PERSONAL SERVICES CONTRACT SUMMARY ("PSC FORM 1")

Department: PUBLIC HEALTH Dept. Code: DPH

Type of Request: ☐Initial ☑Modification of an existing PSC (PSC # 48652 - 16/17)

Type of Approval: ☐Expedited ☑Regular ☐Annual ☐Continuing ☐ (Omit Posting)

Type of Service: Substance Use Disorder (SUD) Treatment Services

Funding Source: State Drug MediCal, General Fund

PSC Original Approved Amount: $192,080,000 PSC Original Approved Duration: 07/01/17 - 06/30/22 (5 years)

PSC Mod#1 Amount: $175,800,000 PSC Mod#1 Duration: 07/01/22-06/30/27 (5 years 1 day)

PSC Mod#2 Amount: no amount added PSC Mod#2 Duration: 07/01/27-06/30/28 (1 year 1 day)

PSC Mod#3 Amount: no amount added PSC Mod#3 Duration: 07/01/28-06/30/29 (1 year)

PSC Cumulative Amount Proposed: $367,880,000 PSC Cumulative Duration Proposed: 12 years 2 days

1. Description of Work

A. Scope of Work/Services to be Contracted Out:

These services will be provided by contractors responding to a new RFP to create a Drug Medi-Cal Organized Delivery System (DMC-ODS) pilot, which tests a new paradigm for the organized delivery of health care services for Medicaid eligible individuals with a substance use disorder. Its purpose is to demonstrate how such a system will increase the success of DMC beneficiaries while decreasing other system health care costs. Critical elements include:

--Providing a continuum of care modeled after the American Society of Addiction Medicine (ASAM) Criteria for Substance Use Disorder (SUD) treatment services, which describes specific service levels within Opioid Treatment, Intensive Outpatient, and Residential SUD services;

--Increasing local control and accountability, creating utilization controls, and increasing program oversight and integrity;

--Requiring evidence-based practices and increasing coordination with other systems of care, including primary care and mental health;

--Expanding the SUD treatment workforce by including Licensed Practitioners of Healing Arts; and

--Providing more intensive services for the criminal justice population.

Services will:

--Prioritize services to specific populations, including persons who are Black/African American, homeless, incarcerated or involved with the criminal/juvenile justice systems/Drug Court, adolescents aged 10-18 years old, Transitional Aged Youth (TAY) aged 18-24 years old, Lesbian/Gay/Bisexual/Transgender/Queer/Questioning/Intersex/Ally/Two-Spirit, Pregnant/Parenting women with children, and/or whose primary substance is alcohol.

--Prioritize services in specific geographic areas, including Hayes Valley/Tenderloin/North of Market, South of Market, Bernal Heights/Inner Mission/94110, Bayview Hunter's Point/94124, and Southeast/Visitacion Valley/Sunnydale/94134

--Include patient engagement and peer support, medication assisted treatment, withdrawal management, case management, and recovery services and supports, with appropriate integration of adolescent-specific

considerations, pregnant women and women with dependent children residential treatment requirements, evidence-based practices, DMC-ODS compliant policies and regulations, electronic health records and data systems, evaluation and quality improvement, workforce development and staffing, ancillary treatment and outreach services.

B. Explain why this service is necessary and the consequence of denial:
The State funding that San Francisco receives for Substance Use Disorder treatment is now the result of California's Medi-Cal waiver, which received Federal approval August 2015 and was rolled out to counties in steps throughout 2016. This waiver allows counties to support a much wider range of options to people with low incomes who are on Medi-Cal. Without this funding, San Francisco's funding for SUD treatment would be severely limited and people needing these services would likely be untreated and/or require significant increases in repetitive primary care and mental health treatment, experiencing worsening symptoms, requiring more expensive treatment, and escalating mortality rates.

C. Has this service been provided in the past? If so, how? If the service was provided under a previous PSC, attach copy of the most recently approved PSC.
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D. Will the contract(s) be renewed?
Yes, as funding is available.

E. If this is a request for a new PSC in excess of five years, or if your request is to extend (modify) an existing PSC by another five years, please explain why:
The Department expects the need for the services to continue.

2. <u>Reason(s) for the Request</u>

A. Display all that apply

☑ Services that require resources that the City lacks (e.g., office space, facilities or equipment with an operator).

Explain the qualifying circumstances:
The City does not have the facilities (including buildings for residential services) or capacity to provide these services, which provide an integral part of the City's system of care for people with substance abuse disorder diagnoses.

B. Reason for the request for modification:
To align the duration with the anticipated contract term.

3. <u>Description of Required Skills/Expertise</u>

A. Specify required skills and/or expertise: Contractors must provide services responsive to the requirements and goals of the new DMC-ODS pilot founded on values of a trauma-informed system of care, the practice of cultural humility and of whole person care, utilizing multi-dimensional assessments as specified by the American Society of Addiction Medicine (ASAM) criteria and an evidence-based, clinically/outcomes-driven treatment model that is person-centered, based on the person's illness and level of functioning, operating within the broad and flexible continuum of care, providing individualized treatment that can be stepped up or down to different care levels, and implemented with an interdisciplinary team approach in collaboration with the person's medical home, behavioral health clinics, and other services providers. All providers must also meet State and City requirements for Drug Medi-Cal certification, harm reduction, cultural and linguistic competency, Americans with Disabilities Act and other access requirements, as well as have the ability to serve priority service populations and geographic service areas.

B. Which, if any, civil service class(es) normally perform(s) this work? 2110, Medical Records Clerk; 2305, Psychiatric Technician; 2320, Registered Nurse; 2328, Nurse Practitioner; 2552, Dir of Act, Therapy & Vol

Svcs; 2574, Clinical Psychologist; 2585, Health Worker 1; 2586, Health Worker 2; 2587, Health Worker 3; 2588, Health Worker 4; 2589, Health Program Coordinator 1; 2591, Health Program Coordinator 2; 2593, Health Program Coordinator 3; 2822, Health Educator; 2908, Hospital Eligiblity Worker; 2910, Social Worker; 2913, Program Specialist; 2915, Program Specialist Supervisor; 2920, Medical Social Worker; 2930, Psychiatric Social Worker; 2935, Sr Marriage, Fam & Cld Cnslr;

C. Will contractor provide facilities and/or equipment not currently possessed by the City? If so, explain: Yes, contractors will provide their own treatment and office space, including buildings for residential treatment, as licensed/required by the State.

4. If applicable, what efforts has the department made to obtain these services through available resources within the City?

Not Applicable

5. Why Civil Service Employees Cannot Perform the Services to be Contracted Out

A. Explain why civil service classes are not applicable.
Existing civil service classes are already overburdened with the current maximum level of delivery of local government-based services which can be provided by the City and County. The remainder of the substance use disorder treatment services within the City's system of care must be based in and often is best performed by community based organizations with the experience, focus, and often the trust of and credibility in the community, who are able to operate the flexible, grassroots-oriented programs.

B. If there is no civil service class that could perform the work, would it be practical and/or feasible to adopt a new civil service class to perform this work? Explain: No, there are existing classifications performing this work, however, the demand for services exceeds the capacity of City facilities to provide them, so the City uses contractors to meet as many of the clients' needs as possible.

6. Additional Information

A. Will the contractor directly supervise City and County employee? If so, please include an explanation.
No.

B. Will the contractor train City and County employees and/or is there a transfer of knowledge component that will be included in the contact? If so, please explain what that will entail; if not, explain why not.
The purpose of the services is does not include formal training of civil service staff, however, there may be transfer of knowledge through City staff's close coordination and collaboration with providers.

C. Are there legal mandates requiring the use of contractual services?
No.

D. Are there federal or state grant requirements regarding the use of contractual services? If so, please explain and include an excerpt or copy of any such applicable requirement.
No.

E. Has a board or commission determined that contracting is the most effective way to provide this service? If so, please explain and include a copy of the board or commission action.
No

F. Will the proposed work be completed by a contractor that has a current PSC contract with your department? If so, please explain.
Please see attached list of current contractors.

7. Union Notification: On 05/30/24, the Department notified the following employee organizations of this PSC/RFP request:
SEIU Local 1021; SEIU 1021 Miscellaneous; Professional & Tech Engrs, SFAPP; Professional & Tech Engrs, Local 21; Prof & Tech Eng, Local 21; Management & Superv Local 21; Architect & Engineers, Local 21;

☑ I CERTIFY ON BEHALF OF THE DEPARTMENT THAT THE INFORMATION CONTAINED IN AND ATTACHED TO THIS FORM IS COMPLETE AND ACCURATE:

Name: Reanna Albert Phone: 628-271-6178 Email: reanna.albert@sfdph.org

Address: 101 Grove Street, Room 307, San Francisco, CA 94103

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FOR DEPARTMENT OF HUMAN RESOURCES USE

PSC# 48652 - 16/17
DHR Analysis/Recommendation:
Commission Approval Not Required
Approved by DHR on 09/06/2024