



{ 2024-25 }

# *Annual Report*

**CalMHSA**

California Mental Health Services Authority



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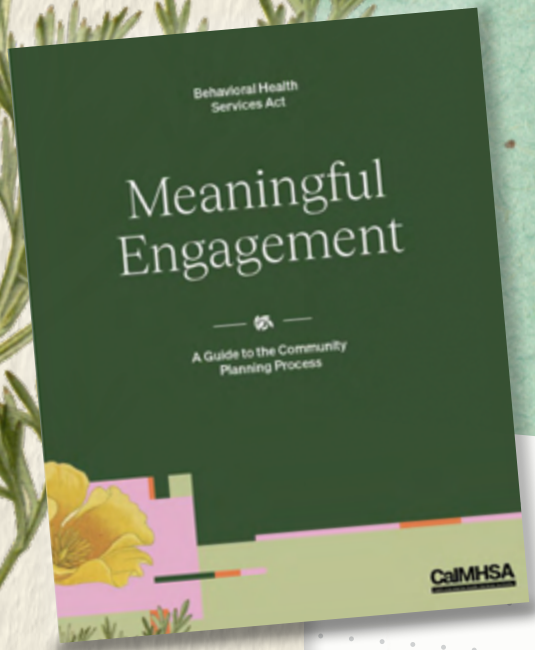
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# *Behavioral Health Transformation*





With major changes in public behavioral health from the Behavioral Health Services Act (BHSA), CalMHSA began a new collaboration with DHCS to deeply support counties with training and technical assistance for implementation.





## 4 COUNTY TRAININGS

## 1 CBO TRAINING

## 2 NEW GUIDEBOOKS







# COMMUNITY PLANNING PROCESS: CREATING THE INTEGRATED PLAN

Meaningfully integrated county leaders' and stakeholder feedback to help counties create the first Integrated Plan as required by the BHSA:

- A guidebook designed with county and community feedback that includes clear timelines, structured processes, decision points, and tools
- A webinar and an in-person workshop to detail the process and the tools, and help counties customize them for local effectiveness

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# HOUSING ISSUES AND COORDINATION

- Convened **150 leaders from 45 counties** to learn best practices for housing, budgeting, and application support, as well as data to inform decision-making
- Created a housing and behavioral health workbook and trainings, with resources for understanding the housing continuum of care and how to partner with housing agencies and providers







# MEDI-CAL CORE COMPETENCIES FOR CBOs

Designed a series of five on-demand trainings to help CBOs become Medi-Cal certified. Topics include:

- Medi-Cal requirements
- Public behavioral health financing & budgeting
- Site certification & standards for county contracting
- Maintaining a credentialed workforce
- Clinical readiness

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# Strengthening the Behavioral Health Workforce





# MEDI-CAL PEER SUPPORT SPECIALIST CERTIFICATION

As the statewide certifying entity for Medi-Cal Peer Support Specialists, CalMHSA continued to uplift the voice of Peers.

- Certifying **500 new Peers** in **13 counties** over a three-month period in early 2025
- Convening more than **100 Peers** in person to learn practical strategies and best practices for working with counties
- In-person training for leaders from **21 counties** focused on how peers enhance behavioral health delivery
- Expanded certification process by offering the exam in **10 languages**
- Training more than **400 justice-involved individuals at nine state correctional facilities** — and offering a certification exam for those trained
- A job board highlighting career opportunities for Peers





This year, highlights included expanded training for both Peers and counties, and broadening opportunities for more individuals to reach certification.

*more than*

6,000

PEERS CERTIFIED  
STATEWIDE

68%

RECEIVED DHCS-FUNDED  
SCHOLARSHIPS

50

APPROVED TRAINING PROVIDERS





*“I believe in the transformative power of peer support in behavioral health. Through uplifting lived experience, we drive meaningful, lasting outcomes.”*

**AMIE MILLER**

*CalMHSA Executive Director*

## *Counties participating:*

Amador, Calaveras, Contra Costa, Del Norte, El Dorado, Fresno, Glenn, Humboldt, Kern, Kings, Lake, Lassen, Los Angeles, Madera, Marin, Merced, Modoc, Mono, Monterey, Napa, Nevada, Orange, Placer, San Benito, San Bernardino, San Diego, San Francisco, San Joaquin, San Luis Obispo, San Mateo, Santa Barbara, Santa Clara, Santa Cruz, Shasta, Sierra, Siskiyou, Solano, Sonoma, Stanislaus, Sutter/Yuba, Tehama, Trinity, Tulare, Ventura, Yolo



# REMOTE CLINICAL SUPERVISION

For counties that need access to clinical supervisors for pre-licensed staff, CalMHSA partners with a provider successful in offering to-scale remote supervision services. This ensures:

- Counties can secure essential supervision for clinical staff
- Counties can separate clinical from administrative supervision
- Staff receive supervision that is 100% dedicated to their clinical needs
- Additional leverage for counties in clinician recruitment & retention

## *Counties participating:*

Amador, Contra Costa, Del Norte, El Dorado, Inyo, Lake, Madera, Mono, Nevada, Placer, San Joaquin, San Mateo, Siskiyou, Sonoma, Trinity, Tulare, Yolo



156 PROFESSIONALS

11 COUNTIES

*more than*  
6,000 SUPERVISION  
HOURS PROVIDED

*in 2024,  
an estimated* 130,000 PATIENT HOURS





# WORKFORCE EDUCATION AND TRAINING (WET)

Partnering with counties on the WET component of the Mental Health Services Act, CalMHSA lent operational expertise and practical support for workforce loan repayment, undergraduate scholarships and post-graduate stipends, resulting in:

**\$7.8M** IN LOANS

**761** RECIPIENTS

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## Counties participating:

Alameda, Alpine, Amador, Butte, Calaveras, City of Berkeley, Colusa, Contra Costa, Del Norte, Fresno, Glenn, Humboldt, Imperial, Kern, Kings, Lake, Lassen, Los Angeles, Madera, Marin, Mariposa, Mendocino, Merced, Modoc, Mono, Monterey, Napa, Nevada, Orange, Placer, Plumas, Riverside, Sacramento, San Benito, San Bernardino, San Diego, San Francisco, San Joaquin, San Luis Obispo, San Mateo, Santa Barbara, Santa Clara, Santa Cruz, Sierra, Siskiyou, Solano, Sutter/Yuba, Tehama, Tri-Cities, Trinity, Tulare, Tuolumne, Ventura, Yolo





# Health IT



# SEMI-STATEWIDE ELECTRONIC HEALTH RECORD

The 25 counties using CalMHSA's EHR further enhanced their care delivery with a system that:

- Builds efficiencies
- Is scalable for greater reach
- Allows clinicians to spend less time on screens and more time caring

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## Counties participating:

Colusa, Contra Costa, Fresno, Glenn, Humboldt, Imperial, Kern, Kings, Lake, Madera, Marin, Mono, Nevada, Placer, Sacramento, San Benito, San Diego, San Joaquin, San Luis Obispo, Santa Barbara, Siskiyou, Sonoma, Stanislaus, Tulare, Ventura



# SEMI-STATEWIDE ELECTRONIC HEALTH RECORD

*highlights:*

## E-Prescribing

- **A mature e-prescribing platform** – CalMHSA Rx – focused on patient safety and ease of use
- **Robust outpatient prescribing** that meets industry standards for order signature and processes to pharmacy

## CARE Act Processes

- Live for all counties in **December 2024**
- Includes state reporting processes, reimbursement invoicing, and documenting CARE Act activities





# SEMI-STATEWIDE ELECTRONIC HEALTH RECORD

## highlights:

### Revenue Cycle Management

- Expanded to **13 counties**
- **\$405.29 million** in claims submitted on behalf of RCM counties
- **\$248.78 million** received by counties for claims submitted by CalMHSA
- **Operational enhancements** enable early and timely error correction
- Audit & remediation support

“Specialty behavioral health claiming is exponentially more complex than standard healthcare. We have built a team of specialists to take on this complex business function for counties so scarce local resources can be focused on client care.”

**AMIE MILLER**

*CalMHSA Executive Director*



# CALMHSA CONNEX: COMPLIANCE WITH CMS INTEROPERABILITY

A specialized platform for secure sharing of behavioral health information. The 22 counties participating were set for full compliance with state interoperability requirements.

- Used in **25 counties**
- Extends to **35% of Medi-Cal beneficiaries**
- **18 counties** granted funding to advance data exchange
- A **major milestone** that advances health care data exchange standards and supports client-centered care
- Completed a **pivotal onboarding process** with a network of partners that use a common framework (Carequality)
- Now meets current **California Data Exchange Framework** requirements



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## *Counties participating:*

Colusa, Fresno, Glenn, Humboldt, Imperial, Kern, Kings, Lake, Madera, Marin, Mono, Nevada, Placer, Sacramento, San Benito, San Joaquin, San Luis Obispo, Santa Barbara, Siskiyou, Sonoma, Stanislaus, Tulare, Ventura





# Measuring & Monitoring Impact





CalMHSA's team of epidemiologists, managed care specialists, data analytic experts, and quality improvement professionals collaborates with counties to engage stakeholders, understand barriers, identify interventions, and monitor impact.

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9

HEDIS MEASURES CALCULATED  
FOR COUNTIES THAT RUN MENTAL  
HEALTH PLANS AND DRUG MEDI-CAL  
ORGANIZED DELIVERY SYSTEM PLANS

44

COUNTIES ASSISTED  
WITH HEDIS



# QUALITY MEASUREMENT REPORTING

Calculated Healthcare Effectiveness Data and Information Set (HEDIS) measures on behalf of 44 county Mental Health Plans and Drug Medi-Cal Organized Delivery System Plans.

- Technical assistance & support to county plans to ensure successful submission of performance rates and associated deliverables
- Collaboration with CBHDA, HSAG and DHCS on process and coding issues to accurately capture the breadth of services provided by county behavioral health plans
- Serving as expert faculty for the DHCS-sponsored Institute of Healthcare Improvement Medi-Cal Behavioral Health Collaborative






# ENHANCED ANALYTICS/ DASHBOARDING

For counties using CalMHSA's SmartCare EHR, developed dashboards with actionable insights into multiple areas of operations including:

- Provider network and benefit management
- Claiming and fiscal optimization
- Initiative implementation








# EQRO AUDITS

**EQRO TA:** Technical assistance helped counties navigate new external quality review organization (EQRO) audit submissions and processes, including supporting HEDIS performance measure validation and information systems capabilities assessment.



*“Your preparation, input, system demonstrations, and expertise were so greatly appreciated, and contributed to what we thought was a pretty smooth review!”*

**COUNTY STAFF**



# EQRO AUDITS

**PIPs:** Supported Performance Improvement Projects through coaching, writing and data support, and assistance with re-submission activities.

## *Counties participating:*

Contra Costa, Fresno, Humboldt, Imperial, Kings, Marin, Nevada, Sacramento, San Benito, San Joaquin, Siskiyou, Stanislaus, Tulare



# Supporting Care for Californians



**Take Action**   
FOR MENTAL HEALTH





# PUBLIC AWARENESS AND OUTREACH

The statewide **Take Action for Mental Health** campaign promotes awareness with the ultimate goal of reducing stigma and preventing suicide.





# PUBLIC AWARENESS AND OUTREACH

## Mental Health Awareness Month

A theme of Mental Health as a Continuum prompted Californians to reflect on where they are and to meet themselves with care and understanding. To reach the broadest possible audience, CalMHSA's campaign used:

- Social media & digital marketing tools
- Culturally responsive resources
- Social influencers
- Toolkits for counties



FACEBOOK & INSTAGRAM  
ADS IN MAY PROMOTED  
MENTAL HEALTH  
AWARENESS MONTH TO  
MILLIONS OF PEOPLE.



# PUBLIC AWARENESS AND OUTREACH

## Focused Outreach

Custom campaigns featured Facebook and Instagram posts, posters for underserved and under resourced communities, tip sheets, educational guides, and more, for:

- Suicide Prevention Month
- Winter Wellness
- AAPI Heritage Month
- Black History Month
- ACEs Awareness



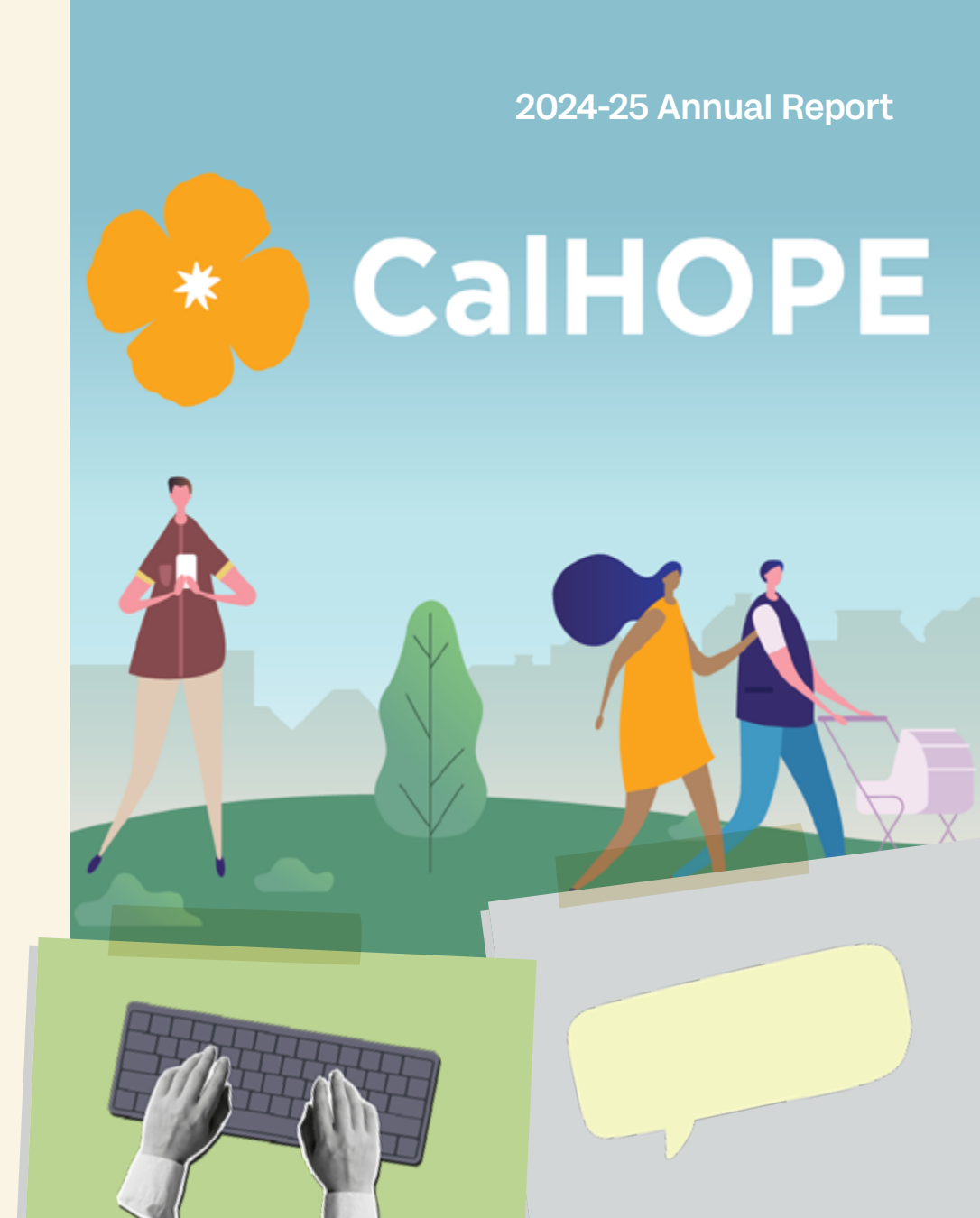


# STATEWIDE CRISIS COUNSELING: CalHOPE CONNECT

Leading the crisis counseling component of DHCS's statewide CalHOPE program since 2020 – including an innovative chat app.

In 2024-25, CalMHSA's oversight of subcontracted agencies helped them provide outreach to their communities:

- **2,552 outreach events** reaching over **35,000 Californians**
- **500 outreach events** held at schools or colleges
- Over **8,000 counseling chats** on the CalHOPE Connect chat app





# BIG LOCAL IMPACT

Serving Sacramento, Tulare, Sutter-Yuba, Sonoma, and the Tri-Cities:

- Administered **\$10.5 million** in grants
- **50 community-based organizations**
- Awardees hosted over **1,500 events**
- Reached more than **20,000 individuals** with culturally relevant mental wellness programs.





# BIG LOCAL IMPACT

In Los Angeles County, fostering community engagement in mental health for Mental Health Awareness Month:

- Administered **\$4.2 million** in grants
- **67 organizations**
- **97 events**
- More than **20 languages**





# *PRESUMPTIVE TRANSFER: ENSURING CARE FOR FOSTER YOUTH*

Helps counties meet statutory requirements by streamlining inter-county billing for services provided to foster youth while placed out of county.

This year's enhancements:

- Fiscal accuracy and transparency
- Invoicing and payment tools that reduce administrative burden
- Standardized portal updates
- Expanded training and improved user support
- Incorporating state law requirements to ensure county compliance





# PRESUMPTIVE TRANSFER: ENSURING CARE FOR FOSTER YOUTH

## *Looking Forward*

Build foundational functionality to support future cross-county fund transfers, multi-county contracting, and large-scale fiscal intermediary support and payment systems beyond presumptive transfer requirements.

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## Counties participating:

Alameda, Alpine, Amador, Butte, Calaveras, City of Berkeley, Colusa, Contra Costa, Del Norte, Fresno, Glenn, Humboldt, Imperial, Kern, Kings, Lake, Lassen, Los Angeles, Madera, Marin, Mariposa, Mendocino, Merced, Modoc, Mono, Monterey, Napa, Nevada, Orange, Placer, Plumas, Riverside, Sacramento, San Benito, San Bernardino, San Diego, San Francisco, San Joaquin, San Luis Obispo, San Mateo, Santa Barbara, Santa Clara, Santa Cruz, Sierra, Siskiyou, Solano, Sutter/Yuba, Tehama, Tri-Cities, Trinity, Tulare, Tuolumne, Ventura, Yolo



# STATE HOSPITAL BEDS

Supporting counties with the Department of State Hospitals (DSH) on cost and availability of hospital beds for individuals mandated to civil commitment under the Lanterman-Petris-Short (LPS) Act.

In 2024-25, CalMHSA created a data-driven bed allocation plan to promote equity, access, and transparency. Other highlights:

- Negotiated multi-year rate agreements that avoid over **\$30 million** in projected county costs in FY 2025-26.
- **Expanded to 581** the number of beds statewide effective July 1, 2025
- Developed tools for improved utilization tracking, streamlined referral coordination, and proactive capacity planning

## Counties participating:

Alameda, Butte, Calaveras, Colusa, Contra Costa, El Dorado, Imperial, Kings Kern, Lassen, Los Angeles, Marin, Merced, Riverside, Sacramento, San Bernardino, San Diego, San Francisco, San Luis Obispo, Santa Barbara, Santa Cruz, Shasta, Siskiyou, Solano, Stanislaus, Tulare, Yolo



# Managed Care & Operational Improvements





# MANAGED CARE AND OPERATIONAL IMPROVEMENTS

## Faster Credentialing Process

Partnered with a National Committee for Quality Assurance-certified Credentialing Verification Organization to accelerate the time to credentialing while increasing counties' capacity to serve clients.

### Features:

- Regulatory Compliance
- Cost Effectiveness
- Efficiency
- Centralized Administrative Functions
- Virtual Committee Functionality
- Reporting and Analytics



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## Counties participating:

Calaveras, Kings, Marin, Monterey, Napa, Nevada, San  
Joaquin, San Mateo, Stanislaus



*of 9 participating counties, more than*

**1,200** PROVIDERS  
CREDENTIALIED

AVERAGE  
CREDENTIALING  
TURNAROUND =

**4** *days*



## Psychiatric Inpatient Concurrent Review

Leveraging our scale and established vendor collaboration, CalMHSA continues to help simplify the inpatient psychiatric authorization request and concurrent review process for county mental health plans, hospitals, and psychiatric health facilities.

- **26 counties** participating
- More than **28,000 hospitalizations** reviewed
- **100% reimbursable** under Prop. 30
- Cost is well below standard rates

## *Counties participating:*

Contra Costa, El Dorado, Fresno, Glenn, Kings, Lake, Madera, Modoc, Monterey, Napa, Nevada, Placer, Sacramento, San Bernadino, San Joaquin, San Luis Obispo, San Mateo, Santa Barbara, Shasta, Siskiyou, Solano, Sonoma, Stanislaus, Sutter-Yuba, Tulare



## Quality Assurance

For counties using the SmartCare EHR, we used data-driven insights to streamline processes, strengthen compliance, increase knowledge of policy development, and improve workforce retention, with:

- Policy Development
- DHCS Compliance Audit Preparation, Coordination & Response
- Chart Review Tools and Coaching







**CalMHSA**  
California Mental Health Services Authority



Questions? Email [info@calmhsa.org](mailto:info@calmhsa.org)