



DEPARTMENT OF MENTAL HEALTH

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DMH Legislative Report for the Behavioral Health Commission – April 27, 2026

This report provides a 2025-2026 Legislative Session summary including important upcoming dates. It also includes an updated list of DMH's priority bills and bills of interest introduced during this session. The Department will continue identifying and analyzing newly introduced legislation throughout the session and updates on our priority list of bills that may have an impact on our operations and the public mental health safety net.

Recent Departmental Advocacy Efforts

Shortly after the Governor released his January budget proposal, the Department made a recommendation to the CEO and the Board that the County oppose the Governor's proposal to make Mobile Crisis Response services a County-optional Medi-Cal benefit. The Department expressed its concern that this proposal will shift costs from the State down to the County, without any reason to believe that doing so would lead to improved outcomes for the County's residents. The Department is also concerned that the Governor's proposal, made while counties are expecting rising unreimbursed care costs as residents lose Medi-Cal due to the implementation of H.R. 1 and the State's 2025-2026 budget deal, will lead to the loss of these critical mobile crisis response services across the State. The County CEO and Board adopted DMH's recommendation, and the County is officially opposing the Governor's proposal regarding Mobile Crisis Response Services.

In early March, Departmental leadership, including Dr. Wong, participated in the California Behavioral Health Directors Association's (CBHDA) annual Lobby Day. During the event, DMH leadership participating in over a dozen meetings with Legislators and their staff to discuss high priority advocacy issues, including: the importance of streamlining the administrative process to allow individuals with SMI to be exempted from H.R. 1's work requirements as easily as possible, the importance of the State's behavioral health workforce development programs to address the diverse linguistic and cultural needs of LA County's communities, and to oppose the Governor's proposal to make Mobile Crisis Response services a County-optional Medi-Cal benefit. The meetings were very productive and the Department will continue to engage with our Sacramento legislators throughout the legislative year and budget season.

Last week Dr. Wong joined the Board of Supervisors as they visited with the County's Congressional representatives and met with various Administrative officials in Washington, D.C. During the visit Dr. Wong stressed the importance of repealing or easing the IMD Exclusion rule, which severely limits the County's supply of treatment beds. Dr. Wong also discussed the critical need for the Centers for Medicare and Medicaid to issue rules regarding the implementation of H.R. 1 that will provide States with flexibility in determining how to exempt individuals with serious mental illness from the bill's work and community engagement requirements. The meetings were productive and the Department will continue to engage with our Federal legislators and Administrative officials in the coming months as the Department prepares for the implementation of H.R. 1.

Priority Legislation

The analysis and status updates offered below should be considered preliminary and may be subject to change as bills go through committee and potential amendments in the 2026 legislative session.

- **SB 903 Mental Health Professionals: AI Intelligence (Padilla)**, amended on April 7, 2026, regulates the use of artificial intelligence by licensed professionals providing psychotherapy services. Prohibits an individual, corporation, or entity from using artificial intelligence to record or transcribe psychotherapeutic communications or sessions, or to triage or screen a person for the need for psychotherapy services unless the patient or their authorized representative is informed that artificial intelligence will be used and provides consent.

DMH Analysis: The Department is in the process of analyzing the impact of this bill on DMH programs.

DMH Recommendation: No recommendation yet.

County Position: No position taken yet.

CBHDA Position: Support.

Current Status: Referred to Senate Appropriations committee.

- **SB 989 Community Assistance, Recovery, and Empowerment (CARE) Court Program (Blakespear)**, amended on April 16, 2026, authorizes a first responder to contact the county behavioral health agency in the county in which the respondent resides to request that the agency file a petition to commence the CARE process. Requires the agency to review the request and determine whether to file a petition within 30 business days.

DMH Analysis: The amended version of the bill, April 16, 2026, gives the County Behavioral Health Department discretion to review the request and determine if filing a petition is necessary.

DMH Recommendation: Watch.

County Position: Watch.

CBHDA Position: Watch.

Current Status: Referred to Senate Appropriations committee.

- **SB 1016 Community Assistance, Recovery, and Empowerment (CARE) Court Program and court-ordered evaluations (Blakespear)**, amended on March 26, 2026, authorizes a petitioner of a CARE Act petition to request that the court order a mental health evaluation under the LPS Act if the petitioner believes that the person may not be willing or able to participate in the CARE process and a CARE plan or CARE agreement due to the severity of their mental disorder.

DMH Analysis: The Department is in the process of analyzing the impact of this bill on DMH programs.

DMH Recommendation: No recommendation yet.

County Position: No position taken yet.

CBHDA Position: Oppose.

Current Status: Referred to Senate Appropriations committee.

- **SB 1221 Lanterman-Petris-Short Act: conservatorships (Stern)**, amended on April 16, 2026, makes various changes to the conservatorship process, including prohibiting a court from determining a person has the ability to provide for their basic personal needs based on the fact that the person has temporary access to those basic personal needs while incarcerated.

DMH Analysis: The Department is in the process of analyzing the impact of this bill on DMH programs.

DMH Recommendation: No recommendation yet.

County Position: No position taken yet.

CBHDA Position: Oppose.

Current Status: Referred to Senate Appropriations committee.

- **SB 1242 Community Assistance, Recovery, and Empowerment (CARE) Court Program (Choi)**, amended on April 20, 2026, requires the court to allow the original petitioner to participate in the respondent's CARE program for the purpose of assisting in care coordination and providing relevant information to the CARE team, unless the court determines that it would likely be detrimental to the treatment or well-being of the respondent. Would authorize the court to limit or exclude participation by the original petitioner.

DMH Analysis: The Department is in the process of analyzing the impact of this bill on DMH programs.

DMH Recommendation: No recommendation yet.

County Position: No position taken yet.

CBHDA Position: Watch.

Current Status: Referred to Senate Judiciary committee.

- **SB 1373 Mental Health Diversion (Grove)**, amended on April 15, 2026, adds to the list of crimes for which a defendant is prohibited from being placed into a diversion program to include, among other things, human trafficking and child abuse, as specified. Also requires a defendant to have received a diagnosis of a mental illness within five years preceding the alleged crime in order to be eligible for mental health diversion.

DMH Analysis: The bill would impose unnecessary restrictions that are not evidence-based on mental health diversion and would likely reduce the number of people who are able to participate in beneficial mental health diversion programs.

DMH Recommendation: Concerns

County Position: No position taken yet.

CBHDA Position: Oppose.

Current Status: Referred to Senate Appropriations committee.

- **SB 1401 Criminal procedure: competence to stand trial (Stern)**, introduced on February 20, 2026, authorizes a county behavioral health agency and jail medical provider to share confidential

medical records and other relevant information with the court for the purpose of determining likelihood of eligibility for behavioral health services and programs.

DMH Analysis: The Department is in the process of analyzing the impact of this bill on DMH programs.

DMH Recommendation: No recommendation yet.

County Position: No position taken yet.

CBHDA Position: Watch.

Current Status: Referred to Senate Appropriations committee.

- **SB 1422 Medi-Cal: eligibility: immigration status (Durazo)**, introduced on February 20, 2026, makes an individual who is 19 years of age or older, who does not have satisfactory immigration status, eligible for the full scope of Medi-Cal benefits subject to certain limitations, such as the payment of premiums and certain dental benefits.

DMH Analysis: DMH recommends that the County support this bill because it will restore access to critical behavioral health services for LA County residents and will help ensure that the Department of Mental Health has the resources it needs to continue providing care and treatment to all County residents.

DMH Recommendation: Support.

County Position: Support.

CBHDA Position: No position taken yet.

Current Status: Referred to Senate Appropriations committee.

- **AB 46 Diversion (Nguyen)**, amended on February 13, 2026, requires that the diagnosis with a mental disorder be within 5 years before the alleged offense to be eligible for diversion.

DMH Analysis: The bill would impose unnecessary restrictions that are not evidence-based on mental health diversion and would likely reduce the number of people who are able to participate in beneficial mental health diversion programs.

DMH Recommendation: Oppose.

County Position: Oppose.

CBHDA Position: Oppose.

Current Status: Referred to Senate Appropriations committee.

- **AB 96 Mental Health Services: Peer Support Specialist Certification (Jackson)**, gut and amended on January 5, 2026, removes the requirement of possessing a high school diploma or equivalent degree from the requirements necessary for an applicant to receive peer support specialist certification.

DMH Analysis: The Department is in the process of analyzing the impact of this bill on DMH programs.

DMH Recommendation: No recommendation yet.

County Position: No position taken yet.

CBHDA Position: Sponsor.

Current Status: Passed out of Assembly and ordered to the Senate.

- **AB 1540 988 Suicide & Crisis Lifeline: LGBTQ+ Youth (Gonzalez)**, amended on March 19, 2026, require OES to request the federal Substance Abuse and Mental Health Services Administration (SAMHSA) to enable a press 3 function for calls originating in the State of California to allow callers to dial 988 and press “3” to be automatically routed to a specialized call center.

DMH Analysis: The bill would offer consistent 24/7 specialized LGBTQ+ crisis services to youth throughout the State of California, benefiting Los Angeles County residents who may be physically far from in person LGBTQ+ crisis resources.

DMH Recommendation: Support.

County Position: Support.

CBHDA Position: Support.

Current Status: Referred to Assembly Appropriations committee.

- **AB 1660 Public Guardians and Public Administrators (Schiavo)**, amended on April 9, 2026, authorizes a court to award sanctions of no less than \$1,000 per violation for fees paid and costs incurred for failure of a financial institution, government or private agency, retirement fund administrator, insurance company, licensed securities dealer, or other person to comply with these requirements.

DMH Analysis: The Department is in the process of analyzing the impact of this bill on DMH operations.

DMH Recommendation: No recommendation yet.

County Position: No position taken yet.

CBHDA Position: Support.

Current Status: Referred to Assembly Floor.

- **AB 1676 Mental health services: assisted outpatient treatment: involuntary medication (Stefani)**, amended on March 24, 2026, authorize the county behavioral health director, or their designee, to file a petition for an order authorizing the use of involuntary psychotropic medication independent of, or concurrently with, a petition for assisted outpatient treatment.

DMH Analysis: The Department is in the process of analyzing the impact of this bill on DMH operations.

DMH Recommendation: No recommendation yet.

County Position: No position taken yet.

CBHDA Position: Oppose.

Current Status: Referred to Assembly Health committee.

- **[AB 1825 Health care: state hospitals \(Krell\)](#)**, amended on April 16, 2026, requires that various factors be considered when determining whether an incarcerated person is an offender with a mental health disorder (OHMD) subject to treatment by the Department of State Hospitals (DSH) and requires an exit plan for an individual determined by the court to not pose a substantial risk of physical harm to others to include presumptive eligibility for a full service partnership.

DMH Analysis: The Department is in the process of analyzing the impact of this bill on DMH operations.

DMH Recommendation: No recommendation yet.

County Position: No position taken yet.

CBHDA Position: No position taken yet.

Current Status: Referred to Assembly Appropriations committee.

- **[AB 2275 Mental Health Diversion \(Bains\)](#)**, introduced on February 19, 2026, revises the eligibility requirement by prohibiting the court from finding the defendant eligible solely based on the defendant's diagnosis of a mental disorder and would additionally require the court to find that the defendant is not mentally incompetent.

DMH Analysis: The bill would impose unnecessary restrictions that are not evidence-based on mental health diversion and would likely reduce the number of people who are able to participate in beneficial mental health diversion programs.

DMH Recommendation: Concerns

County Position: No position taken yet.

CBHDA Position: Oppose.

Current Status: Referred to Assembly Public Safety committee.