_\_

**Participant:** Los Angeles County

Signed: \_\_\_\_\_ Name (Printed): Gregory C. Polk, MPA

Title: Chief Deputy Director, Administration Date: \_\_\_\_\_

**PARTICIPATION AGREEMENT**  
Exhibit B – General Terms and Conditions

**I. Definitions**

The following words as used throughout this Participation Agreement shall be construed to have the following meaning, unless otherwise apparent from the context in which they are used:

- A. CalMHSA – California Mental Health Services Authority, a Joint Powers Authority (JPA) created by counties in 2009 at the instigation of the California Mental Health Directors Association to jointly develop and fund mental health services and education programs.
- B. Mental Health Services Division (MHSD) – The Division of the California Department of Health Care Services responsible for mental health functions.
- C. Member – A County (or JPA of two or more Counties) that has joined CalMHSA and executed the CalMHSA Joint Powers Agreement.
- D. Mental Health Services Act (MHSA) – Initially known as Proposition 63 in the November 2004 election, which added sections to the Welfare and Institutions Code providing for, among other things, PEI Programs.
- E. Participant – Any County participating in the Program either as Member of CalMHSA or as Partner under a Memorandum of Understanding with CalMHSA.
- F. Program – The program identified in Exhibit A, as further embodied in the Services Agreement.
- G. Services Agreement – That certain Standard Technology Services Agreement entered into by and between CalMHSA and technology service providers in connection with the Program.

Terms not defined herein shall have the meaning ascribed to them in the Services Agreement unless their meaning is otherwise apparent from the context.

**II. Responsibilities**

- A. Responsibilities of CalMHSA:
  - 1. Act as fiscal and administrative agent for the Program.
  - 2. Management of funds received consistent with the requirements of any applicable laws, regulations, guidelines and/or contractual obligations.
  - 3. Provide quarterly fiscal reports and/or as requested to Participant.
  - 4. Compliance with CalMHSA's Joint Powers Agreement and Bylaws.
  - 5. Project Management:

As part of this effort CalMHSA will provide a Project Manager (PM) to serve as oversight for all activities defined within the initial Agreement No. 316-ITS-2018PA and this Amendment. The PM (*JPA Administrative Director*) shall be responsible for the following:

- i. Prevention Project Management (*CalMHSA JPA Administrative Director*)
  - PM will meet with key sub-contractors, vendors, partners, consultants, etc. to manage contracts which includes discussion re contract deliverables, timelines, budgets, priorities, address under performance issues, etc. on an on-going basis.
  - PM is expected to be the oversight and have a physical presence at meetings, etc. as deemed appropriate by PM.
- ii. PM Reporting to LACDMH
  - PM will provide an organizational chart identifying the lead CalMHSA staff across programs and direct support to PM.
  - Meetings – PM and relevant department staff will meet bi-weekly in person and/or via teleconference. Additional in-person/teleconference meetings will be identified and scheduled as needed.
  - PM will provide regular program updates to include reports with supporting documentation that informs on deliverables status/completion.
  - PM will maintain electronic and hard copy records (on-site) of all work.
  - PM will share all information with LACDMH via a shared file or other, as a matter of record.

B. Responsibilities of Participant:

1. Transfer of funds for the Program as specified in Exhibit C at the beginning of each fiscal year identified in Exhibit C, County-Specific Scope and Funding.
2. Identification of a representative authorized to act for Participant and receive notices on behalf of Participant with regard to the Program.
3. Cooperate by providing CalMHSA with requested information and assistance in order to fulfill the purpose of the Program.
4. Provide feedback on Program performance.
5. Compliance with applicable laws, regulations, guidelines, contractual agreements, JPAs and bylaws.

**III. Duration, Term, Amendment and Participant Withdrawal**

- A. The term of the Help@Hands Program is amended to **February 18, 2018** through **June 30, 2023**, reflecting an update to the termination date from June 30, 2021. However, the obligation of any single Participant (a.k.a. Member) to pay funds is limited to the periods and amounts stated in Exhibit C, County-Specific Scope and Funding.



- B. Except as otherwise provided for in Section IV of this Agreement, this Agreement may be supplemented, amended or modified only by the mutual agreement of CalMHSA and the Participant, expressed in writing and signed by authorized representatives of both parties.
- C. Subject to Section IV of this Agreement, any Participant may withdraw from the Program upon six (6) months' prior written notice. Notice shall be deemed served on the date of mailing in the U.S. Mail.

**IV. Funding, Amending Program Operations and Administration, Cancellation and Shutdown of the Program**

- A. The Program and its administration by CalMHSA are funded by the Participants. CalMHSA has no independent ability to fund the Program. The Program cannot continue without Participant funding. Therefore, if CalMHSA determines that Participant funding is no longer available at the levels it deems sufficient, in its sole discretion, to properly fund the Program, including its administration, CalMHSA shall invoke this Section IV.A. and propose either a means of promptly remedying the funding issue or an orderly process of winding down the Program. CalMHSA shall convey its proposal in the form of a proposed amendment to this Agreement (and/or any other Program related documents) providing for:
  - 1. changes that will ensure CalMHSA can operate and administer the Program on financially sound terms, which terms would take effect no less than 30 calendar days' after delivery of the amendment to the representatives of the Participants then funding the Program; or
  - 2. changes that will authorize CalMHSA to take the steps necessary to cancel and administer an orderly shutdown of the Program, which terms would take effect no less than 30 calendar days' after delivery of the amendment to the representatives of the Participants then funding the Program.CalMHSA shall deliver the proposed amendment(s) to the Participants' representatives by U.S. Mail and electronic communication. Delivery shall be deemed to have occurred on the first business day after the date of mailing of the amendment(s).
- B. The Participants shall each consider and vote to accept or reject CalMHSA's proposed amendment(s) no more than 30 calendar days' after its delivery. A majority vote of the Participants then funding the Program shall determine whether CalMHSA's proposed amendment(s) is accepted or rejected.
- C. Upon cancellation, termination or other conclusion of the Program, any Program funds remaining undisbursed shall be returned to the Participants after any and all obligations of the Program have been satisfied, including any obligations to CalMHSA. Unused funds paid for a joint effort will be returned pro rata to Participants in proportion to payments made unless adjusted as provided for in Section IV.E.
- D. CalMHSA shall provide notice of the amount of unused funds to be returned and the pro rata amount to be returned to each Participant in the Program at least 15 calendar days' before returning the funds.

1. CalMHSA's notice shall be delivered electronically to each Participants' representative, and a backup copy will be sent via U.S. Mail. The notice shall be deemed delivered on the date it is sent.
2. Within 10 calendar days' of the date of that electronic notice, a Participant may seek an adjustment in the amount of unused funds to be returned to it by submitting an adjustment request to CalMHSA's Project Manager electronically, and copy each of the Participants' representatives on the electronic communication. The adjustment request must demonstrate why a disproportionate share of the unused funds should be paid to the Participant.
3. Within 5 calendar days of the date an adjustment request was sent to CalMHSA, any Participant whose proportionate share of the unused funds would or may be reduced if the adjustment request is granted may submit a response to the adjustment request to CalMHSA's Project Manager electronically, and must copy each of the Participants' representatives on the electronic communication.
4. CalMHSA shall consider all adjustment requests and responses and shall determine whether an adjustment request should be granted, in whole or in part. CalMHSA shall have exclusive jurisdiction over how to resolve any such requests, and its decision(s) shall be final.
5. CalMHSA shall render its decision(s) on any adjustment requests before returning any unused funds.
6. CalMHSA's decisions shall be delivered electronically to each Participants' representative, and a backup copy will be sent via U.S. Mail.

**V. Fiscal Provisions; Order of Precedence**

- A. Funding required from the Participants will not exceed the amount stated in Exhibit C, County-Specific Scope and Funding.
- B. County will provide the funding amount stated in Exhibit C - Budget, which includes a one-time administrative fee. CalMHSA will invoice the County upon execution of Participation Agreement, for the full budget amount in order to successfully carry out its contractual obligations.
- C. Through the Program, Participants invest in innovation to scale existing mobile applications or successfully develop and scale new mobile applications for the benefit of those living with mental illness. The Parties agree that investing in technology, particularly new technologies, is highly speculative and it is essentially impossible to know whether a Party's failure to perform will cause the other Party harm. Therefore, the Parties agree that neither shall be liable to the other with respect to any investment in a particular mobile application, for the success of failure of the Program in part or as a whole, or for any Program related work, including administration of the Program.
- D. Other than with respect to this Section IV hereof, in the event of any conflict between the terms of this Agreement and the terms of the Services Agreement

with respect to CalMHSA's obligations the terms of the Services Agreement shall control.

- E. In addition to the terms of Section 8.11 of the Services Agreement, the Parties agree to observe and comply with all applicable laws, ordinances, codes and regulations of government agencies, including federal, state, municipal and local governing bodies and commissions associated with the investments made in connection with the Program.
- F. Pursuant to the terms of Section 8.14 of the Services Agreement, CalMHSA shall require vendors under the Services Agreement to procure and maintain the policies and levels of insurance set forth therein, including to name CalMHSA and the Participants as additional insureds under such policies.

**PARTICIPATION AGREEMENT**  
Exhibit C – Amended County-Specific Scope and Funding

**Name of Program: MHSA Innovation Program (a.k.a. Help@Hands)**

**MHSA Innovation 3 Project – Increasing Access to Mental Health Services and Supports Utilizing a Suite of Technology-Based Mental Health Solutions**

This Amendment revises LACDMH's scope of work due to assessments made over the course of time, requiring a broader focus in the implementation of technology-based solutions to improve access to mental health and supportive services focused on prevention, early intervention, family support, social connectedness and decreased use of psychiatric hospitals and emergency services.

The new scope of work shall be focused on two main funding allocations, as defined below.

**Collaborative Funds** – LACDMH will allocate funding towards collaborative efforts which include CalMHSA Administration/Project Management, Technology, Evaluation, Peer and Outreach and Engagement. Technology funds will be used for the launching of pilot projects that will lead to longer term contracts if outcomes demonstrate to be positive.

**Local Funds** – LACDMH will apply remaining funding toward local funds for the purpose of entering into longer term contracts with vendors providing technology-based MH solutions to include collaboration with partners to identify community members who would benefit from interventions delivered through Help@Hand platforms.

**Amended Budget**

Due to the Mental Health Services Oversight and Accountability Commission (MHSOAC) having awarded a two-year extension and assessments related to funding of components, the following new budget allocation will be adopted, effective January 1, 2020. However, the budget is expected to be revised over time as projects are completed and assessments made.

DESCRIPTION	FY19-20 THRU FY22-23
<b>CalMHSA</b> (Admin/Project Management)	\$2,977,562
<b>Collaborative Funds</b>	\$1,910,548
<b>Local Funds</b>	\$17,713,860
<b>Subtotal</b>	<b>\$22,601,970</b>

<b>Funds Expended (Thru 12-31-2019)</b>	
Collaborative Funds	\$9,592,674
Local Funds	\$805,356
<b>Subtotal</b>	<b>\$10,398,030</b>
<b>TOTAL FUNDING AMOUNT</b>	<b>\$33,000,000</b>



# DEPARTMENT OF MENTAL HEALTH

hope. recovery. wellbeing.

**JONATHAN E. SHERIN, M.D., Ph.D.**  
Director

**Gregory C. Polk, M.P.A.**  
Chief Deputy Director

**Curley L. Bonds, M.D.**  
Chief Medical Officer

**Lisa H. Wong, Psy.D.**  
Senior Deputy Director

December 21, 2020

**TO:** Supervisor Hilda L. Solis, Chair  
Supervisor Holly J. Mitchell  
Supervisor Sheila Kuehl  
Supervisor Janice Hahn  
Supervisor Kathryn Barger

**FROM:** Gregory C. Polk  
Chief Deputy Director

**SUBJECT: NOTICE OF INTENT TO EXTEND A SOLE SOURCE PARTICIPATION AGREEMENT WITH THE CALIFORNIA MENTAL HEALTH SERVICES AUTHORITY FOR THE TECHNOLOGY-BASED MENTAL HEALTH SOLUTIONS PROGRAM**

In accordance with the Los Angeles County Board of Supervisors' (Board) Policy No. 5.100 (Sole Source Contracts), the Department of Mental Health (DMH) is notifying your Board of our Department's intent to extend a sole source Participation Agreement with the California Mental Health Services Authority (CalMHSA) for the Technology-Based Mental Health Program.

DMH will request that your Board approve an extension effective July 1, 2021 through June 30, 2022, with an option to extend the term for two additional fiscal years, as necessary.

## **JUSTIFICATION**

Under California Government Code Section 6500 et seq, CalMHSA is a Joint Powers of Authority (JPA) formed in 2009 to jointly develop and fund mental health services and education programs on a Statewide, regional, and local basis. CalMHSA's mission is to provide an efficient and effective administrative and fiscal structure focused on collaborative partnerships in the development and implementation of mental health

programs in accordance to the Mental Health Services Act (MHSA). Currently, CalMHSA consists of 57 member counties and cities, including Los Angeles County.

On May 11, 2010, your Board authorized DMH to sign the CalMHSA Joint Exercise of Powers Agreement in order to jointly exercise powers with other participating CalMHSA county and city members. CalMHSA has helped counties and cities with mental health programs reduce administrative overhead by centralizing compliance with State reporting MHSA requirements through their research information and strategies, in addition to negotiating cost-effective rates with various subcontractors throughout the State of California. In addition, CalMHSA provides a mechanism to facilitate the efficient use of resources for multiple counties and cities by maximizing group purchasing power for products, jointly developing requests for proposals, and establish contracts with providers to accomplish mutual goals related to the State MHSA regulations.

On February 20, 2018, your Board approved the Participation Agreement with CalMHSA to fund the Technology-Based Mental Health Solutions Program. Based on the number of challenges and restrictions experienced due to COVID-19 crisis, Board approval of the extension will allow CalMHSA to continue developing and implementing essential technology designed to educate users on the signs and symptoms of mental illness, improve early identification of emotional/behavioral destabilization, connect individuals seeking help in real time, and increase access to mental health services for residents of Los Angeles County at no additional cost.

The Director of Mental Health currently serves on the Board of Directors of CalMHSA's Joint Powers Agreement, but he is not compensated and does not benefit financially in any way from serving in that position. In addition, the Director will not participate in the approval process of the extension to the Participation Agreement with CalMHSA.

#### **NOTIFICATION TIMELINE**

Pursuant to Board Policy No. 5.100 (Sole Source Contracts), DMH is required to notify your Board at least six months prior to the expiration of an existing contract when departments do not have delegated authority to extend the term beyond the original term. The extension of this agreement will not cost DMH additional funds. If requested by a Board office or the Chief Executive Office, DMH will place this item on the Health and Mental Health Services Cluster Agenda.

Unless otherwise instructed by your Board office within four weeks of this notice, DMH will present your Board a letter for approval to extend the term of CalMHSA's Participation Agreement for the Technology-Based Mental Health Solutions Program.

Each Supervisor  
December 21, 2020  
Page 3

If you have any questions or concerns, please contact me at (213) 738-4926, or your staff may contact Stella Krikorian, Division Manager, Contracts Development and Administration Division, at (213) 738-4023.

GCP:ES:SK  
SC:atm

c:     Executive Office, Board of Supervisors  
          Chief Executive Office  
          County Counsel

## SOLE SOURCE CHECKLIST

Department Name: Mental Health

- ☐ New Sole Source Contract
- ☒ Sole Source Amendment to Existing Contract

Date Existing Contract First Approved: 2/20/2018

Check (✓)	<b>JUSTIFICATION FOR SOLE SOURCE CONTRACTS</b> Identify applicable justification and provide documentation for each checked item.
<input type="checkbox"/>	➤ Only one bona fide source (monopoly) for the service exists; performance and price competition are not available. A monopoly is an <i>“Exclusive control of the supply of any service in a given market. If more than one source in a given market exists, a monopoly does not exist.”</i>
<input type="checkbox"/>	➤ Compliance with applicable statutory and/or regulatory provisions.
<input type="checkbox"/>	➤ Compliance with State and/or federal programmatic requirements.
<input checked="" type="checkbox"/>	➤ Services provided by other public or County-related entities.
<input type="checkbox"/>	➤ Services are needed to address an emergent or related time-sensitive need.
<input type="checkbox"/>	➤ The service provider(s) is required under the provisions of a grant or regulatory requirement.
<input type="checkbox"/>	➤ Additional services are needed to complete an ongoing task and it would be prohibitively costly in time and money to seek a new service provider.
<input type="checkbox"/>	➤ Services are needed during the time period required to complete a solicitation for replacement services; provided services are needed for no more than 12 months from the expiration of an existing contract which has no available option periods.
<input type="checkbox"/>	➤ Maintenance and support services are needed for an existing solution/system during the time to complete a solicitation for a new replacement solution/ system; provided the services are needed for no more than 24 months from the expiration of an existing maintenance and support contract which has no available option periods.
<input type="checkbox"/>	➤ Maintenance service agreements exist on equipment which must be serviced by the original equipment manufacturer or an authorized service representative.
<input type="checkbox"/>	➤ It is more cost-effective to obtain services by exercising an option under an existing contract.
<input type="checkbox"/>	➤ It is in the best economic interest of the County (e.g., significant costs to replace an existing system or infrastructure, administrative cost savings and excessive learning curve for a new service provider, etc.) In such cases, departments must demonstrate due diligence in qualifying the cost-savings or cost-avoidance associated with the best economic interest of the County.

\_\_\_\_\_  
Chief Executive Office

\_\_\_\_\_  
Date



## BOARD LETTER FACT SHEET

Agenda Review Date:

Board Meeting Date:

Sup. Dist. / SPA No.:

DRAFT

DEPARTMENT:

SUBJECT:

**I. PUBLIC BENEFIT** (precise description, mandated or non-mandated)

**II. RECOMMENDED ACTIONS** (summarized)

**III. COST AND FUNDING SOURCES**

Cost:

Funding:

**IV. BACKGROUND** (critical and/or insightful)

**V. POTENTIAL ISSUE(S)**

**VI. DEPARTMENT & COUNTY COUNSEL CONTACTS**



**BARBARA FERRER, Ph.D., M.P.H., M.Ed.**  
Director

**MUNTU DAVIS, M.D., M.P.H.**  
County Health Officer

**MEGAN McCLAIRE, M.S.P.H.**  
Chief Deputy Director

313 North Figueroa Street, Room 806  
Los Angeles, California 90012  
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**BOARD OF SUPERVISORS**

**Hilda L. Solis**  
First District

**Holly J. Mitchell**  
Second District

**Sheila Kuehl**  
Third District

**Janice Hahn**  
Fourth District

**Kathryn Barger**  
Fifth District

**DRAFT**

June 29, 2021

The Honorable Board of Supervisors  
County of Los Angeles  
383 Kenneth Hahn Hall of Administration  
500 West Temple Street  
Los Angeles, California 90012

Dear Supervisors:

**APPROVAL TO EXECUTE A MASTER AGREEMENT WORK ORDER  
FOR THE PROVISION OF TEMPORARY PERSONNEL SERVICES  
TO SUPPORT THE HOME VISITATION PROGRAM  
JULY 1, 2021 THROUGH JUNE 30, 2022  
(ALL SUPERVISORIAL DISTRICTS) (3 VOTES)**

**SUBJECT**

Request approval to execute a Master Agreement Work Order for Temporary Personnel Services to support the Home Visitation Program by the Department of Public Health, Division of Maternal, Child, and Adolescent Health.

**IT IS RECOMMENDED THAT YOUR BOARD:**

1. Authorize and instruct the Director of the Department of Public Health (Public Health), or designee, to execute a Master Agreement Work Order (MAWO), substantially similar to Exhibit I, with SuperbTech, Inc., for the provision of temporary personnel services to support the Public Health's Division of Maternal, Child, and Adolescent Health (MCAH) Home Visitation Program (HVP), effective July 1, 2021 through June 30, 2022, at a total maximum obligation of \$1,642,368; 100 percent offset by funding from the California Department of Social Services (CDSS), via Intra-Fund Transfer (IFT) from Department of Public Social Services (DPSS).

2. Delegate authority to the Director of Public Health, or designee, to execute an amendment to the MAWO that extends the term for one additional year through June 30, 2023, at an annual maximum obligation not to exceed \$1,642,368, contingent upon the availability of funding and contractor performance, subject to review and approval by County Counsel, and notification to your Board and the Chief Executive Office (CEO).

### **PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION**

Approval of Recommendation 1 will allow Public Health to execute a MAWO with SuperbTech, Inc., to provide up to 18 temporary personnel to support the HVP. These personnel will provide assistance with the implementation, reporting, evaluation, and coordination of the home visiting services throughout Los Angeles County (LAC).

MCAH HVP provides home visiting services utilizing evidence-based home visiting models, Healthy Families America (HFA), Parents As Teachers (PAT), and Nurse Family Partnership (NFP), in high priority cities in the eight Service Planning Areas in LAC. These services help to coordinate mental health and family support linkages to prevent trauma risks for young children; and support expectant mothers and parenting families for children's health, safety, and readiness to learn.

As part of the HVP, MCAH is collaborating with DPSS to implement the California Work Opportunity and Responsibility to Kids (CalWORKs) Home Visiting Program. The CalWORKs Home Visiting Program is a State program that provides cash assistance and other benefits to qualified low-income families using federal, State, and County funds. The HVP is a voluntary program supporting positive health, development, and wellbeing for eligible pregnant and parenting women, families, and infants born into poverty, expanding their future educational, economic, and financial capability opportunities, and improving the likelihood that they will overcome poverty. The pairing of home visiting with CalWORKs provides an opportunity to connect parents with resources to improve their parenting skills and help them to ensure their children have a safe and nurturing environment that allows them to thrive and grow. Eligible women who qualify for the CalWORKs Home Visiting Program receive home visitation services through the HFA and PAT home visitation models.

Specifically, the 18 full-time temporary personnel will implement objectives related to home visitation including administration of the CalWORKs HPV in collaboration with DPSS; and data collection, entry, and analysis to inform quality assurance and generate data outcomes.

Approval of Recommendation 2 will allow Public Health to execute an amendment to the MAWO to extend the term for one additional year through June 30, 2023, if necessary.

### **Implementation of Strategic Plan Goals**

The recommended actions support Strategy I.1 – Increase Our Focus on Prevention Initiative; and Objective I.1.6, Increase Home Visitation Capacity, of the County's Strategic Plan.

### **FISCAL IMPACT/FINANCING**

The total maximum obligation of this MAWO is \$1,642,368 for the period effective 7/1/2021 through June 30, 2022; 100 percent offset by CDSS funds through an IFT from DPSS.

There is no net County cost associated with this action. Funding is included in Public Health's Recommended Budget for fiscal year (FY) 2021-22 and will be included in future FYs as necessary.

### **FACTS AND PROVISIONS/LEGAL REQUIREMENTS**

In collaboration with Public Health, DPSS submitted a County Plan to CDSS on September 27, 2018 to apply for home visiting funding appropriated by Senate Bill 840 (Chapter 29, Statutes of 2018), and the Budget Act of 2018. Subsequently on March 28, 2019, Public Health entered into a Memorandum of Understanding (MOU) with DPSS to collaboratively implement the CalWORKs Home Visiting Program. Subject to appropriation in the annual Budget Act, CDSS shall continue to award funds to participating counties who apply biennially and meet minimum requirements established by CDSS.

On April 5, 2016, your Board approved the execution of Master Agreements with six agencies for the provision of as-needed temporary personnel services and delegated authority to the Director of Public Health, or designee, to execute work orders under the Master Agreement with the following criteria for each work order: a) \$399,999 or less annually, Public Health will notify your Board of the work order once approved by County Counsel; b) \$400,000 to \$699,999 annually, upon approval from County Counsel, Public Health will provide two weeks advance written notice to your Board and, unless otherwise instructed, will execute the work order; and c) \$700,000 or more annually, Public Health will return to your Board for approval.

Subsequently, Public Health exercised delegated authority to execute four additional MAs for the provision of as-needed temporary personnel services with vendors who had been identified and selected through the RFSQ process, increasing the pool of qualified vendors to ten.

Exhibit I has been reviewed and approved by County Counsel as to use.

### **CONTRACTING PROCESS**

On April 16, 2021, Public Health issued a Temporary Personnel Services WOS for HVP (TEMP-WOS-124) to the nine Public Health Temporary Personnel Master Agreement Contractors qualified to provide temporary personnel services. One vendor was excluded from participating in the solicitation pending vendor's acceptance/signature of its Master Agreement Amendment.

Request for a Solicitations Requirements Review (SRR) and Bidder's written questions were due by April 27, 2021. There were no requests for an SRR.

Public Health received four bids by the submission deadline. No bids were received late or disqualified. The successful Bidder, SuperbTech, Inc., met all the requirements and submitted the lowest cost responsive bid.

Three bidders requested the Local Small Business Enterprise preference program consideration. Each met the required criteria and was granted the preference.

On May 27, 2021, the selected bidder was notified. No transmittal to request a Proposed Contractor Selection Review were received by the deadline.

### **IMPACT ON CURRENT SERVICES**

The Honorable Board of Supervisors  
June 29, 2021  
Page 4

Approval of the recommended actions will allow Public Health to continue the provision and expansion of home visitation services throughout LAC.

Respectfully submitted,

Barbara Ferrer, Ph.D., M.P.H., M.Ed.  
Director

BF:yhj  
#05765

Enclosure

c: Chief Executive Officer  
County Counsel  
Executive Officer, Board of Supervisors

Changes from the 2021-22 Recommended Budget

	Gross Appropriation (\$)	Intrafund Transfers (\$)	Revenue (\$)	Net County Cost (\$)	Budg Pos
<b>ALLIANCE FOR HEALTH INTEGRATION</b>					
<b>2021-22 Recommended Budget</b>	<b>2,135,000</b>	<b>2,135,000</b>	<b>0</b>	<b>0</b>	<b>7.0</b>
<b>1. Retirement:</b> Reflects revised retirement estimates based upon updated payroll data.	10,000	10,000	--	--	--
<b>2. Deferred Compensation:</b> Reflects the restoration of County contribution to the 401(k) Savings Plan and Thrift Plan (Horizons) for non-represented and grand-fathered represented Flex and MegaFlex employees.	66,000	66,000	--	--	--
<b>Total Changes</b>	<b>76,000</b>	<b>76,000</b>	<b>--</b>	<b>--</b>	<b>--</b>
<b>2021-22 Final Changes</b>	<b>2,211,000</b>	<b>2,211,000</b>	<b>0</b>	<b>0</b>	<b>7.0</b>

Changes from the 2021-22 Recommended Budget

	Gross Appropriation (\$)	Intrafund Transfers (\$)	Revenue (\$)	Net County Cost (\$)	Budg Pos
<b>DIVERSION AND RE-ENTRY</b>					
<b>2021-22 Recommended Budget</b>	<b>151,618,000</b>	<b>9,600,000</b>	<b>66,051,000</b>	<b>75,967,000</b>	<b>0.0</b>
<b>1. Youth Diversion and Development (YDD):</b> Reflects the addition of appropriation, fully offset with a net increase in one-time funding and NCC, primarily to support the Board's commitment to transition the County's youth justice system to a care-first model by enabling the Countywide expansion of youth diversion.	17,296,000	(2,350,000)	6,291,000	13,355,000	--
<b>Total Changes</b>	<b>17,296,000</b>	<b>(2,350,000)</b>	<b>6,291,000</b>	<b>13,355,000</b>	<b>0.0</b>
<b>2021-22 Final Changes</b>	<b>168,914,000</b>	<b>7,250,000</b>	<b>72,342,000</b>	<b>89,322,000</b>	<b>0.0</b>

## Changes from the 2021-22 Recommended Budget

	Gross Appropriation (\$)	Intrafund Transfers (\$)	Revenue (\$)	Net County Cost (\$)	Budg Pos
<b>HEALTH SERVICES</b>					
<b>2021-22 Recommended Budget</b>	<b>8,667,393,000</b>	<b>485,866,000</b>	<b>7,134,970,000</b>	<b>1,046,557,000</b>	<b>25,887.0</b>
1. <b>Retirement:</b> Reflects revised retirement estimates based upon updated payroll data.	27,448,000	--	16,000	27,432,000	--
2. <b>Deferred Compensation:</b> Reflects restoration of the County contribution to the 401(k) Savings Plan and the Thrift Plan (Horizons) for non-represented and grandfathered represented Flex and MegaFlex employees.	24,570,000	--	89,000	24,481,000	--
3. <b>Office of Diversion and Re-Entry (ODR) - Grants:</b> Reflects an increase of 5.0 positions and other appropriation, fully offset with grant revenue, to expand the Felony Incompetent to Stand Trial program, interim housing and related services for medically vulnerable individuals being released from jail, and the Law Enforcement Assisted Diversion program.	23,813,000	--	23,813,000	--	5.0
4. <b>ODR – Youth Diversion and Development:</b> Reflects an increase of 3.0 positions and other appropriation, fully offset with IFT from the Diversion & Re-Entry budget unit, to support the Board's commitment to transition the County's youth justice system to a care-first model by enabling the Countywide expansion of youth diversion.	17,296,000	17,296,000	--	--	3.0
5. <b>Housing for Health:</b> Reflects the expansion of the Project Homekey program, fully offset with grant revenue, and benefits advocacy services for persons experiencing homelessness, fully funded with IFT from the Department of Public Social Services.	17,318,000	135,000	17,183,000	--	--
6. <b>LAC+USC Physician Services:</b> Reflects the addition of 23.0 positions, fully offset with a reduction in contracted services, to provide physician services at LAC+USC Medical Center.	--	--	--	--	23.0
7. <b>Other Position Changes:</b> Reflects a net increase of 5.0 positions to increase staffing in anesthesiology, nursing administration, critical care, obstetrics-gynecology, diagnostics, pharmacy, and various other areas.	339,000	--	290,000	49,000	5.0
8. <b>Capital Projects:</b> Reflects the LAC+USC Women's and Children's Hospital demolition project.	10,290,000	--	--	10,290,000	--
9. <b>Ministerial Changes:</b> Primarily reflects cost increases related to charges from other County departments, position reclassifications, Board-approved contracts, and other various changes.	17,752,000	(159,000)	4,074,000	13,837,000	--
10. <b>Revenue Changes and Operating Subsidies:</b> Reflects revenue adjustments primarily related to the Quality Improvement Program, as well as appropriation and revenue adjustments for operating subsidies.	(75,337,000)	--	(1,396,000)	(73,941,000)	--
<b>Total Changes</b>	<b>63,489,000</b>	<b>17,272,000</b>	<b>44,069,000</b>	<b>2,148,000</b>	<b>36.0</b>
<b>2021-22 Final Changes</b>	<b>8,730,882,000</b>	<b>503,138,000</b>	<b>7,179,039,000</b>	<b>1,048,705,000</b>	<b>25,923.0</b>



Changes from the 2021-22 Recommended Budget

	Gross Appropriation (\$)	Intrafund Transfers (\$)	Revenue (\$)	Net County Cost (\$)	Budg Pos
<b>PUBLIC HEALTH</b>					
<b>2021-22 Recommended Budget</b>	<b>1,447,245,000</b>	<b>101,392,000</b>	<b>1,132,351,000</b>	<b>213,502,000</b>	<b>5,230.0</b>
<b>1. Substance Abuse Prevention and Control (SAPC):</b> Reflects the addition of 22.0 positions and various appropriation and revenue adjustments, fully offset with an increase in revenue, primarily to assist with meeting requirements of the Drug Medi-Cal (DMC) Waiver and support the department's efforts to right-size SAPC's budget based on anticipated funding levels and expenditures.	2,342,000	--	2,342,000	--	22.0
<b>2. Operational Support Positions:</b> Reflects the addition of 2.0 positions, fully offset with the redirection of existing appropriation, to strengthen departmental functions within Information Systems and Finance.	--	--	--	--	2.0
<b>3. Local, State &amp; Federal Funding:</b> Reflects the addition of grant funding to support the California Home Visiting Program, HIV Prevention & Surveillance services, and HIV Care & Treatment activities.	9,116,000	--	9,116,000	--	--
<b>4. Ministerial Changes:</b> Reflects a decrease in time-limited funding by the Department of Mental Health for two home visitation programs.	(7,895,000)	(7,895,000)	--	--	--
<b>5. Salary and Employee Benefits:</b> Primarily reflects Board-approved increases in salary and employee benefits.	2,664,000	--	1,588,000	1,076,000	--
<b>6. eCAPS Maintenance:</b> Reflects the Department's proportional share of eCAPS maintenance cost increases.	18,000	--	15,000	3,000	--
<b>Total Changes</b>	<b>6,245,000</b>	<b>(7,895,000)</b>	<b>13,061,000</b>	<b>1,079,000</b>	<b>24.0</b>
<b>2021-22 Final Changes</b>	<b>1,453,490,000</b>	<b>93,497,000</b>	<b>1,145,412,000</b>	<b>214,581,000</b>	<b>5,254.0</b>

Changes from the 2021-22 Recommended Budget

	Gross Appropriation (\$)	Intrafund Transfers (\$)	Revenue (\$)	Net County Cost (\$)	Budg Pos
<b>MENTAL HEALTH</b>					
<b>2021-22 Recommended Budget</b>	<b>2,985,225,000</b>	<b>163,107,000</b>	<b>2,791,924,000</b>	<b>30,194,000</b>	<b>6,362.0</b>
1. <b>Probation 16 Hour Plan Pilot:</b> Reflects funding for 34.0 mental health positions, offset by intrafund transfer from the Probation Department, for a one-year pilot to expand mental health services to 16 hours per day at four units at Central Juvenile Hall as part of a Department of Justice Settlement Agreement.	5,082,000	5,082,000	--	--	34.0
2. <b>Mental Health Services Act (MHSA) – Partnerships with Other County Departments:</b> Reflects a reduction in time-limited funding and MHSA revenue that was temporarily added in prior fiscal years for nurse family partnerships and home visitation programs conducted in partnership with the Department of Public Health.	(7,895,000)	--	(7,895,000)	--	--
3. <b>Salaries and Employee Benefits:</b> Primarily reflects adjustments to salary-driven employee benefits in accordance with revised projections for Fiscal Year 2021-22.	(1,544,000)	--	--	(1,544,000)	--
4. <b>Retirement:</b> Reflects an increase in retirement rates primarily due to adjustments for prior-year investment gains and losses in the Los Angeles County Employees Retirement Association's investment portfolio.	3,703,000	--	--	3,703,000	--
5. <b>Retiree Health Insurance:</b> Reflects an adjustment to align the budget for retiree health insurance premiums with revised projections for Fiscal Year 2021-22.	(2,159,000)	--	--	(2,159,000)	--
6. <b>AB 109 Public Safety Realignment Revenue:</b> Reflects an adjustment to align the budget with projections for AB 109 Public Safety Realignment revenue.	77,000	--	77,000	--	--
7. <b>Position Adjustments – Program Support:</b> Reflects additional funding and 11.0 positions to refine the staff plan for the Board-directed health promoters' expansion that was added in the Fiscal Year 2021-22 Recommended budget.	3,944,000	--	3,944,000	--	11.0
8. <b>Position Alignments:</b> Reflects adjustments to various positions to more accurately reflect duties and responsibilities.	167,000	--	167,000	--	--
9. <b>Operating Costs:</b> Reflects miscellaneous adjustments to various revenues and expenditures to more closely reflect anticipated funding levels.	17,007,000	--	17,007,000	--	--
<b>Total Changes</b>	<b>18,382,000</b>	<b>5,082,000</b>	<b>13,300,000</b>	<b>--</b>	<b>45.0</b>
<b>2021-22 Final Changes</b>	<b>3,003,607,000</b>	<b>168,189,000</b>	<b>2,805,224,000</b>	<b>30,194,000</b>	<b>6,407.0</b>