

CHAIRPERSON Lorraine Flores To:

From:

Date:

EXECUTIVE OFFICER Jane Adcock Re: 2019 Year-End Legislative Report The attached report is intended to inform all California Behavioral Health Planning Council members of the Legislation Committee's activities during the

of the bills reviewed this year, the Council's position and the outcome.

The Legislation Committee reviewed and took positions on 26 bills in addition to supporting two bills the Council co-sponsored. The committee's positions are outlined below:

first year of the 2019-2020 legislative session. The report includes a summary

- Support- 16
- Support if Amended- 2

All Council Members

Legislation Committee

October 2019

- Oppose- 3
- Oppose Unless Amended- 1
- Watch/Neutral- 3
- Work with Author- 1

The activities to advocate for this legislation included sending position letters for these bills at various stages of the legislative cycle, as well as working with the author's offices, key sponsors, and the Governor's office to voice the Council's position and provide input on potential amendments.

This year, the Council co-sponsored two important bills. Assembly Bill 333 (Eggman) was put forth by the Patients' Rights Committee, along with the CA Association of Patients' Rights Advocates, to provide whistleblower protections for patients' rights advocates (PRAs) who are contractors. The Governor signed AB 333 on October 2, 2019. Senate Bill 539 (Caballero) was put forth by the Workforce and Employment Committee, along with the CA Council of Community Behavioral Health Agencies and CA Association of Marriage and Family Therapists, to provide an ongoing source of funding for the Five-Year Education and Training Development Plans. SB 539 is currently held in suspense in the Senate Appropriations Committee. Additionally, a Budget request of \$70M in one-time State General Funds was made to allow the MH Services Workforce Education and Training Account to be established while the ongoing funding methodology is implemented. The 2019-2020 Budget provides \$35M in State General Funds and \$25M in MHSA Admin Funds and requires the counties to provide a 33% match.

MS 2706 PO Box 997413 Sacramento, CA 95899-7413 916.323.4501 fax 916.319.8030 Please note there are a number of bills that became 2-year bills and can be acted upon again in January 2020. The committee will continue to monitor those bills and advocate accordingly through the end of the second year of legislative cycle.

> Advocacy

- Evaluation
- Inclusion



2019 Year-End Legislative Report

AB 8 (Chu D) Pupil health: mental health professionals.

Status: 2 year bill. Last location- Senate Health Committee.

Summary: Would require, on or before December 31, 2024, a school of a school district or county office of education and a charter school to have at least one mental health professional, as defined, for every 600 pupils generally accessible to pupils on campus during school hours. The bill would require, on or before December 31, 2024, a school of a school district or county office of education and a charter school with fewer than 600 pupils to have at least one mental health professional generally accessible to pupils on campus during school hours, to employ at least one mental health professional to serve multiple schools, or to enter into a memorandum of understanding with a county agency or community.

Position: Oppose Unless Amended

AB 46 (Carrillo D) Individuals with mental illness: change of term.

Status: Signed by the Governor 6/26/2019. Chaptered by Secretary of State - Chapter 9, Statutes of 2019.

Summary: Current law refers to persons with mental disorders and mental defects in provisions relating to, among other things, criminal proceedings, correctional facilities, and property tax exemptions. This bill would state the intent of the Legislature to enact legislation to replace those derogatory terms with more appropriate terms when referring to individuals with mental illness. The bill would make those changes throughout various provisions of law.

Position: Support

AB 258 (Jones-Sawyer D) Pupil health: School-Based Pupil Support Services Program Act. Status: Vetoed by the Governor 10/12/2019. Veto message attached.

Summary: The Healthy Start Support Services for Children Act requires the Superintendent of Public Instruction to award grants to local educational agencies or consortia to fund programs in qualifying schools that provide support services, which include case-managed health, mental health, social, and academic support services, to eligible pupils and their families. This bill would

state the intent of the Legislature to enact legislation that would increase in-school support services to pupils in order to break down barriers to academic success.

Position: Support

AB 286 (Bonta D) Taxation: cannabis.

Status: Held under submission in Assembly Appropriations 5/16/19.

Summary: The Control, Regulate and Tax Adult Use of Marijuana Act imposes duties on the Bureau of Cannabis Control in the Department of Consumer Affairs, the Department of Food and Agriculture, and the State Department of Public Health with respect to the creation, issuance, denial, suspension and revocation of commercial cannabis licenses, and imposes an excise tax commencing January 1, 2018, on the purchase of cannabis and cannabis products at the rate of 15% of the average market price of any retail sale by a cannabis retailer. Commencing January 1, 2018, AUMA also imposes a cultivation tax upon all cultivators on all harvested cannabis that enters the commercial market, at specified rates per dry-weight ounce of cannabis flowers and leaves. This bill would reduce that excise tax rate to 11% on and after the operative date of this bill until July 1, 2022, at which time the excise tax rate would revert back to 15%.

Position: Oppose

AB 333 (Eggman D) Whistleblower protection: county patients' rights advocates.

Status: Signed by the Governor 10/2/2019. Chaptered by Secretary of State - Chapter 423, Statutes of 2019.

Summary: Current law relating to mental health advocacy requires each local mental health director to appoint, or contract for the services of, one or more county patients' rights advocates to perform prescribed duties. Current law prohibits the knowing obstruction of a county patients' rights advocate in the performance of the advocate's duties. This bill would establish similar whistleblower protections specifically for county patients' rights advocates.

Position: Co-Sponsor

AB 480 (Salas D) Mental health: older adults.

Status: 2 year bill. Last location- Senate Appropriations Committee.

Summary: Would establish within the State Department of Health Care Services an Older Adult Mental Health Services Administrator to oversee mental health services for older adults. The bill would require that position to be funded with administrative funds from the Mental Health Services Fund. The bill would prescribe the functions of the administrator and its responsibilities, including, but not limited to, developing outcome and related indicators for older adults for the purpose of assessing the status of mental health services for older adults, monitoring the quality of programs for those adults, and guiding decision making on how to improve those services. Position: Support

AB 512 (Ting D) Medi-Cal: specialty mental health services.

Status: Vetoed by the Governor 10/13/2019. Veto message attached.

Summary: Current law requires the State Department of Health Care Services to implement managed mental health care for Medi-Cal beneficiaries through contracts with mental health plans, and requires mental health plans to be governed by various guidelines, including a requirement that a mental health plan assess the cultural competency needs of the program. This bill would require each mental health plan to prepare a cultural competence plan to address specified matters, including mental health disparities in access, utilization, and outcomes by various categories, such as race, ethnicity, and immigration status.

Position: Support if Amended

AB 565 (<u>Maienschein</u> D) Public health workforce planning: loan forgiveness, loan repayment, and scholarship programs.

Status: Held under submission 8/30/2019.

Summary: Current law establishes the Steven M. Thompson Physician Corps Loan Repayment Program (program) in the California Physician Corps Program within the Health Professions Education Foundation, which provides financial incentives, including repayment of educational loans, to a physician and surgeon who practices in a medically underserved area, as defined. Current law establishes the Medically Underserved Account for Physicians, a continuously appropriated account, within the Health Professions Education Fund, to primarily provide funding for the ongoing operations of the program. Current law defines "practice setting," for these purposes. This bill also would define "practice setting" to include a program or facility operated by, or contracted to, a county mental health plan.

Position: Support

AB 680 (Chu D) Public safety dispatchers: mental health training.

Status: 2 year bill. Last location- Senate Appropriations Committee.

Summary: Would require the Commission on Peace Officer Standards and Training, on or before January 1, 2021, to develop mental health training courses for state and local public safety dispatchers, incorporated in the dispatchers' basic training course and as a continuing training course, that cover specified topics, including recognizing indicators of mental illness, intellectual disabilities, or substance use disorders, and conflict resolution and de-escalation techniques. The bill would require the commission to develop these courses in consultation with specified groups and individuals.

Position: Support

AB 713 (Mullin D) Early Psychosis Intervention Plus (EPI Plus) Program.

Status: 2 year bill. Last location- Senate Appropriations Committee.

Summary: Current law establishes the Early Psychosis and Mood Disorder Detection and Intervention Fund, and authorizes the commission to allocate moneys from that fund to provide grants through a competitive selection process to counties or other entities to create, or expand existing capacity for, early psychosis and mood disorder detection and intervention services and supports. Current law requires the commission to adopt regulations to implement these provisions, but provide that the adoption of those regulations and the implementation of the grant program are contingent upon the deposit into the fund of at least \$500,000 in non-state funds for those purposes. Current law prohibits funds from being appropriated from the General Fund for purposes of these provisions. This bill would delete that prohibition on General Fund moneys being appropriated for purposes of those provisions and would delete the requirement that the minimum \$500,000 deposit be from non-state funds.

Position: Support

<u>AB 734</u> (<u>Maienschein</u> D) Resource families: supportive services pilot program. Status: Vetoed by the Governor 10/13/2019.

Summary: Would require the State Department of Social Services to establish and facilitate a pilot program in up to 5 counties that voluntarily apply and are selected by the department, to increase placement stability for foster youth and facilitate greater resource family retention through the provision of strengths-based, skills-based, trauma-informed coaching. The bill would specify that the pilot program is not intended to supplant any existing obligation on counties to provide core services, or to duplicate services already available to foster children in the community.

Position: Watch

<u>AB 890</u> (Wood D) Nurse practitioners: scope of practice: unsupervised practice.

Status: 2 year bill. Last location- Assembly Appropriations Committee.

Summary: Would establish the Advanced Practice Registered Nursing Board within the Department of Consumer Affairs, which would consist of 9 members. The bill would authorize a nurse practitioner who holds a certification as a nurse practitioner from a national certifying body recognized by the board who practices in certain settings or organizations to perform specified functions without supervision by a physician and surgeon, including ordering and interpreting diagnostic procedures, certifying disability, and prescribing, administering, dispensing, and administering controlled substances.

Position: Support if Amended

AB 1352 (Waldron R) Community mental health services: mental health boards.

Status: Signed by the Governor 10/2/2019. Chaptered by Secretary of State - Chapter 460, Statutes of 2019.

Summary: The Bronzan-McCorquodale Act governs the organization and financing of community mental health services for persons with mental disorders in every county through locally administered and locally controlled community mental health programs. Current law generally requires each community mental health service to have a mental health board consisting of 10 to 15 members who are appointed by the governing body, and encourages counties to appoint individuals who have experience with and knowledge of the mental health system. This bill would state that a mental health board serves in an advisory role to the governing body, and would require the board to review and evaluate the local public mental health system and advise the governing body on community mental health services delivered by the local mental health agency or local behavioral health agency, as applicable.

Position: Watch

<u>AB 1601</u> (<u>Ramos</u> D) Office of Emergency Services: behavioral health response.

Status: 2 year bill. Last location- Assembly Appropriations Committee.

Summary: Would establish a behavioral health deputy director within the Office of Emergency Services to ensure individuals have access to necessary mental and behavioral health services and supports in the aftermath of a natural disaster or declaration of a state of emergency and would require the deputy director to collaborate with the Director of Health Care Services to coordinate the delivery of trauma-related support to individuals affected by a natural disaster or state of emergency.

Position: Support

AB 1766 (Bloom D) Licensed adult residential facilities and residential care facilities for the elderly: data collection: residents with a serious mental disorder.

Status: 2 year bill. Last location- Senate Human Services Committee.

Summary: Would require the State Department of Social Services to collect and publicly report data from licensed adult residential facilities and residential care facilities for the elderly, including whether the facility accepts residents with a serious mental disorder, as defined, and the destination for all residents with a serious mental disorder who exited during the previous 12 months, among other information. The bill would also require the department to publicly report on a quarterly basis how many licensed residential facilities primarily serving low-income residents closed permanently in the prior quarter and to create guidelines to ensure that the county in which a facility is located is notified when that facility notifies the department that it is closing.

Position: Support

<u>SB 10</u> (Beall D) Mental health services: peer support specialist certification.

Status: Vetoed by the Governor 10/13/2019. Veto message attached.

Summary: Would require the State Department of Health Care Services to establish, no later than July 1, 2020, a statewide peer support specialist certification program, as a part of the state's comprehensive mental health and substance use disorder delivery system and the Medi-Cal program. The certification program's components would include, among others, defining responsibilities, practice guidelines, and supervision standards, determining curriculum and core competencies, specifying training and continuing education requirements, establishing a code of ethics, and determining a certification revocation process. The bill would require an applicant for the certification as a peer support specialist to meet specified requirements, including successful completion of the curriculum and training requirements.

Position: Support

SB 11(Beall D) Health care coverage: mental health parity.Status: 2 year bill Last location- Senate Appropriations Committee.

Summary: Would require the Department of Managed Health Care and the Department of Insurance annually to report to the Legislature the information obtained through activities taken to enforce state and federal mental health parity laws.

Position: Support

<u>SB 12</u> (Beall D) Mental health services: youth.

Status: 2 year bill. Last location- Assembly Appropriations Committee.

Summary: The Mental Health Services Act an initiative statute enacted by the voters as Proposition 63 at the November 2, 2004, statewide general election, also funds a system of county mental health plans for the provision of mental health services, as specified. Current law provides for the operation and administration of various mental health programs by the Mental Health Services Oversight and Accountability Commission This bill would require the commission, subject to an appropriation, to administer an Integrated Youth Mental Health Program for purposes of establishing local centers to provide integrated youth mental health services, as specified.

Position: Support

<u>SB 40</u> (Wiener D) Conservatorship: serious mental illness and substance use disorders.

Status: Signed by the Governor 10/2/2019. Chaptered by Secretary of State. Chapter 467, Statutes of 2019.

Summary: Would authorize the court to establish a temporary conservatorship for a period of 28 days or less if the court is satisfied that the person is presently incapable of caring for the person's own health and well-being due to a serious mental illness and substance use disorder, as those terms are defined by the bill, the person has been detained 8 times for evaluation and treatment in a 12-month period pursuant to existing law authorizing the detention of mentally disordered persons who are a danger to self or others or gravely disabled, without reference to evidence of

frequent detention for evaluation and treatment, the temporary conservatorship is necessary, and the county health director, or their designee, has met specified requirements relating to those previous detentions.

Position: Oppose

SB 66(Atkins D) Medi-Cal: federally qualified health center and rural health clinic services.Status: 2 year bill. Last location-Assembly Appropriations Committee.

Summary: Current law provides that federally qualified health center (FQHC) services and rural health clinic (RHC) services, as defined, are covered benefits under the Medi-Cal program, to be reimbursed, to the extent that federal financial participation is obtained, to providers on a per-visit basis. "Visit" is defined as a face-to-face encounter between a patient of an FQHC or RHC and specified health care professionals, including a physician and marriage and family therapist. Under existing law, "physician," for these purposes, includes, but is not limited to, a physician and surgeon, an osteopath, and a podiatrist. This bill would authorize reimbursement for a maximum of 2 visits taking place on the same day at a single location if after the first visit the patient suffers illness or injury requiring additional diagnosis or treatment, or if the patient has a medical visit and a mental health visit or a dental visit, as defined.

Position: Support

<u>SB 228</u> (Jackson D) Master Plan on Aging.

Status: Signed by the Governor 10/11/2019. Chaptered by Secretary of State. Chapter 14, Statutes of 2019.

Summary: By executive order, the Governor ordered that a master plan for aging be developed and issued to serve as a blueprint to implement strategies and partnerships that promote healthy aging and prepare the state for upcoming demographic changes. The executive order requires the Secretary of the California Health and Human Services Agency to convene a Cabinet-level Workgroup for Aging to advise the secretary in developing and issuing the master plan. This bill would require the secretary, in coordination with the Director of the California Department of Aging, to lead the development and implementation of the master plan established pursuant to that executive order.

Position: Watch

<u>SB 331</u> (Hurtado D) Suicide prevention: strategic plans.

Status: 2 year bill. Last location- Assembly Appropriations Committee.

Summary: The California Suicide Prevention Act of 2000 authorizes the State Department of Health Care Services to establish and implement a suicide prevention, education, and gatekeeper training program to reduce the severity, duration, and incidence of suicidal behaviors. This bill would require counties to create and implement, and update every 3 years, a suicide-prevention strategic plan that places particular emphasis on preventing suicide in children who are less than 19 years of

age and includes specified components, including long-term suicide-prevention goals and the selection or development of interventions to be used to prevent suicide.

Position: Work with Author

<u>SB 389</u> (<u>Hertzberg</u> D) Mental Health Services Act.

Status: Signed by the Governor 8/302019. Chaptered by Secretary of State. Chapter 209, Statutes of 2019.

Summary: Would amend the Mental Health Services Act to authorize the counties to use MHSA moneys to provide services to persons who are participating in a presentencing or post-sentencing diversion program or who are on parole, probation, post-release community supervision, or mandatory supervision. By authorizing a new use of continuously appropriated moneys, this bill would make an appropriation. The bill would state the finding of the Legislature that this act is consistent with, and furthers the intent of, the Mental Health Services Act.

Position: Support

SB 428(Pan D) Pupil health: school employee training: youth mental and behavioral health.Status: Vetoed by the Governor 10/13/2019. Veto message attached.

Summary: Current law requires a school of a school district or county office of education and a charter school to notify pupils and parents or guardians of pupils no less than twice during the school year on how to initiate access to available pupil mental health services on campus or in the community, or both, as provided. This bill, contingent on an appropriation made for these purposes, would require the State Department of Education to identify an evidence-based training program for a local educational agency to use to train classified and certificated school employees having direct contact with pupils on youth mental and behavioral health, as specified.

Position: Support

<u>SB 539</u> (<u>Caballero</u> D) Mental Health Services Act: workforce education and training funds. Status: Held under submission 5/16/2019.

Summary: Would amend the Mental Health Services Act by requiring the Controller, in any fiscal year in which the Department of Finance estimates that the revenues to be deposited into the Mental Health Services Fund for the fiscal year will exceed the base amount of \$1,900,000,000, to, no later than the last day of each month and before any transfer or expenditure from the fund for any other purpose for the following month, reserve in the fund an amount that is equal to 15% of 1/12 of the estimated amount of increased revenue for the fiscal year, except as specified.

Position: Co-Sponsor

<u>SB 582</u> (Beall D) Youth mental health and substance use disorder services.

Status: 2 year bill. Last location- Assembly Appropriations Committee.

Summary: Would require the Mental Health Services Oversight and Accountability Commission, when making grant funds available on and after July 1, 2021, to allocate at least 1/2 of those funds to youth services, as specified, if moneys are appropriated for this purpose. The bill would require this funding to be made available to support prevention, early intervention, and direct services, as determined by the commission. The bill would require the commission, in consultation with the Superintendent of Public Instruction, to consider specified criteria when determining grant recipients would authorize the commission to allocate the funds towards other purposes if there is an inadequate number of qualified applicants, as specified. The bill would require the commission to provide a status report to the fiscal and policy committees of the Legislature, as specified, no later than March 1, 2022.

Position: Support

<u>SB 665</u> (<u>Umberg</u> D) Mental Health Services Fund: county jails.

Status: 2 year bill. Last location- Assembly Health Committee.

Summary: Current law prohibits Mental Health Services Act (MHSA) funds from being used to pay for persons incarcerated in state prison or parolees from state prisons. The 2011 Realignment Legislation addressing public safety and related statutes, requires that certain specified felonies be punished by a term of imprisonment in a county jail, rather than the state prison, and provides for mandatory supervision, a period of suspended execution of a concluding portion of the sentence that is supervised by the county probation officer. This bill would, until January 1, 2023, authorize a county to use MHSA funds, if that use is included in the county plan, to provide services to persons who are incarcerated in a county jail or subject to mandatory supervision, except persons who are incarcerated in a county jail for a conviction of a felony unless for purposes of facilitating discharge.

Position: Oppose

<u>SB 744</u> (<u>Caballero</u> D) Planning and zoning: California Environmental Quality Act: permanent supportive housing.

Status: Signed by the Governor 9/26/2019. Chaptered by Secretary of State. Chapter 346, Statutes of 2019.

Summary: CEQA requires a lead agency to prepare a mitigated negative declaration for a project that may have a significant effect on the environment if revisions in the project would avoid or mitigate that effect and there is no substantial evidence that the project, as revised, would have a significant effect on the environment. Current law authorizes the court, upon the motion of a party, to award attorney's fees to a prevailing party in an action that has resulted in the enforcement of an important right affecting the public interest if 3 conditions are met. This bill would specify that a decision of a public agency to seek funding from, or the department's awarding of funds pursuant to, the No Place Like Home Program is not a project for purposes of CEQA.

Position: Support



OCT 1 2 2019 OFFICE OF THE GOVERNOR

To Members of the California Assembly:

I am returning Assembly Bill 258 without my signature.

This will would authorize the Department of Health Care Services (DHCS) to redirect cannabis tax funds generated under Proposition 64 to in-school support services grant for local educational agencies, administered by the California Department of Education.

I support increased access to mental health prevention, early intervention, and support programs in schools, which is why I worked with the Legislature to provide an additional \$50 million for those programs.

While well intentioned, this bill, however, attempts to change the fund allocation process specified by Proposition 64. DHCS has already directed these funds toward expanding access to child care, which is one of our shared priorities and a commitment reflected in this year's budget deal. Additionally, Proposition 64 does not authorize the Legislature to modify the fund allocation process by July 1, 2028.

Sincerely Gavin Newsom



OFFICE OF THE GOVERNOR

OCT 1 3 2019

To the Members of the California State Assembly:

I am returning Assembly Bill 512 without my signature.

This bill would require each county mental health plan to meet mental health disparities reduction targets developed by the Department of Health Care Services and imposes additional reporting requirements and processes on county mental health plans.

Although I support the intent and efforts of this bill to reduce mental health disparities, the new requirements imposed by this bill would result in significant General Fund cost pressures that are better considered through the state's annual bydget process.

Sincerel Gavin Newsom



OFFICE OF THE GOVERNOR

OCT 1 3 2019

To the Members of the California State Senate:

I am returning Senate Bill 10 without my signature.

This bill would require the Department of Health Care Services (DHCS) to establish a new state certification program for mental health and substance use disorder peer support specialists.

Peer support services can play an important role in meeting individuals' behavioral health care needs by pairing those individuals with trained "peers" who offer assistance with navigating local community behavioral health systems and provide needed support. Currently, counties may opt to use peer support services for the delivery of Medicaid specialty mental health services.

As the Administration, in partnership with the Legislature and counties, works to transform the state's behavioral health care delivery system, we have an opportunity to more comprehensively include peer support services in these transformation plans. I look forward to working with you on these transformations efforts in the budget process and future legislation, as improving the state of the state's behavioral health system is a critical priority for me.

This proposal comes with significant costs that should be considered in the

budget procest Since/ely, vin Newso



OFFICE OF THE GOVERNOR

OCT 1 3 2019

To Members of the California State Senate:

I am returning Senate Bill 428 without my signature.

This bill would require the California Department of Education (CDE) to identify an evidence-based training program on youth mental health for Local Educational Agencies (LEAs) to use to train classified and certificated employees who have direct contact with students at each school site.

Providing support for students facing mental health is of critical importance. Multiple public agencies beyond CDE hold a responsibility for addressing the mental health crisis impacting young people today. That is why I worked with the Legislature to appropriate \$50 million in this year's budget to create the Mental Health Student Services Act.

Mental health partnerships among county mental health or behavioral health departments, school districts, charter schools and county offices of education are best positioned to address the diverse mental health needs of young

people. Sinceraly Gavin Newso