

COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH

F A C T S H E E T

**APPROVAL OF 117 FUNDING AGREEMENTS FOR
THE INFORMATION TECHNOLOGY PLAN OF THE TECHNOLOGICAL NEEDS
COMPONENT OF THE MENTAL HEALTH SERVICES ACT
(ALL SUPERVISORIAL DISTRICTS)
(3 VOTES)**

SUBJECT

Request approval of 117 Funding Agreements for the Contract Provider Technology Project under the Information Technology Plan of the Capital Facilities and Technological Needs Component of the Mental Health Services Act.

REQUEST

Approve and authorize the Director of Mental Health, or his designee, to prepare, sign, and execute 117 funding agreements for the Contract Provider Technology Project (CPTP) under the Information Technology Plan of the Capital Facilities and Technological Needs Component of the Mental Health Services Act (MHSA), to prepare for, and assist in, the transition of contract providers of mental health services to a fully electronic exchange of information with the Department of Mental Health's (DMH) new Integrated Behavioral Health Information System (IBHIS), effective upon the date of execution through June 30, 2016 for the term with provisions for month-to-month extensions for up to 18 months at the discretion of the Director, at a cumulative total amount of \$22,905,982, fully funded by MHSA funds.

Authorize the Director of Mental Health, or his designee, to enter into future funding agreements with new qualified contract providers provided that: 1) approval of County Counsel and the Chief Executive Office (CEO) is obtained prior to any such agreement; and 2) the Director of Mental Health notifies your Board in writing within 30 days after the execution of each agreement.

Delegate authority to the Director of Mental Health, or his designee, to prepare, sign, and execute future amendments to these funding agreements, provided that: 1) the County's total payments to each contractor under the agreement do not exceed an increase of 20 percent from the applicable Total Contract Amount (TCA); 2) any such increase is used to reflect program changes; 3) your Board has appropriated sufficient funds for all changes; 4) approval of County Counsel and the CEO is obtained prior to the execution of any such amendment; 5) the parties may, by written amendment, mutually agree to reduce programs or services without reference to the 20 percent limitation; and 6) the Director of Mental Health notifies your Board within 30 days after the execution of each amendment.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

Approval of the proposed funding agreements will allow DMH to provide MHSA funds to contract providers to acquire sustainable information systems that will allow them to efficiently and effectively interface with DMH, and develop sustainable technology programs that empower the consumers they serve. These funds will support contract provider's capacity to: 1) effectively sustain their participation in the delivery of mental health services; and 2) make the transition to an Electronic Health Record (EHR).

MHSA Information Technology funds will be distributed to contract providers for the following types of technology projects:

- Electronic Health Record System Projects
- Electronic Data Interchange Projects
- Consumer/Family Access to Computer Resources Projects
- Personal Health Record Projects
- Online Information Resource Projects
- Telemedicine and other rural/underserved access methods projects
- Pilot Projects to monitor new programs and service outcome improvement
- Data Warehousing/Decision Support Projects
- Imaging/Paper Conversion Projects

Additionally, DMH will support contract provider requests for treatment planning libraries that are consistent with MHSA treatment models, automation of eligibility verification, forms translations, and software and hardware to support e-signatures.

These projects will assist contract providers to transition from a Direct Data Entry (DDE) model of submitting claims and other information to DMH to an EDI model, and implementing other information technology projects consistent with the goals of MHSA. EDI is the automated transfer of data in a specific format from one system to another. With the implementation of the IBHIS, DMH will transition from a centralized consumer information and billing system to a decentralized model. This shift will require contract providers to interact with DMH's IBHIS via EDI transactions. MHSA technology funds will assist contract providers in acquiring information systems appropriate to their business model that will, at a minimum, provide the capability to submit EDI transactions to DMH.

DMH is requesting delegated authority to: 1) enter into future funding agreements with new qualified contract providers; and 2) execute future amendments to these funding agreements.

CONTRACTING PROCESS

Contract providers were selected through a non-competitive process in which DMH limited distribution of MHSA IT Plan to legal entity Short-Doyle providers, including the Department of Health Services (DHS). Three DHS Medical Centers provide mental health services to both in-patient and out-patient mental health clients; DMH intends to provide MHSA IT Plan funds to DHS at a later date via a Memorandum of Understanding to offset costs DHS will incur to meet IBHIS EDI requirements.

DMH used a fixed increment model to determine the TCA available to each contract provider for technological needs projects. Each eligible contract provider was rank ordered from lowest to highest based on the TCA of their legal entity mental health services agreement executed in July 2007. The minimum funding allocation amount was set at \$30,000, judged the minimum amount needed to make meaningful improvements. Funding allocations were increased incrementally based on rank order, at an amount of \$2,640 per rank, resulting in a range from \$30,000 to \$346,800.

DMH Contact:

Robert Greenless
Chief Information Office Bureau
Telephone Number: (213) 251-6481
Email address: RGreenless@dmh.lacounty.gov

APPROVED BY:

DMH Program – Robert Greenless
DMH Contracts – Larry Quan
Chief Executive Officer – James Sokalski
County Counsel – Stephanie Farrell

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