



# Pregnant and parenting clients

REACHING THE 95%

Please sign in by the door

**SAPC** | Substance Abuse  
Prevention and Control



COUNTY OF LOS ANGELES  
**Public Health**

## SAPC Guest Presenters:

### **Leslie Lopez, MPH**

Senior Staff Analyst Health  
Youth and Family Services Section Manager  
Division of Systems of Care

### **Liz Olson, MPP**

Staff Analyst, Health  
Family Services Unit Manager  
Division of Systems of Care

October 1, 2026

## Agenda



Reaching the 95% overview



Pregnant and parenting clients



Panel Discussion



Open Discussion

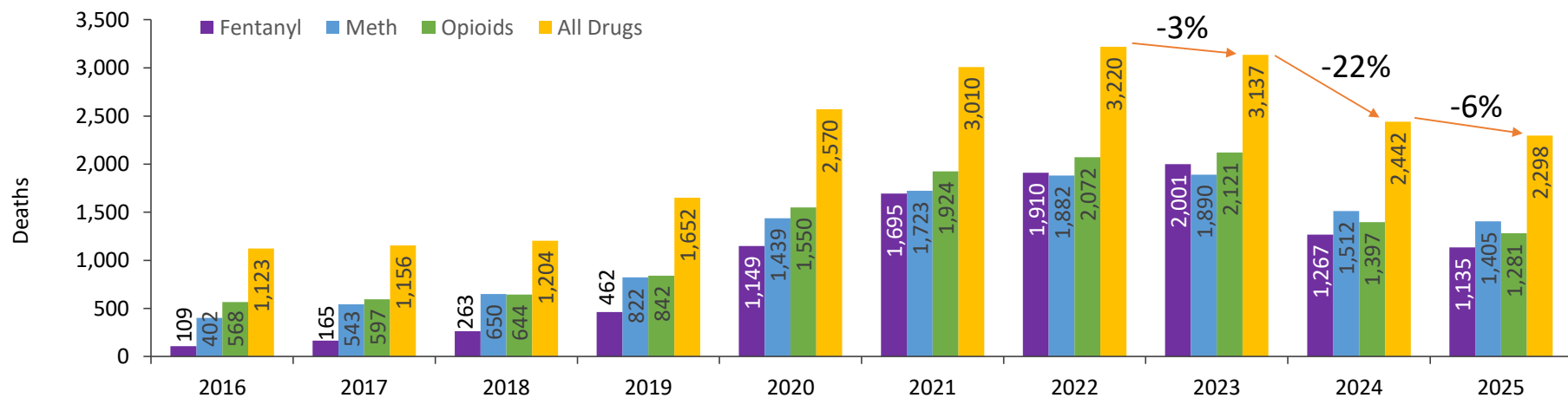


Provider Support Resources

# The Reaching the 95% (R95) Initiative

*Lowering barriers to life-saving SUD treatment services*

## Drug Overdose in LA County Report 2025



- **3 consecutive years of decreases in drug overdose deaths**
- **Nearly 30% overall decrease in drug overdose deaths from 2022 to 2025**
  - 40% reduction in fentanyl-related deaths
  - 25% reduction in methamphetamine-related deaths
    - Methamphetamine is once again the most prevalent drug involved in drug overdose deaths

Data Report: [Drug Overdose in Los Angeles County](#). Health Outcomes and Data Analytics Division, Substance Abuse Prevention and Control Bureau, Los Angeles  
County Department of Public Health, June 2026

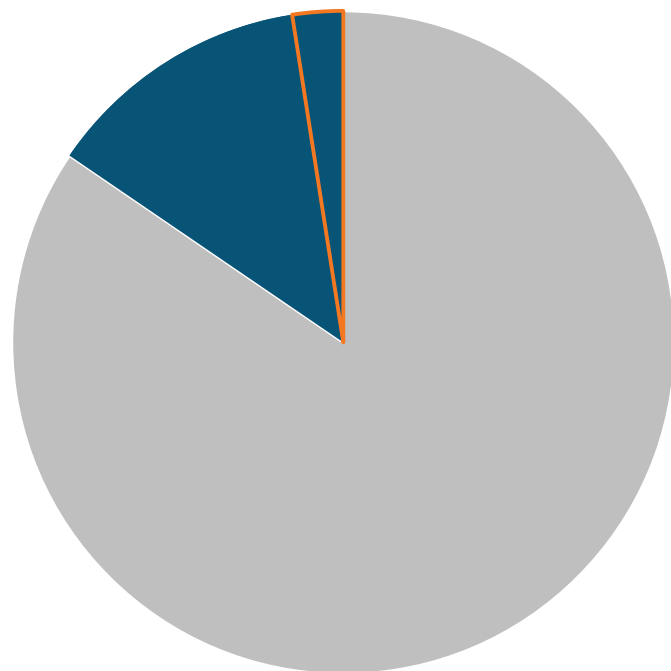
# Reaching the 95% Initiative

## Fundamental R95 Goals

1. Ensure specialty SUD systems are **designed** not just for the ~5% of people with SUDs who are already interested in treatment, but also the ~95% of people with SUDs who are not.
2. To lower barriers to care in the hearts and minds of the SUD community and public by disconnecting readiness for treatment from abstinence.
3. To **communicate** – through words, policies, and actions – that people with SUD are worthy of our time, attention, and compassion, no matter where they are in their readiness for change or recovery journey.

The R95 Initiative was launched by the Los Angeles County Department of Public Health's Substance Abuse Prevention and Control (SAPC) in 2023 to reach more people with SUD by expanding outreach and lowering barriers to care

## Very few people with SUD receive treatment



■ 15% of people age 12+ in the U.S. have a SUD  
(-3% from 2024)

■ 16% received treatment when including all settings, such as specialty treatment, primary care, telehealth, withdrawal management, prison, jail, or juvenile detention center (-3% from 2024)

84% of people age 12+ in the U.S. with SUD or in need of SUD treatment received no treatment in the past year

Substance Abuse and Mental Health Services Administration. (2026). Key substance use and mental health indicators in the United States: Results from the 2025 National Survey on Drug Use and Health (HHS Publication No. PEP26-07-010, NSDUH Series H-61). Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration. <https://www.samhsa.gov/data/data-we-collect/nsduh-national-survey-drug-use-and-health/national-releases/2025>

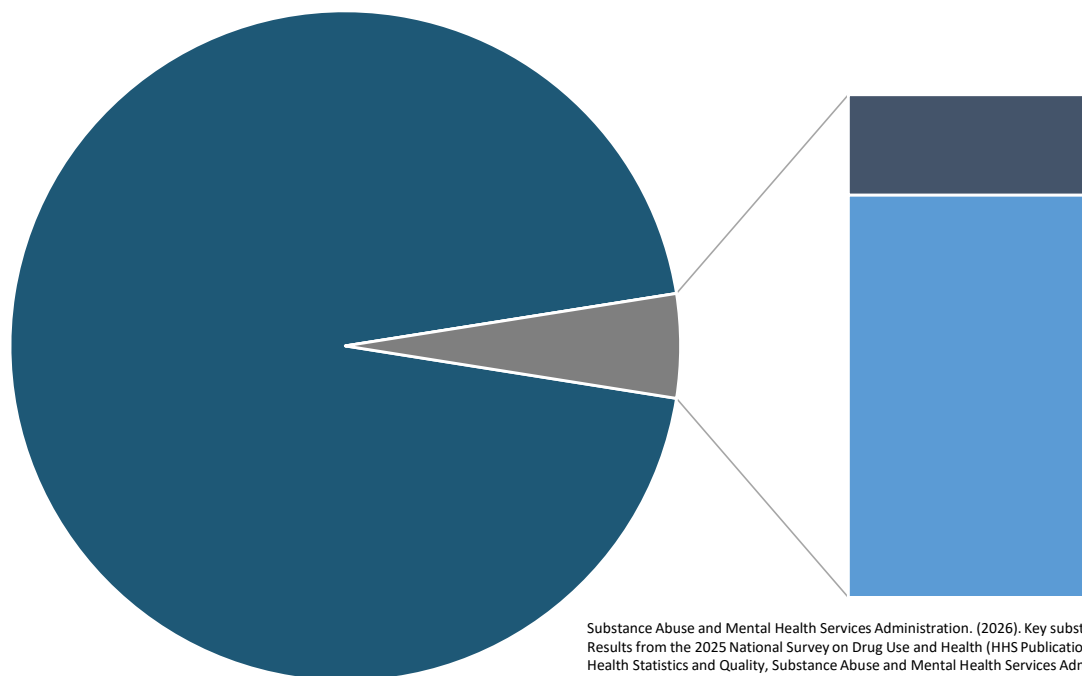


In the SUD treatment field, we offer something few people receive, and even fewer people want, yet we often **establish criteria to access services** as if it's a hot commodity.

## It's time to improve access by reaching out to those we've missed

*Of people age 12+ with SUD  
that did not access  
treatment...*

**95%** did not seek  
treatment and **did  
not think they  
needed** treatment  
*(+2% from 2024)*



**<1%** thought they should get  
treatment and  
**unsuccessfully** sought  
treatment  
*(-2% from 2024)*

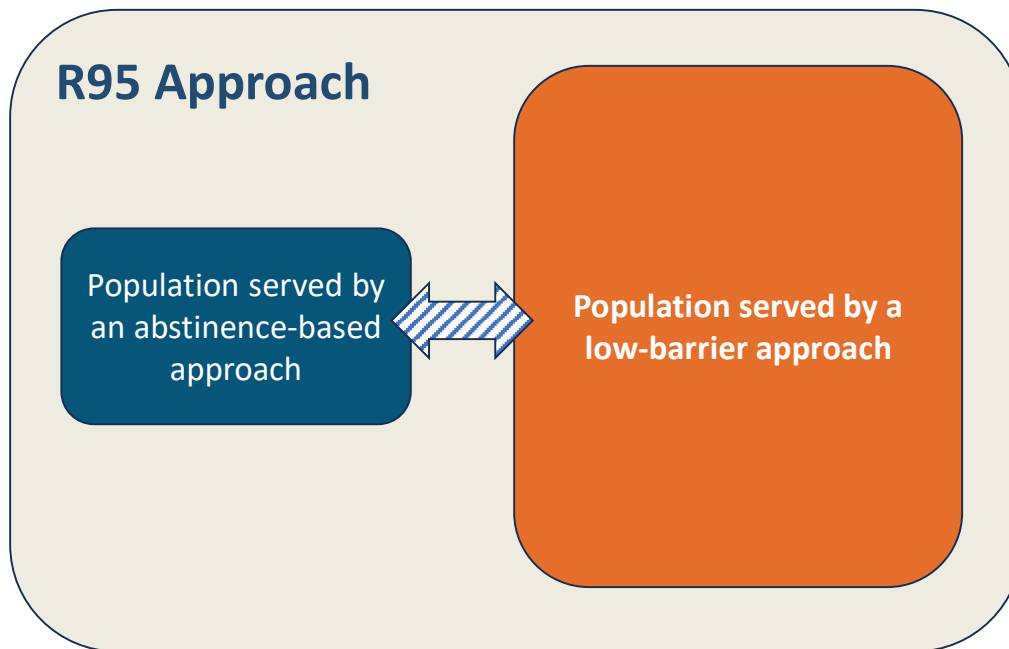
**5%** thought they should get  
treatment but **did not seek** it  
*(No change from 2024)*

Substance Abuse and Mental Health Services Administration. (2026). Key substance use and mental health indicators in the United States: Results from the 2025 National Survey on Drug Use and Health (HHS Publication No. PEP26-07-010, NSDUH Series H-61). Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration. <https://www.samhsa.gov/data/data-we-collect/nsduh-national-survey-drug-use-and-health/national-releases/2025>



The SUD treatment system needs to change its public image to encourage people with SUD to access services

## Reaching the 95% is a broader approach to treatment to serve more people, inclusive of those seeking abstinence



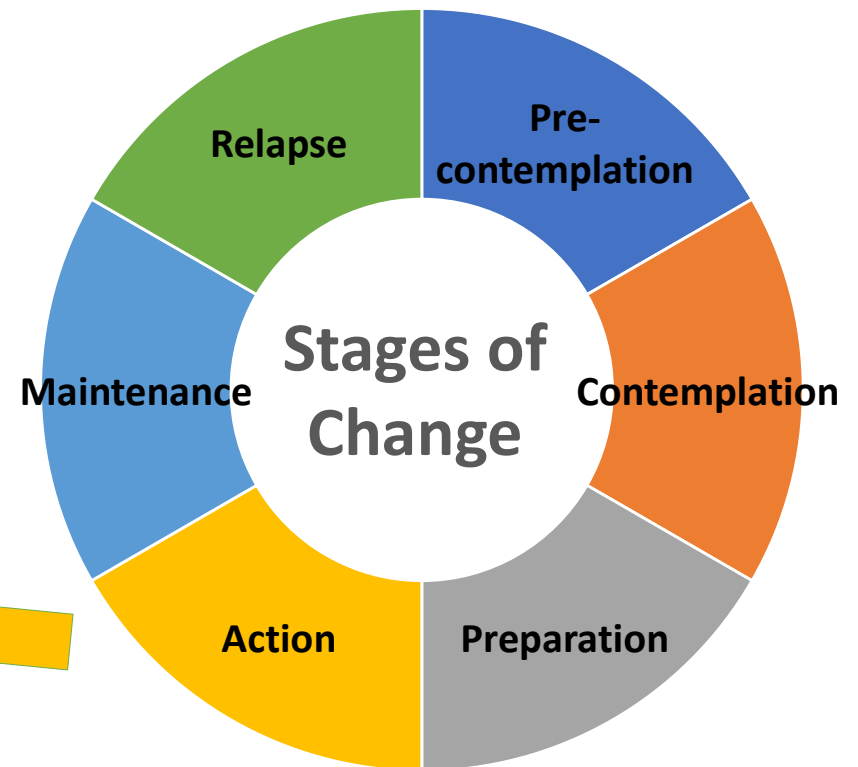
The R95 approach supports abstinence-based and low-barrier approaches to SUD care, guided by what the client wants and needs at that moment.

Client preferences can shift day-to-day, and **clients are best served when they continue to be engaged in treatment** rather than being removed from and reintroduced to treatment.

## Timely Intervention Using the Stages of Change

### Action

- Medication
- Inpatient rehab
- Sober living
- Hep C / HIV treatment
- Therapy
- Housing Services
- Primary Care Services

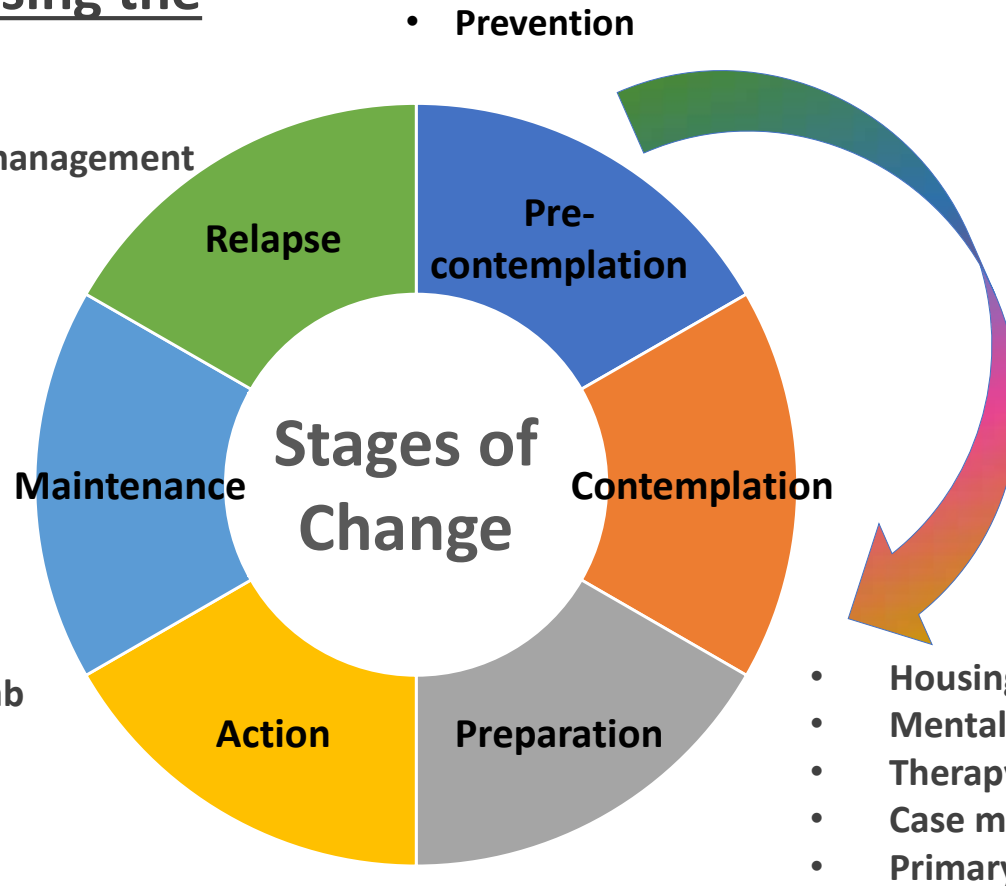


## Timely Intervention Using the Stages of Change

- Withdrawal management

- Recovery Housing
- Relapse prevention
- Workforce re-entry

- Medication
- Outpatient rehab
- Inpatient rehab
- Contingency management



# Pregnant and Parenting Women (PPW) Network Overview

# Context and Barriers to Treatment

## Data Highlights – FY24-25

### Primary Characteristics at Admission

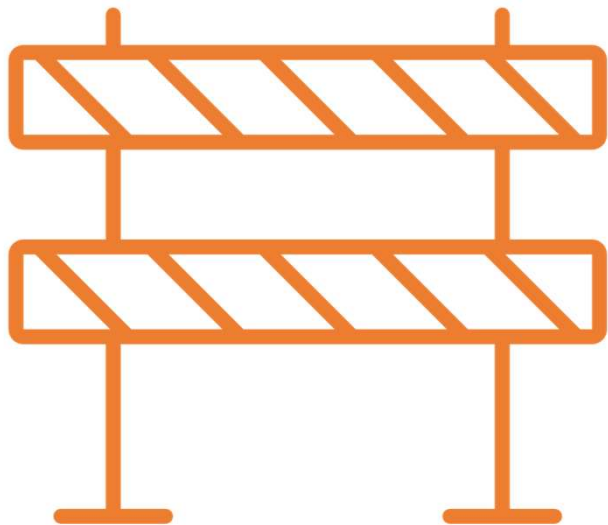
|                                                                                     |                                                    |
|-------------------------------------------------------------------------------------|----------------------------------------------------|
| Total # of unduplicated Pregnant and Parenting Women (PPW) served in SAPC's network | <b>6,005 (16.8% of total admissions)</b>           |
| Total # of pregnant women served                                                    | <b>1,030 (17% of all PPW clients)</b>              |
| Total # of accompanying children entering treatment at PPW provider sites           | <b>839 (441 ages 5 and under; 398 ages 6-17)</b>   |
| % of PPW experiencing homelessness                                                  | <b>44.4% (compared to 44.1% among all clients)</b> |
| % of PPW experiencing mental health issues                                          | <b>65.6% (compared to 58% among all clients)</b>   |

Source: SAPC Annual Treatment Report, Fiscal Year 2024-25 <http://publichealth.lacounty.gov/sapc/public/data-reports-and-briefs.htm>

# Substance Use During Pregnancy is Common

- Substance use and substance use disorders (SUDs) are common among people who are pregnant and parenting, but underdiagnosed and undertreated
- Estimates of overall prevalence vary, but data show that SUDs during pregnancy have risen in recent decades
- Analysis of deaths among pregnant and postpartum women in the U.S. from 2018 through 2023 indicates that unintentional drug overdose was the **leading cause** of maternal death

# Barriers to Treatment



## Stigma

- Heightened stigma, judgment, and bias around substance use during pregnancy and among parents

## Punitive policies

- Child welfare involvement and loss of custody

## Lack of family-friendly services

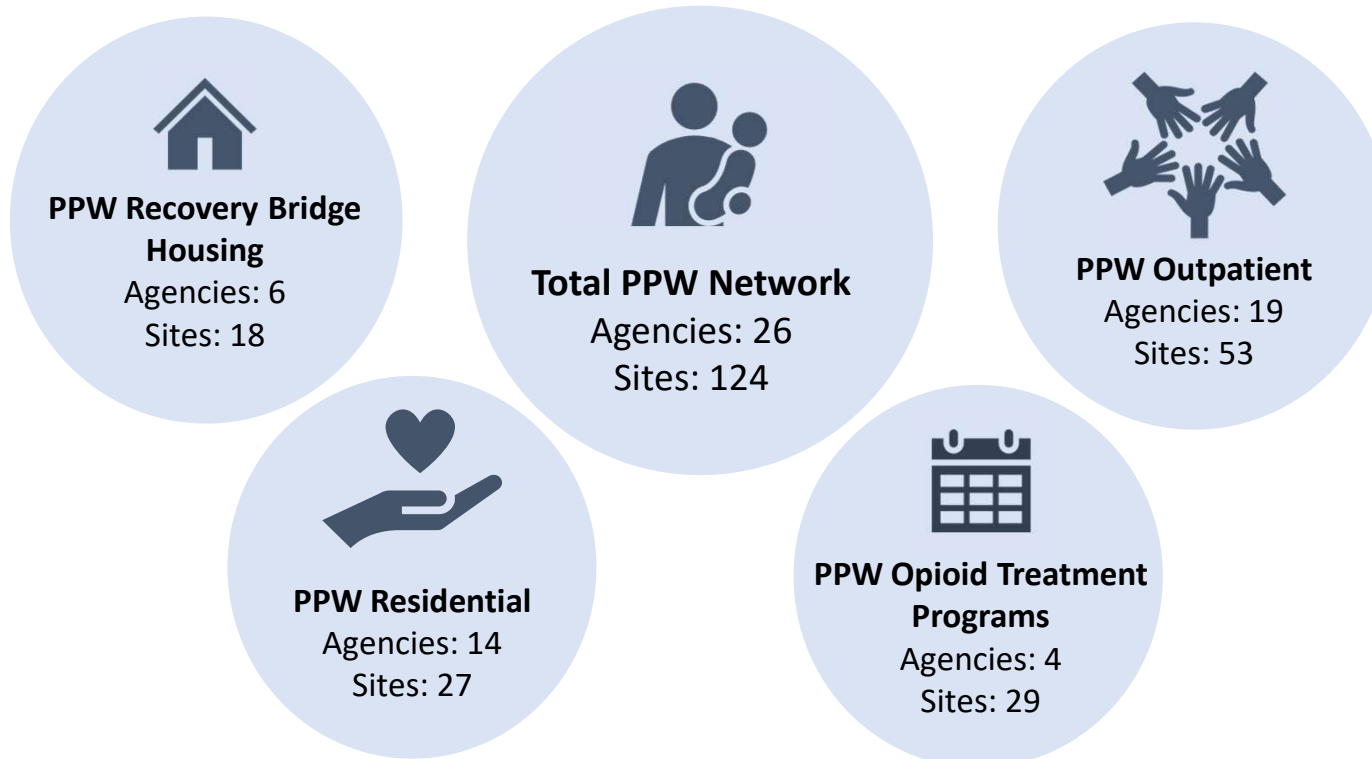
- Lack of childcare services, facilities not designed to serve pregnant people, parents, and children

## Insufficient training among health care providers

- Can limit access to MAT during pregnancy

# PPW Network Overview

# Pregnant and Parenting Women (PPW) Network



**SAPC's PPW network offers SUD treatment and expanded services to pregnant, postpartum, and parenting women and their dependent children (age 0-17) across all levels of care.**

## What's unique about the PPW network?

- PPW SUD treatment provider sites are:
  - 1) DMC-certified as a perinatal provider
  - 2) Contracted with SAPC for PPW services
- PPW providers must adhere to the requirements outlined in the [Substance Use Disorder Perinatal Practice Guidelines](#) (PPG)
- PPW providers can bill for expanded services for PPW clients and their accompanying children

# PPW Network Services



**Room and board for children ages 0-17** accompanying their parent to residential treatment, Recovery Bridge Housing, or Recovery Housing



**Childcare** for children while parents are receiving treatment or related services



**Transportation** to/from treatment and ancillary services



**Care coordination for parents and children** to support access to needed services



**Parent education** to support parent-child bonding and skill building

# PPW Initiatives to Reduce Barriers to Treatment

# Child-Friendly Environment Funds

- Resources to create and enhance child-friendly spaces at PPW sites (childcare rooms, play areas, family bedrooms)
- SAPC-contracted PPW providers eligible for up to \$15,000 per outpatient site and \$25,000 per RS or RBH site
- 21 agencies and 96 treatment sites participated in FY 2025-26
- Invoices totaling \$1,510,687



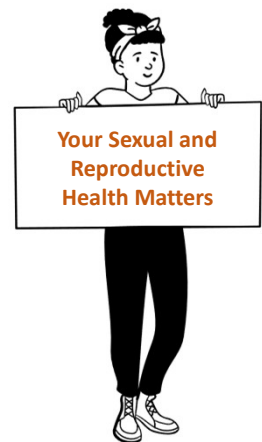
**Before**



**After**

# Sexual and Reproductive Health (SRH) Services

- Goal is to integrate SRH services for clients in SUD treatment settings to better address intersecting, highly stigmatized health needs
- Programs include:
  - **SRH Specialist Project** – SRH Specialists provide education, screening, and service navigation to identify and meet clients' sexual and reproductive health needs
  - **PATH Training** – Supports providers to engage clients in conversations about pregnancy intentionality and conduct screening for reproductive health needs
  - **Health Education Classes** – Health Educators provide client education on preventing and preparing for pregnancy, STI/HIV prevention, women's+ health, and healthy relationships
- Providers can also consult [Real Talk. Real Options.](#) for comprehensive and evidence-based resources family planning, prenatal, postpartum, and other reproductive health services



# Recovery Bridge Housing for Dads



Like RBH for the PPW population, RBH for Dads provides interim housing for men who are receiving outpatient SUD treatment or recovery services and their dependent children



Intended to better meet the needs of the diverse range of families affected by SUD across LA County

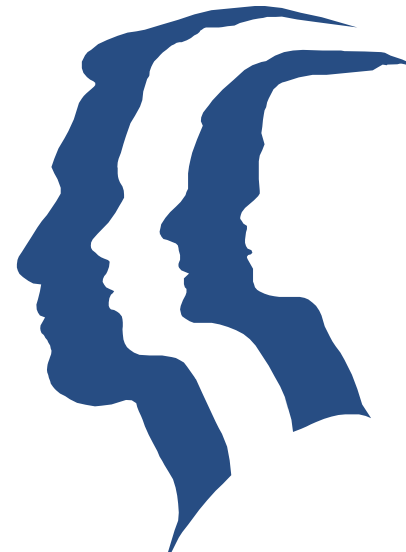


Pilot provider is Grandview Foundation in SPA 3. As a part of expansion efforts, three additional sites have initiated contracting in SPAs 4, 6, and 8

# Questions?

**Leslie Lopez, Division of Systems of Care - Youth and Family Services Section Manager** [leslopez@ph.lacounty.gov](mailto:leslopez@ph.lacounty.gov)

**Liz Olson, Division of Systems of Care - Family Services Unit Manager** [eolson@ph.lacounty.gov](mailto:eolson@ph.lacounty.gov)



# Community Health Project Los Angeles

Full-Spectrum Doula Services

Taylor Smith, MPH

10.1.2026



# Who we are

Community Health Project Los Angeles (CHPLA) is the first & longest-running needle exchange in Los Angeles.

CHPLA has expanded to offer a large variety of services under three umbrellas:

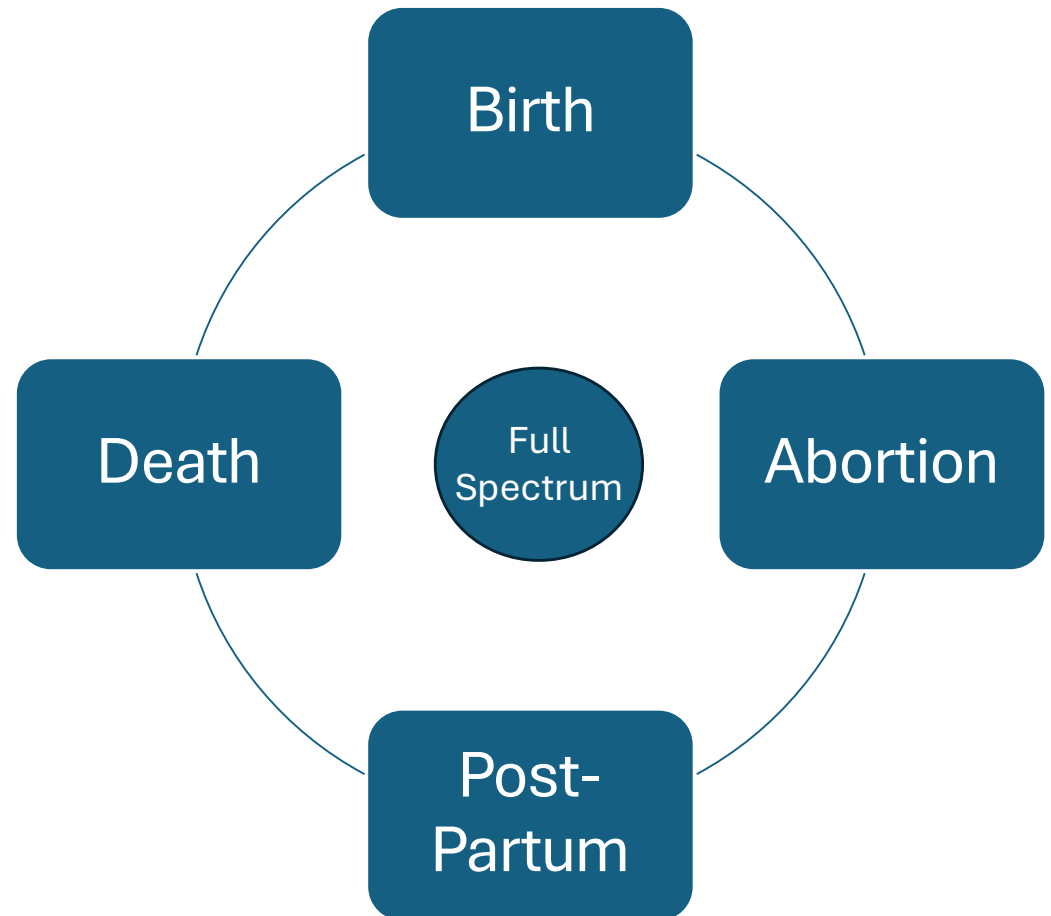
- Overdose Education and Naloxone Distribution (OEND) program in partnership with LA Department of Health Services Office of Overdose Prevention and Response
- Syringe Service Programming in partnership with LA Department of Public Health SAPC (Substance Abuse Prevention and Control) Division
- LEAD (Let Everyone Advance with Dignity / Law Enforcement Assisted Diversion) in partnership with the LA County Office of Diversion and Re-Entry



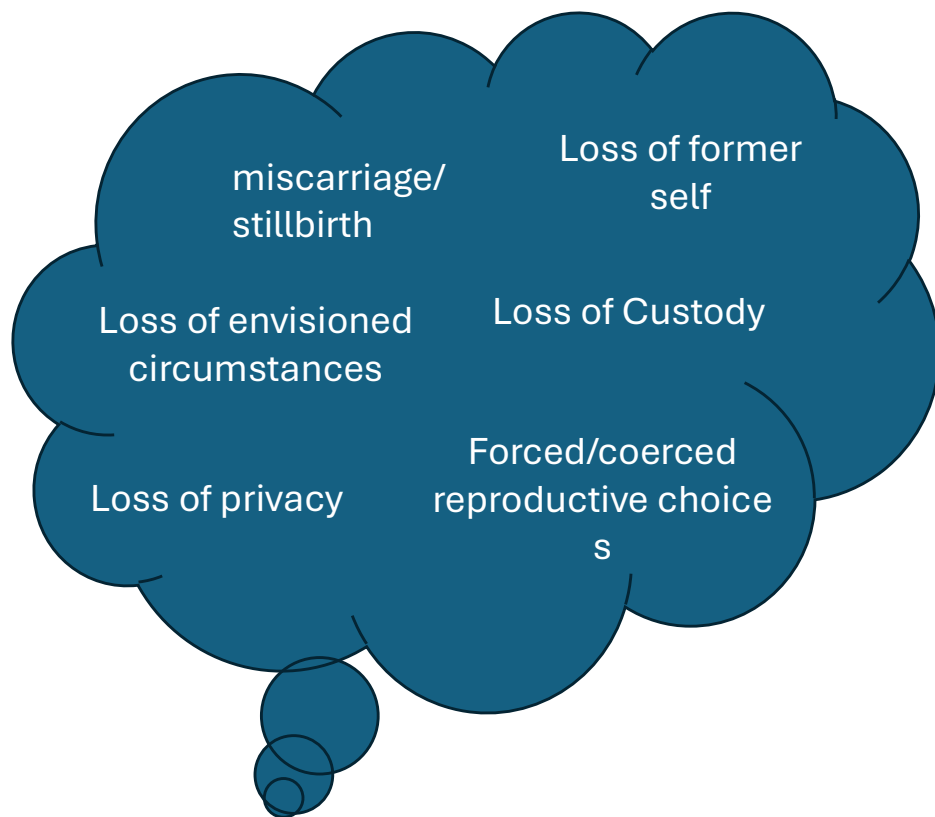
# What is a Doula?

“Doulas are non-clinical, trained professionals who provide personal support to Medi-Cal members and their families throughout pregnancy and up to one year postpartum. This includes emotional, physical, and informational support provided during pregnancy, labor, birth, and the postpartum period, as well as support for and after miscarriage and abortion.”

-Department of Health Care Services (DHCS)



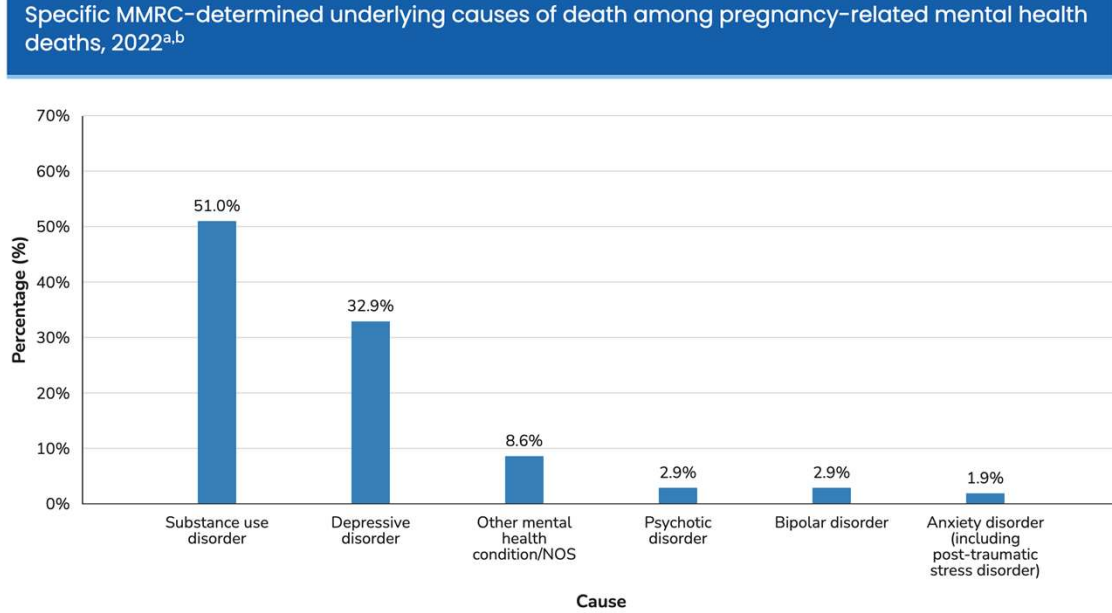
# Remembering Death in Pregnancy and Parenting



Expanding our understanding of death and the ways in which it is linked to pregnancy and parenting will allow us to better meet the holistic needs of our participants

# Doula Services within a Harm Reduction Agency

- In 2022, the CDC reported the leading cause of pregnancy-related deaths in the US was mental health conditions, including suicide-related deaths, overdose/poisoning related to substance use disorder, substance use disorder and other mental health related deaths



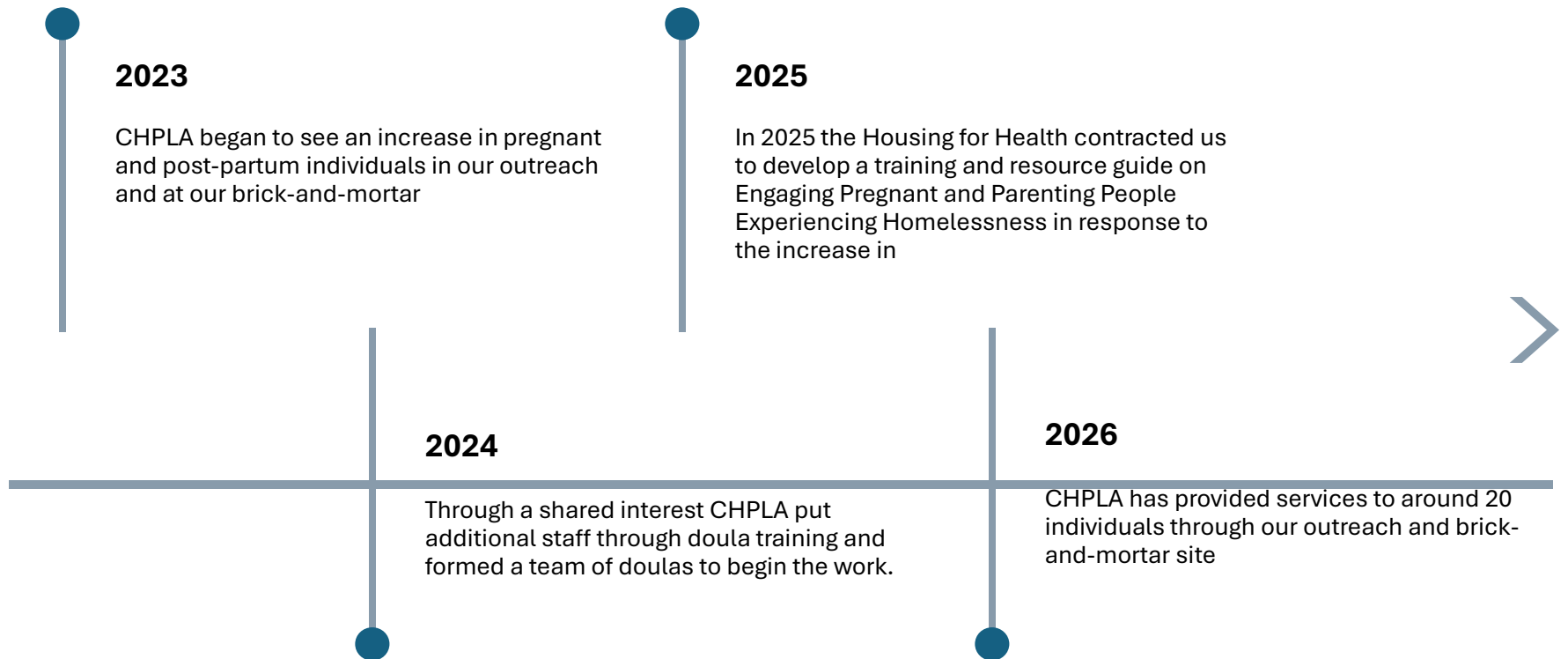
**Source:** Pregnancy-Related Deaths: Data from Maternal Mortality Review Committees  
<https://www.cdc.gov/maternal-mortality/php/data-research/mmrc/?cove-tab=3>

# Doula Services within a Harm Reduction Agency

- Between 2005- and 2010, 1 in every 20 women in LA County experienced homelessness at some point during their last pregnancy.<sup>1</sup>
- There is a relationship between experiencing homelessness and pregnancy.<sup>2</sup>
- Experiencing homelessness during pregnancy leads to an increased risk for chronic and infectious diseases, mental illness, substance use disorder, and intimate partner violence.<sup>2</sup>



# See A Need, Meet A Need



# The Doula and Health Navigation Program

A harm reduction-based outreach program that involves the co-location of substance use services, health navigation and certified doulas.

- Doula services
- Transportation and accompaniment to appointments and court
- Access to medication for substance use
- Medication obtainment and delivery
- Linkage to treatment
- Linkage to street-based and brick-and-mortar medical and behavioral health care
- Linkage to case management and housing services
- Assistance with documentation (IDs, birth certificates, etc.) obtainment
- Short-Term Motel accommodations (Case-by-Case and based on resource availability)
- Assistance with survival needs such as food, hygiene supplies, and cell phones

# What is unique about this program?

Care rooted in harm reduction principles and pre-established trust and rapport

Integration into a community outreach program with a brick-and-mortar drop-in space

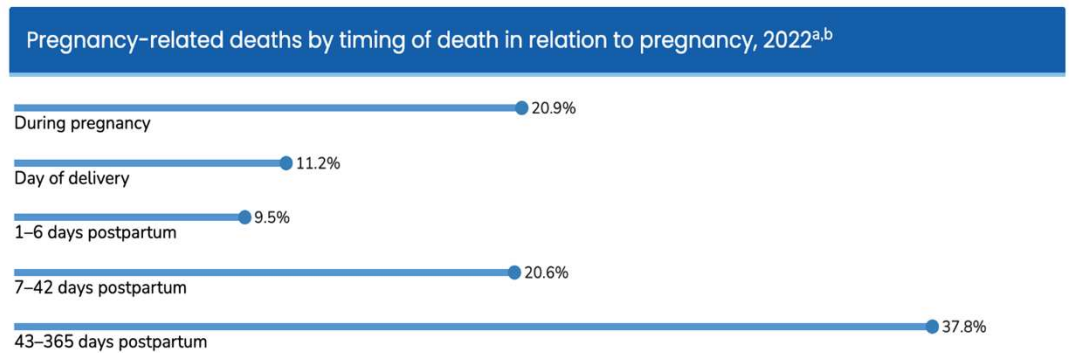
Co-Location and integration of doula services, substance use services and health navigation

Lived experience and non-clinical roles

Time dedicated to each participant

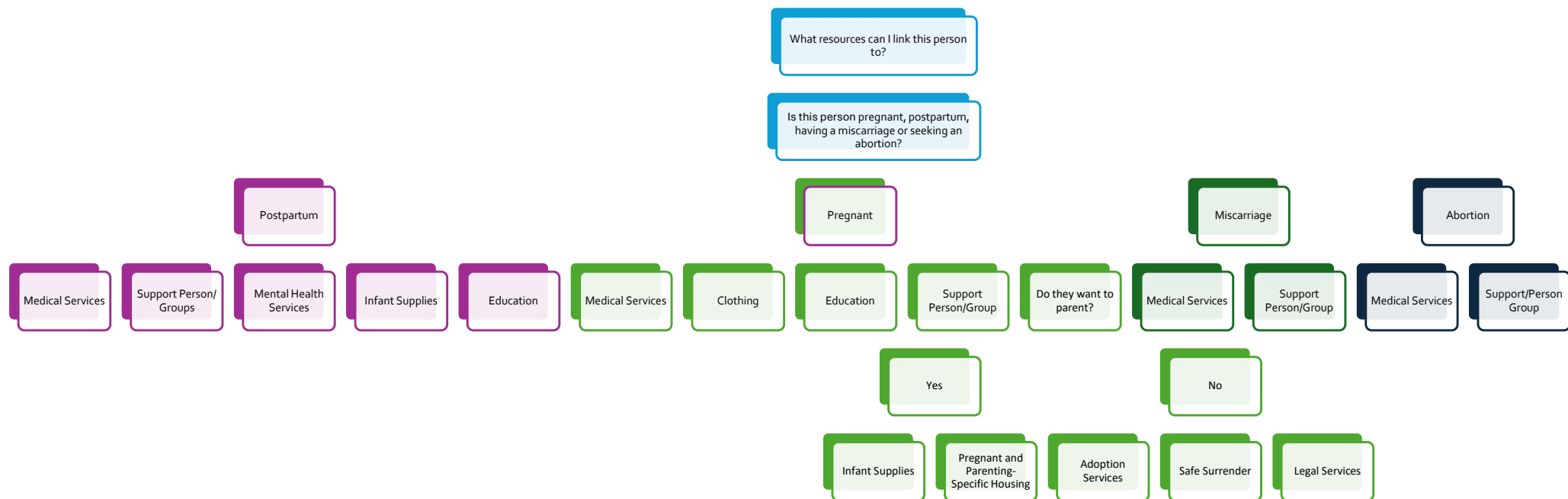
# Balancing Timelines

- More frequent visits/sessions and longer periods of time spent than what is typically covered by health insurance
- More time to build rapport and navigate systems
- Quicker access to our support for concentrated periods of time
- Agency and doula-specific relationships with agencies aid in more streamlined services



**Source:** Pregnancy-Related Deaths: Data from Maternal Mortality Review Committees  
<https://www.cdc.gov/maternal-mortality/php/data-research/mmrc/?cove-tab=1>

# What does this typically look like?



# Tools and Strategies for Engagement

**Meeting an immediate need  
within the first few interactions**



Gift Cards



Meals



Cell  
Phones

**Offering opportunities to  
discuss pregnancy status**



Pregnancy  
Test  
Distribution



Emergency  
Contraceptive  
Distribution

**Relationship building with  
private and non-profit orgs**



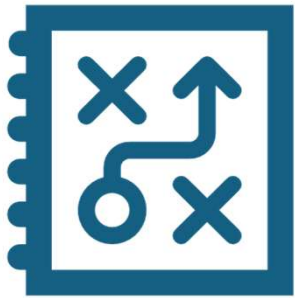
Housing  
Programs



Shelters

# Barriers

## Logistical/Technical



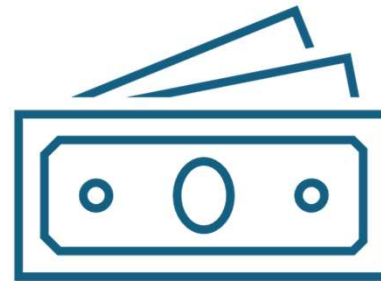
- Many motels do not take EBT cards or Cash as a form of payment
- Some participants do not have bank accounts
- Many motels require a physical credit card to book a room upon check-in
- DPSS requiring paperwork to be submitted before it can be obtained

## Housing Navigation



- Family Solutions Centers may not be accepting new people on waitlists
- Calls may go straight to voicemail with no timeline disclosed for a call back
- Sites may list available hours for services but can operate on a first come first serve basis and stop seeing individuals early in the day

## Money



Limited financial resources for food, motel stays and infant supplies etc.

## Cross Agency Coordination



- Gap between hospital social workers and DCFS social workers
- Participants left with lists of resources without assistance on tight deadlines

# References

1. Los Angeles County Department of Public Health, Maternal, Child and Adolescent Health Programs, Los Angeles Mommy and Baby Project, Homelessness During Pregnancy. October 2012.[http://publichealth.lacounty.gov/mch/MCAH%20Data%20Resources/Health%20brief%20files/LAMBBrief\\_Homeless\\_10\\_04\\_12%20Final.pdf](http://publichealth.lacounty.gov/mch/MCAH%20Data%20Resources/Health%20brief%20files/LAMBBrief_Homeless_10_04_12%20Final.pdf)
2. Kushel, M., Dones, M., Espinoza, M., Perry, E. (2024). Topic Brief: Pregnancy and Homelessness in the California Statewide Study of People Experiencing Homelessness. UCSF Benioff Homelessness and Housing Initiative.  
<https://homelessness.ucsf.edu/sites/default/files/2024-08/2024.07-2%20Pregnancy%20Topic%20Brief.pdf>

# Provider Panel

*Charlene Jackson, Alcoholism Center for Women*

*Taylor Smith, Community Health Project Los Angeles*

*Mechelle Monroe, HealthRIGHT 360*

*Leslie Lopez and Liz Olson, SAPC Systems of Care Division*

## Panel introduction

- Role/position
- Agency
  - Location(s)
  - Years in operation
  - Levels of care
  - Number of beds or population size
  - Population served



**ACW** Alcoholism  
Center for  
Women

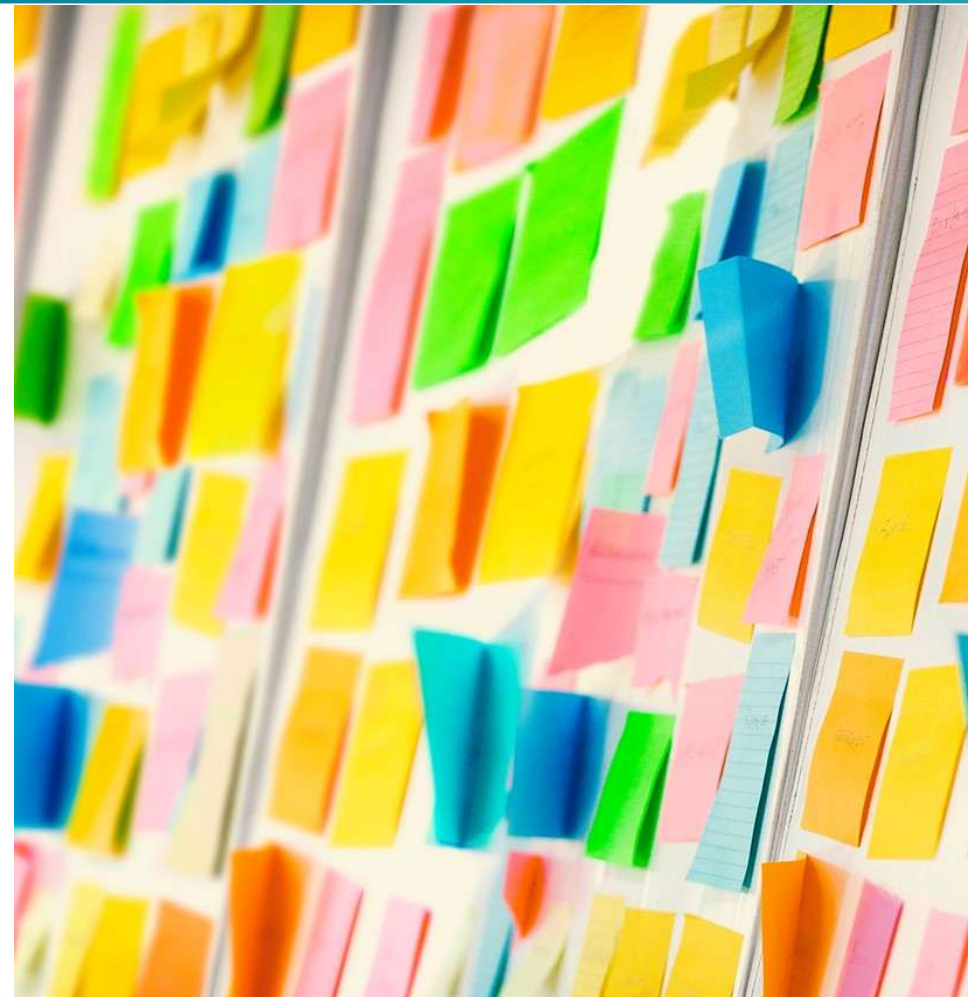


**health**  
**RIGHT**  
360

**Get Better. Do Better. Be Better.**

## Panel and Group Discussion

- How can R95 policies and client agreements **improve access for Pregnant and/or Parenting Women (PPW) population?**
- What **accommodations should be prioritized** when facilitating a warm hand off to a DHCS approved PPW service provider?
- What are some key considerations when delivering **client-centered and low-threshold PPW care in a residential setting?**
- How can providers **navigate mandatory reporting to external entities** while maintaining a strong therapeutic alliance?





## Additional questions?

**Next Harm Reduction and Treatment Integration  
Meeting:**

**Tuesday, November 17, 2026**

**10:00am-12:00pm**

***\*Enhancement Eligible***



**Thank You!**

| Month     | Meeting/Training                                                                                 | Details                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|-----------|--------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| August    | <b>R95 Workgroup: Providing quality care without testing</b><br><i>Enhancement eligible: R95</i> | <b>Topic:</b> Leveraging clinical observation and other tools when clients decline to test.<br><b>Date:</b> Thursday, August 20, 2026, 2:00pm-3:30pm<br><b>Location:</b> Asian American Drug Abuse Program, Inc. (AADAP), 2900 Crenshaw Blvd., Los Angeles, CA 90016<br><b>Registration:</b> <a href="https://sapccis.ph.lacounty.gov/registration/registration.aspx?ID=226">https://sapccis.ph.lacounty.gov/registration/registration.aspx?ID=226</a>                                                                                                  |
| September | <b>Harm Reduction and Treatment Integration</b><br><i>Enhancement eligible: Harm reduction</i>   | <b>Topic:</b> Meeting with harm reduction and treatment providers to identify opportunities for collaboration to best serve Angelenos with SUD across the SAPC and recovery spectrum.<br><b>Date:</b> Friday, September 18, 2026, 1:00pm-3:00pm<br><b>Location:</b> Zev Yaroslavsky Family Support Center RED/PINE Room Combo, 7555 Van Nuys Blvd, Van Nuys, CA 91405<br><b>Registration:</b> <a href="https://sapccis.ph.lacounty.gov/registration/registration.aspx?ID=227">https://sapccis.ph.lacounty.gov/registration/registration.aspx?ID=227</a> |
| October   | <b>R95 Workgroup: Pregnant and parenting clients</b><br><i>Enhancement eligible: R95</i>         | <b>Topic:</b> Service design considerations for pregnant and parenting clients in different levels of treatment.<br><b>Date:</b> Thursday, October 1, 2026, 11:00am-12:30pm<br><b>Location:</b> Behavioral Health Services (BHS) Training Center, 15519 Crenshaw Blvd., Gardena, CA 90249<br><b>Registration:</b> <a href="https://sapccis.ph.lacounty.gov/registration/registration.aspx?ID=228">https://sapccis.ph.lacounty.gov/registration/registration.aspx?ID=228</a>                                                                             |
| November  | <b>November 2, 2026: VBI Activity 3-I R95 Policies and Client-Facing Agreements due</b>          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|           | <b>Harm Reduction and Treatment Integration</b><br><i>Enhancement eligible: Harm reduction</i>   | <b>Topic:</b> Meeting with harm reduction and treatment providers to identify opportunities for collaboration to best serve Angelenos with SUD across the SAPC and recovery spectrum.<br><b>Date:</b> Tuesday, November 17, 2026, 10:00am-12:00pm<br><b>Location:</b> Helpline Youth Counseling, 14181 Telegraph Road, Whittier, CA 90604<br><b>Registration:</b> <a href="https://sapccis.ph.lacounty.gov/registration/registration.aspx?ID=229">https://sapccis.ph.lacounty.gov/registration/registration.aspx?ID=229</a>                             |
| December  | <b>R95 Workgroup: RYSE Initiative and Youth</b><br><i>Enhancement eligible: R95</i>              | <b>Topic:</b> Engaging and supporting youth through recovery.<br><b>Date:</b> Thursday, December 17, 2026, 10:00am-11:30am<br><b>Location:</b> Zev Yaroslavsky Family Support Center SEQ/JOS Room Combo, 7555 Van Nuys Blvd, Van Nuys, CA 91405<br><b>Registration:</b> <a href="https://sapccis.ph.lacounty.gov/registration/registration.aspx?ID=230">https://sapccis.ph.lacounty.gov/registration/registration.aspx?ID=230</a>                                                                                                                       |

# R95 Support for Treatment Agencies

## R95 101 Training for Frontline Staff

In-person trainings per agency to address staff questions and concerns about real life application of R95 principles

Request by email or through [Booking](#)

## R95 Value-Based Incentive TA

Virtual meeting to discuss specific R95 topics and/or Value-Based Incentive deliverables

Request by email or through [Booking](#)

## R95 Consultation Line for Providers

(626) 210-0648

M-F 8:30am-5:00pm, excluding County holidays

## R95 Virtual Monthly Office Hour (3<sup>rd</sup> W, 9:00am)

Monthly Teams meeting with R95 overview and updates with dedicated time for agency questions

Reaching the 95%



✓ SELECT A SERVICE

R95 Value Based Incentive TA ☐

Meeting with R95 staff for treatment provid... [Read more](#)  
30 minutes

R95 101 Training for Frontline Staff (per agency) ☒

On-site trainings for treatment agency fron... [Read more](#)  
Free · 1 hour 30 minutes

Booking for **R95 101 Training for Frontline Staff (per agency)**

May 19

DATE

TIME

< > May 2025

2:00 PM

| S  | M  | T  | W  | T  | F  | S  |
|----|----|----|----|----|----|----|
|    |    |    |    | 1  | 2  | 3  |
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| 18 | 19 | 20 | 21 | 22 | 23 | 24 |
| 25 | 26 | 27 | 28 | 29 | 30 | 31 |



Click to go to the  
Booking page

<https://tinyurl.com/R95Booking>

## Reaching the 95% resources

### R95 website



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County holidays

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- Monthly Teams meeting with R95 overview and updates with dedicated time for agency questions



#### **Email**

**R95:** [SAPC-R95@ph.lacounty.gov](mailto:SAPC-R95@ph.lacounty.gov)

**Payment Reform (VBI) :** [DPH-SAPC-VBI@ph.lacounty.gov](mailto:DPH-SAPC-VBI@ph.lacounty.gov)

# Supplemental Slides



# Value-Based Incentives



## Activity 3-I: R95 Client-facing Agreements

|                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|-------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Description</b>                              | <p>This incentive fosters a client-centered approach by ensuring participating treatment provider agencies update their policies and patient-facing agreements to recognize SUD as a chronic medical condition that will be treated with compassion.</p> <p><b>Treatment provider agencies are expected to implement approved policies and agreements within one (1) month of SAPC approval.</b></p>                                                                                                                                                                                                                          |
| <b>Eligibility</b>                              | <p>Open to all contracted treatment provider agencies that have not adopted all five (5) R95 policies and agreements: admission policy, discharge policy, toxicology policy, admission agreement, and toxicology agreement.</p> <p><i>More on the <a href="#">Payment Reform VBI website</a></i></p>                                                                                                                                                                                                                                                                                                                          |
| <b>Invoicing/<br/>Submission<br/>Guidelines</b> | <p><b>Submit required documents by 11/02/2026</b></p> <p>For provider agencies that have not previously completed any of the below documents, submit all five.</p> <p>For provider agencies that previously completed any of the below policies and agreements, short of all five (5) items, submit all remaining items.</p> <ul style="list-style-type: none"> <li>• <a href="#">R95 Admission Policy</a></li> <li>• <a href="#">R95 Discharge Policy</a></li> <li>• <a href="#">R95 Admission Agreement</a></li> <li>• <a href="#">R95 Toxicology Policy</a></li> <li>• <a href="#">R95 Toxicology Agreement</a></li> </ul> |
| <b>Payment</b>                                  | <ul style="list-style-type: none"> <li>• \$40,000 one-time payment for all five (5) R95 policies and agreements completed in FY 2026-27</li> <li>• \$20,000 one-time payment for one to four (1-4) remaining R95 policies and/or agreements completed in FY 2026-27</li> </ul>                                                                                                                                                                                                                                                                                                                                                |

## Activity 3-H: R95 Unique Clients Served

|                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|-------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Description</b>                              | <p><b>At least 5% increase in the number of unique clients served compared to previous fiscal year</b><br/>(FY 2025-26 vs FY 2026-27)</p> <p>This incentive encourages provider use of meaningful data to support business decisions, focusing on measurable impact and data reporting at the agency level to understand provider agency reach and progress in reaching the 95% of people with SUD that have not been engaged in treatment.</p>          |
| <b>Eligibility</b>                              | Treatment provider agencies that have been approved for all five (5) R95 policies and agreements in any fiscal year, including FY 2026-27, are eligible.                                                                                                                                                                                                                                                                                                 |
| <b>Calculation</b>                              | <p>Numerator: (number unique clients served July 1, 2026-February 28, 2027) – (number unique clients served July 1, 2025-February 28, 2026)</p> <p>Denominator: number unique clients served July 1, 2025-February 28, 2026</p>                                                                                                                                                                                                                          |
| <b>Invoicing/<br/>Submission<br/>Guidelines</b> | <p><b>Guidance Documents:</b><br/> <a href="#">R95 Unique Clients Served activity guide</a> &amp; <a href="#">R95 Unique Clients Served Submission Checklist</a></p> <p><b>Submit the below documents by 03/19/2027:</b></p> <ul style="list-style-type: none"> <li>• <a href="#">Invoice Form</a></li> <li>• KPI MSO Payment Reconciliation Report (Do not submit PHI via <a href="#">VBI Electronic Submission Form</a> or unsecure email.)</li> </ul> |
| <b>Payment</b>                                  | \$ 20,000                                                                                                                                                                                                                                                                                                                                                                                                                                                |

# R95 Enhancement Activity FY 26-27

## R95 Enhancement Activity

### R95 Track

### Harm Reduction Track

**Incentive amount**

**\$15,000**

**\$15,000**

**Participation threshold**

85% client-facing staff, at least one training

85% client-facing staff, at least one training

**Eligible meetings**

**\*\*In person only\*\***

July 1, 2026-March 31, 2027

R95 Workgroup meetings

Harm Reduction and Treatment Integration meetings

R95 101 Training for Frontline Staff

Internal training with approval

Tarzana Treatment Centers and Clare Matrix trainings

Tarzana Treatment Centers and Clare Matrix trainings

**Total potential incentive**

**\$30,000**

## Requesting R95 Enhancement Activity eligible trainings:

### R95 Track

- Clare Matrix ([email](#)) or Tarzana Treatment Centers ([email](#)) to request a training at a facility of your choosing or at Clare Matrix or TTC
- Eligible workgroup meetings ([R95 FY 26-27 Calendar](#))
- SAPC R95 ([Booking](#) or [email](#)) to request an R95 101 Training at a facility of your choosing from available dates

### Harm Reduction Track

- Clare Matrix ([email](#)) or Tarzana Treatment Centers ([email](#)) to request a training at a facility of your choosing or at Clare Matrix or TTC
- Eligible Integration meetings ([R95 FY 26-27 Calendar](#))
- Agencies must submit Harm Reduction slides to [SAPC-R95@ph.lacounty.gov](mailto:SAPC-R95@ph.lacounty.gov) for approval prior to self-training

### Preparation, Notification and Payment Process:

- Submit R95 Enhancement Activities – Intent to Participate (Attachment 1), with a precise count of direct client-facing staff, by 3/31/27.
- SAPC R95 staff will automatically notify providers when they meet the 85% threshold and include a prepopulated invoice for completion.
- Providers must complete the R95 Enhancement Activities Invoice by 3/31/27 and submit to [SAPC-R95@ph.lacounty.gov](mailto:SAPC-R95@ph.lacounty.gov)