
MENTAL HEALTH COMMISSION PRESENTATION

LEGISLATIVE UPDATE



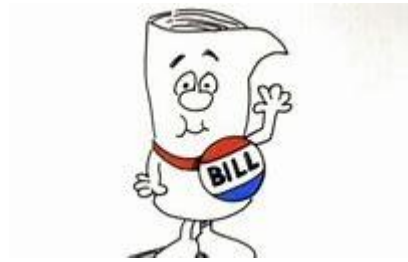
LOS ANGELES COUNTY
**DEPARTMENT OF
MENTAL HEALTH**
hope. recovery. wellbeing.

SB 803 (BEALL) : PEER SPECIALIST CERTIFICATION ACT OF 2020

- LA County Sponsored
- Requires the Department of Health Care Services (DHCS) to establish a certifying body by July 1, 2021 to provide a statewide certification and develop practice guidelines for peer support specialists.
- Requires DHCS to amend its Medicaid state plan and to seek any federal waivers or state plan amendments to implement the certification program.
- Peer support specialist are already used by 48 states and the US department of Veteran Affairs.

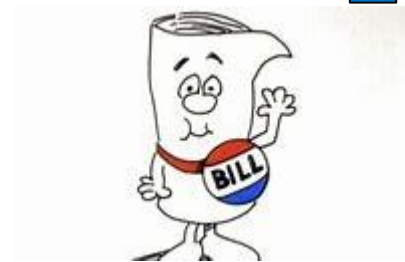
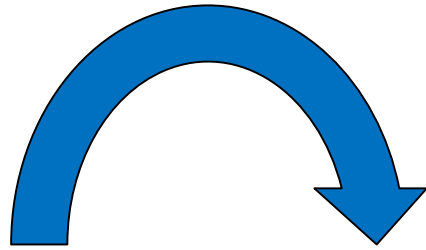
FOLLOW THAT BILL...





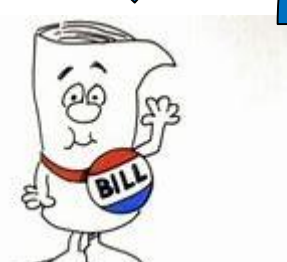
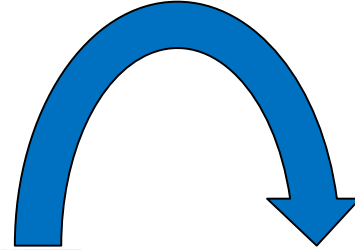
Suggestions for needed legislation from Residents, Organizations, Governor, Lobbyists.

- ❖ Los Angeles County, Steinberg Institute, CAMHPRO and CBHDA co-sponsor Senate Bill 803 (SB 803)



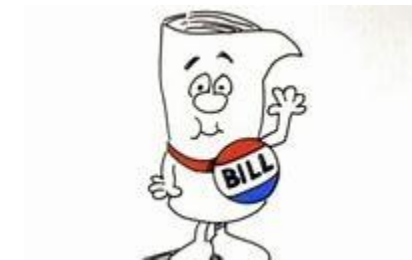
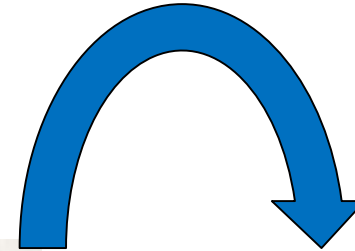
Legislative Bill introduced by elected official (Senator or Assemblymember)

- ❖ Senator Beall introduced SB 803



Legislative Bill is scheduled for hearing in committee of subject area.

- ❖ SB 803 passed out of the Health Committee.



Legislative Bill moves to Appropriations committee, all bills that have an annual cost of more than \$150,000 are voted on and put on a suspense file. There is a second vote to pass the bill out of Appropriations committee.

- ❖ SB 803 on consent agenda for Appropriations committee to put it on the suspense file. The Appropriations committee passed SB 803 unanimously.

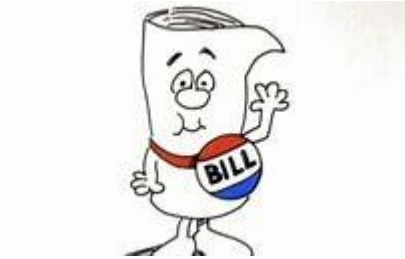


WE ARE HERE!!!



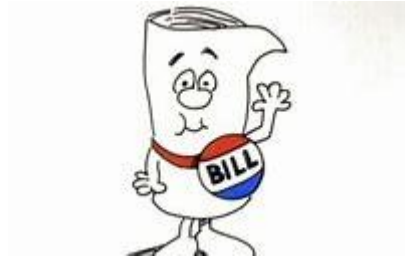
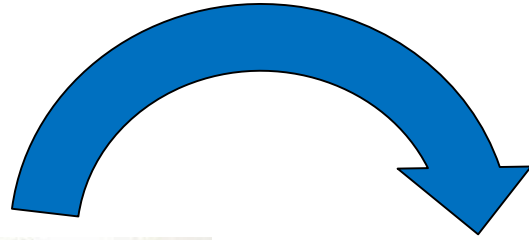
Legislative Bill moves to the Senate Floor for all Senators to vote on the bill.

- ❖ SB 803 passed off the Senate Floor on 6/24/20.

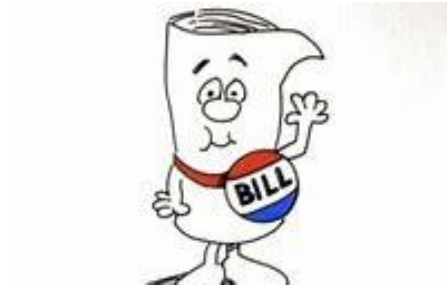
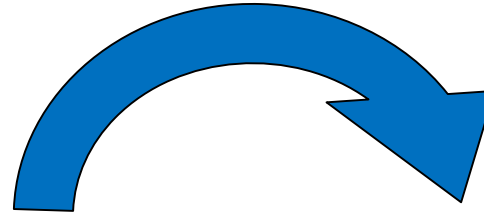


Legislative Bill is scheduled for hearing in committee of subject area.

- ❖ SB 803 will be scheduled for a hearing in the Assembly Health Committee



Legislative Bill moves to Appropriations committee, all bills that have an annual cost of more than \$150,000 are voted on and put on a suspense file. There is a second vote to pass the bill out of appropriations committee.



Legislative Bill moves to the Assembly Floor for all Assemblymembers to vote on the bill.





Legislative Bill reaches the Governor's desk.

The Governor has three choices. The Governor can sign the bill into law, allow it to become law without his or her signature, or veto it.

AB 2025 (GIPSON) MENTAL ILLNESS AND SUBSTANCE USE DISORDER: RESTORATIVE CARE PROGRAM PILOT

- LA County Sponsored
- Authorizes the LA County to establish a pilot project to develop a Restorative Care Program (RCP) for up to six years.
- The pilot project is for the provision of community-based care and treatment that addresses:
 - mental illness,
 - substance use disorder (SUD),
 - other medical comorbidities, and homelessness.

SB 855 (WIENER): HEALTH COVERAGE MENTAL HEALTH OR SUD

- LA County Support Position
- Updates existing state mental health parity laws with a requirement for health plans and disability insurers to provide coverage for medically necessary treatment of mental health and substance use disorders (SUD), under the same terms and conditions applied to medical conditions by January 1, 2021.
- The health plan must:
 - Cover out-of-network services, if any of the medically necessary services are not available in network within geographic and timeliness standards, as specified,
 - Avoid interrupting a course of treatment initiated out-of-network, unless otherwise specified,
 - Base any medical necessity determination or utilization review criteria.

ACCESS & EQUITY

- AB 2112: Suicide prevention (Ramos)
 - Authorizes the State Department of Public Health to establish the office of suicide prevention (OSP) to provide guidance and collect data on suicide prevention, focusing on high-risk populations.
- AB 1935 Veterans: Mental Health (Voepel)
 - Establishes a program to fund the study of mental health among women veterans in California.
 - Requires CalVet to report the findings of the study; should include demographics, an analysis of stressors, risk factors, treatment modalities, barriers to access, suicide rates, and other relevant factors.
- AB 2218: Transgender Wellness and Equity Fund (Santiago)
 - Establishes the Transgender Wellness and Equity (TWE) Fund within the Office of Health Equity in the Department of Public Health to fund grants to transgender-led organizations and hospitals, health clinics, and other medical providers providing gender non-conforming health care services.

ACCESS

- AB 2830 Health Care Payments Data Program (Wood)
 - Requires the Office of Statewide Health Planning and Development (OSHPD) to establish the Health Care Payments Data Program to implement, administer, and collect data for the Health Care Payments Data System.
- AB 2360: Telehealth: Mental health (Maienschein)
 - This bill would require health care service plans and health insurers, by January 1, 2021, to establish a telehealth consultation program that provides providers who treat children and pregnant and postpartum persons with access to a psychiatrist, in order to more quickly diagnose and treat children and pregnant and postpartum persons suffering from mental illness.
 - Requires health plans and insurers to communicate information relating to the telehealth program at least twice a year in writing.
 - Requires health plans and insurers to maintain records and data, as necessary.

MENTAL HEALTH SERVICES ACT

- AB 2265: Mental Health Services Act: use of funds for substance use disorder treatment (Quirk-Silva)
 - Provides flexibility for the use of Mental Health Services Act (MHSA) dollars to treat someone with a co-occurring substance use and mental health disorder.
 - The MHSA Community Program Planning process must be met prior to delivering services for those with co-occurring conditions through identifying the treatment of eligible population in the three-year MHSA program plan or annual update.
- AB 2576 Mental Health (Gloria)
 - Provides that MHSA funds subject to reversion are to be reallocated amongst counties and requires that consideration for the reallocated funds to provide services to individuals with mental illness who are also experiencing homelessness or who are involved in the criminal justice system and to provide early intervention services to youth.

ADULT RESIDENTIAL FACILITIES

- **AB 2377: Adult Residential Facilities: Closures and Resident Transfers (Chiu)**
 - Adult Residential Facilities (ARFs) are facilities that provide non-medical services to those between 18-59 that have been diagnosed with mental, physical, and developmental disabilities and could otherwise not live alone.
 - AB 2377 expands the protection for ARF residents by mandating advanced notification of closure to give enough time for residents to be transferred.

ASSISTED OUTPATIENT TREATMENT, INVOLUNTARY DETENTION, AND TELEHEALTH

- AB 1976 (Eggman) Mental Health Services: Assisted Outpatient Treatment
 - Updates Assisted Outpatient Treatment (AOT), also known as Laura's Law, to automatically enroll county mental health programs and has an option to 'opt-out' by publicly providing reasons for making that decision.
 - Repeals the January 1, 2022 sunset date of Laura's Law and makes the law permanent.
- AB 3242 (Irwin) Mental health: Involuntary Commitment
 - Authorizes the use of telehealth or other audio-visual technology for evaluation related to the involuntary commitment and treatment of individuals under the Lanterman-Petris-Short (LPS) Act.
- AB 2015 (Eggman) Certification for Intensive Treatment: Review Hearing
 - Authorizes the evidence presented in support of certification of an individual for involuntary detention under a 5250 hold to include information regarding the person's medical condition and how that condition bears on the certification of the person as either a danger to themselves or others or gravely disabled.
 - Requires the hearing officer to consider the information in the determination of probable cause for certification.

PHARMACY AND MEDICATION ASSISTED TREATMENT

- AB 2100 (Wood) Medi-Cal: Pharmacy Benefits
 - Requires the Department of Health Care Services (DHCS) to survey specialty drug price information for the purpose of determining the actual acquisition costs for specialty drugs for pharmacies as compared to the amount reimbursed by the Medi-Cal program,
 - Requires DHCS to provide a disease management payment to a pharmacy pursuant for the costs and activities associated with dispensing specialty drugs in an amount necessary to ensure beneficiary access, as determined by DHCS based on the results of the survey.
 - Repeals the Medi-Cal fee-for-service (FFS) limit of no more than six prescribed drugs per month and the statutory Medi-Cal copayments of \$1 per drug prescription or refill.
 - Requires DHCS to provide a Medi-Cal beneficiary with the opportunity to seek an Independent Prescription Drug Medical Review (IPDMR) for prescriptions that were modified, delayed, or denied.

PHARMACY AND MEDICATION ASSISTED TREATMENT

- AB 2983 Pharmacies: Automatic Refills (Holden)
 - Prohibits a pharmacy from automatically contacting a prescriber to authorize a prescription refill for any dangerous drug or device for more than a seven-day supply, without prior written authorization.
- AB 2876 Narcotic Treatment: Medication Assisted Treatments (Waldron)
 - Requires the DHCS to report to the Legislature specified information regarding the California Medication Assisted Treatment Program Expansion Project between January 1, 2022 to January 1, 2024.

WORKFORCE

- AB 2854 Board of Vocational Nursing and Psychiatric Technicians of the State of California (Committee on Business and Professions)
 - Requires The Board of Vocational Nursing and Psychiatric Technicians (BVNPT) to delegate to the executive officer the authority to adopt a decision entered by default and to adopt a stipulation for surrender of a license.