

# Transportation Strategies

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**M-TAC**

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Monica Reeves and Danielle Raghieb have certified that they have no relevant relationships with any commercial or nonprofit organizations that represent a conflict of interest.

# Mobile Crisis Services

- » *Mobile crisis services provide rapid response, individual assessment and community-based stabilization to Medi-Cal members who are experiencing a behavioral health crisis. Mobile crisis services are designed to provide relief to members experiencing a behavioral health crisis, including through de-escalation and stabilization techniques; reduce the immediate risk of danger and subsequent harm; and avoid unnecessary emergency department care, psychiatric inpatient hospitalizations and law enforcement involvement.*



# A New Direction for Mobile Crisis Services

- » Change mobile crisis services so that the response is more resolution-focused and works to provide relief to people in crisis in the community.
- » Support people in crisis where they are, while using the least restrictive means necessary.



# A New Direction for Mobile Crisis Services



» Mobile crisis services should be:

- Person-centered
- Trauma-informed
- Equity-driven
- Brief intervention: de-escalation and resolution focused
- Working from a lens of least restrictive interventions
- Culturally responsive, linguistically appropriate, and accessible



# **Welcome and Introductions**



# Today's Presenters



**Monica Reeves, LMHCA**

*Project Director, Crisis Care Mobile Units  
(CCMU)*

Advocates for Human Potential (AHP)



**Danielle Raghieb, LCSW**

*Training and Technical Assistance Specialist*

Center for Applied Research Solutions  
(CARS)

# Agenda

- » Welcome and Introductions
- » BHIN 23-025 requirements on transportation
- » Determining appropriate transportation needs
- » How to partner and collaborate for transportation needs, including non-medical emergency transportation
- » Practical strategies from the field, including identified challenges
- » Crisis Care Mobile Units (CCMU) cross- project learnings

# Introductions

In the chat box, we invite you to share your:

- » Name
- » Role
- » Organization
- » One thing you're hoping to learn today



# Learning Objectives

## **Participants will:**

- » Understand BHIN 23-025 transportation requirements of Medi-Cal members needing additional care beyond the mobile crisis service encounter.
- » Learn practical strategies utilized by some California counties regarding transporting members and leveraging infrastructure funds related to mobile crisis services.

# Polling Questions

- » Does your county currently transport individuals in crisis directly in county vehicles?
- » Does your county have formal partnerships or collaborate with law enforcement or Emergency Medical Services (EMS) for transportation of individuals in crisis when needing further treatment?
- » When using non-medical transport, does your mobile crisis team accompany the individual in crisis when a warm hand-off is necessary?





# **Review of BHIN 23-025 and Transportation**



# Facilitation of a Warm Handoff

In some cases, the member may need to be **transported** to a higher level of care, such as a sobering center, crisis respite, crisis stabilization unit, psychiatric health facility (PHF), psychiatric inpatient hospital, general acute care hospital, or crisis residential treatment program. If the member requires further treatment at a higher level of care, the mobile crisis team shall connect the member with the appropriate care option by facilitating a warm handoff. The mobile crisis team **shall also arrange for or provide transportation to effectuate the warm handoff, if needed.** Additional guidance on transportation as part of the mobile crisis services encounter is described in section V(d).

# BHIN 23-025 Transportation Requirements

When needed, a mobile crisis team **shall arrange for or provide transportation to an appropriate level of care or treatment setting**. The mobile crisis team may transport the member directly as part of providing the mobile crisis service. If the mobile crisis team cannot provide transportation itself, or if there are outstanding medical or safety concerns, the mobile crisis team **shall coordinate with nonmedical transportation (NMT) providers, EMS, or law enforcement, if necessary, to arrange transportation and ensure the member is connected with appropriate care**. If EMS, NMT, or law enforcement is utilized to transport the member directly to a higher level of care, the mobile crisis team shall remain onsite until the transportation provider arrives. At its discretion, the mobile crisis team may have one or more team members accompany the member inside the vehicle to the higher level of care.

If the mobile crisis **team provides transportation or accompanies** a member who is being transported by a NMT provider, EMS, or law enforcement, beginning July 1, 2023, it can receive **an add-on reimbursement** to reflect the expanded nature of its mobile crisis encounter in such circumstances.

# **Determining Appropriate Transportation Needs**



# Determining Appropriate Type of Transportation Needed

When it is determined a warm handoff to further treatment is needed following a mobile crisis service encounter, it is important to determine what type of transportation would be most appropriate for the safety of the person in crisis and others onsite.

- » Emergency transportation:
  - Immediate medical attention
  - High acuity transportation may require medical or law enforcement transport (e.g., people who may not be willing to get in the car); counties need strategies in place for these situations.


# **Practical Strategies from the Field**





# Practical Strategies from the Field: Non-Medical Emergency Transportation

## Questions to Get You Started

- » What are other counties/agencies in your community using?
  - » What are your hospitals using? What are the jails using?
  - » Is there a partnership that you can join as opposed to developing a new Memorandum of Understanding (MOU)/formal agreement?
    - Different parts of your county may need different types of transport based on logistics/regions/boundaries of service providers
      - Make sure the transportation company will transport individuals in crisis to all potential places you may need to send an individual in crisis when further treatment is needed
-  Are there other programs in your county that can be leveraged to provide or partner on transportation?

# Strategies for Partnering with Transportation Providers

## Strategies from the Field

- » Establish formal agreements through Memoranda of Understanding (MOUs) with transportation providers which include stipulations for mobile crisis teams accompanying individuals in crisis while being transported for further treatment.
- » This practice supports a smooth transition of care for the person in crisis and provides opportunity for add-on reimbursement.
  - » “If the mobile crisis **team provides transportation or accompanies** a member who is being transported by a NMT provider, EMS, or law enforcement, beginning July 1, 2023, it can receive **an add-on reimbursement** to reflect the expanded nature of its mobile crisis encounter in such circumstances.”



# Practical Strategies from the Field: Non-Medical Emergency Transportation

- » Some counties developed MOUs with local law enforcement and EMS for transportation of individuals in crisis when further treatment is needed after a mobile crisis services encounter
- » Some counties have established contracts and partnership with California non-medical transportation companies
  - [DHCS list of CA approved non-medical emergency transportation companies](#)
  - Important to explore the questions below when developing contracts:
    - Review/analysis of existing transportation companies: what do response and transport timelines look like?
    - Challenges: what are their response times? Is there immediate availability when transport is needed?
    - Will team members be able to ride along to support the person in crisis and ensure a smooth transition of care?

# Practical Strategies from the Field: Non-Medical Emergency Transportation

## Non-Medical Emergency Transport- Practical strategies from the field

- » Transporting with County vehicles
  - Examples of counties that are providing transportation via county vehicles operated by the mobile crisis teams: Riverside, Sonoma, Hoopa Valley-Kimaw Medical Center, Contra Costa
- » Types of Vehicles (purchased with CCMU funding)
  - Converted vans, converted ambulances, Ford Escapes
  - Hoopa Valley Tribe Mobile Crisis Team vehicle



# **Crisis Care Mobile Units (CCMU)**



# What is CCMU?

The California Department of Health Care Services (DHCS) Crisis Care Mobile Units (CCMU) program provides funding for California county, city, or tribal entity behavioral health authorities to implement new and enhanced CCMUs. The CCMU program integrates funds from two sources:

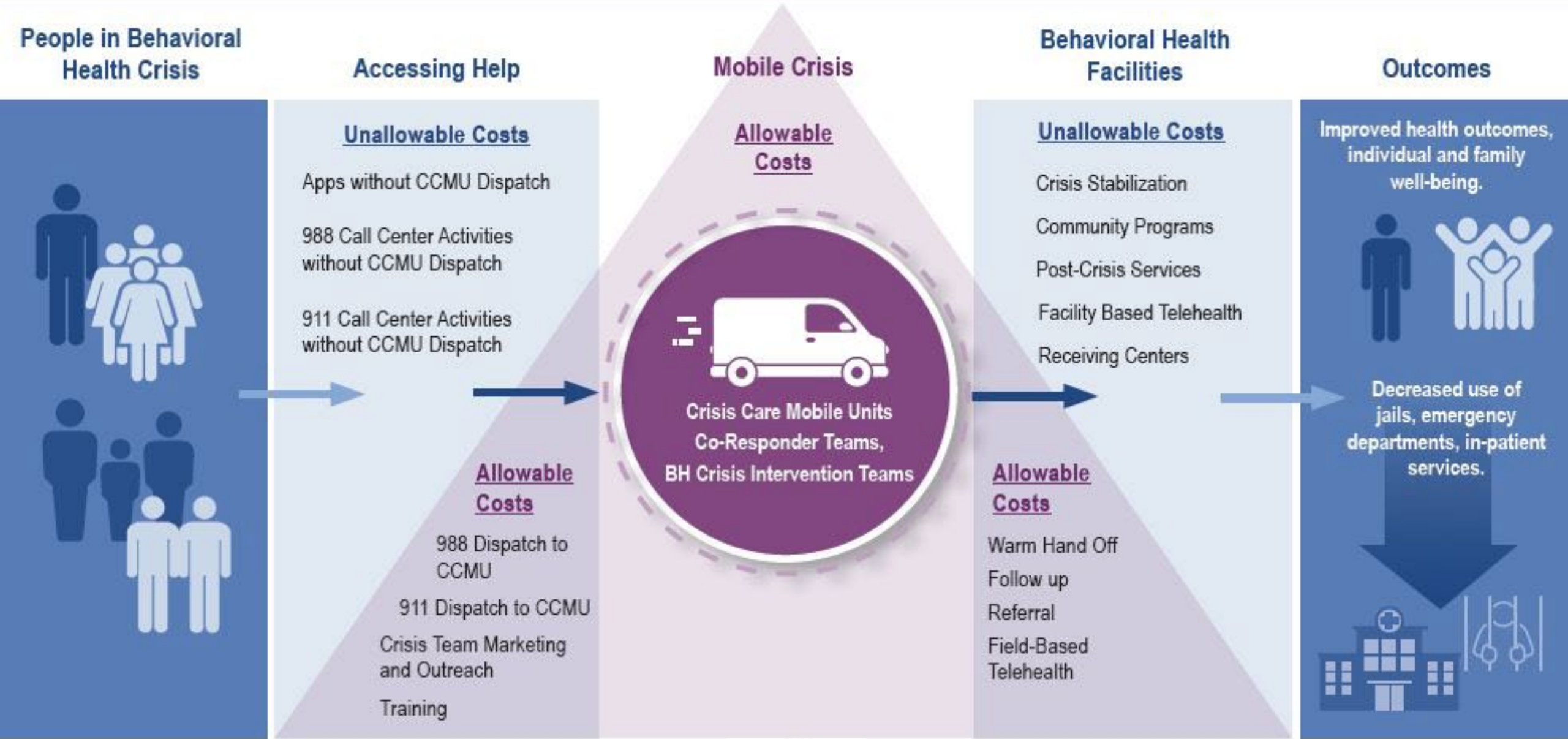
- » \$150 million of state general funds that are part of the Behavioral Health Continuum Infrastructure Program (BHCIP). These funds are available for behavioral health authorities to develop infrastructure that supports mobile crisis units that are not available through other sources.
- » \$55 million in DHCS funding from the Substance Abuse and Mental Health Services Administration (SAMHSA) through the Coronavirus Response and Relief Supplemental Appropriations Act (CRRSAA)

CCMU has already awarded more than \$185 million to **48 behavioral health authorities and 24 tribal entities**. The awards are being used to create or enhance 390 mobile crisis response teams throughout California.

<https://www.infrastructure.buildingcalhhs.com/ccmu/>



# BHCIP Crisis Care Mobile Units Program

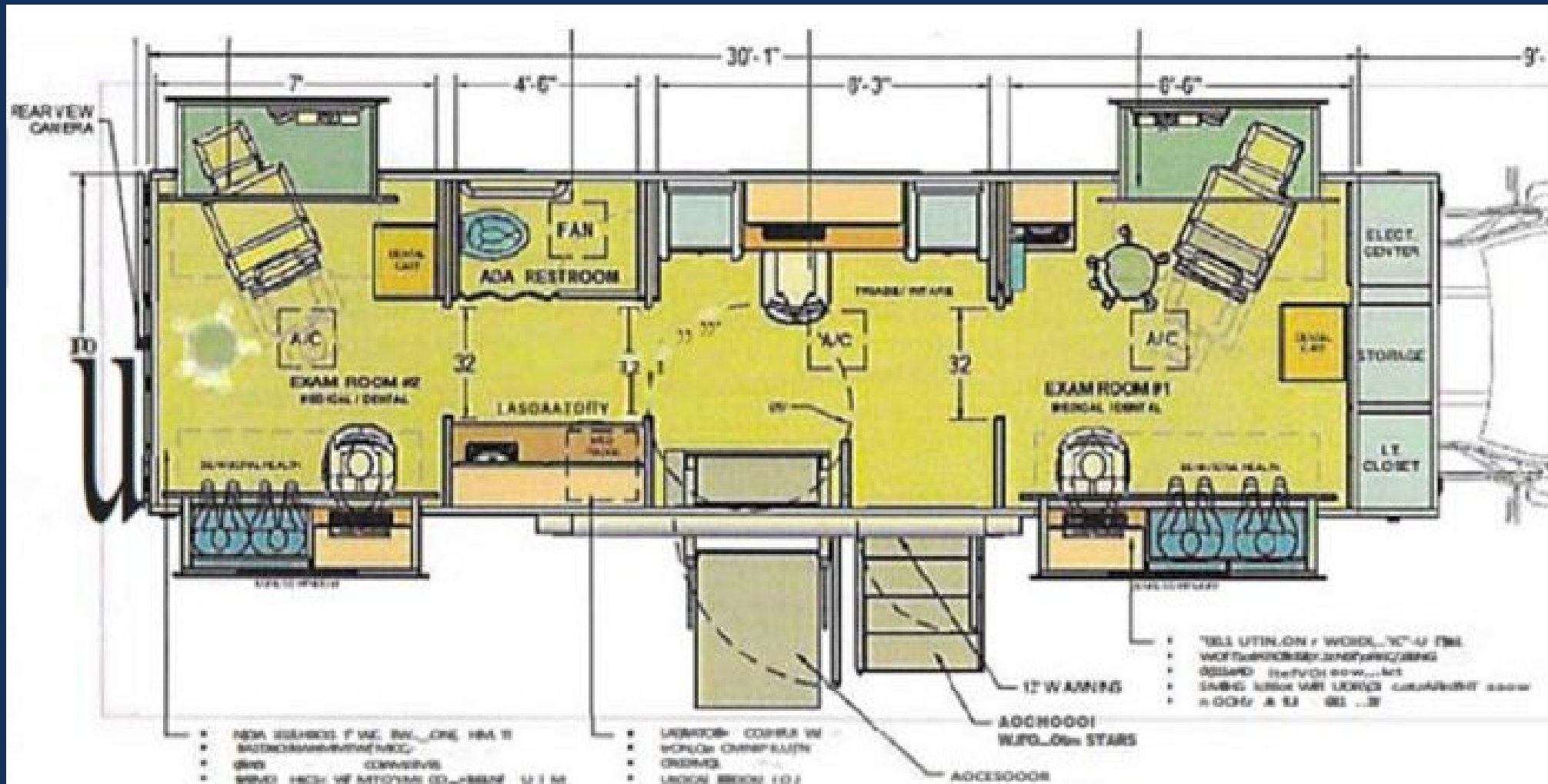


# Examples of Vehicles Purchased with CCMU Funds

[Sonoma County Transportation Video](#)

[Riverside County Mobile Crisis News Story Vehicles](#)

# Hoopla Valley Tribe Mobile Crisis Team Vehicle



# Transportation Challenges Identified from the Field

## Challenges

- County protocols need to be developed and approved and can take time to complete
- It can be costly to purchase county vehicles, and securing new vehicles has been a nationwide challenge (low stock/availability)
- Transporting individuals under 18 has been challenging for counties directly transporting individuals in crisis
- Voluntary transportation







# Summary

- » Counties should review BHIN 23-025 transportation requirements for mobile crisis teams to develop transportation policies when further treatment is needed beyond the mobile crisis service encounter.
- » There are key considerations for determining the appropriate types of transportation strategies that are needed to transport individuals in crisis.
- » Partnering and collaborating for transportation needs can expand county mobile crisis team's ability to provide transportation services.
- » Counties can look to learn from other counties to support creative strategies to implement effective transportation protocols.
- » Cross-project leveraging can support additional funding opportunities for transportation vehicles for mobile crisis teams.

# Questions?



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**Post-Survey, attendees need to opt into the 90-day survey so we can collect your emails to send out the Certificates of Completion**

The completion of this survey is vital to our quality control and to the future funding of this project, as it allows us to provide you with training and technical assistance at no cost. In addition, it allows us to continually improve our services and provide the information and resources you need in the field.

**Please take a few minutes to complete the survey!  
Your time and feedback are greatly appreciated and valued!**

# Thank You!



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# References

- » California Department of Health Care Services. (2023). Behavioral Health Information Notice 23-025.
- » BHCIP Crisis Mobile Units Program <https://www.infrastructure.buildingcalhhs.com/ccmu/>

# Contact Us



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