

## **MHSA – REQUEST FOR ADDITIONAL FUNDS**

*Mental Health Services Act (MHSA) funding is contingent on availability and stakeholder approval. Requests for under 3% of current contracted single programs may be approved by the Behavioral Health Department.*

- A separate form should be completed for each program an increase or new funding is requested.
- Total submitted request should be no more than 4 pages

I. ORGANIZATION: **SAN LUIS OBISPO COUNTY BEHAVIORAL HEALTH**

II. PROGRAM NAME: **MOBILE CRISIS SERVICES**

III. AMOUNT OF FUNDING INCREASE/NEW FUNDING REQUESTED

Mobile crisis services were expanded in 2024 as mandated by the State, by adding one 24/7 2-person response teams in community-based settings. The Behavioral Health Department requests the use of one-time MHSA savings in the amount of up to \$700,000 budgeted in FY 24-25 for the CSU, which is no longer operational, to cover non-Medi-Cal expenditures for the new community based mobile crisis services. As the number of Medi-Cal responses increases, the Behavioral Health Department anticipates that MHSA funds will no longer be needed to supplement the program. The State provides Medi-Cal revenue for community-based mobile crisis services for Medi-Cal insured individuals.

IV. JUSTIFICATION FOR ADDITIONAL FUNDING/NEW FUNDING

Expansion of community-based mobile crisis services are required by the State for behavioral health agencies in California starting on January 1, 2024 ([BHIN 23-025](#)). Services are to be provided by 2-person teams, with 24/7 services available. Eligible service locations are at community-based locations such as homes, workplaces, libraries, emergency/homeless shelters, outside (e.g. street, park), schools, and at outpatient clinics. These expanded services may not be provided at hospitals, inpatient facilities, or other locations already required to provide other crisis services. The expanded services are intended to be funded by Medi-Cal. However, while the community- based mobile crisis team responds to any individual in crisis. The number of responses are anticipated to increase moving forward as community awareness of the availability of these services increases. A combination of MHSA and Medi-Cal funds have been paying for MHET/MCRT services.

V. WHAT THE ADDITIONAL FUNDING/NEW FUNDING WILL BE USED FOR

To cover expenditures related to operations of community-based mobile crisis services.

VI. EXPLAIN THE IMPACT IF ADDITIONAL OR NEW FUNDS ARE NOT GRANTED

Community based mobile crisis services are required for behavioral health agencies in California starting on January 1, 2024. If not funded by MHSA savings from other crisis services, reductions would likely need to be made in other programs to fund this mandated service.

VII. ONCE COMPLETE, PLEASE SUBMIT DOCUMENTATION TO THE FOLLOWING RECIPIENTS:

To: Landon King at [lking@co.slo.ca.us](mailto:lking@co.slo.ca.us)

Cc: Christina Rajlal at [crailal@co.slo.ca.us](mailto:crailal@co.slo.ca.us)

VIII. AFTER THE COUNTY MHSA PROGRAM COORDINATOR HAS REVIEWED, AND IF THE REQUEST IS OVER THE 3% THRESHOLD, THE MHSA PROGRAM COORDINATOR WILL SCHEDULE A PRESENTATION AT A FUTURE MHSA ADVISORY COMMITTEE MEETING.

IX. THIS FORM HAS A ROLLING SUBMISSION. IF A PRESENTATION AT A FUTURE MHSA ADVISORY COMMITTEE (MAC) MEETING IS REQUIRED, THIS FORM MUST BE SUBMITTED 30 DAYS PRIOR TO THE MAC MEETING IN WHICH IT IS BEING PRESENTED.