

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

Introduced: 2/15/2019

Last Amend: 8/12/2019

Status: 8/12/2019-From committee chair, with author's amendments: Amend, and re-refer to committee. Read second time, amended, and re-referred to Com. on APPR.

Location: 7/2/2019-S. APPR.

SENATE APPROPRIATIONS, PORTANTINO, Chair

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

Sponsor

AB 451 (Arambula D) Health care facilities: treatment of psychiatric emergency medical conditions.

Introduced: 2/11/2019

Last Amend: 7/2/2019

Status: 8/12/2019-From committee: Be ordered to second reading pursuant to Senate Rule 28.8.

Location: 8/12/2019-S. SECOND READING

Summary: Would require a psychiatric unit within a general acute care hospital, a psychiatric health facility, or an acute psychiatric hospital that has accepted a person for the purpose of determining the existence of a psychiatric medical emergency condition, to provide emergency services and care to treat that person, regardless of whether the facility operates an emergency department, provided that specified criteria are met. These requirements would not apply to a state psychiatric hospital.

Position

Support

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

Introduced: 2/13/2019

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Last Amend: 7/3/2019

Status: 8/12/2019-In committee: Referred to APPR. suspense file.

Location: 8/12/2019-S. APPR. SUSPENSE FILE

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 competency assessment plan to address specified matters, including disparities in access, utilization, and outcomes by various categories, such as race, ethnicity and immigration status.

Position

Support

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

Introduced: 2/13/2019

Last Amend: 6/10/2019

Status: 6/24/2019-In committee: Referred to APPR. suspense file.

Location: 6/24/2019-S. APPR. SUSPENSE FILE

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 630 (Arambula D) Board of Behavioral Sciences: marriage and family therapists: clinical social workers: educational psychologists: professional clinical counselors: required notice: exemptions.

Introduced: 2/15/2019

Last Amend: 6/6/2019

Status: 6/25/2019-Read second time. Ordered to third reading.

Location: 6/25/2019-S. THIRD READING

Summary: Current law provides for the licensure and regulation of marriage and family therapists, educational psychologists, clinical social workers, and professional clinical counselors by the Board of Behavioral Sciences, which is within the Department of Consumer Affairs. A violation of these provisions is a crime. This bill, commencing July 1, 2020, would require those licensees and registrants, prior to initiating specified services, to provide a client with a specified written notice that the board receives and responds to complaints regarding services within the scope of the licensed practice and that the client may contact the board.

Position

Support

AB 770 (Garcia, Eduardo D) Medi-Cal: federally qualified health clinics: rural health clinics.

Introduced: 2/19/2019

Last Amend: 5/2/2019

Status: 6/4/2019-Failed Deadline pursuant to Rule 61(a)(8). (Last location was APPR. SUSPENSE FILE on 5/15/2019)

Location: 6/4/2019-A. 2 YEAR

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, in accordance with Medicare reasonable cost principles, and to the extent that federal financial participation is obtained, to providers on a per-visit basis that is unique to each facility. Current law prescribes the reimbursement rate methodology for establishing and adjusting the per-visit rate. This bill would require the methodology of the adjusted per-visit rate to exclude, among other things, a provider productivity standard. The bill would authorize an FQHC or RHC to apply for a rate adjustment for the adoption, implementation, or upgrade of a certified electronic health record system as a change in the scope of service.

Position

Support

AB 1322 (Berman D) School-based health programs.

Introduced: 2/22/2019

Last Amend: 7/8/2019

Status: 8/12/2019-In committee: Referred to APPR. suspense file.

Location: 8/12/2019-S. APPR. SUSPENSE FILE

Summary: Would require the State Department of Education to, no later than July 1, 2020, establish an Office of School-Based Health Programs for the purpose of, among other things, administering health-related programs under the purview of the State Department of Education and advising on issues related to the delivery of school-based Medi-Cal services in the state. The bill would authorize the office to form additional advisory groups, as specified, and would require the State Department of Education to make available to the office any information on other school-based dental, health, and mental health programs.

Position

Support

AB 1572 (Chen R) Mental health services: gravely disabled.

Introduced: 2/22/2019

Status: 4/9/2019-In committee: Set, second hearing. Hearing canceled at the request of author.

Location: 3/14/2019-A. HEALTH

Summary: Current law, for the purposes of involuntary commitment and conservatorship, defines "gravely disabled." This bill would change the definition of "gravely disabled" for these purposes to read, in part, a condition in which a person, as a result of a mental health disorder, is incapable of making informed decisions about, or providing for, the person's own basic personal needs for food, clothing, shelter, or medical care without significant supervision and assistance from another person and, as a result of being incapable of making these informed decisions, the person is at risk of substantial bodily harm, dangerous worsening of a concomitant serious physical illness, significant psychiatric deterioration, or mismanagement of essential needs that could result in bodily harm.

Position

Support

AB 1619 (Weber D) Mental health careers: funding.

Introduced: 2/22/2019

Last Amend: 4/11/2019

Status: 5/16/2019-In committee: Held under submission.

Location: 5/1/2019-A. APPR. SUSPENSE FILE

Summary: Would appropriate \$20,000,000 from the General Fund to the Office of Statewide Health Planning and Development for the purpose of reducing the shortage of, and disparity in, mental health services across the state by performing one or more of specified actions, including the recruitment and support of students enrolled in a postsecondary educational institution, who are from both an underrepresented group and a mental health professional shortage area, as defined, to pursue mental health careers.

Position

Support

ACR 98 (Wicks D) Mental health and substance use treatment.

Introduced: 6/4/2019

Status: 7/10/2019-From committee: Be adopted and re-refer to Com. on APPR. with recommendation: To Consent Calendar. (Ayes 15. Noes 0.) (July 9). Re-referred to Com. on APPR.

Location: 7/9/2019-A. APPR.

Summary: This measure would urge specified state departments and the Attorney General to use their authority to ensure that health care service plans and health insurers subject to their authority comply with the federal Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008.

Position

Support

SB 10 (Beall D) Mental health services: peer support specialist certification.

Introduced: 12/3/2018

Last Amend: 6/18/2019

Status: 7/3/2019-Coauthors revised. From committee: Do pass and re-refer to Com. on APPR. (Ayes 15. Noes 0.) (July 2). Re-referred to Com. on APPR.

Location: 7/3/2019-A. APPR.

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.

Introduced: 12/3/2018

Last Amend: 5/1/2019

Status: 5/17/2019-Failed Deadline pursuant to Rule 61(a)(5). (Last location was APPR. SUSPENSE FILE on 5/13/2019)(May be acted upon Jan 2020)

Location: 5/17/2019-S. 2 YEAR

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

SB 66 (Atkins D) Medi-Cal: federally qualified health center and rural health clinic services.

Introduced: 1/8/2019

Last Amend: 3/21/2019

Status: 7/3/2019-Coauthors revised. From committee: Do pass and re-refer to Com. on APPR. with recommendation: To consent calendar. (Ayes 15. Noes 0.) (July 2). Re-referred to Com. on APPR.

Location: 7/3/2019-A. APPR.

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

SB 389 (Hertzberg D) Mental Health Services Act.

Introduced: 2/20/2019

Status: 7/11/2019-Read second time. Ordered to consent calendar.

Location: 7/11/2019-A. CONSENT CALENDAR

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.

Introduced: 2/21/2019

Last Amend: 7/5/2019

Status: 7/5/2019-Read second time and amended. Re-referred to Com. on APPR.

Location: 7/5/2019-A. APPR.

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

SB 539 (Caballero D) Mental Health Services Act: workforce education and training funds.

Introduced: 2/21/2019

Last Amend: 4/11/2019

Status: 5/16/2019-May 16 hearing: Held in committee and under submission.

Location: 5/13/2019-S. APPR. SUSPENSE FILE

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

Support

SB 582 (Beall D) Youth mental health and substance use disorder services.

Introduced: 2/22/2019

Last Amend: 8/12/2019

Status: 8/12/2019-From committee with author's amendments. Read second time and amended. Rereferred to Com. on APPR.

Location: 7/10/2019-A. APPR.

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. The bill 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

SB 660 (Pan D) Postsecondary education: mental health counselors.

Introduced: 2/22/2019

Last Amend: 5/17/2019

Status: 6/26/2019-From committee: Do pass and re-refer to Com. on APPR. (Ayes 11. Noes 0.) (June 25). Re-referred to Com. on APPR.

Location: 6/26/2019-A. APPR.

Summary: Would require the Trustees of the California State University and the governing board of each community college district to establish a goal of having one full-time equivalent mental health counselor with an applicable California license per 1,500 students enrolled at each of their respective campuses to the extent consistent with state and federal law. The bill would define mental health counselor for purposes of this provision. The bill would require those institutions, on or before January 1, 2021, and every 3 years thereafter, to report to the Legislature how funding was spent and the number of mental health counselors employed on each of its campuses, as specified.

Position

Support