

California Behavioral Health Planning Council

Legislation Committee Agenda

Wednesday, January 16, 2019

Holiday Inn San Diego Bayside

4875 North Harbor Drive, San Diego, CA 92106

Catalina/Silvergate Room

1:30 pm to 5:00 pm

Conference Call-in: 1-866-742-8921

Participant Code: 5900167

- | | | |
|----------------|---|--------------|
| 1:30 pm | Welcome and Introductions
<i>Monica Wilson, Chairperson</i> | |
| 1:35 pm | Change of Officers
<i>Monica Wilson, Chairperson</i> | |
| 1:40 pm | Approve October and November Meeting Minutes
<i>Monica Wilson, Chairperson</i> | Tab 1 |
| 1:50 pm | Legislative Update
<i>Naomi Ramirez, Committee Staff</i> | Tab 2 |
| 2:00 pm | 2019 CBHDA Legislative Priorities
<i>Mary Adèr, CBHDA Deputy Director, Legislative Affairs</i> | Tab 3 |
| 2:45 pm | Break | |
| 3:00 pm | 2019 CASRA Legislative Priorities
<i>Chad Costello, Vice President of Policy, MHALA (Representing CASRA)</i> | Tab 4 |
| 3:45 pm | Review of Collateral Partner's 2019 Policy Platforms and Legislative Priorities
<i>Naomi Ramirez, Committee Staff and All Members</i> | Tab 5 |
| 4:00 pm | Legislation Committee Policy Platform Discussion
<i>Monica Wilson, Chairperson and All Members</i> | Tab 6 |
| 4:30 pm | Request for Letter of Support for SSI Increase
<i>Monica Wilson, Chairperson</i> | Tab 7 |
| 4:40 pm | Adult Residential Facility Project Update
<i>ARF Workgroup Members</i> | Tab 8 |
| 4:50 pm | Public Comment | |
| 4:55 pm | Wrap Up/Next Steps | |

If reasonable accommodations are required, please contact the Council at (916) 323-4501 not less than 5 working days prior to the meeting date.

California Behavioral Health Planning Council

Legislation Committee Agenda

5:00 pm

Adjourn

The scheduled times on the agenda are estimates and subject to change.

Legislation Committee Members

Monica Wilson, Chairperson

Gerald White, Chair-Elect

Catherine Moore

Barbara Mitchell

Daphne Shaw

Marina Rangel

Simon Vue

Deborah Starkey

Darlene Prettyman

Monica Nepomuceno

Noel O'Neill

Patricia Bennett

Raja Mitry

Robert Blackford

Veronica Kelley

Susan Wilson

Gail Nickerson

If reasonable accommodations are required, please contact the Council at (916) 323-4501 not less than 5 working days prior to the meeting date.

**California Behavioral Health Planning Council
Legislation Committee
Wednesday, January 16, 2019**

Agenda Item: Approve October and November Meeting Minutes

Enclosures: October and November 2018 Meeting Minutes

How This Agenda Item Relates to Council Mission

The CBHPC evaluates the behavioral health system for accessible and effective care. It advocates for an accountable system of responsive services that are strength-based, recovery-oriented, culturally and linguistically competent, and cost-effective. To achieve these ends, the Council educates the public, the behavioral health constituency, and legislators.

The minutes are a means to document and archive the activities and/or discussions of the Advocacy Committee in its efforts to move the Council's mission and vision forward.

Background/Description:

The Committee members are to discuss any necessary edits and vote on the acceptance of the draft minutes presented for the October and November 2018 meetings.

Motion: Accept and approve the October and November 2018 Legislation Committee Minutes.

Members Present:

Darlene Prettyman, Chair-Elect	Catherine Moore	Barbara Mitchell
Daphne Shaw	Gerald White	Deborah Starkey
Monica Nepomuceno	Noel O'Neill	Raja Mitry
Robert Blackford	Susan Wilson	Gail Nickerson

Meeting Commenced at 1:30 p.m.

Item #1 **Approve June Meeting Minutes**

The committee members reviewed the June 2018 meeting minutes. A motion to approve the minutes was made by Catherine Moore and seconded by Robert Blackford. The motion passed.

Action/Resolution

Naomi Ramirez will facilitate the posting of the minutes to the committee webpage.

Responsible for Action-Due Date

Naomi Ramirez-January 2019

Item #2 **Proposed Amendments to the Public Charge Rules**

Liz Oseguera requested time to discuss the proposed amendments to the Public Charge Rules and ultimately for the Council to submit a comment letter. A brief overview of the Public Charge Rules and the proposed amendments were provided. It was determined that there would not be enough time for a full presentation and the committee would not be able to take action since the item was not on the agenda. The members requested for the item to be placed on the agenda for the next committee meeting. It was determined the next meeting would be November 15, 2018 since the public commenting period closes December 10, 2018.

Action/Resolution

Naomi Ramirez will prepare for November 15th meeting and include presentation from Liz Oseguera on the agenda.

Responsible for Action-Due Date

Naomi Ramirez- November 2018

Item #3 **Year-End Legislation Update**

Naomi Ramirez provided the Year-End Legislation Report and discussed the content. The following were highlights from the discussion:

- AB 2316 (Eggman) Mental Health: county patient's rights advocates: training materials
 - Co-sponsored by the Patient's Rights Committee
 - Signed by the Governor 9/26/18
- AB 2317 (Eggman) Whistleblower protection: county patient's rights advocates
 - Co-Sponsored by the Patient's Rights Committee
 - Vetoed by the Governor 9/19/18
- SB 906 (Beall) Mental health services and substance use disorder treatment: peer support specialist certification
 - Council sent multiple letters of support and a request for Governor's signature
 - Vetoed by the Governor 9/29/18
- SB 1004 Mental Health Services Act: prevention and early intervention
 - Council sent multiple letters of opposition and met with the Governor's office to express the members concerns
 - Signed by the Governor 9/27/18

Committee members discussed the outcomes of the legislation included in the report and were disappointed that SB 906 was not signed by the Governor. The committee is very interested in supporting efforts for peer certification in the next legislative session.

Action/Resolution

N/A

Responsible for Action-Due Date

N/A

Item #4 **Nomination of 2019 Committee Chair-Elect**

Committee members discussed the need to nominate a Chair-Elect for the committee. The roles and responsibilities of the Chairperson and Chair-Elect were discussed. There were inquiries on the attendance requirements for committee officers. Members

expressed concern over the current Chairperson's availability for the Legislation and Executive committees meetings and responsibilities. Additionally, members stressed the importance of consistent attendance to ensure the committee officers are up to date on the committee's work. Gerald White was nominated and agreed to serve as the 2019 committee Chair-Elect.

Action/Resolution

N/A

Responsible for Action-Due Date

N/A

Item #5 Effective Advocacy on Legislation Presentation

Mary Adèr, CBHDA Deputy Director of Legislative Affairs, presented on the state's legislative and budget processes. The presentation provided the committee with an overview of both processes with a focus on effective advocacy.

Highlights from the presentation are outlined below:

- California has a very active legislature.
 - 5,000 bills introduced last legislative session.
- California has a full time legislature- not all states do.
- Bills have to be in print for 30 days prior to any action being taken, as notice to public.
 - Spot bills are often introduced as placeholder and actual language inserted after 30 days.
- Policy Committee hearings typically occur in April and May.
- Bills are moved to the Suspense File if the bill would cost more than \$150K in general funds
- Many bills live/die in Appropriations Committee
 - often used by houses (assembly, senate and federal government) to kill/quiet/slow down/modify bills
- 2-year bills allow two years to make the journey through the legislative process
 - Often "troubled" legislation and big reform efforts
- Deadline for bill introduction is usually 2nd or 3rd week of February
- Trailer bills are to address laws to enact changes to the budget
- Legislative Counsel Digest is provided on first page of bills
 - It is one attorney's perception and may be incorrect
 - Full bill should always be read

- Best way to advocate is through the Policy Committee process
 - Letters of support or opposition can be written to the governor, committee, legislature, authors and sponsors
 - Verbal public comment at hearings
- Capitol Tracker is a good tool to keep track of changes to bills
- Governor has 30 days to sign/veto a bill or it automatically becomes law
- Governor's budget is proposed in January
 - Changes provided in May Revision

CBHDA is currently working on identifying legislative priorities for 2019 and will share in the future.

Action/Resolution

N/A

Responsible for Action/Due Date

N/A

Item #6 Committee Charter

Darleen Prettyman facilitated a conversation on the committee charter. All members reviewed the draft and feedback was provided. The following edits were requested:

- Wordsmithing to the overview and purpose section.
- Adding standing meeting times for in-between meetings (3rd Thursday of every month- as needed from 2:00 pm-3:00 pm).
- Replace LC with Legislative Committee throughout the document.

Catherine Moore made a motion to approve the Legislation Committee Charter with the edits discussed. The motion was seconded by Susan Wilson and passed.

Action/Resolution

Naomi Ramirez will incorporate the requested edits. The finalized charter will be posted to the committee's webpage.

Responsible for Action/Due Date

Naomi Ramirez-January 2019

Item #7 **Adult Residential Facility Project Discussion**

Jane Adcock facilitated a conversation about the next steps for Adult Residential Facility (ARF) Project. Jane recommended that members of the Legislation (LC) and Housing and Homelessness Committee (HHC) work together with the Council staff to host a symposium. The purpose of the event would be to bring together subject matter experts to start the work on the project. The committee voted to form a workgroup at this time and revisit the idea of a symposium later, if identified as needed by the workgroup. Additionally, the committee requested that a consultant be hired to assist with the project.

The workgroup will be comprised of members from the LC and HHC. The following LC members are interested in participating in the workgroup:

- Susan Wilson
- Noel O'Neill
- Darlene Prettyman
- Barbara Mitchell
- Deborah Starkey

The Housing and Homelessness Committee will discuss the project during their meeting and identify members from their committee to participate.

The committee identified the following partners that should also be included in the workgroup:

- Department of Social Services (Community Care Licensing)
- Department of Health Care Services (Whole Person Care Lead)
- CBHDA
- Department of Finance
- Regional Centers
- CALBHBC
- Client(s) with lived experience with an ARF

The purpose of the workgroup will be to address the following:

- Financial Barriers
 - Explore options including potentially adopting a model similar to the Developmental Disability Model
 - Individuals are assessed and categorized according to needs. Subsidies paid according to the assessed level of care.
 - Possible funding source could be augmentation of State Supplementary Payment (SSP) benefit depending on level of need.

- End product may include funding proposals.
- Regulatory Barriers
 - Compile a list of the barriers and determine basis of the regulations.
 - Work with the Department of Social Services on potential changes to regulations.
 - End product may include legislative and regulatory proposals.

Action/Resolution

Jane Adcock will ask for approval to hire a consultant to facilitate the project at the next Executive Committee meeting in November 2018.

Responsible for Action/Due Date

Jane Adcock- November 2018

Item #8 Work Plan Development

Naomi Ramirez provided an overview of the enclosures included for the agenda item. The committee decided that they would like to focus on reviewing/taking positions on legislation and working with the HHC on the ARF Project. Additionally, the committee will also support any of the Workforce and Employment Committee's efforts in securing WET funding.

Action/Resolution

N/A

Responsible for Action/Due Date

N/A

Item #9 Public Comment

Mandy Taylor from Health Access suggested the Behavioral Health Equity Collaborative as a potential presenter for the Legislation Committee in the future.

Item #10 Wrap Up: Report Out/Evaluate

The committee requested for presentations on other organization's legislative priorities at the January Meeting. Members suggested the following organizations:

- CBHDA
- Steinberg Institute
- CASRA

Action/Resolution

Naomi Ramirez will arrange presentations for the January 2019 Legislation Committee meeting.

Responsible for Action/Due Date

Naomi Ramirez- January 2019

Members Present:

Monica Wilson, Chairperson Darlene Prettyman, Chair-Elect
Deborah Starkey Noel O'Neill Raja Mitry Susan Wilson

Meeting Commenced at 2:00 p.m.

Item #1 Proposed Changes to the Public Chare Rules

Liz Oseguera presented an overview of the Public Charge Rules and the proposed amendments to the rules. The purpose of the presentation was to inform the Council of the proposed changes and request for the Council to submit a comment letter.

Highlights from the presentation are outlined below:

- Public Charge is a term used in immigration law to describe an individual that is dependent on the government for financial or material support.
- Public Charge Rules are applied to the applications of individuals attempting to enter/re-enter the country or obtain a green card/permanent residency status.
 - Determination is an estimate based on whether an individual is likely to become a Public Charge.
- Public benefits currently included in the Public Charge determination are Tax Assistance for Income Maintenance and Institutionalization for Long Term Care and Government Assistance.
 - Temporary Assistance for Needy Families (TANF)
 - Supplemental Security Income (SSI)
- Under new proposed regulations the term would describe an individual using/receiving 1 or more public benefits.
 - Non-cash medical, housing and food benefits, including Medi-Cal
 - Excludes emergency and school based Medi-Cal
- Rules projected to impact an estimated of 5 million people
 - Refugees are exempt
 - Creating much fear in the communities
- Discourages individuals from seeking the needed care for medical needs, including behavioral health.
 - Potential community health hazard
- Public comment period closes December 10, 2018.

Action/Resolution

The committee was very interested in submitting a comment letter on behalf of the Council, however there was not a quorum for the committee to take action. The committee requested that Naomi Ramirez send the resources, provided by Liz including template letters, out to all Council members informing them of the opportunity to submit personal comment letters.

Responsible for Action-Due Date

Naomi Ramirez- November 2018

Item #2 Scope of Work for the ARF Consultant

Naomi Ramirez facilitated a conversation with the committee members to obtain input for the scope of work that staff will be developing for the requested ARF Project consultant. Information obtained from Barbara Mitchell prior to the meeting was also discussed.

The committee agreed the following included in the scope of work:

- Obtain information from the State on numbers of residents in adult residential care with serious mental illness.
 - Look at the types of physical disabilities that these clients have in addition to serious mental illness and possibly co-occurring substance use disorders.
- Analyze the system of determination of levels of care/ levels of need for people with developmental disabilities and how this was determined.
- Research regulations from Community Care Licensing (CCL) on operation of adult residential care
- Review possible changes to regulations to allow more services outside adult residential care, or possibly changes to regulations that would make it easier to operate adult residential care.
 - Example: Delivery of services to people in adult residential care who are insulin-dependent and unable to handle their own blood testing.
- Review how rates are set for State Supplementary Payment (SSP)
 - Primarily at the state level for the state portion and what portion of people on SSI are currently getting the board and care rate, which is higher than the independent living rate.
- Provide financial modeling.
- Excellent technical writing skills.

Additionally, the committee agreed the consultant hired should have no ties to the industry to insure that there is no conflict of interest.

Action/Resolution

Naomi Ramirez will ensure that Jane Adcock receives the input prior to the November 2018 Executive Committee meeting.

Responsible for Action-Due Date

Naomi Ramirez- November 2018

Item #3 **Request for Letter of Support for SSI Increase**

During General Session of the October 2018 meeting, a member of the public, Barbara Wilson, requested that the Council submit a letter of support for an expedited plan by the California Legislature to increase the SSI rate. Barbara intended to take the letter to the Disabilities Caucus and garner support within the Democratic Party at E-Board (November 16-18, 2018). A letter was drafted by staff with the intent to be sent immediately following the meeting.

Action/Resolution

There was not a quorum for the committee to take action, therefore the drafted letter will not be sent to Barbara Wilson. Committee members requested that the agenda item be revisited at the January 2019 meeting.

Responsible for Action-Due Date

Naomi Ramirez- January 2019

Item #9 **Public Comment**

There was no public comment.

Item #10 **Wrap Up/Next Steps**

Committee members briefly reviewed the actions decided upon during the meeting.

Action/Resolution

Naomi Ramirez will include the request for a letter of support for an SSI Increase on the January 2019 meeting agenda and minutes from this meeting will be provided in the January 2019 meeting packet.

Responsible for Action/Due Date

Naomi Ramirez-January 2019

**California Behavioral Health Planning Council
Legislation Committee
Wednesday, January 16, 2019**

Agenda Item: Legislative Update

Enclosures: 2019 Tentative Legislative Calendar

2019 Legislation Committee Position Matrix

SB 10 (Beall) Fact Sheet and Letter of Support

SB 11 (Beall) Fact Sheet

SB 12 (Beall) Fact Sheet

AB 8 (Chu) Fact Sheet

How This Agenda Item Relates to Council Mission

The CBHPC evaluates the behavioral health system for accessible and effective care. It advocates for an accountable system of responsive services that are strength-based, recovery-oriented, culturally and linguistically competent, and cost-effective. To achieve these ends, the Council educates the public, the behavioral health constituency, and legislators.

The Council's 2019 Legislation Position Matrix documents the Council's effort to advocate for an adequate behavioral health system and assist in educating the public, behavioral health constituency, and legislators on issues that impact individuals with Serious Mental Illness (SMI) and Serious Emotional Disturbances (SED).

Background/Description:

On opening day of the new legislative session, members from the Senate and Assembly gathered to call for action on California's mental health crisis through a press conference. During the press conference four bills (SB 10, SB 11, SB 12, and AB 8) were introduced to increase and ensure mental health services and treatment.

Motion: To support SB 11, SB 12, and AB 8.

**California Behavioral Health Planning Council
2019 Legislation Committee Position Matrix**

Bill	Author	Summary	Position
AB 8	Chu	<p>AB-8 Pupil Health: Mental Health Professionals. This bill requires all K-12 campuses to have at least one mental health professional available for students, with a 600 student to one professional ratio requirement. Along with the legislation, Assembly member Chu will request \$100 million in new funding to ensure schools have enough resources to implement the mandate. This bill is building on Assembly member Chu's efforts last year, AB 2022, which requires all schools to provide students and parents with information about available mental health services biannually. Sponsors: Mental Health America of CA (MHAC)</p>	Pending
SB 10	Beall	<p>SB-10 Peer Provider Certification Act of 2019 This bill has two primary goals: (1) Requires the Department of Health Care Services (DHCS) to establish a certification program for peer providers with four distinct certification categories: peer, parent, transition-age, and family support specialist. Among other things, the program defines the range of responsibilities and practice guidelines for peer support specialists, specifies required training and continuing education requirements, determines clinical supervision requirements, and establishes a code of ethics and processes for revocation of certification.(2) Expresses the intent of the Legislature that the program will provide increased family support, a fuller continuum of wraparound services, and an individualized focus on clients to promote recovery and self-sufficiency. Sponsors: Steinberg Institute</p>	Support Letter Sent 12/13/18

**California Behavioral Health Planning Council
2019 Legislation Committee Position Matrix**

Bill	Author	Summary	Position
<u>SB 11</u>	Beall	<p>SB-11 Mental Health Parity. This bill prohibits a mental health plan or insurer that provides prescription drug benefits for the treatment of substance use disorders from imposing any prior authorization requirements on FDA-approved prescriptions. This bill also requires health plans and insurers to submit an annual report to the Department of Managed Health Care or the Department of Insurance to certify compliance with state and federal parity laws.</p>	Pending
<u>SB 12</u>	Beall	<p>SB-12 Youth Mental Health Drop-in Centers. This bill directs the Legislature to establish a series of at least 100 youth drop-in centers across the state to address the mental health needs of California youth. This bill also encourages the Legislature to allocate funding to establish these centers.</p>	Pending

**California Behavioral Health Planning Council
Legislation Committee
Wednesday, January 16, 2019**

Agenda Item: 2019 CBHDA Legislative Priorities

Enclosures: None

How This Agenda Item Relates to Council Mission

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This presentation is intended to assist the Legislation Committee with identifying key areas of focus within the behavioral health constituency. Additionally, it will assist the committee in identifying areas the Council can work with CBHDA to advocate for Californians with serious mental illness and promote a system of services that are accountable, accessible and responsive.

Background/Description:



Mary Adè, CBHDA Deputy Director, Legislative Affairs, will be discussing CBHDA's legislative priorities for the new legislative session. Mary is responsible for leading CBHDA's legislative work with a focus on mental health laws and policy. She has expertise in health financing, child welfare and federal health reform.

**California Behavioral Health Planning Council
Legislation Committee
Wednesday, January 16, 2019**

Agenda Item: 2019 CASRA Legislative Priorities

Enclosures: CASRA Brief 2019

CASRA on Workforce Issues

The Stories We Tell

How This Agenda Item Relates to Council Mission

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This presentation is intended to assist the Legislation Committee with identifying key areas of focus within the behavioral health constituency. Additionally, it will assist the committee in identifying areas the Council can work with CASRA to advocate for Californians with serious mental illness and promote a system of services that are accountable, accessible and responsive.

Background/Description:

Chad Costello, Vice President, Policy at Mental Health America of Los Angeles, is representing CASRA and presenting their public policy and legislative priorities for 2019. Chad is a member of CASRA and is responsible for identifying and analyzing local, state and federal legislation, regulations and policies affecting agency's various constituencies for Mental Health America Los Angeles.

**California Behavioral Health Planning Council
Legislation Committee
Wednesday, January 16, 2019**

Agenda Item: Review of Collateral Partner's 2019 Policy Platforms and Legislative Priorities

Enclosures: None

How This Agenda Item Relates to Council Mission

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Reviewing the policy platforms and legislative priorities of the Council's Collateral partners will assist the committee in identifying areas the Council can work with partners to advocate for Californians with serious mental illness and to promote a system of services that are accountable, accessible and responsive.

Background/Description:

Committee members will be given the opportunity to review and discuss the policy platforms and legislative priorities of multiple Council collateral partners. The review and discussion is intended to assist the committee in identifying top priorities across the behavioral health constituency. Additionally, it will assist the committee in identifying areas to partner with collateral partners.

The following organization's policy platforms/legislative priorities will be provided at the meeting:

- Steinberg Institute
- California Council of Community Behavioral Health Agencies (CBHA)
- CA Association of Local Behavioral Health Boards & Commissions (CALBHB/C)
- California Coalition for Mental Health (CCMH)

**California Behavioral Health Planning Council
Legislation Committee
Wednesday, January 16, 2019**

Agenda Item: Legislation Committee Policy Platform Discussion

Enclosures: CBHPC Policy Platform

How This Agenda Item Relates to Council Mission

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The CBHPC evaluates the behavioral health system for accessible and effective care. It advocates for an accountable system of responsive services that are strength-based, recovery-oriented, culturally and linguistically competent, and cost-effective. To achieve these ends, the Council educates the public, the behavioral health constituency, and legislators utilizing the Policy Platform as a guide.

Background/Description:

The Legislation Committee addresses public issues affecting the effectiveness of behavioral health programs and quality of life for persons living with mental illness. This includes increasing public mental health awareness through collaboration with local consumer advocacy agencies for access and improved quality of care, responding to proposed legislation, rulemaking and budget bills based on the CBHPC Policy Platform.

Historically, the Platform was renewed on an annual basis. The review and updating of the Platform has changed from annual to bi-annual to align with the California Legislative Cycle (two-year increments). As a new legislative session has begun, the Legislation Committee is responsible for review and proposing any amendments to the Policy Platform. The approved platform will be used for the next two years.

CALIFORNIA BEHAVIORAL HEALTH PLANNING COUNCIL
POLICY PLATFORM
January 2019 – December 2020

The California Behavioral Health Planning Council has federal and state mandates/duties to review State Plans, advocate for individuals with serious mental illness, children with severe emotional disturbance and other individuals with mental illnesses or emotional problems and to monitor the mental health services within the State.

The statements below are the Council's guiding policy principles.

1. Support proposals that embody the principles of the Mental Health Master Plan.
2. Support policies that reduce and eliminate stigma and discrimination.
3. Support proposals that address the human resources problem in the public behavioral health system with specific emphasis on increasing cultural diversity in efforts to reduce disparities and promote the employment of consumers and family members.
4. Support proposals that augment behavioral health funding, consistent with the principles of least restrictive care and adequate access, and oppose any cuts.
5. Support legislation that safeguards behavioral health insurance parity and ensures quality behavioral health services in health care reform.
6. Support expanding affordable housing and affordable supportive housing.
7. Actively advocate for the development of housing subsidies and resources so that housing is affordable to people living on Social Security Income (SSI)/Social Security Disability (SSD)/Social Security Disability Insurance (SSDI) and people with similar limited incomes.
8. Support expanding employment options for people with psychiatric disabilities, particularly processes that lead to certification and more professional status and establish stable career paths.
9. Support proposals to lower costs by eliminating duplicative, unnecessary, or ineffective regulatory or licensing mechanisms of programs or facilities.
10. Support initiatives that reduce the use of seclusion and restraint to the least extent possible.
11. Support adequate funding for evaluation of mental/behavioral health services.
12. Support initiatives that can reduce disparities and improve access to behavioral health services, particularly to unserved, underserved populations, and maintain or improve quality of services.

CALIFORNIA BEHAVIORAL HEALTH PLANNING COUNCIL
POLICY PLATFORM
January 2019 – December 2020

13. Oppose bills related to “Not In My Back Yard” (NIMBY) and restrictions on housing and siting facilities for providing behavioral health services.
14. Support initiatives that provide comprehensive health care and improved quality of life for people living with mental illness, and oppose any elimination of health benefits for low income beneficiaries, and advocate for reinstatement of benefits that have been eliminated.
15. Oppose legislation that adversely affects the principles and practices of the Mental Health Services Act.
16. Support policy that enhances the quality of the stakeholder process, improves the participation of consumers and family members, and fully represents the racial/cultural and age demography of the targeted population.
17. Support policies that require the increased use and coordination of data and evaluation processes at all levels of behavioral health services.
18. Support policies that promote appropriate services to be delivered in the least restrictive setting possible.
19. Support policies or legislation that promote the mission, training and resources for local behavioral health boards and commissions.
20. Support policies/initiatives that promote the integration of mental health, substance use disorders and physical health care services.

The policies below are issues of interest to the Council.

1. Support proposals that advocate for blended funding for programs serving clients with co-occurring disorders that include mental illness.
2. Support proposals that advocate for providing more effective and culturally appropriate services in the criminal and juvenile justice systems for persons with serious mental illnesses and/or children, adolescents, and transition-aged youth with serious emotional disturbances, including clients with co-occurring disorders.
3. Support proposals that specify or ensure that the behavioral health services provided to Assembly Bill 109 (AB109) populations are paid for with AB 109 funding.
4. Support the modification or expansion of curricula for non-mental health professionals to acquire competency in understanding basic behavioral health issues and perspectives of direct

CALIFORNIA BEHAVIORAL HEALTH PLANNING COUNCIL
POLICY PLATFORM
January 2019 – December 2020

Consumers across the age spectrum and family members and those from ethnic/racial/cultural populations.

5. Promote the definition of outreach to mean “patient, persistent, understanding, respectful and non-threatening contact” when used in context of engaging hard to reach populations.

6. Support policies, legislation or statewide initiatives that ensure the integrity of processes at the local behavioral health boards and commissions.

7. Support the modification or expansion of curricula for Behavioral Health professionals to fully encompass the concepts of wellness, recovery, resiliency, cultural and linguistic competence, cultural humility, and perspectives of consumers, family members and members of cultural communities.

DRAFT

**California Behavioral Health Planning Council
Legislation Committee
Wednesday, January 16, 2019**

Agenda Item: Request for Letter of Support for SSI Increase

Enclosures: None

How This Agenda Item Relates to Council Mission

The CBHPC evaluates the behavioral health system for accessible and effective care. It advocates for an accountable system of responsive services that are strength-based, recovery-oriented, culturally and linguistically competent, and cost-effective. To achieve these ends, the Council educates the public, the behavioral health constituency, and legislators.

Many individuals with Serious Mental Illness are SSI recipients and some no longer have family that is engaged. These factors often make placement at an Adult Residential Facility (ARF) impossible, resulting in a need to advocate for an increase across the board for all licensed ARF's primarily serving adults with mental illness.

Expected Outcome:

The committee is expected to decide whether or not the Council will submit a letter of support for an increase in the "SSI Rate".

Background/Description:

There was a request that the Council support an expedited plan by the California Legislature to increase the SSI rate during public comment at the Council's October 2018 General Session Meeting. The request was discussed at the committee's November meeting, however action could not be taken due to not having a quorum. Members requested that the item be revisited at this meeting.

The "SSI Rate" is a term commonly used for Board & Care Homes. In California this rate consists of federal funding from the Social Security Administration and a portion of state funding that is added.

A licensed Adult Residential Facility (ARF) is not allowed to charge a SSI recipient more than the SSI benefit amount. The Council has been informed that it is common to hear facilities say that

they do not accept the SSI Rate or refer to themselves as "Private" meaning they do not accept placement referrals for individuals that can only pay the SSI rate. One way some facilities get around that regulation is to refuse to touch the money and submit the bill to the family. The family then pays the bill and reimburses themselves for the majority of the bill from their loved one's SSI. In this way, technically the facility is not surcharging the client.

Potential Language for Letter of Support

The California Behavioral Health Planning Council acknowledges the proven value of the Adult Residential Facility (ARF) model for providing individuals with Serious Mental Illness (SMI) the housing and permanent supportive services they need. It is also recognized that there is currently a financial disparity between ARF's that serve the Regional Center clients at a minimum of twice the rate that is paid to those providers who service Adults with Serious Mental Illness. Given the current crisis in loss of Licensed Adult Facility beds, that serve primarily adults with Serious Mental Illness, due to the low rate of reimbursement set by the State of California Legislature, the Council supports an expedited plan by the California Legislature to increase the SSI rate.

California Behavioral Health Planning Council
Legislation Committee
Wednesday, January 16, 2019

Agenda Item: Adult Residential Facility (ARF) Project Update

Enclosures: None

How This Agenda Item Relates to Council Mission

The CBHPC evaluates the behavioral health system for accessible and effective care. It advocates for an accountable system of responsive services that are strength-based, recovery-oriented, culturally and linguistically competent, and cost-effective. To achieve these ends, the Council educates the public, the behavioral health constituency, and legislators.

The ARF project seeks to find more accessible and effective solutions for individuals with mental illness that are not able to obtain sustainable community housing options within the appropriate level of care following stays in acute in-patient treatment programs, hospitals, Short-Term Crisis Residential or Transitional Residential Treatment Programs and/or correctional institutions.

Background/Description:

At the October 2018 meeting, the committee voted to form a workgroup. The purpose of the workgroup is to address the following:

- Financial Barriers
 - Explore options including potentially adopting a model similar to the Developmental Disability Model
 - Individuals are assessed and categorized according to needs. Subsidies pay according to the identified level of care.
 - Augmentation of SSP benefits depending on level of need.
 - End product may include funding proposals.
- Regulatory Barriers
 - Compile a list of the barriers and determine basis of the regulations.
 - Work with the Department of Social Services on potential to changes to regulations.
 - End product may include legislative and regulatory proposals.

The workgroup will be comprised of members from the LC, the HHC and partners with subject matter expertise. The following members are interested in participating in the workgroup:

- Susan Wilson
- Noel O'Neill
- Darlene Prettyman
- Barbara Mitchell
- Deborah Starkey
- Lorraine Flores
- Steve Leoni
- Raja Mitry

Members of the workgroup will provide an update from the first workgroup meeting, which took place January 8, 2019.