

## PROVIDER ADVISORY COMMITTEE MEETING

December 9, 2025 2 PM – 4 PM



## WELCOME

Dr. Brian Hurley, Medical Director, DPH



Agenda	
2:00 – 2:05	Welcome
2:05 – 2:10	Approval of Meeting Minutes – October 14, 2025
2:10 – 2:20	Workgroup Updates  • PAC Provider Data Workgroup  • SUD Workforce Development
2:20 – 3:50	Discussion Items
3:50 – 3:55	Meeting Wrap Up
3:55 - 4:00	Public Comments



## APPROVAL OF MEETING MINUTES

October 14, 2025 Meeting Bernie Lau, Systems of Care, DPH



## **PAC Motion: October Meeting Minutes**

- Please speak up if you'd like to make any changes.
- Motion to Approve
- Motion to Second







## PAC PROVIDER DATA WORKGROUP

Dr. Gary Tsai, Bureau Director, DPH



## SUD WORKFORCE DEVELOPMENT

Seth Blackburn, Roots Through Recovery José Salazar, Tarzana Treatment Centers



## PAC MEMBERSHIP UPDATE



## DISCUSSION ITEMS





# COVID-19 AND STANDARDS OF CARE

Alice Gleghorn, Phoenix House California



# COVID-19 Reporting Requirements

SAPC-IN 24-09

Bulletins 2024

Subject

Date

24-09 - COVID-19 and Influenza Vaccination Requirements, Masking Guidance, And Reporting Responsibilities (New - October 2024)

All staff working under a Public Health contract or agreement in outpatient, opioid treatment program, residential, recovery bridge housing settings, DUI, prevention, harm reduction and any setting other than the specified licensed healthcare settings described below are strongly encouraged, but not required, to receive the currently recommended influenza and COVID-19 vaccines. Immunizations are the best way to protect against serious illness and death caused by influenza and COVID-19.

All staff who have direct patient contact or work in patient care areas in specified licensed healthcare settings, including Chemical Dependency Recovery Hospitals and Acute Psychiatric Hospitals (ASAM 3.7 and 4.0 Levels of Care), should receive the annual influenza vaccine and the most recent updated COVID-19 vaccine authorized for use in the United States for the current respiratory virus season.

http://publichealth.lacounty.gov/acd/ncorona2019/reporting.htm



## COVID-19 Reporting Requirements

SAPC-IN 24-09

- Licensed healthcare settings, such as chemical dependency hospitals, are required to report according to the instructions under the category "Acute Hospital Settings" or "Other Healthcare Settings", depending on the setting.
- Community congregate settings, including residential and recovery bridge housing settings, are required to report based on the instructions under the category "Community settings", sub-category "Community Congregate Settings"
- Non-congregate settings, including prevention, DUI, outpatient, and OTP settings are required to report according to the instructions under the category "Community settings", sub-category "Workplaces".
- Outbreak reporting: Report within (1) business day of being notified that Public Health has determined there is an outbreak requiring further investigation in any SAPC-contracted site or level of care.





#### **Overview**

In Los Angeles County, all settings must report clusters of COVID-19 and Acute Respiratory Illness (ARI) to the LA County Department of Public Health (LAC DPH) within 24 hours, as mandated by the LA County Health Officer Order.

In <u>healthcare settings</u>, where the risk of adverse outcomes is higher, timely reporting of COVID-19 case clusters is essential. Specific reporting thresholds are established to ensure swift actions are taken to mitigate the virus's spread.

For non-healthcare <u>community settings</u>, where testing access may be limited, COVID-19 reporting is now incorporated into the existing Acute Respiratory Illness (ARI) symptom-based reporting protocol. This approach aims to facilitate early outbreak detection and management through proactive symptom monitoring.

See below for reporting requirements and information by type of setting.

Report any clusters of more severe illness (such as multiple cases of pneumonia in a group) even if they do not meet the reporting thresholds listed below.

If you are a representative from a laboratory or provider's office seeking information about mandated COVID-19 reporting, visit the <u>Health Professional Mandatory Reporting</u> webpage.

If you are looking to submit an anonymous report, call (888) 700-9995 or submit a complaint.

http://publichealth.lacounty.gov/acd/ncorona2019/reporting.htm





#### Welcome to SPOT



- Select Existing Users if your local health department has provided you with a SPOT account and log in credentials.
- Select New Users if you do not have a SPOT account.

#### Why SPOT?

The goal of the School and Shared Portal for Outbreak Tracking (SPOT) is to expand California's contact tracing efforts by facilitating collaboration and sharing of information between schools, workplaces, congregate settings, other entities and local health departments (LHDs), through CalCONNECT, California's public health contact tracing and data management system.

http://spot.cdph.ca.gov



**■** DEFINITIONS (for community settings)

**\*\*** Community Congregate Settings

A Education Settings

₩ Workplace Settings

#### **Community Congregate Settings**

#### Refers to

- . Community care facilities, including:
  - o Adult Residential Care Facilities, all license types
  - o Continuing Care Retirement Communities
  - o Psychiatric Health Facilities, not including Acute Psychiatric Hospitals
  - o Residential Care Facilities for the Elderly
  - o Residential Facilities for the Chronically III
  - o Social Rehabilitation Facilities
  - o Long-Term Care Facilities
  - Residential Substance Use Treatment Facilities
  - o Mental Health Treatment Facilities
- Sites that provide housing for people experiencing homelessness such as:
  - Shelters
  - o Recuperative care centers
  - Single room occupancy hotels (SRO)
- Correctional/detention facilities

#### When to Report

#### Epidemiologically linked group (e.g., individuals sharing common areas or living space):

 A minimum of 5 cases (at least 20% of the group) meets case definition for acute respiratory illness within a 7 day period, OR

#### Facility-wide (e.g., among residents or clients):

 At least 10% of the average daily population are reporting new onset of symptoms of acute respiratory illness, with a minimum of 5\* ill, within a 3-day period.

\*In settings with groups smaller than 15 people, the minimum is reduced to 3 cases.

#### **How to Report**

SPOT: <u>Spot.cdph.ca.gov</u>

SPOT Reporting Quick Guides

For additional assistance, contact the Community Outbreak Team.



# CARE COORDINATION FOR EXTERNAL MENTAL HEALTH SERVICES

Zainab Mohammed, Families for Children

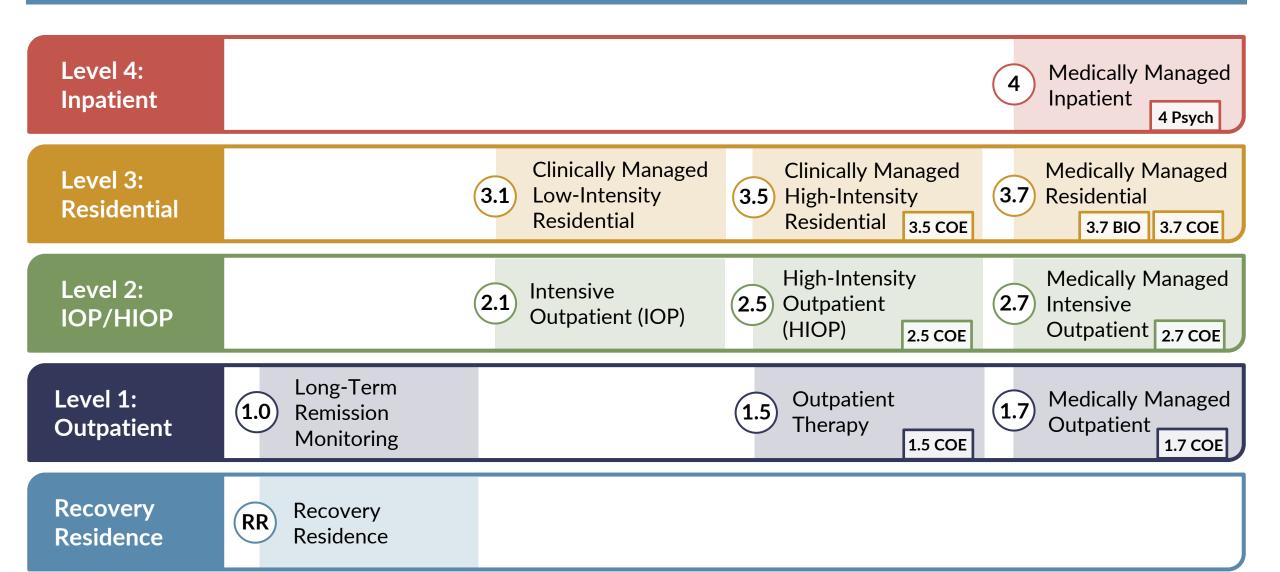


# ASAM 4TH EDITION CAPACITY BUILDING: RESIDENTIAL CO-OCCURRING CAPABILITY AND ADDITIONAL RESIDENTIAL WITHDRAWAL MANAGEMENT BEDS

Dr. Brian Hurley, Medical Director, SAPC



#### The ASAM Criteria Continuum of Care for Adult Addiction Treatment





### **Notable Level of Care changes**



Removing Level 0.5. Early intervention and prevention are addressed in a new chapter.



Recovery support service expectations at each level of care.



Removing Level 3.3. Reflecting that cognitive deficits should be addressed in all levels of care.



Expectation that all levels of care be co-occurring capable at minimum.



Level 3.2 WM services integrated into Level 3.5.



Adding harm reduction as a component of individualized care.



- Time-limited capacity building start-up fund funds for:
  - Staffing (LPHAs which may include psychiatrist / Psych-NPs) providing mental health services in residential LOCs
  - Adding 3.2-WM Bed Capacity
  - Limited to residential sites of care
- Current Funding Consideration
  - \$400,000 per site of residential care in a cost-sharing arrangement
  - 85% must be directed to staffing
    - Covers staffing until DHCS rates align with state cost reporting



- Funding Available via Approved Implementation Plan which must include:
  - Proposed Staffing Model
  - Proposed 3.2-WM Bed Additions
- Key Performance Indicators:
  - Mental health diagnoses documented via Cal-OMS
  - 3.2-WM Bed Count / Utilization
  - Direct LPHA services to residential clients



- Direct Provision of Care by LPHAs
  - Services tracked through \$0 Tracking Code: LPHACOD
- Considerations:
  - Medication services provided by COD Medical Clinicians (Psychiatry, Advanced Practice Psychiatric Nurse, Mental Health RN, Mental Health LVN) billable on top of the day rate via codes H0033 and H0034
  - Non-medical LPHA services not separately billable. DHCS sites day rates responsive to cost reporting.
- SAPC will monitor 3.2-WM Bed Count / Utilization via billing



- Timeline
  - Proposed plan submitted to network for comment Dec 2025
  - Published via Workforce Development section of SAPC's Value-Based
     Incentives (VBI) funds: <a href="http://publichealth.lacounty.gov/sapc/providers/payment-reform-vbi/workforce-development.htm">http://publichealth.lacounty.gov/sapc/providers/payment-reform-vbi/workforce-development.htm</a>
  - Implementation plans due Jan 2026
- Portion of funding is from LA County MHSA → Workflow considerations related to accepting referrals from DMH programs
- Written feedback welcomed via email: <u>SAPC.QI.UM@ph.lacounty.gov</u>



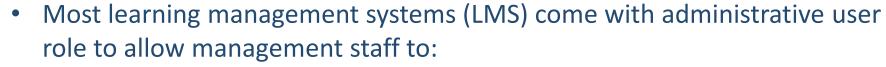
# SAPC-LNC PROVIDER ADMINISTRATIVE USER ROLE

Dr. David Hindman, SAPC





### **About SAPC-LNC Provider Administrative User Role**



- Assign training to their staff
- Send training notifications and reminders
- Track training completion
- Manage membership
- SAPC-LNC Provider Administrative User Role will be released to all SAPC Providers in 2026
- SAPC is seeking (5) five SAPC Providers to participate in the pilot phase
- Pilot phase will take place in February 2026







## Pilot Phase Details (February, 2026)

- Each Pilot Provider will select 2-3 Administrative Users
  - Selection recommendation: All Sage Liaisons, plus 1-3 non-Sage Liaisons
  - Commitment: 6 hours in total
    - Attend orientation and feedback sessions (2 hours)
    - Test Administrative User functions (3.5 hours)
    - Provide Feedback on how to improve functionality (30 mins)



- Selection recommendation: Both onboarding and existing staff
- Commitment: Complete training(s) assigned and take a short survey
- Providers who are interested in participating in the pilot phase please email the list of administrative users to the SAPC-LNC Team at <u>SAPC-LNC@ph.lacounty.gov</u> by <u>1/16/2026</u>
- Questions? Please email the SAPC-LNC Team at <u>SAPC-LNC@ph.lacounty.gov</u>





# R95 FACILITATOR'S GUIDE

Maria Elena Chavez, SAPC



## GROCERY ONE-TIME SUPPORT INITIATIVE

Daniel Deniz, SAPC Finance Services Division Chief SAPC Finance Services Division

## **SAPC Finance Updates**



## **Grocery One-Time Support Initiative (GOTSI)**

- SAPC Information Notice 25-15, gave clients \$100 gift card for groceries
- In response to Federal Government shut-down and resulting delay in Supplement Nutrition Assistance Program (SNAP)
- Provider temporary & one-time assistance to eligible clients:
  - -Currently enrolled in SAPC funded non-residential program
  - -Actively receiving CalFresh benefits
  - -Impacted by the pause in nutrition benefit and experiencing food insecurity
- Eligibility verified by:
  - DPSS CalFresh data
  - –Sage billing claims

## **SAPC Finance Updates**



## **Grocery One-Time Support Initiative GOTSI**

- A total of 31 providers agencies submitted requests.
- Between November 6<sup>th</sup> and 30<sup>th</sup>, SAPC received <u>1,918 requests</u> were received.
- 1,231 clients received one (1) \$100 gift card, total amount \$123,100.

### **Next Steps**

Provider agencies to return distribution logs & undistributed cards by Dec. 14<sup>th</sup>



## Finance Services Division Update – Contact

## **Questions and/or More Information**

SAPC-Finance@ph.lacounty.gov (626) 293-2630



# CALIFORNIA SB 43 UPDATES

Dr. Brian Hurley, Medical Director, SAPC



# **Expanded LPS Criteria for Grave Disability: California Senate Bill 43**

• Date: Friday, December 12, 2025

Location: Zoom

• **Time:** 10:00 am – 1:15 pm

• **Details**: Presentation to provide an overview of Los Angeles County's implementation plans given updated eligibility for involuntary psychiatric holds and LPS conservatorships.





# H.R.1 UPDATES

Dr. Brian Hurley, Medical Director, SAPC



## PUBLIC COMMENTS

Dr. Brian Hurley, Medical Director, SAPC



## Meeting Wrap Up

- Next meeting: Tuesday, February 10, 2026
- Decisions
- Feedback on PAC Meetings:
  - a) What did you like about the PAC meeting?
  - b) How could the PAC meeting be improved?
  - c) Do you have recommendations for topics that should be discussed at future PAC meetings?



https://forms.office.com/g/tvzu2QZLT7



## **A**DJOURN

Next PAC meeting:

February 10, 2026, 2 PM – 4 PM