

**APPENDIX: Yolo COUNTY- Innovation Plan**

**Innovation (INN) Project Name: Yolo County Semi-Statewide Enterprise Health Record**

**COUNTY CONTACT INFORMATION** (*who is your Project Lead, as provided to CalMHSA*):

Samantha Fusselman, Adult & Aging Branch Director	Samantha.fusselman@yolocounty.gov
Jennifer Gay, Quality Management Clinical Manager	Jennifer.gay@yolocounty.gov
Jennifer Edwards, MHSA Program Coordinator	Jennifer.edwards@yolocounty.gov

**KEY DATES:** (*Include actual dates and/or expected dates, as per your local timeline*)

<b>Local Review Process</b>	<b>Dates</b>
30-day Public Comment Period (begin and end dates)	03/18/25-4/16/25
Public Hearing by Local Mental Health Board	04/16/2025
County Board of Supervisors' Approval	04/29/2025

**This INN Proposal is included in:** (*Check all that apply*)

<b>Title of Document</b>	<b>Fiscal Year(s)</b>
MHSA 3-Year Program & Expenditure Plan	
MHSA Annual Update	
Stand-alone INN Project Plan	24/25, 25/26, 26/27

**DESCRIPTION OF THE LOCAL NEED(S)** (*Include specifics from your local MHSA community program planning process (CPPP), e.g., comments about your current EHR system, suggestions from stakeholders, e.g. County staff, contracted providers, system partners, clients, family members and other interested parties. Include challenges meeting current and future reporting requirements and business needs, past efforts to address local needs, etc.*)

Behavioral Health Plans (BHP) in California have had a limited number of options from which to choose when seeking to implement a new Electronic Health Record (EHR). The majority of EHR vendors develop products to meet the needs of the much larger physical health care market, while the few national vendors that cater to the behavioral health (BH) market have been disincentivized from operating in California by the many unique aspects of the California BH landscape. This has resulted in most county BHPs, including Yolo County, being largely dissatisfied with their current EHRs, yet with few viable choices when it comes to implementing new

solutions. The pervasive difficulties of 1) configuring the existing EHRs to meet the everchanging California requirements, 2) collecting and reporting on meaningful outcomes for all the county BH services (including MHSA/BHSA-funded activities), and 3) providing direct service staff and the clients they serve with tools that enhance rather than hinder care have been difficult and costly to tackle on an individual county basis.

Currently, EHRs have been identified as a source of burnout and dissatisfaction among healthcare direct service staff. EHRs, which were first and foremost designed as billing engines, have not evolved to prioritize the user experience of either the providers or recipients of care. The impact of this design issue is telling – an estimated 40% of a healthcare staff person’s workday is currently spent in documenting encounters, instead of providing direct client care. This estimate does not consider the full breadth of the BHP workforce, which relies on a wide diversity of provider types needed to respond to the Medi-Cal population. This impact is even more significant since the implementation of California Advancing and Innovating Medi-Cal (CalAIM). The documentation time has resulted in a financial struggle for the county provider network now that they do not receive payment for documentation time.

Yolo County Behavioral Health currently uses Netsmart’s myAvatar for clinical documentation and Medi-Cal billing and claiming. The Department also uses the Data Collection and Reporting (DCR) for Full-Service Partnership data reporting and the Person-Centered Intelligence Solution through Opeeka for data reporting on a large MHSA PEI project. In addition, all BH programs and contracts complete quarterly Results Based Accountability (RBA) data reports; these are often manually tracked, only show aggregate data, and are insufficient to draw meaningful conclusions based on longitudinal data. The contract amounts for these systems collectively is over \$790,000 annually. This is not inclusive of HHS System Software staff required to provide technology support and solutions for myAvatar.

The department’s efforts over the years to implement myAvatar has been challenging and expensive. Yolo County has been unsuccessful with implementing the use of myAvatar with our community-based organizations, which provide approximately 70% of the county’s BH services. This has resulted in a large administrative burden on both our provider network and county fiscal staff. Additionally, this has reduced revenues due to billing and claiming challenges associated with our provider network using a variety of other EHRs while the county is in myAvatar. Not being able to bring our provider network into myAvatar has meant various technology and business solutions have been created to support importing data from the providers’ EHRs into myAvatar. With the rate that changes occur, the county and the provider network have to make frequent and repeated changes to the EHR systems which has created significant delays as well as strained county-provider relationships. As a small to medium sized county, we have a limited array of service providers available to serve our community and having strained relationships due to inefficiencies of our EHR is a significant risk.

In addition, CalAIM is a massive initiative requiring all California counties to implement various goals and milestones. With this came several new requirements which need to be addressed

through updates and modification to each County's EHR such as payment reform, data exchange, and BH policy changes (i.e. screening tools and clinical documentation). The county's current EHR has not been able to keep pace with the changes taking place, resulting in many pivots and workarounds which have created significant delays in processing claims and producing data reports. The cumulative effect of this is notable, requiring the Department to dedicate a continuously increasing amount of staff time to develop solutions within myAvatar, which then must be maintained and revised regularly. The outsized administrative and technical burden is unsustainable.

Yolo County's participation in this project will address some of the needs and themes expressed by community stakeholders during the last several years leading up to this Innovation Plan. In the community program planning process for the 2023-2026 Three-Year Plan, several primary themes emerged as salient across focus groups, including aspects of service provision. The primary themes were Access, Navigation, Integrated Services, Special Needs Populations, Cultural Competence, and Telehealth. Participation in this project will contribute to expanded and increased access to mental health services because staff will spend less time navigating an administratively cumbersome EHR, allowing them to provide more direct client care. This project is supportive of the workforce, who often experience burnout, in part due to the administrative burden associated with the existing EHR. With less burnout, the workforce will be healthier and better staffed. Additionally, increasing efficiencies with a strong EHR allow staff to increase the amount of client-facing time which improves access to services.

As California counties, including Yolo, are navigating the Behavioral Health Transformation, the need for an effective EHR that meets the needs of the county BH department is more essential than ever. Yolo County, along with others, are navigating the implementation of CalAIM, Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment (BH-CONNECT), Children and Youth Behavioral Health Initiative (CYBHI), and Medi-Cal Mobile Crisis, in addition to the upcoming Behavioral Health Services Act (BHSA/Proposition 1) changes. These are substantial programmatic changes to the entire BH system. Yolo County needs a modern, effective EHR to be able to reduce documentation time, maximize federal revenue through Medi-Cal billing, and retain a strong workforce.

**INNOVATION PROJECT SUSTAINABILITY, PROPOSITION 1 ALIGNMENT, AND CONTINUITY OF CARE** *(Briefly describe how the County will decide whether it will continue with the INN project in its entirety or keep particular elements of the INN project without the use of MHS funding components for sustainability.)*

This project will support Full Service Partnership services for individuals living with serious mental illness by optimizing the health information technology used by county and provider staff to meet their daily workflow needs, enhance working conditions, increase efficiencies, and reduce burnout. The impact of this plan includes improved working conditions under which direct client care is provided as well as increasing access to care because of the reduced documentation and administrative burden associated with the current legacy system. With the input of provider

stakeholders and best practice experts in the field of human-centered design, the improved EHR will be collaboratively and intentionally designed to improve the method and ease of documenting into the EHR as well as gathering pertinent clinical information. This promotes less time spent “treating the chart” and more time spent on “treating individuals” in need of care. This project does not directly provide housing interventions or early intervention programs/approaches; however, a more effective EHR supports the county and the broader provider network being able to increase access to services and to utilize data to inform the provision of these services.

This project supports the sustainability of various MHSA funded programs under the upcoming BHSA. Yolo County has MHSA funded programs in both Community Services and Supports (CSS) and Prevention and Early Intervention (PEI) that, to be sustained, under the BHSA, need to increase Medi-Cal revenue. Having an improved EHR not only allows for increased direct client time and less documentation time, it also will help to maximize Medi-Cal billing by reducing the administrative burden of processing claims which allows staff to spend time working denials, ensuring all billable services are billed, and processing claims timely. In addition, moving to the semi-statewide EHR supports the county in integrating all community-based providers into one EHR which improves billing practices, reduces administrative burden on the provider network, and allows for comprehensive data reporting. To sustain services that are valuable to the community, and that the community has said are priorities, the county needs to improve Medi-Cal revenue generation which can be accomplished with an improved EHR.

The County will sustain the project, or components of the project, after its completion with other sources of funds including Behavioral Health Services Act (BHSA) Behavioral Health Services and Supports (BHSS)/Capital Facilities and Technology (CFTN) to support the on-going maintenance of the newly developed EHR.

**DESCRIPTION OF THE RESPONSE TO LOCAL NEED(S) AND REASON(S) WHY YOUR COUNTY HAS PRIORITIZED THIS PROJECT OVER OTHER CHALLENGES IDENTIFIED IN YOUR COUNTY** *(Include information describing what your County hopes to achieve by participating in the INN project, referencing the learning goals included at the end of the “Project Brief” document.)*

In assessing possible solutions to the primary problem illustrated earlier, the county has determined that participating in the CalMHSA Semi-Statewide Enterprise Health Record Project is appropriate given the multi-dimensional nature of the problem with the current system. The problem is not simply the challenges with the implementation of CalAIM and the existing EHR. It is also the need to bring our entire provider network into the same EHR, coupled with the billing and claiming challenges faced in myAvatar and the data reporting requirements that are administratively burdensome in the current system. MyAvatar is progressively more costly year over year, without any improvement in user experience or billing efficiency. As the BH system in California, and in Yolo County specifically, prepares for the implementation of the Behavioral

Health Services Act (BHSa) in July 2026, the need for a lean, adaptable, and efficient EHR has become a critical need. Yolo County, like others, is seeking ways to maximize Medi-Cal revenue to sustain current MHSa programs that are at risk of sunseting under BHSa. With a more efficient EHR, allowing staff to provide more direct service and maximize Medi-Cal billing, the county expects to be able to sustain some programming that is otherwise at risk of ending under the BHSa.

Throughout the community planning process for both the 2023-26 Three-Year Plan and the 24-25 Annual Update, stakeholders and community members have indicated that access to services is a priority and an area needing attention. Additionally, we have heard from Yolo County’s Local Behavioral Health Board, Board of Supervisors, and community members that access to data to gain a clear understanding of the needs, services, and outcomes is essential. Workforce challenges have also been identified as an area that needs attention and has a direct impact on access to services. Yolo County believes that participating in the Semi-Statewide EHR project will reduce administrative burden, allowing clinical staff to provide more direct client care, which is also identified as a solution to burnout and an improved workforce.

By joining this unique multi-county collaborative opportunity, Yolo County can provide continuous feedback through system end-users, providers, contractors, consumer/family members, staff, and recipients of care. This broad stakeholder group will serve as an essential feedback loop to program design, system design, and evaluation. Yolo County hopes to achieve the following learning goals through participation in this Innovation Project:

1. Using a Human-Centered Design approach, identify design elements of a new Electronic Health Record to improve our local BH workforce’s job effectiveness, satisfaction, and retention.
2. Implement a new EHR that is more efficient to use, resulting in a 30% reduction in time spent documenting services, thereby increasing time spent providing direct care.
3. Implement a new EHR that facilitates a client-centered approach to service delivery, founded upon creating and supporting a positive therapeutic alliance between the service provider and the client.

**DESCRIPTION OF THE LOCAL COMMUNITY PLANNING PROCESS** *(Describe the County's CPPP for the Innovative Project, encompassing inclusion of stakeholders, representatives of unserved or under-served populations, and individuals who reflect the cultural, ethnic, and racial diversity of the County's community. Include details of stakeholder meetings, i.e. number and demographics of participants, community groups and system partners, methods of dissemination of information about the proposed project and comments received regarding the INN project.)*

The 2023-2026 Three-Year plan community engagement process took place over five months, encompassing 32 focus groups with 516 participants, their family and friends, people on the front lines, emergency responders, adults, parents, youth, LBGTQ+ people, diverse racial and cultural communities, and many more. The FY 24-25 Annual Update engagement process involved 193 participants who supported the planning process.

Yolo County's participation in this project will address some of the needs and themes expressed by community stakeholders during the last several years leading up to this Innovation Plan. In the community program planning process for the 2023-2026 Three-Year Plan and the recent Annual Update several primary themes emerged as salient across focus groups including aspects of service provision that this Innovation Plan will help to address: access, navigation, integrated services, special needs populations, cultural competence, and telehealth. The participation in this project will contribute to expanding and increasing access to mental health services because staff will spend less time navigating an administratively challenging EHR and have more time to provide direct client care, thus increasing support for the workforce as well as increasing access to services, building efficiencies that alleviate workforce shortages. Additionally, one of the foundations of providing such services is having accurate data on underserved or unserved populations. The new EHR will provide more accurate data on these populations and help in planning for expanded services for them.

Below is an overview providing additional information and details on the community planning process leading up to this Innovation Plan.

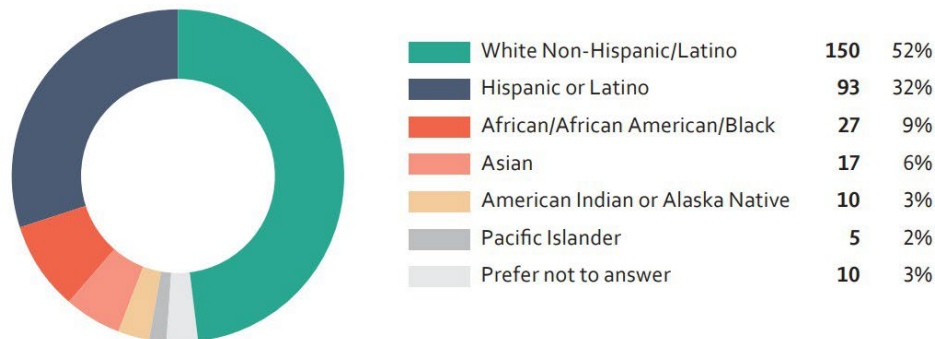
## Community Planning Process & Focus Groups (Three-Year Plan FY 2023-2026)

### Focus Groups for Yolo County MHSA with Number of Participants












Nov 21, 2022	Law Enforcement (Police Departments) <b>4</b>	Jan 30, 2023	Latinx Perspectives on Mental Health <b>5</b>
Dec 6, 2022	Help Me Grow—Early Childhood Mental Health (Parents and Families) <b>9</b>	Jan 30, 2023	Criminal Justice Partners <b>6</b>
Dec 7, 2022	Community Engagement Workgroups <b>52</b>	Feb 2, 2023	HHSA Behavioral Health Team <b>76</b>
Dec 9, 2022	Yolo County School Districts <b>6</b>	Feb 7, 2023	Empower Yolo <b>29</b>
Dec 9, 2022	Help Me Grow- Early Childhood Mental Health (Parents and Families) <b>7</b>	Feb 10, 2023	Cesar Chavez Community School: Student Participants <b>10</b>
Dec 13, 2022	North Valley Indian Health <b>2</b>	Feb 13, 2023	Families of Individuals Involved in the Criminal Justice System <b>6</b>
Dec 14, 2022	Fourth and Hope (Transitional and Permanent Housing) <b>14</b>	Feb 15, 2023	Yolo County Maternal Mental Health Advisory Board <b>18</b>
Dec 14, 2022	Peer Support Group <b>8</b>	Feb 15, 2023	Yolo Rainbow Families <b>10</b>
Dec 15, 2022	Yolo County HHSA Substance Use Provider Meeting (DMC-ODS Providers) <b>26</b>	Feb 17, 2023	Early Childhood Mental Health Professionals Focus Group <b>8</b>
Dec 15, 2022	Yolo County HHSA Provider Stakeholder Work Group <b>12</b>	Feb 17, 2023	Criminal Justice Professionals: Yolo Staff and Contractors <b>8</b>
Jan 4, 2023	Yolo County Child, Youth, and Family Branch Staff <b>67</b>	Feb 21, 2023	Children's Mental Health Service Providers <b>17</b>
Jan 5, 2023	Yolo Healthy Aging Alliance Committee <b>18</b>	Feb 24, 2023	People with Lived Experience <b>10</b>
Jan 10, 2023	National Alliance on Mental Illness (NAMI) Yolo County <b>6</b>	Feb 24, 2023	Yolo County Veterans Services Office Staff <b>2</b>
Jan 12, 2023	Yolo County Health Council <b>25</b>	Mar 7, 2023	Woodland Community College: Staff Participants <b>7</b>
Jan 25, 2023	West Sacramento Community <b>19</b>	Mar 16, 2023	Emergency Medical Services Partners <b>10</b>
Jan 26, 2023	Davis Community Meals <b>9</b>	Mar 29, 2023	Cesar Chavez Community School: Staff Participants <b>10</b>

## Participant Demographics (Three-Year Plan FY 2023-2026)

### Participant Race/Ethnicity

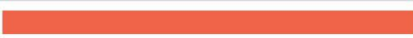



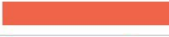
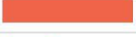






**Participant Residence**

Woodland		90	32%
Davis		49	18%
West Sacramento		31	11%
Sacramento (Board and Care)		13	5%
Yolo		9	3%
Winters		3	1%
Dunnigan		1	0.4%
Esparto		1	0.4%
Knights Landing		1	0.4%
Homeless		1	0.4%
Out of County		65	23%

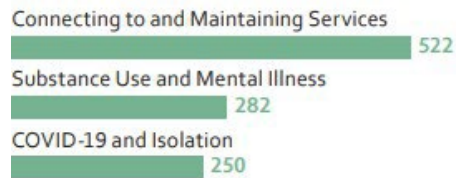
There were no participants from Brooks, Clarksburg, Guinda, or Madison.

**Participant Affiliation**

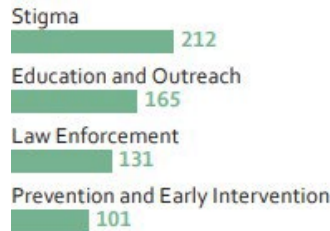
Community member		86	31%
Mental health service provider		64	23%
City/County employee		62	22%
Mental health client/consumer		39	14%
Educator		36	13%
Family member/Friend of mental health client		27	10%
1st responder		11	4%
Business owner		5	2%
Foster care youth		4	1%
Prefer not to answer		12	4%

## Keyword Mentions: 2023 Themes

### Community Needs and Accessing Services



### Prevention, Education, and Outreach



### Special Populations

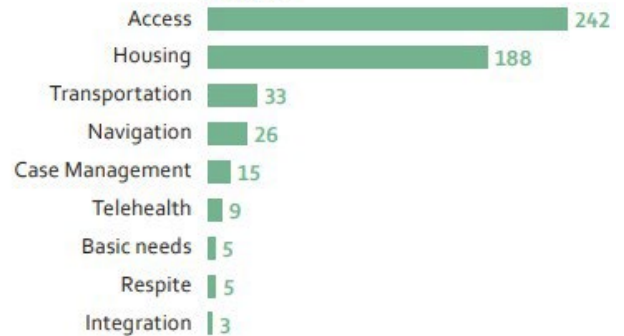


### Funding, Workforce, and Capacity Building

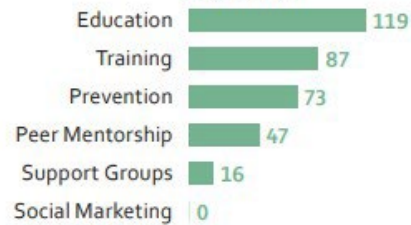


## Keyword Mentions: Issues

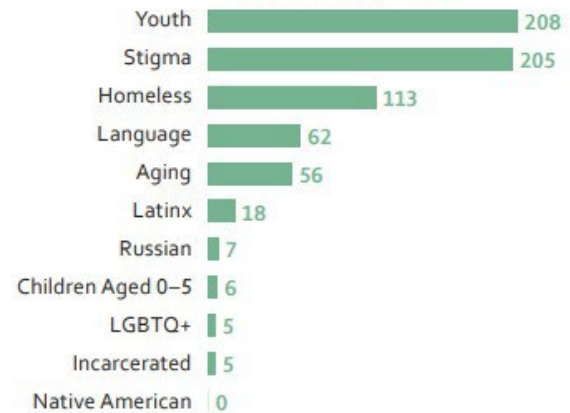
### Services



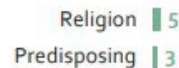
### Prevention



### Special Needs Populations and Cultural Competence



### Funding



**Innovation Plan CPPP:** The Yolo County MHSA Draft Innovation Plan 30-day public comment period opened on March 18, 2025 and closed on April 16, 2025. The county announced and disseminated the draft plan broadly through community stakeholders, the general public, the Community Engagement Work Group, MHSA listservs, Cultural Competence committee, service providers, consumers and family members, Board of Supervisors, Local Behavioral Health Board (LBHB), county staff, and requested and encouraged partners and community stakeholders to promote the review of the draft plan and participation by posting and sharing with others. Public Notices were posted in the Davis Enterprise and the Daily Democrat newspapers for several dates. The draft plan was posted to the county's MHSA website and could be downloaded electronically along with comment forms and online resources. Hardcopies were also made available at HSA locations in Woodland, Winters, Davis, West Sacramento, and a community location (Esparto) within Yolo County. Additionally, any interested party could request a copy of the draft by submitting a written or verbal request to the MHSA program staff. All Public Comments and Yolo County Health and Human Services Agency Responses were compiled within this document and presented to the LBHB. On Wednesday, April 16, 2025, at 6:00 PM, a public hearing was held by the Yolo County Local Behavioral Health Board in compliance of regulation.

**CONTRACTING** *(What project resources will be applied to managing the County's relationship to the contractor(s)? How will the County ensure quality as well as regulatory compliance in these contracted relationships?)*

Yolo County will be contracting with CalMHSA for this project. The leads for this project in Yolo County will be the Adult & Aging Branch Director who oversees most of our BH system of care, including all the adult-serving MHSA programs. Secondary leads on this innovation project will be our Quality Management Clinical Manager and MHSA Program Coordinator. All three of these staff are experienced in stakeholder engagement, both within the MHSA Community Program Planning Process and through other community engagement efforts. The Adult & Aging Branch Director and QM Clinical Manager share responsibility with the larger BH Department for the implementation of Behavioral Health Transformation, leaving them well positioned to ensure Yolo County's implementation of a new EHR meets the needs identified. Contract monitoring will be completed by the Program Coordinator, who will collaborate closely with the other project leads to ensure quality assurance and regulatory compliance. These positions all report up to the Behavioral Health Director. These designated staff also participate in the county's Behavioral Health Leadership Team where information and progress on this project will be shared. These staff will participate in on-going communication with CalMHSA which serves as the Project Manager and liaison to the evaluation vendors.

**COMMUNICATION AND DISSEMINATION PLAN** *(Describe how you plan to communicate results, newly demonstrated successful practices, and lessons learned from your INN Project. How do you plan to disseminate information to stakeholders within your County and (if applicable) to other Counties? How will program participants or other stakeholders be involved in the communication efforts?)*

Upon approval of the Innovation Plan, the project leads will create an EHR Community Stakeholder group. Stakeholders engaged in the EHR Community Stakeholder group may include county staff, community based-providers, consumers, and family members. The stakeholder group will play a critical role to serve as an essential feedback loop to program design, system design and implementation, and evaluation.

Information about this Innovation plan will also be disseminated through our County Behavioral Health Leadership Team, the Yolo County Behavioral Health Quality Improvement Subcommittee, and the MHSA Community Engagement Work Group. Communication about the plan, including ongoing progress, will be included in the monthly Behavioral Health Directors report and shared at the Local Behavioral Health Board.

This Innovation plan will also be included in upcoming MHSA Annual Updates as well as the next Three-Year Plan. Yolo County will work with CalMHSA and its program partners to disseminate information regarding the EHR Multi-County Innovation Project to local stakeholders and counties. In general, communication about the Multi-County Project will be posted through a public announcement to the MHSA Stakeholder e-mail list and posted to the County's MHSA website.

**COUNTY BUDGET NARRATIVE** *(Include description of expenses for local Personnel, Operating and Consultant Costs, as well as the source(s) of funds to be used to support this multi-County collaborative. Provide a brief budget narrative to explain how the total budget is appropriate for the described INN project. The goal of the narrative should be to provide the interested reader with both an overview of the total project and enough detail to understand the proposed project structure. Ideally, the narrative would include an explanation of amounts budgeted to ensure/support stakeholder involvement (For example, “\$5000 for annual involvement stipends for stakeholder representatives, for 3 years: Total \$15,000”) and identify the key personnel and contracted roles and responsibilities that will be involved in the project (For example, “Project coordinator, full-time; Statistical consultant, part-time; 2 Research assistants, part-time...”). Please include a discussion of administration expenses (direct and indirect) and evaluation expenses associated with this project. Please consider amounts associated with developing, refining, piloting, and evaluating the proposed project, and the dissemination of the Innovative project results.*

<b>Personnel</b>		
Systems Software Specialist II	<i>1.0- Will provide I.T. project support for the new Semi-Statewide EHR system in our county.</i>	\$588,745.67
MHSA Program Coordinator	<i>0.15- will provide management and stakeholder engagement and collaboration within our county.</i>	\$66,662.18
Program Coordinator (MC Billing)	<i>0.50- will provide oversight and technical assistance to both program and fiscal staff for the implementation of the new Semi-Statewide EHR system in our county.</i>	\$222,207.26
Branch Director	<i>0.10- will provide executive level oversight in the implementation of the new Semi-Statewide EHR in our county.</i>	\$70,701.23
Clinical Supervisor- QM	<i>0.4- will provide oversight and support contract management and implementation.</i>	\$176,153.94
Behavioral Health Director	<i>0.04- will provide executive level oversight in the implementation of the new Semi-Statewide EHR in our county.</i>	\$31,526.60

Fiscal Administrative Officer	<i>0.10- will provide executive level oversight to our fiscal/admin teams conducting the billing system analysis.</i>	\$50,370.04
Accountant III	<i>0.35- will provide billing system analysis of the new Semi-Statewide EHR system in our county.</i>	\$152,511.45
Accountant I	<i>0.50- will provide billing system analysis of the new Semi-Statewide EHR system in our county.</i>	\$171,839.87
Senior Account Technician	<i>0.50- will provide billing system analysis of the new Semi-Statewide EHR system in our county.</i>	\$172,926.90
<i>** all payroll taxes and benefits are included in each personnel cost listed above</i>		
<b>Operating Expenses- Direct Costs</b>		
Communication Expenses	n/a	\$0
Office Expenses	n/a	\$0
Training	n/a	\$0
Travel/Transportation	n/a	\$0
<b>Consultation/Contract Expenses</b>		
Consultant	<i>Contract/Participation Agreement with CalMHSA (including evaluation costs of \$150,000) Avatar contract during transition period.</i>	\$3,302,170.51
Evaluation	<i>CalMHSA contracts with RAND for the evaluation component</i>	\$150,000
<b>Indirect Costs</b>		
Admin/Overhead		\$111,489.95
<b>Total Direct Costs</b>	\$5,155,815.64	
<b>Total Budget</b>	\$5,267,305.58	

**BUDGET & FUNDING CONTRIBUTION BY FISCAL YEAR AND SPECIFIC BUDGET CATEGORY** *(Please complete the Excel file for this portion of the Appendix)*

BUDGET BY FISCAL YEAR AND SPECIFIC BUDGET CATEGORY							
COUNTY	Yolo						
<b>EXPENDITURES</b>							
	<b>PERSONNEL COSTS</b> (salaries, wages, benefits)	<b>FY 22-23</b>	<b>FY 23-24</b>	<b>FY 24-25</b>	<b>FY 25-26</b>	<b>FY 26-27</b>	<b>TOTAL</b>
1	Salaries			124,531.71	770,299.23	808,814.19	1,703,645.13
2	Direct Costs						-
3	Indirect Costs						-
4	<b>Total Personnel Costs</b>			124,531.71	770,299.23	808,814.19	1,703,645.13
<b>OPERATING COSTS*</b>							
5	Direct Costs						-
6	Indirect Costs			8,149.60	50,409.92	52,930.42	111,489.94
7	<b>Total Operating Costs</b>			8,149.60	50,409.92	52,930.42	111,489.94
<b>NON-RECURRING COSTS (equipment, technology)</b>							
8							-
9							-
10	<b>Total non-recurring costs</b>			-	-	-	-
<b>CONSULTANT COSTS/CONTRACTS</b>							
		<b>FY 22-23</b>	<b>FY 23-24</b>	<b>FY 24-25</b>	<b>FY 25-26</b>	<b>FY 26-27</b>	<b>TOTAL</b>
11	Direct Costs			919,765.99	1,194,592.12	1,337,812.40	3,452,170.51
12	Indirect Costs						-
13	<b>Total Consultant Costs</b>			919,765.99	1,194,592.12	1,337,812.40	3,452,170.51
<b>OTHER EXPENDITURES (explain in budget narrative)</b>							
14							-
15							-
16	<b>Total Other Expenditures</b>			-	-	-	-
<b>EXPENDITURE TOTALS</b>							
		<b>FY 22-23</b>	<b>FY 23-24</b>	<b>FY 24-25</b>	<b>FY 25-26</b>	<b>FY 26-27</b>	<b>TOTAL</b>
	Personnel (total of line 1)			124,531.71	770,299.23	808,814.19	1,703,645.13
	Direct Costs (add lines 2, 5, and 11 from above)			919,765.99	1,194,592.12	1,337,812.40	3,452,170.51
	Indirect Costs (add lines 3, 6, and 12 from above)			8,149.60	50,409.92	52,930.42	111,489.94
	Non-recurring costs (total of line 10)			-	-	-	-
	Other Expenditures (total of line 16)			-	-	-	-
	<b>TOTAL INDIVIDUAL COUNTY INNOVATION BUDGET</b>			<b>1,052,447.30</b>	<b>2,015,301.27</b>	<b>2,199,557.01</b>	<b>5,267,305.58</b>
<b>CONTRIBUTION TOTALS**</b>							
		<b>FY 22-23</b>	<b>FY 23-24</b>	<b>FY 24-25</b>	<b>FY 25-26</b>	<b>FY 26-27</b>	<b>TOTAL</b>
	County Committed Funds						-
	Additional Contingency Funding for County-Specific Project Costs						-
	<b>TOTAL COUNTY FUNDING CONTRIBUTION</b>			-	-	-	-

**TOTAL BUDGET CONTEXT: EXPENDITURES BY FUNDING SOURCE & FISCAL YEAR**  
*(Please complete the Excel file for this portion of the Appendix).*

<b>BUDGET CONTEXT - EXPENDITURES BY FUNDING SOURCE AND FISCAL YEAR (FY)</b>							
<b>COUNTY:</b> <i>Yolo</i>							
<b>ADMINISTRATION:</b>							
	Estimated total mental health expenditures for administration for the entire duration of this INN Project by FY & the following funding sources:	<b>FY 22-23</b>	<b>FY 23-24</b>	<b>FY 24-25</b>	<b>FY 25-26</b>	<b>FY 26-27</b>	<b>TOTAL</b>
<b>A.</b>							
	1 Innovation (INN) MHSA Funds			902,447.30	2,015,301.27	2,199,557.01	5,117,305.58
	2 Federal Financial Participation						-
	3 1991 Realignment						-
	4 Behavioral Health Subaccount						-
	5 Other funding						-
	6 Total Proposed Administration						-
<b>EVALUATION:</b>							
	Estimated total mental health expenditures for EVALUATION for the entire duration of this INN Project by FY & the following funding sources:	<b>FY 22-23</b>	<b>FY 23-24</b>	<b>FY 24-25</b>	<b>FY 25-26</b>	<b>FY 26-27</b>	<b>TOTAL</b>
<b>B.</b>							
	1 Innovation (INN) MHSA Funds			150,000.00			150,000.00
	2 Federal Financial Participation						-
	3 1991 Realignment						-
	4 Behavioral Health Subaccount						-
	5 Other funding						-
	6 Total Proposed Evaluation						-
<b>TOTALS:</b>							
	Estimated TOTAL mental health expenditures (this sum to total funding requested) for the entire duration of this INN Project by FY & the following funding sources:	<b>FY 22-23</b>	<b>FY 23-24</b>	<b>FY 24-25</b>	<b>FY 25-26</b>	<b>FY 26-27</b>	<b>TOTAL</b>
<b>C.</b>							
	1 Innovation(INN) MHSA Funds*			1,052,447.30	2,015,301.27	2,199,557.01	5,267,305.58
	2 Federal Financial Participation			-	-	-	-
	3 1991 Realignment			-	-	-	-
	4 Behavioral Health Subaccount			-	-	-	-
	5 Other funding**			-	-	-	-
	6 Total Proposed Expenditures			-	-	-	-
* INN MHSA funds reflected in total of line C1 should equal the INN amount County is requesting approval to spend.							
** If "other funding" is included, please explain within budget narrative.							

## **Yolo County MHSA Innovation Draft Plan Public Comments & Documentation**

30-Day Public Comment Period: March 18, 2025-April 16, 2025

### **1. Anonymous (Submitted Online; 3-20-25)**

#### **Family Member; Housing Partner**

While this may seem like a large amount of money to some, having a comprehensive EHR that will provide critical infrastructure support not just to the county, but to all of its' providers, through the ability to integrate into one EHR has immense benefits for all involved. I wholeheartedly support this innovation effort!

### **2. NAMI Yolo County (Submitted Online; 4-16-25)**

#### **Mental Health Services Provider**

Jen Boschee-Danzer, Executive Director  
execdirector@namiyolo.org  
PO Box 447, Davis, CA 95617

Thank you for the opportunity to comment on the draft of the Yolo County Draft Innovation Plan. NAMI Yolo County commends Yolo County Health and Human Services Agency (HHSA) for creating a plan that allows the County to tap into an important funding source while it is still available.

In our review of the Innovation Plan, the need for an updated Electronic Health Record (EHR) system is clear. An effective EHR that will reduce burdensome administrative tasks on both County staff and contracted providers, will better facilitate data collection and reporting, and will allow for greater analysis of data will ultimately result in better care for the people who receive services. NAMI Yolo County is supportive of this Plan.

While an updated EHR will be an important tool for contracted providers who provide Medi-Cal billable services, NAMI Yolo County encourages Yolo County HHSA to continue to consider the valuable services and programs that are provided by NAMI and other community-based organizations which are not eligible for Medi-Cal billing. It is important for the County to pursue all avenues to recoup costs through Medi-Cal while also recognizing that some of the critical services that are funded by MHSA/BHSA don't fit into Medi-Cal billable categories. These programs and services make up a much smaller percentage of programs that are funded by the County, yet the community would face a significant loss without them.

Thank you again for the opportunity to comment on the Draft Innovation Plan. We are deeply appreciative of your dedication and commitment to our community, and look forward to our continued collaboration with HHSA to support people living with mental illness and their families as efficiently and effectively as possible.

Respectfully,

Jen Boschee-Danzer  
Executive Director  
NAMI Yolo County



# COUNTY OF YOLO

## Health and Human Services Agency

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### **MENTAL HEALTH SERVICES ACT (MHSA): NOTICE OF 30-DAY PUBLIC COMMENT PERIOD and NOTICE OF PUBLIC HEARING**

#### ***MHSA Innovation Plan: Semi-Statewide Enterprise Health Record (EHR)***

**To all interested stakeholders**, Yolo County Health and Human Services Agency (HHSA), in accordance with the Mental Health Services Act (MHSA), is publishing this **Notice of 30-Day Public Comment Period and Notice of Public Hearing** regarding the above-entitled document.

- I. **THE PUBLIC REVIEW AND COMMENT PERIOD begins Tuesday March 18, 2025 and ends at 5:00 p.m. on Wednesday April 16, 2025.** Interested persons may provide comments during this timeline either online <https://forms.office.com/g/qcg47BhyV7> or by mail. Written comments should be addressed to HHSA, Attn: MHSA Coordinator, 25 N. Cottonwood Street, Courier #16CH, Woodland, CA 95695. Please use the Public comment form provided for the MHSA Innovation Plan.
- II. **A PUBLIC HEARING will be held by the Yolo County Local Mental Health Board on Wednesday, April 16th, 2025, at 6:00 PM.** Information will be published in advance of the meeting and listed on the Local Behavioral Health Board event listing found [here](#).
- III. **To review the MHSA Draft Innovation Plan**, or other MHSA documents via Internet, follow this link to the Yolo County website: <http://www.yolocounty.gov/mhsa>.
- IV. **Printed copies** of the MHSA Draft Plan, are available. To obtain copies by mail, or to request an accommodation or translation of the document into other languages or formats, contact HHSA's MHSA Office by email [mhsa@yolocounty.gov](mailto:mhsa@yolocounty.gov) by Friday March 28th, 2025.

# THE DAVIS enterprise

PROOF OF PUBLICATION  
(2015.5 C.C.P.)

Proof of Publication

STATE OF CALIFORNIA  
County of Yolo

I am a citizen of the United States and a resident of the County aforesaid; I'm over the age of eighteen years, and not a party to or interested in the above-entitled matter. I am principal clerk of the printer at the Davis Enterprise, 315 G Street, a newspaper of general circulation, printed and published Sunday, and Wednesday, in the City of Davis, County of Yolo, and which newspaper has been adjudged a newspaper of general circulation by the Superior Court to the County of Yolo, State of California, under the date of July 14, 1952, Case Number 12680; that the notice, of which the annexed is a printed copy (set in type no smaller than non-pareil), has been published in each regular and entire issue of said newspaper and not in any supplement thereof on the following dates, to-wit:

3/30, 4/6, 4/9, 2025

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Dated at Davis, California, this 10 day of  
April, 2025.

M. Gracie Solano

M. Gracie Solano  
Legal Advertising Clerk

Notice is hereby given: the 30-Day Public Review and Comment Period pertaining to the Mental Health Services Act (MHSA) Draft Innovation Plan began Tuesday March 18, 2025 the draft plan and comment forms are posted on the MHSA page of the Yolo County Website at [www.yolocounty.gov/mhsa](http://www.yolocounty.gov/mhsa). The Draft Plan is available for public comment and review until 5:00 PM on Wednesday April 16, 2025; all interested stakeholders are encouraged to submit comments. A public hearing will be held by the Yolo County Local Behavioral Health Board on Wednesday, April 16, 2025, at 6:00 PM. Information will be published in advance of the meeting and listed on the Local Behavioral Health Board event listing page. After final revisions, the MHSA Draft Innovation Plan will be presented to the Yolo County Board of Supervisors. Questions? Email [MHSA@yolocounty.gov](mailto:MHSA@yolocounty.gov) or call 530-666-8536.  
3/30, 4/6, 4/9 #80030

# Woodland Daily Democrat

c/o Legals 57 Commerce Place, Suite A  
Vacaville, CA 95687  
530-406-6223  
legals@dailydemocrat.com

3827661

YOLO COUNTY HEALTH & HUMAN SERVICES  
AGENCY (HHSA)  
137 N COTTONWOOD ST.  
WOODLAND, CA 95695

## PROOF OF PUBLICATION (2015.5 C.C.P.)

STATE OF CALIFORNIA  
COUNTY OF YOLO

### FILE NO. MHSA Draft Innovation Plan

I am a citizen of the United States. I am over the age of eighteen years and not a party to or interested in the above-entitled matter. I am the Legal Advertising Clerk of the printer and publisher of The Daily Democrat, a newspaper published in the English language in the City of Woodland, County of Yolo, State of California.

I declare that the Daily Democrat is a newspaper of general circulation as defined by the laws of the State of California as determined by this court's order dated June 30, 1952 in the action entitled In the Matter of the Ascertainment and Establishment of the Standing of The Daily Democrat as a Newspaper of General Circulation, Case Number 12659. Said order states "The Daily Democrat" has been established, printed and published in the City of Woodland, County of Yolo, State of California; That it is a newspaper published daily for the dissemination of local and telegraphic news and intelligence of general character and has a bona fide subscription list of paying subscribers; and...THEREFORE, IT IS ORDERED, ADJUDGED AND DECREED:...That "The Daily Democrat" is a newspaper of general circulation for the City of Woodland, County of Yolo, California. Said order has not been revoked.

I declare that this notice, of which the annexed is a printed copy, has been published in each regular and entire issue of said newspaper and not in any supplement thereof on the following dates, to wit:

**03/29/2025, 04/05/2025, 04/11/2025**

I certify (or declare) under penalty of perjury that the foregoing is true and correct.

Dated at Woodland, California, this  
11th day of April 2025



(Signature) Melanie Irmer

Legal No. **0006887398**

Notice is hereby given: the 30-Day Public Review and Comment Period pertaining to the Mental Health Services Act (MHSA) Draft Innovation Plan began Tuesday March 18, 2025; the draft plan and comment forms are posted on the MHSA page of the Yolo County Website at [www.yolocounty.gov/mhsa](http://www.yolocounty.gov/mhsa). The Draft Plan is available for public comment and review until 5:00 PM on Wednesday April 16, 2025; all interested stakeholders are encouraged to submit comments. A public hearing will be held by the Yolo County Local Behavioral Health Board on Wednesday, April 16, 2025, at 6:00 PM. Information will be published in advance of the meeting and listed on the Local Behavioral Health Board event listing page. After final revisions, the MHSA Draft Innovation Plan will be presented to the Yolo County Board of Supervisors. Questions? Email [MHSA@yolocounty.gov](mailto:MHSA@yolocounty.gov) or call 530-666-8536.



# COUNTY OF YOLO

## Local Behavioral Health Board

137 N. Cottonwood Street • Woodland, CA 95695  
(530) 666-8940 • www.yolocounty.org

### Local Behavioral Health Board Meeting

**Date:** Wednesday, April 16<sup>th</sup>, 2025 6:00 PM–8:00 PM

**Location:** 25 N Cottonwood Street, Woodland-Gonzales Community Room

**Hybrid Option through ZOOM:**

<https://yolocounty.zoom.us/j/89892306900>

**(Public meetings are recorded and posted for public access)**

*All items on this agenda may be considered for action.*

#### LMHB CALL TO ORDER-----6:00 PM-6:30 PM

1. Public Comment
2. Approval of Agenda
3. Approval of minutes from [March 5<sup>th</sup>, 2025](#)
4. Member Announcements
5. Chair Report-Jonathan Raven
6. Correspondence

#### TIME SET AGENDA -----6:30 PM – 7:15 PM

7. Innovation Plan Public Comment Review-Tony Kildare
  - Board Response
  - Public Response

#### CONSENT AGENDA-----7:15 PM – 7:30 PM

8. [Mental Health Directors Report](#)-Tony Kildare

#### REGULAR AGENDA -----7:30PM – 7:55 PM

9. Board of Supervisors Report
10. Criminal Justice Update- Chris Bulkeley
11. Ad Hoc Committee Reports
  - Nomination Committee
  - Site Visits
12. Long Range Planning Calendar (LRPC)-Executive Committee Suggested Topics
13. Public Comment on Tonight’s Agenda Items

Jonathan Raven  
**Chair**

Maria Simas  
**Vice-Chair**

Sue Jones  
**Secretary**

**District 1**  
**(Oscar Villegas)**

Vacant  
Maria Simas  
Dolores Olivarez

**District 2**  
**(Lucas Frerichs)**

Kimberly Myra Mitchell  
Nicki King  
Meg Blankinship

**District 3**  
**(Mary Vixie Sandy)**

Sue Jones  
John Archuleta  
Melanie Klinkamon

**District 4**  
**(Sheila Allen)**

Jennifer Mullin  
Chris Bulkeley  
Jonathan Raven

**District 5**  
**(Angel Barajas)**

Juan Salas  
Nithya Ganti  
Stephanie Carlstrom

**Board of Supervisors**

**Liaisons**  
Oscar Villegas  
Lucas Frerichs

14. Future Meeting Planning and Adjournment

Next Meeting Date and Location

May 7<sup>th</sup>, 2025

I certify that the foregoing was posted on the bulletin board at 625 Court Street, Woodland CA 95695 on or before Friday, April 11, 2025. Christina Grandison Local Behavioral Health Board Administrative Support Liaison Yolo County Health and Human Services

If requested, this agenda can be made available in appropriate alternative formats to persons with a disability, as required by Section 202 of the American with Disabilities Act of 1990 and the Federal Rules and regulations adopted implementation thereof. Persons seeking an alternative format should contact the Local Mental Health Board Staff Support Liaison at the Yolo County Health and Human Services Agency, [LMHB@yolocounty.org](mailto:LMHB@yolocounty.org) or 137 N. Cottonwood Street, Woodland, CA 95695 or 530-666-8516. In addition, a person with a disability who requires a modification or accommodation, including auxiliary aids of services, in order to participate in a public meeting should contact the Staff Support Liaison as soon as possible and preferably at least twenty-four hours prior to the meeting.