

SUMMARY OF COMMUNITY-BASED ORGANIZATION AGREEMENTS AND OTHER DIRECT TREATMENT PROVIDERS
REQUEST TO THE HEALTH COMMISSION

This Agreement is for the provision of direct treatment/services that serves as an extension of DPH's service delivery system.

Vendor:	Regents of the University of California (San Francisco)	Division/Section:	DPH BHS – CYF SOC
	Division: Infant, Child & Adolescent Psychiatry (ICAP)	DPH Administrator:	Farahnaz Farahmand, CYF Director
Address:	1001 Potrero Ave., Building 5, Suite 6B		Lisa Hilley, CYF Deputy Director
	San Francisco, CA 94110	Program Administrator:	Janet Avila
			Phone: 415-823-1422
Contact:	Barbara Stuart	Contract Analyst:	Carissa Wu
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Request for approval of a New Professional Services Agreement with the Regents of the University of California to provide a mandated State Department of Health Care Services (DHCS) Day Treatment Intensive program (i.e. Partial Hospitalization Program) for youth experiencing acute mental health symptoms. The total proposed agreement amount is \$9,497,905, which includes a 12% contingency, for the term of November 1, 2026 through June 30, 2030 (3 years and 8 months).

Mark only one for each question below:

- Vendor Type:** ☐ For Profit ☐ Non-Profit ☒ Government Entity
- Is the Vendor a CMD Certified LBE?** ☐ Yes ☒ No
- Purchasing Authority:** ☐ RFP ☒ Chapter 1.25 (G2G)
- Does DPH have other existing agreements with this Vendor?** ☒ Yes ☐ No
If yes, approximately how many years has DPH been doing business with this Vendor? Provide explanation, as needed. Over 30 years

AGREEMENT INFORMATION -

FUNDING SOURCES:

Federal
MH CYF County General Fund (Match)
MH CYF County General Fund

TOTAL DPH REVENUES:

Proposed Transaction

November 1, 2026 to June 30, 2030

Initial Year	All Ongoing Years <i>exclude initial year</i>	Total
\$259,120	\$800,914	\$1,060,034
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\$1,554,720	\$4,805,484	\$6,360,204
\$2,072,960	\$6,407,312	\$8,480,272

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12% Contingency Amount	\$248,755	\$768,878	\$1,017,633
<u>TOTAL AGREEMENT AMOUNT WITH CONTINGENCY:</u>	<u>\$2,321,715</u>	<u>\$7,176,190</u>	<u>\$9,497,905</u>
<u>ONE-TIME COSTS:</u>			
<u>ANNUAL AMOUNT WITHOUT CONTINGENCY*:</u>	<u>\$2,072,960</u>	<u>\$6,407,312</u>	<u>\$8,480,272</u>

**Ongoing years excludes one-time costs.*

PROPOSED UNITS OF SERVICES

Mode(s) of Service & Unit of Service (UOS)/ Number of Contacts (NOC) Definition	Number of Clients ☐ Duplicated ☒ Unduplicated	Number of Units/ NOC	Unit Cost
Day Treatment Intensive - Full (Mode 10): \$1,549,633	249 <i>12 clients at a time average stay 2 weeks; Assumes 80% utilization</i>	246 days of operations factoring holidays; 2,331 client days; assuming just under 80% utilization	\$664.80/full day <i>Contract is cost reimbursement Year 1 with possibility of a move to Affiliation Agreement</i>
Outpatient Specialty Mental Health Services (Mode 15): \$523,327	249 (duplicated from line above)	1,027 hours	\$509.56/hr <i>Contract is cost reimbursement Year 1 with possibility of a move to Affiliation Agreement</i>

Purpose of Agreement:

Background and Program Description

DPH received a \$33.7 million Behavioral Health Continuum Infrastructure Program (BHCIP) grant from the California Department of Health Care Services (DHCS) to renovate space at Zuckerberg San Francisco General Hospital (ZSFG) for a 24-slot (12 slots assigned to each) Partial Hospitalization Program (PHP) and Intensive Outpatient Program (IOP), and a 12-bed inpatient adolescent psychiatric unit. The grant supported the facility improvements but not ongoing services. The proposed contract will fund the service delivery for the 12-slot PHP component. A separate service contract was developed and approved by the Health Commission for the 12-slot IOP service component of the continuum on December 1, 2025.

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The PHP provides a structured, intensive level of care for youth experiencing acute mental health symptoms, behavioral issues, or crises—stabilizing symptoms without the need for a 24-hour hospital stay. This service prevents inpatient psychiatric hospitalization and/or acts as a step-down from inpatient for further stabilization. The program will run five days per week, generally from 9:00 a.m. to 3:30 p.m., for youth ages 12 through 18 who are full-scope Medi-Cal beneficiaries.

Services provided in the PHP will integrate group psychotherapy and rehabilitation groups, skill building, adjunctive therapies, assessment and individualized treatment planning, meds management, crisis response and safety planning, family engagement, care coordination, and discharge planning. Treatment will use evidence-based approaches, including Cognitive Behavioral Therapy, Dialectical Behavior Therapy, and Culturally Informed and Flexible Family-Based Treatment for Adolescents, and will be trauma-informed, culturally responsive, and developmentally appropriate.

The proposed contract will initially operate through a Behavioral Health Services contract but is expected to be transitioned to the UCSF Affiliation Agreement as the other components of the continuum are implemented (i.e., the 12 bed psychiatric inpatient unit).

History of UCSF Child and Adolescent Services (CAS):

Since 1997, UCSF the Division of Infant, Child & Adolescent Psychiatry (ICAP) through the Child and Adolescent Services (CAS) program at Zuckerberg San Francisco General Hospital has provided outpatient Specialty Mental Health Services to Medi-Cal-enrolled children, adolescents, and young adults in San Francisco. UCSF CAS delivers evidence-based, culturally responsive, and trauma-informed care while supporting clinical training and workforce development. The proposed PHP builds upon this longstanding partnership among DPH, UCSF, and ZSFG and expands a coordinated continuum of outpatient specialty mental health services, an Intensive Outpatient Program (IOP), and now the proposed PHP.

Monitoring Report/Program Review & Follow-up:

This Agreement will receive annual monitoring through the DPH Business Office of Contract Compliance (BOCC), including for performance and fiscal stability. Individualized Performance Objectives will include:

Clinical Outcomes

- 1) **Suicide Risk Reduction:** 75% of clients identified as being at high or moderate risk for suicide at program entry will demonstrate a decrease in suicide risk to lower risk levels, as measured by validated assessments (e.g., Columbia-Suicide Severity Rating Scale, Suicide Attempt Self-Injury Interview) by the end of the program.
- 2) **Safety Plan:** 100% of clients will have a clinical risk management plan developed and communicated to the client's significant support person(s)/caregiver(s).

Transition and Retention

- 3) **Lower Level of Care Transition:** 75% of clients will successfully transition (e.g., attend at least one outpatient session within 30 days of discharge) to a lower level of care, such as outpatient therapy, following completion of the program.

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- 4) **Retention Rate:** 75% of participants will complete the full program (all sessions over the designated 4-week duration) without dropping out.

Emergency Interventions

- 5) **Avoiding Hospitalizations/ Crisis Stability:** 75% of clients will avoid immediate hospitalization or inpatient care during their participation in the program

Listing of Executive Director and Board of Directors:

Executive Director:

Barbara Stuart, Ph.D., ABPP- Interim Director/Deputy Director, Division of Infant Child and Adolescent Psychiatry (ICAP)

Fumi Mitsuishi, MD, MS- Vice Chair for ZSFG, UCSF Department of Psychiatry and Behavioral Sciences

Board of Directors: Regents of UC
