

File No. 100922

Committee Item No. 6

Board Item No. 03

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee CITY OPERATIONS AND
NEIGHBORHOOD SERVICES

Date 9/13/10

Board of Supervisors Meeting

Date 09/28/10

Cmte Board

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| <input type="checkbox"/> | <input type="checkbox"/> | Resolution |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Ordinance |
| <input type="checkbox"/> | <input type="checkbox"/> | Legislative Digest |
| <input type="checkbox"/> | <input type="checkbox"/> | Budget Analyst Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Legislative Analyst Report |
| <input type="checkbox"/> | <input type="checkbox"/> | Introduction Form (for hearings) |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Department/Agency Cover Letter and/or Report |
| <input type="checkbox"/> | <input type="checkbox"/> | MOU |
| <input type="checkbox"/> | <input type="checkbox"/> | Grant Information Form |
| <input type="checkbox"/> | <input type="checkbox"/> | Grant Budget |
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| <input type="checkbox"/> | <input type="checkbox"/> | Award Letter |
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OTHER

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Completed by: Gail Johnson

Date 9/9/10

Completed by: _____

Date _____

An asterisked item represents the cover sheet to a document that exceeds 25 pages.
The complete document is in the file.

of 16, P

1 [Authorizing the Department of Public Health to Enter Into Contracts for Out-of-County
2 Behavioral Health Services for Children in the Foster Care System]

3 Ordinance amending the San Francisco Administrative Code by amending Section
4 21.42 to authorize the Department of Public Health to contract for behavioral health
5 services to children in the foster care system under the jurisdiction of the City and
6 County of San Francisco and located outside of San Francisco, utilizing contracting
7 language and forms mandated by the State of California under California Welfare and
8 Institutions Code Section 5777.7.

9 Note: Additions are *single-underline italics Times New Roman*;
10 deletions are ~~*strikethrough italics Times New Roman*~~.
11 Board amendment additions are double underlined.
12 Board amendment deletions are ~~strikethrough normal~~.

13 Be it ordained by the People of the City and County of San Francisco:

14 Section 1. The San Francisco Administrative Code is hereby amended by amending
15 Section 21.42, to read as follows:

16 SEC. 21.42 - PROFESSIONAL SERVICES CONTRACTS FOR HEALTH AND
17 BEHAVIORAL HEALTH SERVICES AND SUPPORT.

18 (a) The Board of Supervisors hereby authorizes the San Francisco Health Commission
19 to designate as sole source, professional services contracts for health and behavioral health
20 services and support, where such services are provided by non-profit organizations and a sole
21 source designation is recommended by the San Francisco Department of Public Health.

22 (b) Prior to the expiration of an existing contract, the Director of the Department of
23 Public Health will survey the availability of providers for the health and behavioral health
24 services and support services required by the Department of Public Health where such
25 services are 1) unique to the Department of Public Health, (2) consistent with the its mission

1 and goals, and (3) require specialized knowledge, training, personnel, facilities or other
2 resources that are known to be provided by a limited number of non-profit contractors. Based
3 upon the results of such surveys, the Director of the Department of Public Health may
4 recommend a sole source designation to the San Francisco Health Commission for those
5 services.

6 (c) Nothing herein limits the ability of the Department of Public Health to engage in a
7 competitive process for services provided by non-profit providers.

8 (d) The Board of Supervisors authorizes the Department of Public Health to contract for
9 behavioral health services to children in the foster care system under the jurisdiction of the City and
10 County of San Francisco and located outside of San Francisco utilizing contracting language and
11 forms mandated by the State of California under California Welfare and Institutions Code section
12 5777.7.

13
14 APPROVED AS TO FORM:
15 DENNIS J. HERRERA, City Attorney

16 By:


17 Terence Howzell
18 Deputy City Attorney



TO: Angela Calvillo, Clerk of the Board of Supervisors
FROM: ~~POV~~ Mayor Gavin Newsom ~~NN~~
RE: Amendment to the Administrative Code to Authorize the Department of Public Health to Enter Into Contracts for Out-Of-County Behavioral Health Services for Children in the Foster Care System Using State-Mandated Contract Language and Forms
DATE: July 13, 2010

Dear Madame Clerk:

Attached for introduction to the Board of Supervisors is the ordinance amending the San Francisco Administrative Code by amending Section 21.42 to authorize the Department of Public Health to contract for behavioral health services to children in the foster care system under the jurisdiction of the City and County of San Francisco and located outside of San Francisco, utilizing contracting language and forms mandated by the State of California under California Welfare and Institutions Code section 5777.7.

I request that this item be calendared in City Operations and Neighborhood Services Committee on July 26, 2010.

Should you have any questions, please contact Nicole Wheaton (415) 554-7940.

5777.7. (a) In order to facilitate the receipt of medically necessary specialty mental health services by a foster child who is placed outside his or her county of original jurisdiction, the State Department of Mental Health shall take all of the following actions:

(1) On or before July 1, 2008, create all of the following items, in consultation with stakeholders, including, but not limited to, the California Institute for Mental Health, the Child and Family Policy Institute, the California Mental Health Directors Association, and the California Alliance of Child and Family Services:

(A) A standardized contract for the purchase of medically necessary specialty mental health services from organizational providers, when a contract is required.

(B) A standardized specialty mental health service authorization procedure.

(C) A standardized set of documentation standards and forms, including, but not limited to, forms for treatment plans, annual treatment plan updates, day treatment intensive and day treatment rehabilitative progress notes, and treatment authorization requests.

(2) On or before January 1, 2009, use the standardized items as described in paragraph (1) to provide medically necessary specialty mental health services to a foster child who is placed outside his or her county of original jurisdiction, so that organizational providers who are already certified by a mental health plan are not required to be additionally certified by the mental health plan in the county of original jurisdiction.

(3) (A) On or before January 1, 2009, use the standardized items described in paragraph (1) to provide medically necessary specialty mental health services to a foster child placed outside his or her county of original jurisdiction to constitute a complete contract, authorization procedure, and set of documentation standards and forms, so that no additional documents are required.

(B) Authorize a county mental health plan to be exempt from subparagraph (A) and have an addendum to a contract, authorization procedure, or set of documentation standards and forms, if the county mental health plan has an externally placed requirement, such as a requirement from a federal integrity agreement, that would affect one of these documents.

(4) Following consultation with stakeholders, including, but not limited to, the California Institute for Mental Health, the Child and Family Policy Institute, the California Mental Health Directors Association, the California State Association of Counties, and the California Alliance of Child and Family Services, require the use of the standardized contracts, authorization procedures, and documentation standards and forms as specified in paragraph (1) in the 2008-09 state-county mental health plan contract and each state-county mental health plan contract thereafter.

(5) The mental health plan shall complete a standardized contract, as provided in paragraph (1), if a contract is required, or another mechanism of payment if a contract is not required, with a provider or providers of the county's choice, to deliver approved specialty mental health services for a specified foster child, within 30 days of an approved treatment authorization request.

(b) The California Health and Human Services Agency shall coordinate the efforts of the State Department of Mental Health and the State Department of Social Services to do all of the following:

(1) Participate with the stakeholders in the activities described in this section.

(2) During budget hearings in 2008 and 2009, report to the Legislature regarding the implementation of this section and subdivision (c) of Section 5777.6.

(3) On or before July 1, 2008, establish the following, in consultation with stakeholders, including, but not limited to, the California Mental Health Directors Association, the California Alliance of Child and Family Services, and the County Welfare Directors Association of California:

(A) Informational materials that explain to foster care providers how to arrange for mental health services on behalf of the beneficiary in their care.

(B) Informational materials that county child welfare agencies can access relevant to the provision of services to children in their care from the out-of-county local mental health plan that is responsible for providing those services, including, but not limited to, receiving a copy of the child's treatment plan within 60 days after requesting services.

(C) It is the intent of the Legislature to ensure that foster children who are adopted or placed permanently with relative guardians, and who move to a county outside their original county of residence, can access mental health services in a timely manner. It is the intent of the Legislature to enact this section as a temporary means of ensuring access to these services, while the appropriate stakeholders pursue a long-term solution in the form of a change to the Medi-Cal Eligibility Data System that will allow these children to receive mental health services through their new county of residence.