Welcome to the
*Behavioral Health Recovery Services Onboarding Webinar*

November 17, 2022

This opportunity is provided by The Center at Sierra Health Foundation under contract with the California Department of Health Care Services.
The Center brings people, ideas and infrastructure together to create a collective impact, helping communities access proven practices while tapping into their existing resources, knowledge and creativity to identify strategies for healthier communities.
The Behavioral Health Recovery Services Project is part of the California Department of Health Care Services’ Behavioral Health Response and Rescue Project, which aims to increase access to behavioral health care for all Californians.

**Mission:** The Department’s mission is to provide Californians with access to affordable, integrated, high-quality health care, including medical, dental, mental health, substance use treatment services and long-term care.

**Vision:** Our vision is to preserve and improve the overall health and well-being of all Californians.

**Core Values:** Integrity, Service, Accountability, Innovation
Housekeeping

• These meetings will be recorded; links to the recordings and slides will be made available to participants.
• There will be time for questions and active participation during today’s meeting.
• Please submit questions or comments throughout the workshop via chat or raise your Zoom hand.
• If you are experiencing technical difficulties, please chat the host.
• We encourage you to turn on your camera throughout the meeting to promote engagement and create a sense of community.
Learning and Accessibility Needs

Given the essence of the Learning Community our team will be following this slide template in our future meetings allowing participants to easily recognize the Learning Community materials.

If you have any accessibility needs, please advise by contacting recoveryservices@shfcenter.org and nchavez@healthmanagement.com at the end of today’s presentation
WELCOME
Today’s Agenda:

- Welcome & Introductions
- The Center’s Role
- Why are we Here
- Project Scope of Work and Deliverables
- Contacts and Resources
- Questions and Answers
INTRODUCTIONS
The Center at The Sierra Health Foundation (The Center)
- Execute subcontract agreements with Program Services Providers (PSPs) identified by DHCS
- Collect program and budget reports from funded partners and submit consolidated reports to CA. Dept. of Health Care Services (DHCS)
- Communicate regularly with DHCS
- Participate in HEAR Us Program meetings

California Department of Health Care Services (DHCS)
- Federal funding awardee from SAMSHA
- Policy development and implementation

Health Management Associates Community Strategies (HMACS)
- Monthly Check-In Meetings
- Project Support and Project Resources
- Data collection processes
- Processing of data submissions
- Development of PowerPoint Presentations for Engagement
# Your Team

## The Center

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<thead>
<tr>
<th>Name</th>
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<tr>
<td>Nilda Valmores</td>
<td>Senior Program Officer</td>
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<tr>
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<td>Managing Director, Health Equity and Access</td>
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<td>Evaluation Officer</td>
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## HMA

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<tr>
<th>Name</th>
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<tr>
<td>Leticia Reyes-Nash</td>
<td>Principal</td>
<td><a href="mailto:lreyesnash@healthmanagement.com">lreyesnash@healthmanagement.com</a></td>
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<tr>
<td>John O’Connor</td>
<td>Managing Director</td>
<td><a href="mailto:joconnor@healthmanagement.com">joconnor@healthmanagement.com</a></td>
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<tr>
<td>Nayely Chavez</td>
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<tr>
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<td>Principal</td>
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HEAR US Learning Community
Funded Partners

- CA Association of Alcohol and Drug Program Executives, Inc
- Cal Voices
- California Black Women's Health Project
- California Consortium of Addiction Programs and Professionals
- California Council of Community Mental Health Agencies (DBA: California Council of Community Behavioral Health Agencies)
- Hathaway-Sycamores Child and Family Services (DBA Sycamores)
- NAMI California
- Peer Voices of Orange County Inc.
- The California Association of DUI Treatment Programs
- The Happier Life Project
- United Parents
- West Fresno Health Care Coalition (dba: West Fresno Family Resource Center)
Community Building Activity

Introduce yourself and share one word that describes how you are feeling today.

Hello, my name is....

Name
Pronouns
Role and Tenure

Share one word about how you are feeling today.
WHY ARE WE HERE?
Behavioral Health Recovery Services

HEAR US

Programmatic Components
Project Purpose

The overarching goal of the project is to increase the number and quality of culturally responsive behavioral health recovery services and programs statewide that are tailored to local needs.

Project period: November 2022 – July 2023
The Center’s responsibilities:

- Execute grant agreements with Program Services Providers (PSPs) identified by DHCS
- Collect program and budget reports from subgrantees and submit consolidated reports to CA. Dept. of Health Care Services (DHCS)
- Convene funded partners and other organizations identified by DHCS quarterly to provide technical assistance on administrative and program requirements and delivery of services
- Communicate regularly with DHCS
- Participate in HEAR Us Program meetings
- Administer any additional funds, partnering with DHCS to identify subgrantees
Who we are
To address the social needs that affect public healthcare, HMA formed HMA Community Strategies® (HMACS) in 2014. The HMACS team works directly with communities to identify needs and organize around them. We also work with community-based organizations, policymakers, and healthcare payers and entities to identify and implement solutions.

What we do
HMACS helps communities tackle problems that impact health outside the walls of hospital, provider and payer offices, such as inadequate housing and food access, health equity and disparities, violence, discrimination, unemployment and underemployment. Because good health is more than just good healthcare — it’s a process that begins at the roots of our communities with basics like healthy food, clean air, safe housing and equitable treatment.
Project Purpose:

- To implement a **community-driven process** that will develop **“standards of care”** that build on the SAMSHA guidance for recovery services and address gaps in services and supports. Of particular interest are peer-led programming and consistency with a focus on **higher quality of care** for those engaged in recovery services, with a focus on traditionally underserved populations including **Black, Indigenous, People of Color (BIPOC)** and the **2S/LGBTQ+**
Health Equity Model:

**Driven by:***
- Drivers of health
- Drivers of change in health & healthcare
- Social, political, racial, economic, historical, and environmental context

**Health Equity Through Transformed Systems for Health:**

**Improved Health + Health Care Programs + Policies:**
- Community-aligned solutions
- Actionable, implemented, recognized solutions
- Sustainable solutions

**Thriving Communities:**
- Physical + mental health
- Community capacity + connectivity
- Community power
- Community resiliency
- Life quality + well-being

**Strengthened Partnerships + Alliances:**
- Diversity + inclusivity
- Partnerships + opportunities
- Acknowledgment, visibility, recognition
- Sustained relationships
- Mutual value
- Trust
- Shared power
- Structural supports for community engagement

**Expanded Knowledge:**
- New curricula, strategies + tools
- Bi-directional learning
- Community-ready information

**Core Principles:**
- Co-created
- Ongoing
- Shared governance
- Multi-knowledge
- Trust
- Bi-directional
- Inclusive
- Equitably financed
- Culturally-centered

**Community Engagement:**

THe CENTER at Sierra Health Foundation

HMA
Health Management Associates

SHFCENTER.ORG
Disaggregate data to understand the unique experiences and outcomes for subpopulations.

Design, implement, and continuously improve policies and programs that recognize the unique experiences and outcomes of subpopulations and support health for all people (CMS).

Include people with lived experiences when designing and evaluating solutions (Center for Health Care Strategies).

Create inclusive and equitable meeting processes and environments (Harvard Office of Diversity, Inclusion & Belonging).

Shared governance and decision making to develop recommendations.

Center approach development from an antiracist perspective (NEJM Catalyst).

Share data across governmental agencies and community-based organizations is critical for addressing complex health challenges involving multiple sectors (Center for Health Care Strategies).
The **HEAR US** Phase 1, November 15, 2022 – July 31, 2023, funding activities up to support the following:

- Participation of specialized behavioral health-focused staff (i.e. peer providers, therapists, wellness and recovery coaches, etc.) from the funded organizations in the standards of care development process (with monthly engagement w/The Center/HMA).

Examples of Funded Activities:
- Personnel for participating in monthly sessions
- Technology and technology access to join development sessions (e.g., laptops, webcams, zoom account)
- Travel for possible in-person sessions
Organizing, facilitating, and documenting constituency-focused (i.e., clients, consumers, family members, residents) generative listening sessions and/or focus groups to inform the development of the standards of care (at least three sessions over the 10-month project term)

Examples of allowable activities include, but are not limited to:

- Personnel for planning, implementing, and reporting on listening sessions and/or focus groups
- Meeting space
- Food
- Technology and technology access (e.g., laptops, webcams, zoom account)
- Non-cash incentives for volunteer participation*
- Travel for staff and volunteers for possible in-person sessions
- Educational materials development and distribution
- Outreach and awareness materials development and distribution
Training and engagement of funded partners’ constituency (i.e., clients, consumers, family members, residents) to co-lead, facilitate, and participate in standards of care development process focus groups and/or listening session (at least monthly engagement)

Examples of allowable activities include, but are not limited to:

- Personnel for Training Volunteer curriculum development
- Non-case incentives for volunteer participation*
- Educational materials development and distribution
- Facilitation services
- Translation services
### "STANDARDS OF CARE" DEVELOPMENT PROCESS OVERVIEW

<table>
<thead>
<tr>
<th>Nov 2022</th>
<th>Dec</th>
<th>Jan 2023</th>
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<tbody>
<tr>
<td><strong>Phase 1: Defining the Framework (2 months)</strong></td>
<td><strong>Phase 2: Informing the Framework (2 months)</strong></td>
<td><strong>Phase 3: Refining the Framework (2 months)</strong></td>
<td><strong>Phase 4: Finalizing the Framework (2 months)</strong></td>
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<td><strong>LC Project Launch (Virtual)</strong></td>
<td><strong>LC Meeting 2 (Virtual)</strong></td>
<td><strong>LC Meeting 3 (Virtual)</strong></td>
<td><strong>LC Meeting 4 (Virtual)</strong></td>
<td><strong>LC Meeting 5 (Virtual)</strong></td>
<td><strong>LC Meeting 6 (Virtual)</strong></td>
<td><strong>LC Meeting 7 (In-Person)</strong></td>
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<tr>
<td>- Review of past work and context setting</td>
<td>- Presentation of content</td>
<td>- Identification of content gaps</td>
<td>- Data submission for 3rd partner convening (1)</td>
<td>- Participation in LC Virtual Meeting (1)</td>
<td>- Participation in LC In-Person Closing Meeting (1)</td>
<td>- Participation in check-in</td>
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<td>- Onboard LC Participants</td>
<td>- Data collection processes and best practices (e.g., stakeholder engagement, facilitation, and outreach strategies)</td>
<td>- Cross sharing data findings from local feedback sessions</td>
<td>- Participation in LC Virtual Meetings (2)</td>
<td>- Participation in monthly check-in (2)</td>
<td>- Participation in check-in</td>
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<td>- Learn about LC Participants</td>
<td>- Define health equity</td>
<td>- Facilitating alignment and development of themes across all of the groups</td>
<td>- Workplan Stakeholder Engagement Plan (1)</td>
<td>- Data submission for 2nd partner convening (1)</td>
<td>- Participation in LC Virtual Meetings (1)</td>
<td>- Participation in check-in</td>
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<tr>
<td>- Define parameters of framework and standards and common language</td>
<td>- Review areas of disagreement to work on consensus building and addressing areas of conflict</td>
<td>- Finalizing and gaining agreement on the final submitted unified group of recommendations for standards</td>
<td>- Participation in LC In-Person Meeting (1)</td>
<td>- Participation in check-in</td>
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<tr>
<td>- Collection and analysis of resources</td>
<td>- Sharing and alignment exercises</td>
<td>- Addressing content gaps</td>
<td>- Finalize data findings</td>
<td>- Finalize alignments and development of themes to help inform framework</td>
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**Learning Community Meetings**
- Will include pre-work, work during meetings, and collection of post-meeting feedback.

**Participant Support**
- Intermittent 1:1 custom support and progress check-ins.

**Participant Led Stakeholder Engagement**
- Activities may include Key Informant Interviews, Focus Groups, Listening Sessions.

**Standard Development Deliverables**
- Will include drafts informed by the work being done by participant activities above.
### “STANDARDS OF CARE” DEVELOPMENT PROCESS OVERVIEW

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<td><strong>Phase 4:</strong> Finalizing the Framework (2 months)</td>
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DELIVERABLES

Nov 2022

Phase 1: Defining the Framework (2 months)
- Participation in Kick-Off (1)
- Participation in LC In-Person Meeting (1)
- Participation in monthly check-in (1)

Dec

Phase 2: Informing the Framework (2 months)
- Workplan/Stakeholder Engagement Plan (1)
- Data Submission for 1st partner convening (1)
- Participation in LC Virtual Meetings (2)
- Participation in monthly check-in (2)

Jan 2023

Phase 3: Refining the Framework (2 months)
- Data Submission for 2nd partner convening (1)
- Participation in LC Virtual Meeting (2)
- Participation in monthly check-in (2)

Feb

March

April

May

June

Phase 4: Finalizing the Framework (2 months)
- Data Submission for 2nd partner convening (1)
- Participation in LC Virtual Meeting (2)
- Participation in monthly check-in (2)
Roles
Subgrantee Expectations

- Agreements
- Timeline
- Payments
- Reports
- Budget Modifications
Insurance Components
Insurance Requirements

- Insurance compliance documents must be submitted to The Center within **30 days** of executing your agreement.

- Insurance must be maintained through the duration of the project and renewed if necessary.

- Contact vestall@sierrahealth.org ASAP for assistance if your organization is unable to obtain the required insurance.

- **Important:** Additional insureds must be written exactly as stated in your contract agreement. Payments will not be released until accurate and complete insurance requirements are received.

- Endorsements requested by the State must be physically attached to all requested certificates of insurance and not substituted by referring to such coverage on the certificate of insurance.
Commercial General Liability

- Each Occurrence must be greater than or equal to $1,000,000
  - Coverage Trigger: Occurrence must be present
  - Insurance is written on an occurrence basis using ISO form CG 0001 or equivalent
- General Aggregate must be greater than or equal to $2,000,000
- Products/Completed Operations Aggregate must be greater than or equal to $2,000,000
- Personal and Advertising Injury must be present
- Primary and Non-Contributory Endorsement must be present
- Additional Insured Endorsement must be present, naming The Center, Sierra Health Foundation, DHCS, The State of California, their respective officers, directors, agents, representatives, constituent entities, affiliates, volunteers, of subsidiaries, and employees
  - With Completed Operations language
  - Using a combination of ISO forms CG2010 10/04 and CG 2037 10/04
Insurance Evidence Requirements

**Automobile Liability**
- Combined Single Limit (each accident) must be greater than or equal to $1,000,000
- Coverage applies to Owned, Hired and Non-owned Autos
- Additional Insured Endorsement must be present naming The Center, Sierra Health Foundation and The State of California

**Workers’ Compensation and Employer’s Liability**
- Statutory Limits must be present
- Employer’s Liability Each Accident must be greater than or equal to $1,000,000
- Employer’s Liability Disease – each employee must be greater than or equal to $1,000,000
- Employer’s Liability Disease – policy limit must be greater than or equal to $1,000,000
- Waiver of Subrogation Endorsement must be present

**Professional Liability**
- Each Claim must be greater than or equal to $1,000,000
- Aggregate must be greater than or equal to $2,000,000
Improper Sexual Contact and Physical Abuse Insurance
- Coverage must be greater than or equal to $1,000,000

Cyber Liability
- Claims made Coverage must be greater than or equal to $1,000,000

Additional Requirements
- Certificate Holder must read: Sierra Health Foundation, 1321 Garden Highway Sacramento, CA 95833
- A.M. Best rating of at least A-:VI
- Description of Operations must read: The Center, Sierra Health Foundation, The State of California, their respective officers, directors, agents, representatives, constituent entities, affiliates, volunteers, officials, parents, subsidiaries, and employees shall be added as Insureds (“additional Insureds”) under each commercial general liability and automobile insurance policy. **Agreement #___________** must be present.
Certificate of Liability Insurance (aka: COI)

**ACORD**

**CERTIFICATE OF LIABILITY INSURANCE**

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not affirmatively or negatively amend, extend or alter the coverage afforded by the policies below. This certificate of insurance does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder.

IMPORTANT: If the certificate holder is an additional insured, the policy(ies) must be endorsed. If subrogation is waived, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the

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**COVERAGES**

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**GENERAL LIABILITY**

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**AUTOMOBILE LIABILITY**

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**WORKERS’ COMPENSATION AND EMPLOYER LIABILITY**

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**THE CENTER**
at Sierra Health Foundation

SHFCENTER.ORG
Compliance: Subgrantee Responsibilities

- Participate in required onboarding webinar
- Participate in required quarterly meetings
- Ensure funds are properly tracked and that all expenditures are allowable
- Maintain adequate records supporting grant expenditures
- Submit accurate narrative and financial reports by required due dates
- Respond to all desk review/audit inquiries in a timely manner
To support expenditures reported, sub-grantees must:

- Maintain an expenditure listing (G/L detail or other) that details all expenditures charged to the funds received
- Ensure all expenditures are reasonable and tie to and are for the purpose of the project
- Maintain adequate support, including, but not limited to:
  - Purchase orders/requests
  - Vendor invoices/receipts
  - Receiving documentation/packing slips
  - Timesheets/paystubs
  - Consultant or other contracts
  - Check stubs for payments made
Expenses must be allowable:

- Ensure expenses are necessary and reasonable for the performance of the grant and allocable to the grant.
- Ensure you understand what expenses/costs are allowable under the terms of the grant and your subgrantee agreements.
- Reach out to The Center if you have any questions related to allowable costs.
- Ensure expenses are reasonable and support the overall project purpose/mission.
- Understand what is strictly unallowed per the contract.
- Monitor your approved budget (by line item/category).
The Center at The Sierra Health Foundation (The Center)
• Execute subcontract agreements with Program Services Providers (PSPs) identified by DHCS
• Collect program and budget reports from funded partners and submit consolidated reports to CA. Dept. of Health Care Services (DHCS)
• Communicate regularly with DHCS
• Participate in Hear Us Program meetings

California Department of Health Care Services (DHCS)
• Federal funding awardee from SAMSHA
• Policy development and implementation

Health Management Associates Community Strategies (HMACS)
• Monthly Check-In Meetings
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• Data collection processes
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• Development of PowerPoint Presentations for Engagement
CALENDAR OF EVENTS
# Required HEAR US Learning Community Meeting Dates:

<table>
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<tr>
<th>Dates</th>
<th>Times</th>
<th>Location</th>
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<tr>
<td><strong>December 7, 2022</strong></td>
<td>10am-3pm PST</td>
<td>Sierra Health Foundation – The Center 1321 Garden Highway, Sacramento, CA 95833</td>
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<tr>
<td>January 26, 2023</td>
<td>9am-11am PST</td>
<td>Zoom</td>
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<tr>
<td>February 23, 2023</td>
<td>9am-11am PST</td>
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<td>March 23, 2023</td>
<td>9am-11am PST</td>
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<td>April 27, 2023</td>
<td>9am-11am PST</td>
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<td>May 25, 2023</td>
<td>9am-11am PST</td>
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<tr>
<td>June 22, 2023</td>
<td>10am-3pm PST</td>
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QUESTIONS
NEXT STEPS!

For questions in the future please reach out to
recoveryservices@shfcenter.org
Next Step: #1

Please register for December 7, 2022, in-person convening, 9:00 a.m. – 3:00 p.m.

Location:
Sierra Health Foundation
1321 Garden Hwy, Sacramento, CA 95833

Agenda Overview

- Registration/Breakfast/Networking – 9:00 am-10:00 am
- Program Overview – 10:00am-Noon
- Lunch – Noon-12:30 pm
- Keynote Speaker - 12:30 pm-1:00 pm
- Working Session - 1:00 pm-2:30 pm
- Wrap-Up and Conclusion – 2:30 – 3:00 p.m.
Next Step: #2

- Turn in your Insurance!
- Review your budget and your workplan
THANK YOU!!