



Behavioral Health Services Act

Community Program Planning Process



LOS ANGELES COUNTY
DEPARTMENT OF
MENTAL HEALTH
hope. recovery. wellbeing.




Overview

Presentation by the
Departments of Mental Health and
Public Health – Substance Abuse Prevention and Control
to the
Los Angeles County Behavioral Health Commission
February 13, 2025





BHSA Community Program Planning Process

- What are we directed to do?
 - Who must we include?
 - How will we design the process?
 - When will we execute?
 - What are the next steps to implementation?
- 

BHSA Community Program Planning Process

What are we directed to do?



BHSA INTEGRATED PLAN



Starting July 1, 2026, counties are required to implement an approved **integrated plan** and provide **annual updates** to the California Department of Health Care Services (DHCS) and the Commission for Behavioral Health (CBH).

BHSA Community Program Planning Process

Who must we include?



BHSA CPP

Counties shall demonstrate a **partnership** with constituents and stakeholders throughout the process that includes **meaningful stakeholder involvement** and **sufficient participation from diverse groups** in the following areas:

1. Mental health and substance use disorder policy
2. Program planning and implementation
3. Monitoring
4. Workforce
5. Quality improvement
6. Health equity
7. Evaluation
8. Budget allocation

BHSA REQUIRED STAKEHOLDERS

1. Eligible adults and older adults, as defined in Section 5892.
2. Families of eligible children and youth, eligible adults, and eligible older adults, as defined in Section 5892.
3. Youths or youth mental health or substance use disorder organizations.
4. Providers of mental health services and substance use disorder treatment services.
5. Public safety partners, including county juvenile justice agencies.
6. Local education agencies.
7. Higher education partners.
8. Early childhood organizations.
9. Local public health jurisdictions.
10. County social services and child welfare agencies.
11. Labor representative organizations.
12. Veterans.
13. Representatives from veterans' organizations.
14. Health care organizations, including hospitals.
15. Health care service plans, including Medi-Cal managed care plans as defined in subdivision (j) of Section 14184.101.
16. Disability insurers.
17. Tribal and Indian Health Program designees established for Medi-Cal Tribal consultation purposes.
18. The five most populous cities in counties with a population greater than 200,000.
19. Area agencies on aging.
20. Independent living centers
21. Continuums of care, including representatives from the homeless service provider community.
22. Regional centers.
23. Emergency medical services.
24. Community-based organizations serving culturally and linguistically diverse constituents.

DIVERSE VIEWPOINTS



- 01** Representatives from youth from historically marginalized communities.
- 02** Representatives from organizations specializing in working with underserved racially and ethnically diverse communities.
- 03** Representatives from LGBTQ+ communities.
- 04** Victims of domestic violence and sexual abuse.
- 05** People with lived experience of homelessness.

BHSA *COMMUNITY PLANNING TEAM*

PRINCIPLES

1. A critical mass of 160 members representing the social and cultural diversity of Los Angeles County.
2. Equal representation for the fields of Mental Health (MH) and Substance Use Disorder (SUD).
3. A majority of members (82) with Lived Experience (MH and/or SUD).

Categories	MH	SUD	MH + SUD	Sub-Totals
A. People with Lived Experience	41	41	N/A	82
B. Service Providers	12	12	20	44
C. Systems Representatives	0	0	34	34
Sub-Totals	53	53	54	160

CATEGORY A: PEOPLE WITH LIVED EXPERIENCE (82)

MH Stakeholder Groups (10) & Number of Representatives (41)	SUD Stakeholder Groups (8) & Number of Representatives (41)
<ol style="list-style-type: none">1. Cultural Competency Committee – MH (2)2. Eligible Adult (1)3. Eligible Older Adult (1)4. Faith-Based Advocacy Council (2)5. Families and/or caregivers of eligible children and youth, eligible adults, and eligible older adults (1)6. Homelessness/People Experiencing Homelessness (1)7. SALT Co-Chairs (16)8. UsCC Co-Chairs (14)9. Veterans (1)10. Youth Mental Health Council (2)	<ol style="list-style-type: none">1. Cultural Competency Committee – SUD (2)2. Eligible Adult (1)3. Eligible Older Adult (1)4. Families and/or caregivers of eligible children and youth, eligible adults, and eligible older adults (1)5. Homelessness/People Experiencing Homelessness (1)6. People with lived experience with substance use (inclusive of family, and/or partner, and/or frontline worker representation) (32)7. Youth Substance Use Peer Council (25 & Under) (2)8. Veterans (1)

CATEGORY B: SERVICE PROVIDERS (44)

MH Stakeholder Groups (8) & Number of Representatives (12)	SUD Stakeholder Groups (8) & Number of Representatives (12)
<ol style="list-style-type: none"> 1. Association of Community Human Service Agencies (ACHSA) (1) 2. Community Health Workers/<i>Promotoras</i> (2) 3. Housing Providers (1) 4. Housing System (1) 5. National Alliance for Mental Illness (1) 6. Peer Advisory Council (2) 7. Peer Support Specialists (2) 8. Service Providers (Non-ACHSA) (2) 	<ol style="list-style-type: none"> 1. California Association of Alcohol and Drug Program Executives (CAADPE) (1) 2. California Opioid Maintenance Providers (COMP) (1) 3. Housing Providers (1) 4. Housing System (1) 5. Substance Use Counselors (2) 6. Substance Use Harm Reduction (2) 7. Substance Use Prevention (2) 8. Substance Use Treatment (2)
MH+SUD Stakeholder Groups (5) and Number of Representatives (20)	
<ol style="list-style-type: none"> 1. First 5 Los Angeles/Early Childhood Organizations (1) 2. Health Neighborhoods (12) 3. Los Angeles County Behavioral Health Commission (2) 4. Unions (4) 5. Veterans Organization (1) 	

CATEGORY C: SYSTEMS REPRESENTATIVES (34)

County (17)	CEO: Office (1); Anti-Racism, Diversity & Inclusion (1) Departments: Aging and Disability (1); Children and Family Services (1); Firefighters/First Responders (1); Health Services (1); Justice, Care & Opportunities Department (1); Military and Veterans Affairs (1); Parks and Recreation(1); Libraries (1); Probation/Juvenile Justice (1); Psychiatric Hospitals(1); Public Defender(1); Public Health – Health Promotion (1); Public Social Services(1); Sheriff’s Department(1); Youth Development (1).
Education (5)	California State University (1); Los Angeles County Office of Education (1); Los Angeles Community College District (1); Los Angeles Unified School District (1); University of California (1).
Local Governments & Quasi-Governmental Agencies (12)	<u>Local Health Jurisdictions:</u> Long Beach (1) and Pasadena (1) <u>Most Populous Cities:</u> Glendale (1); Lancaster (1); Long Beach (already included); Los Angeles (1); Santa Clarita (1) <u>Quasi-Governments:</u> Disability Insurers (1); Health Care Organizations/Hospitals (1); Los Angeles Homeless Services Authority (1); Managed Care Plans (1); Regional Centers (1); Tribal and Indian Health Program designees established for Medi-Cal Tribal consultation purposes (1).



BHSA Community Program Planning Process

How will we design the process?

DRAFT BHSA CPP PROCESS

PHASE 1: OUTREACH & INPUT	PHASE 2: RECOMMENDATIONS	PHASE 3: CONSENSUS
April May June	July August September	October November December
FOCUS: Foundation Building + Outreach & Input	FOCUS: Workgroup Recommendations	FOCUS: Stakeholder Agreement

FOUNDATION BUILDING

BHSA CPT

- Affirms Shared Vision.
- Charters Workgroups focused on Integrated Plan topics.
- Analyzes MH & SUD Systems, Data & Disparities.

OUTREACH & INPUT

Stakeholder Groups

- Forums
- Focus Groups
- Interviews

WORKGROUPS

- Workgroups are open to the public for full participation.
- Workgroups conduct analysis focused on specific topics and produce recommendations to the BHSA CPT for the Integrated Plan, addressing disparities.

BHSA CPT

- Reviews Workgroup recommendations for the Integrated Plan.
- Builds consensus on key recommendations for the Integrated Plan.

BHSA Community Program Planning Process

When will we execute?



BHSA INTEGRATED PLAN APPROVAL

PHASE 4: INTEGRATED PLAN APPROVAL

DRAFT INTEGRATED PLAN	POST INTEGRATED PLAN	HOLD PUBLIC HEARING	APPROVE INTEGRATED PLAN		
JANUARY	FEBRUARY	APRIL	MAY	MAY/JUNE	JUNE
<ul style="list-style-type: none">• Department Directors review.• Write draft Integrated Plan.• LA County Counsel vets Integrated Plan.• Summarize Integrated Plan in plain language.• Translate Integrated Plan.	<ul style="list-style-type: none">• 30-Day Public Posting• Collect and summarize feedback from stakeholder groups.	<ul style="list-style-type: none">• Los Angeles County Behavioral Health Commission holds a Public Hearing on the Integrated Plan and proposes changes (if any).	Los Angeles County Board of Supervisors reviews Integrated Plan, makes changes (if any), and votes to approve.	California Department of Health Care Services (DHCS) - Submission and review.	Commission for Behavioral Health (CBH) - Submission and review.

BHSA Community Program Planning Process


What are the next steps to implementation?





NEXT STEPS



- **FEBRUARY 2025** – Finalize BHSA CPT membership list and document shared understanding of BHSA.
 - **MARCH 2025** – Hold Kick Off for BHSA Community Program Planning process.
 - **APRIL 2025** – Begin the Outreach and Input Phase of the BHSA Community Program Planning process.
- 



Behavioral Health Services Act Community Program Planning Process



Thank You for Your Attention!

A grayscale background image of an office interior, showing desks, chairs, and filing cabinets.