

BHSA Full-Service Partnership (FSP) Workgroup

DATE: Wednesday, July 9, 2025

TIME: 3:00 PM – 4:30 PM

LOCATION: In-Person, Behavioral Health Training Center

Meeting Summary

1. Systems Maps

- Reviewed five systems maps representing the State-defined behavioral health continuum, developed to align with BHSA requirements and organize services by level of care.
- Maps reflected the current system of care and discussion included system shifts and gaps. The adult and children's mental health systems were presented as a continuum, with FSPs, wraparound, crisis stabilization, and specialty programs for justice-involved populations.
- SUD systems maps included two levels of care (outpatient and intensive), primary prevention, and residential treatment. Expansion efforts include additional residential beds, a mobile narcotic treatment unit, and medically managed withdrawal services. BHSA-specific requirements were noted around rapid access, mobile services, and staff ability to address co-occurring disorders. Cross-system collaboration, integration challenges, and law enforcement partnerships were also discussed.
- Housing services were reviewed in context with system maps, including permanent supportive housing, residential rehab, shared housing, bridge housing, and transitional supports. Emphasis was placed on improving access for co-occurring and high-acuity populations while addressing barriers such as limited Residential Care Facility for the Elderly (RCFE) options, affordability, and programs sunsetting due to grant funding ending.

2. County FSP Services Discussion

• Discussed the current structure of FSP programs across age groups and the challenges of aligning with BHSA requirements. Existing programs (e.g., TAO, OASIS, STEPS, PACT) were reviewed, including specific targeted services for TAY and older adults. Discussed new FSP requirements regarding service levels, including FSP Level 1 & Level 2.



- Barriers highlighted included:
 - Difficulty maintaining engagement without phones or stable housing.
 - Billing limitations for transportation, field-based services, and members who are uninsured
 - Lack of appropriate lower levels of care after FSP graduation.
 - Inadequate residential and inpatient options for co-occurring populations.
- Stakeholders shared the need to build stronger relationships with law enforcement to enhance referrals and emphasized utilization of geography-based staffing considerations for caseloads to improve outreach and care delivery in the community. Stakeholders also shared ideas for engaging FSP populations and encouraging group attendance in the clinics.

Next Steps

- Continue refining systems maps to reflect BHSA requirements and program interactions, as needed.
- Explore FSP model enhancements (e.g., Level 1, Level 2).
- Strengthen coordination with housing and law enforcement partners.
- Review funding and structural barriers to SUD and mental health integration.
- Identify solutions for sustaining care for uninsured and high-acuity members.

Next Meeting

 Wednesday, July 23, 2025, from 2:00 PM – 3:30 PM, conducted virtually through Microsoft Teams