



Nueces County Community Collaborative

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July 9, 2019

Jonny Hipp, ScD, FACHE, CEO
Nueces County Hospital District
555 North Carancahua St, Suite #950,
Corpus Christi, TX 78401
361.808.3300
jonny.hipp@nchdcc.org

Nueces County Court Judge,
Barbara Canales
Nueces County Courthouse
901 Leopard Street Corpus Christi, TX
78401
(361) 888-0264
Barbara.Canales@nuecesco.com

Dear Mr. Hipp,

Please accept the attached updated proposal for consulting services to assess the Nueces County Community Collaborative Project comprised of the Jail Diversion Program, Crisis Intervention Team and Jail-Based Competency Restoration Programs. Nueces County is off to a great start providing trauma-informed, person-centered services with the goal of health promotion and human services response for people with MH/SUD encountering law enforcement. We look forward to the opportunity to support the initiative to take it from good to great!

Pre-arrest diversion strategies are the most successful in reducing high rates of emergency health care and public safety service usage, while increasing and ensuring linkages to health, behavioral health, housing and other social supports and services. Our assessment will include a review of the tools available for first responders to determine whether diversion is appropriate and to link individuals to treatment and services. We will make recommendations to ensure the continuum of coordinated care is integrated and all-inclusive, which promotes a "no wrong door" approach, and ensures access to care. It is difficult to separate an assessment of a diversion strategy from a behavioral health continuum of care because of the critical importance of creating warm hand-offs and being able to initiate and deliver effective services in a diversion system to create impact. Capacity to facilitate initial stabilization and referral followed by community-based case management and care will need to be assessed to determine the success of the diversion program.

If you have questions on this proposal, feel free to contact me at your convenience by email at Karla@BHealthle.com or by phone at 210-842-6727.

Thank you for your consideration,



Karla Ramirez, MSHA, MSSW, LCSW

Co-Founder & Managing Director
BHealthle, LLC

Proposal for Services 7.15.2019

Jonny Hipp, ScD, FACHE, CEO Nueces County Hospital District and Nueces County Judge, Barbara Canales

Overview

BHealthle is pleased to submit this proposal for services to support Nueces County in its efforts to improve the overall health and safety in Nueces County and Coastal Bend by developing a caring and comprehensive system of care that diverts the communities' highest social service utilizers away from unnecessary, high-cost settings like emergency departments and criminal justice settings, and into a better system of treatment and care. Whether in jails, or hospitals, shelters or police encounters, the uncoordinated ways in which systems interact with the mentally ill result in fragmented, high-cost care that often makes vulnerable individuals worse off and does not improve public safety. This initiative is a result of a community collaborative's effort led by Nueces County Judge Barbara Canales to address the chronic, complex needs of high utilizer populations to reduce ineffective, high-cost interactions with the wrong systems of care and increase people getting the right care, at the right time, in the right place. The hope is to capitalize on the communities' strengths and leverage its strong relationships with State and Federal partners, key stakeholders, and the people served by community organizations to demonstrate that behavioral health is essential to health, prevention works, treatment is effective, and people recover. This initiative is aligned with local, state and national initiatives to achieve the triple aim. A 2016 Coastal Bend Health Needs Assessment identified access to care, mental health and suicidality as areas of concern, with a significant increase since the 2010 community health assessment.

We are confident that our expertise is aligned with your vision and expected outcome for this project, and that we can help your community develop a robust, efficient and effective system of care for some of your most vulnerable populations. For almost forty years, Leon Evans has worked with community partners in public health and safety to provide innovative approaches to hope and healing. Communities throughout the nation and abroad have sought consultation about the diversion programs developed under Mr. Evans' leadership that drive down the cost of healthcare and help thousands of people avoid jail and long-term hospital stays. In the process of helping individuals and families regain independent, productive lives, these programs have saved over \$95 million in taxpayer dollars over the past eight years and helped make Bexar County a healthier place to live. Evans was recognized by CNN as one of our Nations Mental Warriors, whose



programs have received the American Psychiatric Association Gold Award, and many other citations and recognitions for innovations and community partnerships and collaborations. He is currently a member of the National Quality Partners "National Opioid Taskforce." Evans' internationally recognized programs are the result of a highly effective and cooperative spirit throughout the health, law enforcement, judicial and non-profit organizations in San Antonio, Bexar County and the Nation. As a self-described catalyst for transformation to excellence in behavioral healthcare, Karla Ramirez, MHA, MSW, LCSW provides organizations seeking market leadership and clinical excellence with the tools to implement the vision and innovation necessary to disrupt and lead the market into the future. Karla's passion for effective diversion programs focused on getting people the right care at the right time at the right place can be traced back to her role as Vice President of Restoration Services at The Center for Health Care Services, the local mental health authority for Bexar County. Under the leadership of President/CEO Leon Evans, she provided the vision and leadership necessary to design, build and relocate all addiction treatment programs, crisis programs, ER and Jail Diversion programs and primary care integration projects in one location; which is now known as the Restoration Center. In her prior roles in the private sector as Chief Operating Officer and Market Director of Behavioral Health for large hospital/health care systems; she was responsible for strategic plan development, implementation and integration with the clinical operations resulting in smooth and efficient hospital operations and improved patient experience. The focus was to develop new business strategies to enhance market share and improve overall performance by creating new and successful service lines and market presence.

Proposal

The Objective

Assessment of Nueces County Community Collaborative Project in diversion of low-level offenders with high service utilization away from unnecessary criminal justice involvement and into a better system of treatment and care.

- Includes Jail Diversion Program, Crisis Intervention Team and Jail-Based Competency Restoration
- Perform an internal program analysis to identify the different ways in which the program (s) create and/or fail to create value for consumers and prospective consumers.
- Evaluate pre-service, point-of-service, and after-service delivery; culture; structure; and strategic resources to discover strengths and weaknesses.



Strategic Planning to include vision/mission statement, SWOT (issues & opportunities Matrix), goals, KPI's, target population, industry analysis, competitive analysis and advantage, business development plan, HR, operations plan, and financial projections.

- Facilitate strategic planning and implementation discussions to set priorities, focus energy and resources, strengthen operations, ensure that employees and other stakeholders are aligned toward common goals, and establish agreement around intended outcomes/results.
- Guide the development of focus areas to be included that impact operational design.
- Determine future sustainability & program readiness for value-based reimbursement and other potential revenue streams.
- Evaluate alignment of program goals, data collection efforts and reporting mechanisms with the following overarching diversion goals:
 1. Reduced jail populations and associated costs
 2. Reduced emergency room usage and associated costs
 3. More effective use of law-enforcement resources and time
 4. Increased first-responder safety
 5. Positive change in community culture toward behavioral health issues
 6. Improved outcomes for some of the most vulnerable people in the community
 7. Other?
- Prepare an Issues and Opportunities Matrix that will reflect the results of our benchmarking the "issues" with our knowledge of Best Practices and experience with other jail diversion/behavioral health systems of care. We will recommend how to address the issues that were identified. We will also provide recommendations for implementation of any new service deemed beneficial for the people of Nueces County based on best practices.

Better Health Outcomes/Opioid Task Force: Support County Judge and County Commissioners in bringing relevant parties together to engage in a shared vision for the community.

- Engage identified stakeholders in the strategic planning process to include development of guiding principles, benchmarks, data collection activities.
- Facilitate stakeholder input around access to mental health and substance use services to identify the needs, gaps, and possible solutions to address the issues identified, to



include the feasibility of a Mental Health Crisis Restoration Facility or other needed crisis responses in the community.

- The Services will also include any other consulting tasks which the Parties may agree on. The Consultant hereby agrees to provide such Services to the Client.

Project Deliverables

Following is a complete list of all project deliverables:

Deliverable	Description	
Phase 1: Community Assessment & Stakeholder Input	30-60 days	\$12,000-\$24,000
<i>Community Collaborative Program Assessment</i>	<ul style="list-style-type: none"> • Comprehensive Internal assessment valuating pre-service, point-of-service, and after-service delivery; culture; structure; and strategic resources to discover strengths and weaknesses with recommendations for maximizing value 	
<i>Health Outcomes: Opioid Task Force</i>	Facilitate the development of a shared vision, operating principles and desired outcomes.	
Phase 2: Strategic Planning	60-120 days	\$24,000-\$48,000
<i>Strategic Plan</i>	Will include vision/mission statement, SWOT (issues & opportunities Matrix), goals, KPI's, target population, industry analysis, competitive analysis and advantage, business development plan, HR, operations plan, and financial projections	
<i>Stakeholder Input</i>	Identify a person or two from each major group in the community who should be involved, identify needed MOU's, learn each other's language	
<i>Target Population</i>	Identify target population through data utilization, many communities use the sequential Intercept model.	
<i>Implementation Team</i>	Program is transitioned to responsibility of Implementation team, with consulting team serving as support and resource	
<i>Product Development</i>	Based on service gaps in terms of levels of care and service coordination, as well as funding & sustainability opportunities	



Contract Negotiations & Fully Executed Contracts	<i>Will evaluate payer proposals and look for ways to optimize counter offers and review contract for language that affects reimbursement and operations.</i>
Clinical Outcomes Development & Tracking	<i>Identify clinical outcomes to be published and tracked for future contract negotiations; to include value-based purchasing opportunities and other funding opportunities</i>

Pricing

Service	Time Frame	Cost
12-month contract paid on monthly retainer of \$12,000 (15 hrs. per week) with opportunities to evaluate progress and scope at conclusion of each phase.		
Phase 1: Community Assessment & Stakeholder Input	30-60 days	\$12,000-\$24,000
Phase 2: Strategic Planning	60-120 days	\$24,000-\$48,000
Phase 3: Product Development & Design	120-210 days	\$48,000-\$84,000
Phase 4: Implementation Team Identification & Program Implementation	210-360 days	\$84,000-\$144,000
Re-evaluate intensity of consulting needs due to having implementation team in place.		
Phase 5: 3 rd Party Payor Negotiations	360-450 days	
Phase 6: Clinical Outcomes Development & Tracking	450-510 days	
Phase 5: Managed Care Marketing & Strategic Partnering	510+ days	