



Substance Use Disorder Optimal Care Pathways Model

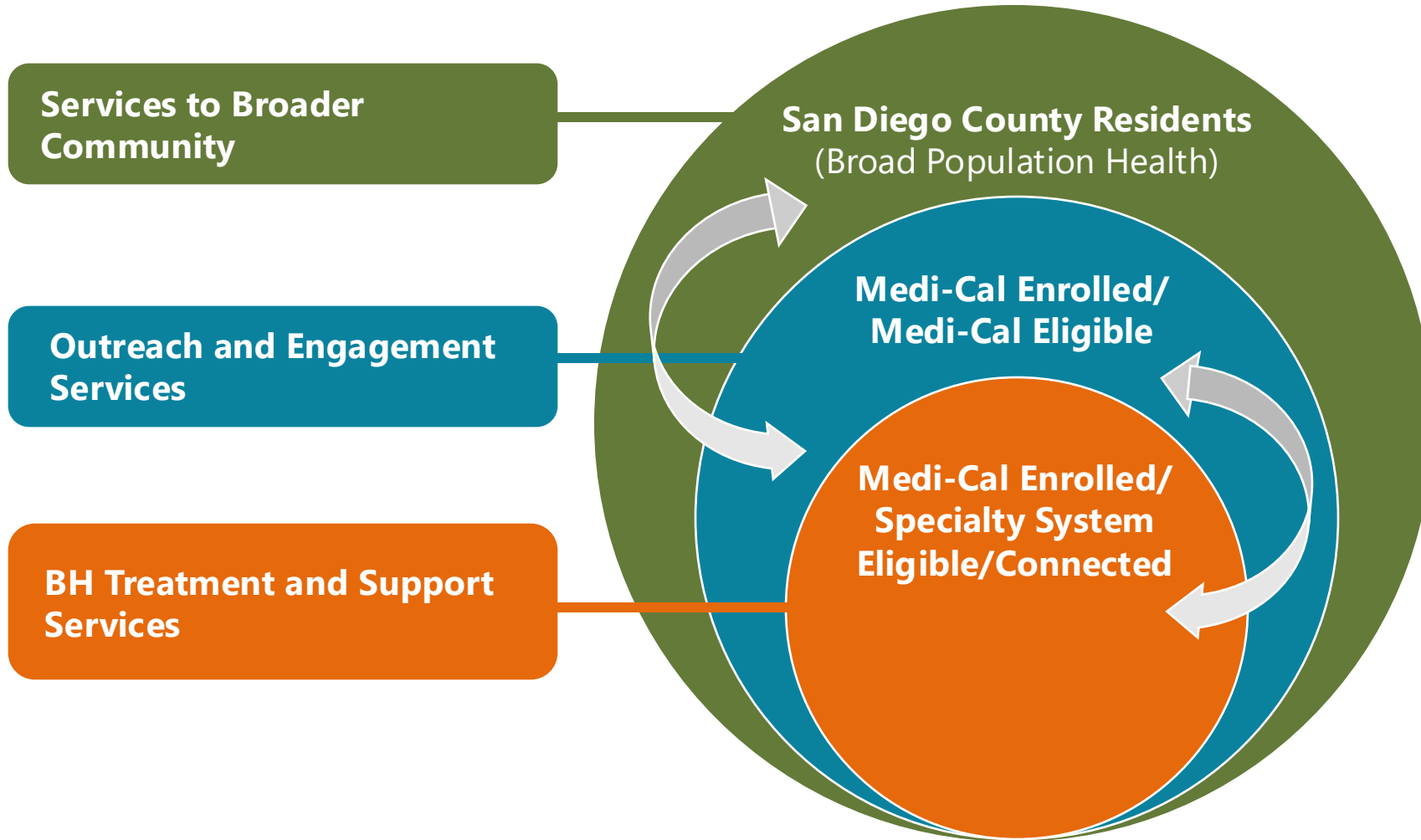
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March 4, 2025

Who We Serve



Shifting from Care Driven by Crises to a Model of Chronic Care and Prevention



Enhancing Our Crisis Diversionary Network



Crisis Stabilization Units (CSUs) provide immediate, short-term behavioral health support and treatment in a therapeutic setting for people experiencing a psychiatric emergency.



Mobile Crisis Response Teams (MCRT) provide a non-law enforcement response to people of all ages who are having a mental health, drug, or alcohol-related crisis.

Making Regional Access a Priority

Crisis Stabilization Units (CSUs)



Updated 2/26/25
Map locations are approximate



- Opened **four new CSUs** in the **last five years** across the region
- **Two additional CSUs** in development

Measurable Impact

From 2021-2024:

- There have been **67,688 CSU discharges**
- Monthly admissions to San Diego County Psychiatric Hospital Emergency Psychiatric Unit (EPU) have **decreased by 28%**
- Admissions to other County CSUs have **increased by 200%**

Making Regional Access a Priority



- BHS designed and launched the County's first **two non-law-enforcement Mobile Crisis Response Teams (MCRT)** in 2021
- MCRTs have grown to **44 teams** that respond 24/7 countywide

Measurable Impact

- MCRTs served **8,306 unique clients** and responded to **12,576 total crises** since program start (January 2021)

MCRT and CSU Expansion Since 2021



Crisis Stabilization Units (CSU)

2021

- Paradise Valley Bayview CSU opens
- North Coastal Community-Based Vista CSU opens

2022

- North Coastal Live Well Health Center Community-Based Oceanside CSU opens

2025/2026

- East County CSU
- Sharp Chula Vista CSU

2021

2021

- MCRT pilot in North County
- MCRT rolls out in National City and Chula Vista

2022

2022

- MCRT goes live with 24/7 response
- MCRT rolls out countywide

2023

2023

- MCRT goes live with San Diego State University response

2024

2024

- MCRT rolls out within school districts

2025

Mobile Crisis Response Teams (MCRT)



Building Capacity for Senate Bill 43



Education and Training

Alternatives to Emergency Departments

Expanded Treatment, Services and Support

Public Conservator Procedures and Capacity

Building Across the Entire Continuum of Care



Education and Training

Alternatives to Emergency Departments

Expanded Treatment, Services and Support

Public Conservator Procedures and Capacity

- Opioid treatment programs
- Adult substance use outpatient programs
- Medication for addiction treatment (MAT) and ambulatory withdrawal management (AWM)
- Chemical Dependency Recovery Hospital for involuntary SUD inpatient level of care

Upcoming

- Tri-City Psychiatric Health Facility
- Broader access to recuperative care beds located countywide
- Substance Use Recovery Treatment Services (SURTS) in South Region

Enhancing Our Substance Use System of Care



2022

Optimal Care Pathways Model (OCP)
outlined optimal capacity within our
Adult Mental Health System

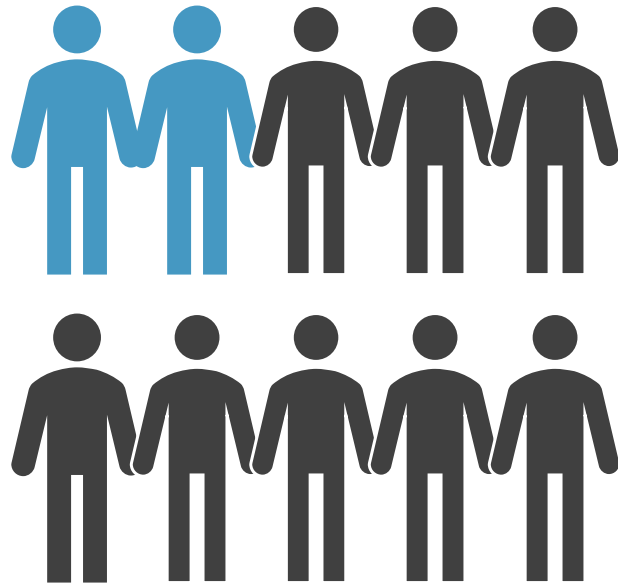
2025

**Substance Use Disorder
Optimal Care Pathways Model
(SUD OCP)** outlines goals for a more
optimal *Substance Use System*

The Impact of Substance Use Conditions



In the US, approximately 2 in every 10 people have a substance use disorder



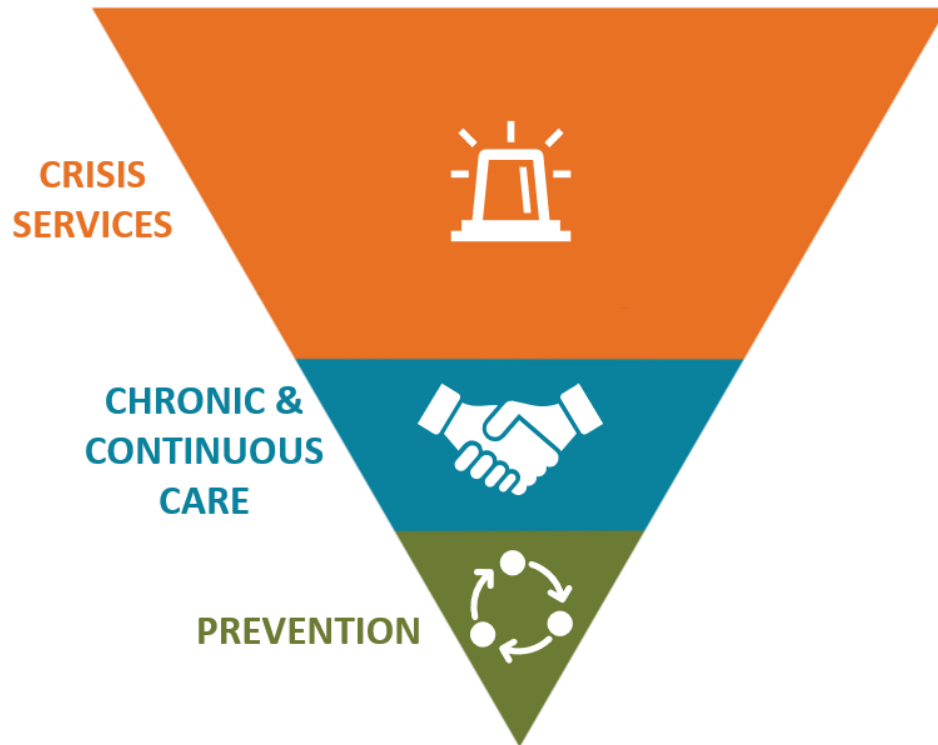
The impacts of a substance use disorder are felt by the family, friends, and surrounding community



A Disconnected Substance Use System



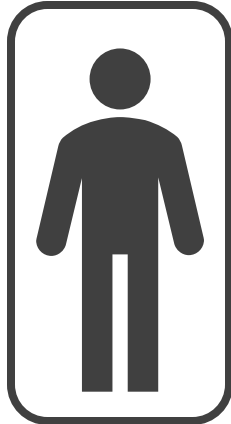
Mental Health System



Substance Use Disorder (SUD) System



Reachable Moments: Meet John



John

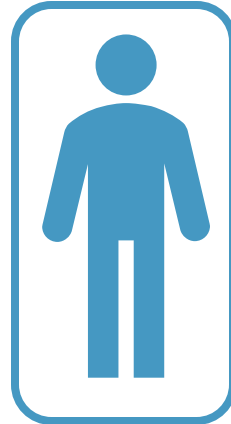
Mild cardiac event

Emergency Department:

- ✓ Primary care provider notified through Electronic Health Record
- ✓ Referred to cardiologist
- ✓ Receives medication prescription

Post Discharge:

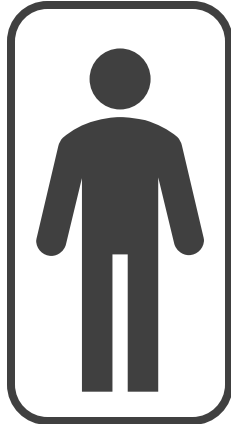
- ✓ Picks up prescription
- ✓ Confirms appointment with cardiologist
- ✓ Starts treatment plan including medication, lifestyle changes, ongoing monitoring
- ✓ Successfully manages chronic condition with support from healthcare team



James

Alcohol poisoning

Reachable Moments: Meet James



John

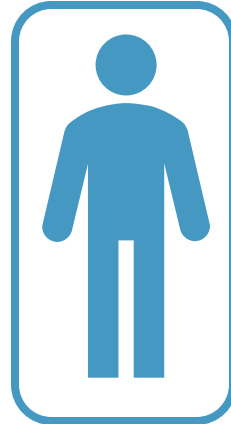
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James

Alcohol poisoning

Emergency Department:

- Encouraged to seek treatment
- Provided a pamphlet with treatment info and support groups

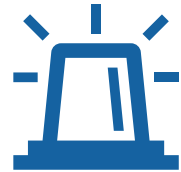
Post Discharge:

- X Fears stigma and social impacts
- X Questions practicality of treatment while managing work and family
- X Resolves to manage his chronic condition on his own, but the symptoms become severe
- X 3 months later, readmitted to the emergency department

Emergency Department Visits Due to Substance Use Conditions



In 2022, San Diego County Medi-Cal eligible with documented primary substance use disorder accounted for:



11,222

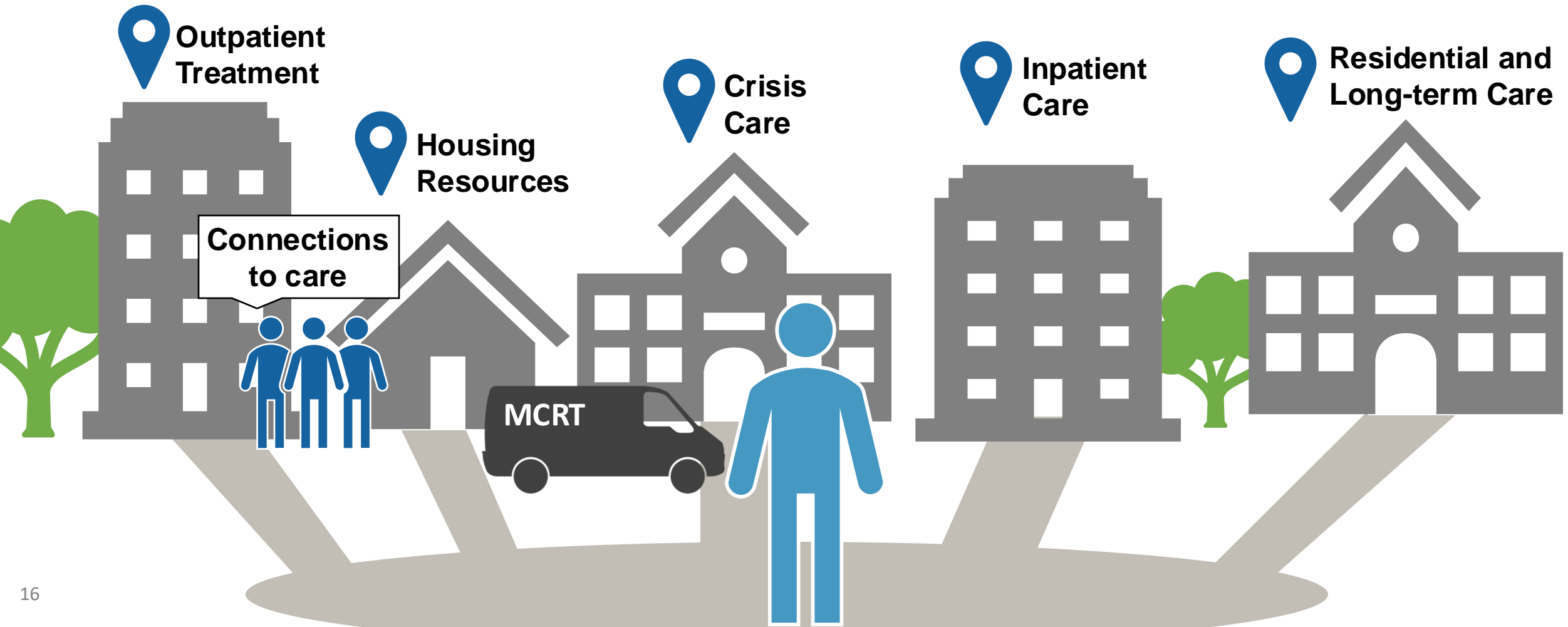
Emergency Department Visits



1,597

Resulting Hospitalizations

Building a System to Support a Lifelong Recovery Journey

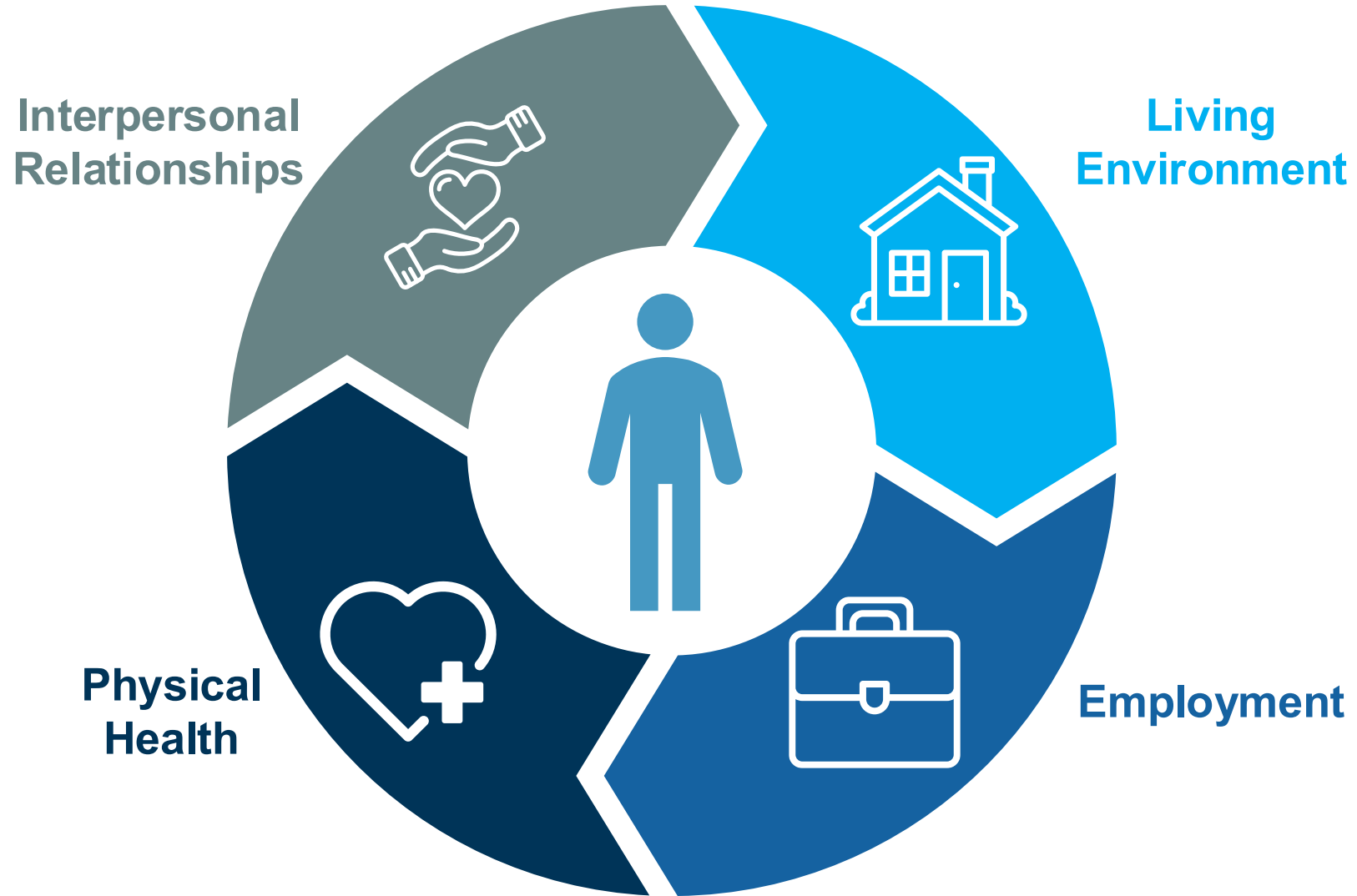


Strategies to Strengthen Pathways to Care



- Partner with hospitals and emergency departments to coordinate and increase engagement in substance use treatment
- Expand access to medications for addiction treatment (MAT) as a key component of comprehensive treatment planning
- Reduce stigma and improve the likelihood of starting treatment in the community through increased outreach and proven harm reduction strategies

Whole-Person Approach



SUD Optimal Care Pathways (OCP) Model



- Models the level of services required under a system that is highly focused on increasing outreach, lowering barriers to care, and supporting people in every stage of their recovery journey.
- Uses available data, academic research, and best practices to inform model inputs and recommendations.
- Incorporates impacts of foundational changes in how we reach individuals in crisis.
- Responds to the unique challenges of substance use through system design.

Expanding Capacity in Critical Substance Use Care Options



Transitional Support

Short-term care for people who don't need to be in the hospital but need additional supports

Residential Care

24/7 clinical treatment beds

Outpatient Care

Treatment and recovery support in the community

Housing Resources

Shared housing for adults who are in treatment

Growth in Substance Use Services Since 2021



Year to Date Growth (# of Care Episodes)

Transitional Support

Residential Care

Outpatient Care

Housing Resources

0
Current Capacity

0
Growth since FY21

4,978
Current Capacity

+3,092
Growth since FY21

9,332
Current Capacity

+1,027
Growth since FY21

2,627
Current Capacity

+1,870
Growth since FY21

SUD Optimal Care Pathways Model



5-Year Goal (# of Care Episodes)

Transitional Support

- Peer Respite
- Recuperative Care

+ 456
Capacity Increase

Residential Care

- SUD Residential
- Supportive Living

+ 3,873
Capacity Increase

Outpatient Care

- Partial Hospitalization
- Intensive Outpatient
- Outpatient Services
- Recovery Supports

+ 9,058
Capacity Increase

Housing Resources

- Recovery Residences

+ 2,406
Capacity Increase

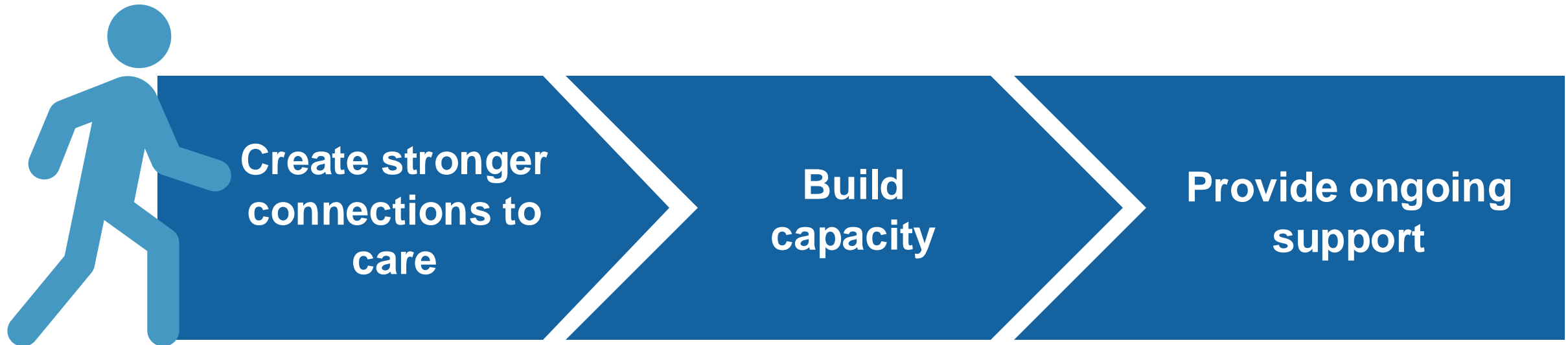
Impending Medicaid policy changes and local budgetary challenges will impact the ability to sustain existing capacity and add new capacity

Optimal 5-year Capacity Modeling



	2021 Capacity	Current Capacity (2025)	Capacity Under Optimal System (5-year)
Transitional Support	0	0	456
Residential Care	1,924	4,978	8,851
Outpatient Care	8,305	9,332	18,390
Housing Resources	1,576	2,627	5,033

Actions for a More Comprehensive System



Challenges and Opportunities



Infrastructure



Workforce



**Funding
Innovation**



**Sustaining Core
Operations**

Medicaid Funding Across Behavioral Health



- Local budget challenges and uncertainty of federal funding will **impact ability to sustain and expand** mental health and substance use services.
- **Potential loss of tens of millions in Medicaid funding for County** substance use and mental health programs.
- **Anticipate significant impacts to other non-Medicaid** behavioral health programs.



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