



**Health and Human Services
Agency
COUNTY OF TULARE
AGENDA ITEM**

BOARD OF SUPERVISORS

KUYLER CROCKER
District One
PETE VANDER POEL
District Two
AMY SHUKLIAN
District Three
J. STEVEN WORTHLEY
District Four
MIKE ENNIS
District Five

AGENDA DATE: November 6, 2018

Public Hearing Required	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Scheduled Public Hearing w/Clerk	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Published Notice Required	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Advertised Published Notice	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
County Counsel Sign-Off	Yes	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Meet & Confer Required	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Electronic file(s) has been sent	Yes	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
Budget Transfer (Aud 308) attached	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Personnel Resolution attached	Yes	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Agreements are attached and signature line for Chairman is marked with tab(s)/flag(s)	Yes	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
CONTACT PERSON: Timothy D. Durick, Psy.D. PHONE: 624-8000				

SUBJECT: Approve an amendment with Psynergy Programs, Inc.

REQUEST(S):

That the Board of Supervisors:

1. Approve an amendment to Agreement No. 28448 with Psynergy Programs, Inc., for the provision of residential and specialty mental health services, effective upon signature by the Tulare County Board of Supervisors, through June 30, 2019. This amendment is necessary to replace and update exhibits due to changes in the contractor's Scope of Work, the State Mental Health Plan requirements, and update rates for services; and
2. Authorize the Chairman of the Board to sign two (2) copies of the amendment.

SUMMARY:

The Tulare County Health and Human Services Agency, Mental Health Branch contracts with Psynergy Programs, Inc. to provide residential and Medi-Cal eligible specialty mental health services to consumers living at one of the four residential facilities, two of which are in Morgan Hill, one in Sacramento, and one in Greenfield, California.

Psynergy's residential programs provide a higher level of care to consumers with serious mental illness. The primary goal of this program is to assist and support consumers in obtaining the necessary skills to allow them to transition into a less restrictive, independent living environment in Tulare County. Residential services provide a distinct cost benefit to Tulare County Mental Health consumers by ensuring that medically necessary mental health services are coordinated,

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delivered, and measured. The outpatient specialty mental health services that are provided to consumers through this contract will include assessment, plan development, individual and group psychotherapy, collateral, targeted case management medication support, crisis intervention, and rehabilitation. It is estimated that forty-four (44) consumers will be served monthly through residential services; and twenty-five (25) consumers will be served monthly through specialty mental health services in each fiscal year.

A Request for Proposal was not included in this amendment because Psynergy Programs, Inc. has been successfully providing these services for over eleven (11) years. The Mental Health Branch aims to continue contracting with this vendor to maintain continuity of care and constancy, which is essential in working with Tulare County mental health consumers.

This amendment adds an additional Medi-Cal Certified treatment site in Sacramento, California to accommodate consumer needs and allows the expansion of specialty mental health services to serve Tulare County Mental Health consumers. The revised Scope of Work, Exhibit A, includes new evaluation tools for mental health consumers, an addition of a Medi-Cal certified treatment site, goals, accommodations of facilities, and descriptions of services to clearly identify the contractor's functions in treating mental health consumers. Exhibit A-1 for the State Mental Health Plan is modified and incorporates state mandated changes to ensure that quality of care is met. Exhibit B-1 is superseded by updated Exhibit B-1 to reflect new rates for Fiscal Year 2018-2019.

This amendment has been approved as to form by County Counsel. The following term deviates substantively from the standard County boilerplate: (1) The State requires a 10-year records retention period for all Mental Health agreements superseding the County's 5-year retention period.

FISCAL IMPACT/FINANCING:

Funding for this agreement in the amount not to exceed \$3,600,000 is for the term of July 1, 2017 through June 30, 2019. From this amount, \$1,800,000 has been included in the Fiscal Year 2018-2019 budget. This agreement is paid through Medi-Cal and Realignment funds. There is no additional net cost to the County General Fund.


LINKAGE TO THE COUNTY OF TULARE STRATEGIC BUSINESS PLAN:

The County's five-year strategic plan includes the Quality of Life Initiative that encourages the innovative provision of quality supportive services for at-risk adults, youth and children in state and federally mandated programs. This agreement increases the ability to fulfill that obligation by providing care and treatment to meet the needs and maximize each consumer's health and functionality.

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ADMINISTRATIVE SIGN-OFF:

 030 TIMOTHY DURICK
Timothy D. Durick, Pys.D.
Director of Mental Health

cc: County Administrative Office

Attachment(s) Amendment

**BEFORE THE BOARD OF SUPERVISORS
COUNTY OF TULARE, STATE OF CALIFORNIA**

**IN THE MATTER OF APPROVE AN
AMENDMENT WITH PSYNERGY
PROGRAMS, INC.**

)
) **Resolution No.** _____
) **Agreement No.** _____
)

UPON MOTION OF SUPERVISOR _____, SECONDED BY
SUPERVISOR _____, THE FOLLOWING WAS ADOPTED BY THE
BOARD OF SUPERVISORS, AT AN OFFICIAL MEETING HELD _____
_____, BY THE FOLLOWING VOTE:

AYES:
NOES:
ABSTAIN:
ABSENT:

ATTEST: JASON T. BRITT
COUNTY ADMINISTRATIVE OFFICER/
CLERK, BOARD OF SUPERVISORS

BY: _____
Deputy Clerk

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2. Authorized the Chairman of the Board to sign two (2) copies of the amendment.