

COUNTY OF SAN MATEO Inter-Departmental Correspondence Health System



Date:July 29, 2015Board Meeting Date:September 22, 2015Special Notice / Hearing:NoneVote Required:Majority

To: Honorable Board of Supervisors

- **From:** Louise Rogers, Chief, Health System Stephen Kaplan, Director, Behavioral Health and Recovery Services Lisa Mancini, Director, Aging and Adult Services
- **Subject:** Agreement with Helios Healthcare, LLC for Residential Rehabilitation and Long-Term Care Services

RECOMMENDATION:

Adopt a Resolution authorizing an agreement with Helios Healthcare, LLC for residential rehabilitation and long-term care services for the term July 1, 2015 through June 30, 2018, in an amount not to exceed \$894,000.

BACKGROUND:

Helios Healthcare, LLC (Helios) is a provider of mental health services in a locked facility setting. Helios provides neurobehavioral, psychosocial rehabilitation, adult residential, community, wellness recovery action planning, and health and wellness programs. Helios' services include behavior modification, skilled nursing, life skills training, recreation and rehabilitation, neurobehavioral support, dementia and Alzheimer's care, behavior intervention, vocational and pre-vocational training, and self-advocacy.

Helios has been providing services to San Mateo County residents since 1988 as a sister company to Crestwood Behavioral Healthcare, which also currently contracts with San Mateo County to provide specialized mental health services. Under the B-1 Administrative Memorandum, the selection of providers for long-term locked facility services is exempt from the Request for Proposals requirement.

DISCUSSION:

Helios will provide services to both the Behavioral Health and Recovery Services (BHRS) and Aging and Adult Services (AAS) divisions of San Mateo County's Health System. Helios will provide up to 5 beds for BHRS clients who are seriously mentally ill and in need of mental health rehabilitation, treatment and long-term care. Helios will

also provide up to 6 skilled nursing facility beds for AAS clients who are probate dementia conservatees and who require a locked long-term treatment setting. Services provided through this agreement offer an alternative to the use of more costly hospital emergency services, inpatient hospital admissions and correctional facilities.

This contract is late because BHRS, as a part of its due diligence for this agreement, needed to review the contractor's FY 14-15 units of service and costs, prior to finalizing this new contract for FY 15-16.

The Resolution contains the County's standard provision allowing amendment of the County's fiscal obligations by a maximum of \$25,000 (in aggregate).

The agreement and Resolution have been reviewed and approved by County Counsel as to form. This agreement is on the Continuing Resolution.

The agreement contributes to the Shared Vision 2025 outcome of a Healthy Community by providing residential rehabilitation and long-term care for the vulnerable population of adults suffering from serious mental illness. It is anticipated that 68% of clients who receive services through this agreement will be maintained at a current or lower level of care.

PERFORMANCE MEASURE(S):

Measure	FY 2014-15 Estimated	FY 2015-16 Projected
Percentage of clients maintained at	68%	68%
current or lower level of care.	3 Clients	3 Clients

FISCAL IMPACT:

The term of the agreement is July 1, 2015 through June 30, 2018. The amount of the agreement is not to exceed \$894,000. Of this amount, \$375,000 is for BHRS and \$519,000 is for AAS.

Of the maximum amount for BHRS, \$125,000 will be for FY 2015-16 and is funded as follows: 90% or \$112,500 is from sales tax Realignment, and 10% or \$12,500 is Net County Cost. These funds are included in the BHRS FY 2015-16 Recommended Budget.

Of the maximum obligation for AAS, \$173,000 will be for FY 2015-16 and is 100% funded through client reimbursements. There is no Net County Cost. These funds are included in the AAS FY 2015-16 Recommended Budget.

The payment provisions in this agreement remain essentially the same as those of the prior agreement. Similar arrangements will be in place for FY 2016-17 and FY 2017-18.