

Proposed Changes to Innovative Project Regulations

The Mental Health Services Oversight and Accountability Commission (MHSOAC) at the December 18, 2014 Commission meetings voted to modify the proposed language of the sections listed below that were the subject of the notice published on June 6, 2014 for a 45-day public comment period and on October 30, 2014 for a 15-day public comment period. The MHSOAC has illustrated changes to the original text in the following manner: (1) regulation language originally proposed on July 11, 2014 is underlined; (2) deletions from the language originally proposed and subject of the October 30, 2014 are shown in underline and strikeout using a “-”; (3) additions to the language originally proposed and subject of the October 30, 2014 are double-underlined; (4) deletions from the language that are the subject of this 15-day public comment period dated December 18, 2014 are shown in bold, italics, and strikeout using a “-”; and (5) additions to the language that are the subject of this 15-day public comment period dated December 18, 2014 are shown in bold and italics.

Article 5. Reporting Requirements

Adopt Section 3510.020 as follows:

Section 3510.020. Innovative Project Annual Revenue and Expenditure Report.

- (a) As part of the Mental Health Services Act Annual Revenue and Expenditure Report the County shall report the following:
- (1) The total dollar amount expended during the reporting period on each Innovative Project by the following funding sources:
 - (A) Innovation Funds
 - (B) Medi-Cal Federal Financial Participation
 - (C) 1991 Realignment
 - (D) Behavior Health Subaccount
 - (E) Any other funding
 - (2) Total dollar amount expended during the reporting period for the administration of each Innovative Project by the following funding sources:
 - (A) Innovation Funds
 - (B) Medi-Cal Federal Financial Participation
 - (C) 1991 Realignment
 - (D) Behavior Health Subaccount
 - (E) Any other funding
 - (3) Total dollar amount expended during the reporting period for the evaluation of each Innovative Project by the following funding sources:
 - (A) Innovation Funds
 - (B) Medi-Cal Federal Financial Participation
 - (C) 1991 Realignment
 - (D) Behavior Health Subaccount
 - (E) Any other funding

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(b) The County shall within 30 days of submitting to the state the Mental Health Services Act Annual Revenue and Expenditure Report:

(1) Post a copy on the County's website; and

(2) Provide a copy to the County's Mental Health Board

NOTE: Authority cited: Section 5846, Welfare and Institutions Code. Reference: Sections 5830, 5845(d)(6), and 5847, Welfare and Institutions Code.

Adopt Section 3580.010 as follows:

Section 3580.010. Annual Innovative Project Report.

(a) The Annual Innovative Project Report shall include:

(1) Name of the Innovative Project

(2) Whether and what changes were made to the Innovative Project during the reporting period and the reasons for the changes.

(3) Available evaluation data, including outcomes of the Innovative Project and information about which elements of the Project that are contributing to outcomes.

(4) Program information collected during the reporting period, including for applicable Innovative Projects that serve individuals, number of participants served by:

(A) Age by the following categories:

(i) 0-15 (children/youth);

(ii) 16-25 (transition age youth);

(iii) 26-59 (adult);

(iv) ages 60+ (older adults)

(v) ~~Declined to state~~ **Number of respondents who declined to answer the question**

(B) Race by the following categories:

(i) American Indian or Alaska Native

(ii) Asian

(iii) Black or African American

(iv) Native Hawaiian or other Pacific Islander

(v) White

(vi) Other

(vii) More than one race

(viii) ~~Declined to state~~ **Number of respondents who declined to answer the question**

(C) Ethnicity by the following categories:

(i) Hispanic or Latino as follows

(a) Caribbean

(b) Central American

(c) Mexican/Mexican-American/Chicano

(d) Puerto Rican

(e) South American

(f) Other

(g) ~~Declined to state~~ **Number of respondents who declined to answer the question**

(ii) Non-Hispanic or Non-Latino as follows

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- (a) African
- (b) Asian Indian/South Asian
- (c) Cambodian
- (d) Chinese
- (e) Eastern European
- (f) European
- (g) Filipino
- (h) Japanese
- (i) Korean
- (j) Middle Eastern
- (k) Vietnamese
- (l) Other
- (m) ~~Declined to state~~ **Number of respondents who declined to answer the question**
- (iii) More than one ethnicity
- (iv) ~~Declined to state~~ **Number of respondents who declined to answer the question**
- (D) Primary language spoken used by threshold languages for the individual county
- (E) Sexual orientation,
 - (i) Gay, or Lesbian or Bisexual
 - (ii) Heterosexual or Straight
 - (iii) ~~Other Bisexual~~
 - (iv) **Questioning**
 - (v) **Queer**
 - (vi) **Another sexual orientation**
 - (vii) ~~Declined to state~~ **Number of respondents who declined to answer the question**
- (F) A Disability, if any, defined as a physical or mental impairment or medical condition lasting at least six months that substantially limits a major life activity, which is not the result of a severe mental illness
 - (i) Yes, specify the report the number that apply in each domain of disability(ies)
 - (a) **Communication domain (including but not limited to difficulty seeing, hearing, or having speech understood)**
 - (b) **Mental domain not including a mental illness (including but not limited to a learning disability, developmental disability, dementia)**
 - (c) **Physical/mobility domain**
 - (d) **Chronic health condition (including but not limited to chronic pain)**
 - (e) **Other (specify)**
 - (ii) No
 - (iii) ~~Declined to state~~ **Number of respondents who declined to answer the question**
- (G) Veteran status,
 - (i) Yes
 - (ii) No
 - (iii) ~~Declined to state~~ **Number of respondents who declined to answer the question**
- (H) Gender identity,

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- (i) Assigned sex at birth*
 - (a) Male*
 - (b) Female*
 - (c) **Number of respondents who declined to answer the question***
 - (ii) Current gender identity*
 - (a) **Male***
 - (b) **Female***
 - (c) **Transgender***
 - (d) **Genderqueer***
 - (e) **Questioning or unsure of gender identity***
 - (f) **Number of respondents who declined to answer the question***
 - ~~(iii) **Transgender**~~*
 - ~~(iv) **Other**~~*
 - ~~(v) **Declined to state**~~*
- (5) Any other data the County considers relevant.

NOTE: Authority cited: Section 5846, Welfare and Institutions Code. Reference: Sections 5830, 5845(d)(6), and 5847, Welfare and Institutions Code.