An act to amend Section 5892 of, and to add Part 3.3 (commencing with Section 5832) of Division 5 of, the Welfare and Institutions Code, relating to mental health, and making an appropriation therefor.

LEGISLATIVE COUNSEL’S DIGEST

AB 1689, as amended, McCarty. College Mental Health Services Program.
Existing law, the Mental Health Services Act, an initiative statute enacted by the voters as Proposition 63 at the November 2, 2004, statewide general election, funds a system of county mental health plans for the provision of mental health services, as specified. Existing law provides for the operation and administration of various mental health programs by the Mental Health Services Oversight and Accountability Commission. Existing law establishes the continuously appropriated Mental Health Services Fund. Existing law requires the Controller, prior to distributing the balance of the funds to the counties, as specified, to reserve up to 5% of the total annual revenues of the fund for the costs for the State Department of Health Care Services, the California Behavioral Health Planning Council, the Office of Statewide Health Planning and Development, the Mental Health Services Oversight and Accountability Commission, the State Department of Public Health, and any other state agency to implement all duties pursuant to the programs set forth in the act.
This bill would amend Proposition 63 by appropriating $20,000,000 annually from the administrative account of the Mental Health Services Fund to the Board of Regents of the University of California, the Board of Trustees of the California State University, and the Board of Governors of the California Community Colleges, as specified, to implement the College Mental Health Services Program. The bill would require the commission, subject to appropriation by the Legislature, governing boards, as defined, to create a grant program for public community colleges, colleges, and universities college, college, and university campuses for the purpose of establishing or improving access to mental health services on those campuses, as specified. The bill would require campuses that have been awarded grants under these provisions to report annually on the use of those grant funds and to post that information on their internet websites. The bill would also require the commission each governing body to submit a report to the Legislature evaluating the impact of the program, as specified. The bill would require that evaluation to be conducted by a public or private research university or institute in this state and would require the Department of Finance to assist the commission governing bodies in issuing a request for proposal for that contract.


The people of the State of California do enact as follows:

1. SECTION 1. The Legislature finds and declares all of the following:
   (a) Students, faculty, health practitioners, and college administrators are reporting increased rates of mental health needs by students attending public colleges in California.
   (b) One in four students has a diagnosable mental illness and 40 percent of students do not seek mental health services when they need it.
   (c) Eight out of 10 people who experience psychosis have their first episode between 15 and 30 years of age.
   (d) The demand for mental health services by public college students far outpaces the ability of colleges to provide them. California public college campuses and higher education systems do not meet national staffing standards for psychiatric services and other mental health professionals.
The lack of services directly impacts college students’ success and academic performance, as well as their ability to develop socially as productive members of society. The effects of untreated mental health needs are long lasting and can include college students dropping out of school, experiencing homelessness, and dying of suicide. One in 10 college students has considered suicide and suicide is the second leading cause of death among college students; claiming more than 1,100 lives every year nationally. Research shows that for each dollar invested in student prevention and early intervention mental health services, California will see a return of at least $6 and up to $11 as a result of more students graduating. Under the Prevention and Early Intervention component of the Mental Health Services Act, subdivision (b) of Section 3706 of Title 9 of the California Code of Regulations states that at least 51 percent of the Prevention and Early Intervention Fund shall be used to serve individuals who are 25 years of age or younger. Since the approval of the Mental Health Services Act in 2004, there has been limited interaction between college campuses and county mental health departments. It is the purpose of this act to foster partnerships between counties and college campuses to better address the mental health needs of their students.

Part 3.3 (commencing with Section 5832) is added to Division 5 of the Welfare and Institutions Code, to read:

PART 3.3. COLLEGE MENTAL HEALTH SERVICES PROGRAM

5832. This part shall be known, and may be cited, as the College Mental Health Services Program Act.

5832.1. (a) Moneys shall be available, upon appropriation by the Legislature, to the Mental Health Services Oversight and Accountability Commission governing bodies of the University of California, California State University, and California Community Colleges to fund the grant program established pursuant to this part.

(b) It is the intent of the Legislature to authorize the governing bodies to allocate grant moneys to participating individual campuses to support various activities relating to mental health.
and to authorize these entities to allocate funds to provide training
to their campuses throughout the state on specified matters relating
to mental health.

5832.2. (a) The commission shall create a grant program for public community colleges, colleges, and universities, their respective campuses, in collaboration with county behavioral health departments, to establish or improve access to mental health services and early identification or intervention programs. These funds shall be used for, but are not limited to use for, the purpose of contracting with independent public or private entities to provide mental health services. The commission shall establish grant program guidelines and shall develop a request for application (RFA). The RFA shall include, but not be limited to, all of the following:

1. Eligibility standards of applicants in order to qualify to be considered for a grant award.
2. Required program components to be included in the grant application, which may include, but are not limited to:
   (A) The ability of the program to meet the needs of students that cannot be met through existing funds.
   (B) The ability of the program to fund the matching component required by subdivision (f).
   (C) The ability of the campus, in partnership with the local county, to establish direct linkages for students to community-based mental health services.
   (D) The ability of the campus to address direct services, including, but not limited to, increasing staff-to-student ratios and decreasing wait times.
   (E) The ability to participate in evidence-based and community-defined best practice programs for mental health services improvements.
3. Preferred program or service components to be included in the grant application, which may include, but are not limited to:
   (A) The ability of the campus to serve underserved and vulnerable populations.
   (B) The ability of the campus, in partnership with the local county, to establish direct linkages for students to community-based mental health services for which reimbursement is available through the students’ health coverage.
(C) The ability of the campus to reduce racial disparities in access to mental health services.

(D) The ability of the campus to fund mental health stigma reduction activities.

(E) The ability of the campus to provide employees and students with education and training on early identification, intervention, and referral of students with mental health needs.

(F) The ability of the campus to screen students receiving other health care services and provide linkages to services from the appropriate mental health provider based on the health insurance status of that student, for those students who are shown to have a need for services.

(G) Evidence of an existing or planned partnership between the campus and the county behavioral health department to address complex mental health needs of students based on their health insurance status and based on the extent to which there are students whose needs cannot be met through their health plan, health insurance, or Medi-Cal.

(H) Evidence of an existing or planned partnership between the campus and local safety net providers to ensure linkages to primary care and community-based mental health care, regardless of the health insurance status of the student.

(4) Articulation of grant program goals and expected outcomes.

(5) Required reporting and evaluation standards to be met by applicants that are selected for a grant award.

(6) Timelines and deadlines for grant applications and anticipated funding award determinations.

(b) Colleges, Campuses, in collaboration with their local county behavioral health department, shall submit their grant application to the commission according to the guidelines adopted pursuant to subdivision (a).

(c) To the extent that an application follows the guidelines adopted pursuant to subdivision (a) and specifically states what activities shall be undertaken in accordance with those guidelines, the commission governing body shall have the authority to approve grant programs and shall award funding.

(d) Grants may be awarded to a community college district in the California Community College system, a campus within the California State University system, or a campus within the
University of California system, campus or a grouping of campuses within the segments.

(e) Total available grant funding to colleges, campuses, by segment, shall be proportional to the number of students served by that segment, but the commission governing board shall not award more than five—million hundred thousand dollars ($5,000,000) ($500,000) per campus, per application.

(f) Grants shall only be awarded to a campus that will provide an equal commitment of funds or other form of commitment match to be determined by the commission, governing body, in consultation with the applicant, based on resources and existing mental health needs of students from the campus or campuses. A commitment of funds may include in-kind funds, student health fee funds, after notification to the student association, and other appropriate funds as determined by the commission governing body and pursuant to the guidelines adopted pursuant to subdivision (a).

(g) Grants shall be awarded to applicants on a competitive basis based on their ability to meet the application standards and prioritization of these standards as determined by the commission governing body through the development of the RFA guidelines adopted pursuant to subdivision (a).

(h) Individual grant award allocations shall be expended over at least one year but not to exceed three years, as determined by the commission governing body through the grant award process.

(i) Costs associated with administering an approved program shall be limited to 5 percent of the total grant amount for any grantee. Administrative costs incurred by the commission governing body to administer this program shall not exceed 5 percent of the total funds annually.

(j) The funding provided pursuant to this part shall not be used to supplant existing campus, state, or county funds utilized to provide mental health services.

(k) The commission governing body shall provide technical assistance to smaller colleges campuses and county behavioral health departments, upon request, during the application process to ensure equitable distribution of the grant award.

(l) For purposes of this part, the following definitions apply:

(1) “Campus” means a community college district or an individual college or university.
(2) “Governing bodies” means the Board of Regents of the University of California, if the University of California chooses to accept the moneys to implement this program, the Board of Trustees of the California State University, and the Board of Governors of the California Community Colleges.

5832.3. (a) Community colleges, campuses in the California State University, and campuses in the University of California system campuses that have been awarded grants pursuant to this part shall report annually on the use of grant funds to the commission applicable governing body and post the annual report on the use of the funds on their internet websites. This report shall include, but not be limited to, all of the following:

1. (a) How grant funds and matching funds are being used.
2. (b) Available evaluation data, including outcomes of the campus mental health programs funded pursuant to the grant program.
3. (c) Program information regarding services being offered and the number of individuals being served.
4. (d) Plans for sustainability of mental health programming beyond the funding from this part.

(b) The campuses shall electronically submit the reports required pursuant to subdivision (a), annually, to the appropriate Chancellor’s offices and the University of California Office of the President.

5832.4. (a) Upon an appropriation of funds for the purposes of this section, the commission each governing body shall contract with a public or private research university or institute in this state to evaluate the program. The commission shall develop the research design and issue a request for proposal for a contract for the evaluation, with the assistance of the Department of Finance. The commission governing body shall develop an evaluation plan to assess the impact of the program.

(b) The commission Each governing body shall submit the final research design and request for proposal required by subdivision (a) to the chairperson of the Joint Legislative Budget Committee no more 30 days prior to executing a contract for the evaluation.
(c) The commission, Each governing body, in compliance with Section 9795 of the Government Code, shall submit the evaluation established in subdivision (a) to the Legislature by February 1, 2023, and annually thereafter by no later than February 1 of each year, evaluating the impact of the program and providing recommendations for further implementation. The commission governing body shall make the report available to the public and shall post the report on its internet website. The report shall include, but not be limited to, the following:

1. A financial accounting of all funds awarded, disbursed to grant recipients, and remaining to be allocated.
2. Available evaluation data, including outcomes of the mental health programs funded pursuant to the grant program.
3. Program information regarding services being offered and the number of individuals being served.
4. Plans for sustainability of mental health programming beyond the funding from the grant program.
5. A financial accounting of all administrative expenditures by the commission each governing body.

SEC. 3. Section 5892 of the Welfare and Institutions Code is amended to read:

5892. (a) In order to promote efficient implementation of this act, the county shall use funds distributed from the Mental Health Services Fund as follows:

1. In the 2005–06, 2006–07, and 2007–08 fiscal years, 10 percent shall be placed in a trust fund to be expended for education and training programs pursuant to Part 3.1 (commencing with Section 5820).

2. In the 2005–06, 2006–07, and 2007–08 fiscal years, 10 percent for capital facilities and technological needs shall be distributed to counties in accordance with a formula developed in consultation with the County Behavioral Health Directors Association of California to implement plans developed pursuant to Section 5847.

3. Twenty percent of funds distributed to the counties pursuant to subdivision (c) of Section 5891 shall be used for prevention and early intervention programs in accordance with Part 3.6 (commencing with Section 5840).

4. The expenditure for prevention and early intervention may be increased in any county in which the department determines
that the increase will decrease the need and cost for additional
services to persons with severe mental illness in that county by an
amount at least commensurate with the proposed increase.
(5) The balance of funds shall be distributed to county mental
health programs for services to persons with severe mental illnesses
pursuant to Part 4 (commencing with Section 5850) for the
children’s system of care and Part 3 (commencing with Section
5800) for the adult and older adult system of care. These services
may include housing assistance, as defined in Section 5892.5, to
the target population specified in Section 5600.3.
(6) Five percent of the total funding for each county mental
health program for Part 3 (commencing with Section 5800), Part
3.6 (commencing with Section 5840), and Part 4 (commencing
with Section 5850), shall be utilized for innovative programs in
accordance with Sections 5830, 5847, and 5848.
(b) (1) In any fiscal year after the 2007–08 fiscal year, programs
for services pursuant to Part 3 (commencing with Section 5800)
and Part 4 (commencing with Section 5850) may include funds
for technological needs and capital facilities, human resource
needs, and a prudent reserve to ensure services do not have to be
significantly reduced in years in which revenues are below the
average of previous years. The total allocation for purposes
authorized by this subdivision shall not exceed 20 percent of the
average amount of funds allocated to that county for the previous
five fiscal years pursuant to this section.
(2) A county shall calculate an amount it establishes as the
prudent reserve for its Local Mental Health Services Fund, not to
exceed 33 percent of the average community services and support
revenue received for the fund in the preceding five years. The
county shall reassess the maximum amount of this reserve every
five years and certify the reassessment as part of the three-year
program and expenditure plan required pursuant to Section 5847.
(c) The allocations pursuant to subdivisions (a) and (b) shall
include funding for annual planning costs pursuant to Section 5848.
The total of these costs shall not exceed 5 percent of the total of
annual revenues received for the fund. The planning costs shall
include funds for county mental health programs to pay for the
costs of consumers, family members, and other stakeholders to
participate in the planning process and for the planning and
implementation required for private provider contracts to be
significantly expanded to provide additional services pursuant to Part 3 (commencing with Section 5800) and Part 4 (commencing with Section 5850).

(d)(1) Prior to making the allocations pursuant to subdivisions (a), (b), and (c), funds shall be reserved for the costs for the State Department of Health Care Services, the California Behavioral Health Planning Council, the Office of Statewide Health Planning and Development, the Mental Health Services Oversight and Accountability Commission, the State Department of Public Health, and any other state agency to implement all duties pursuant to the programs set forth in this section. These costs shall not exceed 5 percent of the total of annual revenues received for the fund. The administrative costs shall include funds to assist consumers and family members to ensure the appropriate state and county agencies give full consideration to concerns about quality, structure of service delivery, or access to services. The amounts allocated for administration shall include amounts sufficient to ensure adequate research and evaluation regarding the effectiveness of services being provided and achievement of the outcome measures set forth in Part 3 (commencing with Section 5800), Part 3.6 (commencing with Section 5840), and Part 4 (commencing with Section 5850). The amount of funds available for the purposes of this subdivision in any fiscal year is subject to appropriation in the annual Budget Act.

(2) (A) Twenty million dollars ($20,000,000) is hereby annually appropriated from the funds distributed pursuant to paragraph (1) as follows:

(i) Five million dollars ($5,000,000) to the Board of Regents of the University of California.

(ii) Five million dollars ($5,000,000) to the Board of Trustees of the California State University.

(iii) Ten million dollars ($10,000,000) to the Board of Governors of the California Community Colleges.

(B) Funds appropriated pursuant to this paragraph shall be used to implement the College Mental Health Services Program established pursuant to Part 3.3 (commencing with Section 5832) and to support mental health services and training at public community colleges, colleges, and universities.

(e) In the 2004–05 fiscal year, funds shall be allocated as follows:
Forty-five percent for education and training pursuant to Part 3.1 (commencing with Section 5820).

(2) Forty-five percent for capital facilities and technology needs in the manner specified by paragraph (2) of subdivision (a).

(3) Five percent for local planning in the manner specified in subdivision (c).

(4) Five percent for state implementation in the manner specified in subdivision (d).

(f) Each county shall place all funds received from the State Mental Health Services Fund in a local Mental Health Services Fund. The Local Mental Health Services Fund balance shall be invested consistent with other county funds and the interest earned on the investments shall be transferred into the fund. The earnings on investment of these funds shall be available for distribution from the fund in future fiscal years.

(g) All expenditures for county mental health programs shall be consistent with a currently approved plan or update pursuant to Section 5847.

(h) (1) Other than funds placed in a reserve in accordance with an approved plan, any funds allocated to a county that have not been spent for their authorized purpose within three years, and the interest accruing on those funds, shall revert to the state to be deposited into the Reversion Account, hereby established in the fund, and available for other counties in future years, provided, however, that funds, including interest accrued on those funds, for capital facilities, technological needs, or education and training may be retained for up to 10 years before reverting to the Reversion Account.

(2) If a county receives approval from the Mental Health Services Oversight and Accountability Commission of a plan for innovative programs, pursuant to subdivision (e) of Section 5830, the county’s funds identified in that plan for innovative programs shall not revert to the state pursuant to paragraph (1) until three years after the date of the approval.

(3) Notwithstanding paragraph (1), any funds allocated to a county with a population of less than 200,000 that have not been spent for their authorized purpose within five years shall revert to the state as described in paragraph (1).

(4) Notwithstanding paragraphs (1) and (2), if a county with a population of less than 200,000 receives approval from the Mental
Health Services Oversight and Accountability Commission of a plan for innovative programs, pursuant to subdivision (e) of Section 5830, the county’s funds identified in that plan for innovative programs shall not revert to the state pursuant to paragraph (1) until five years after the date of the approval.

(i) If there are revenues available in the fund after the Mental Health Services Oversight and Accountability Commission has determined there are prudent reserves and no unmet needs for any of the programs funded pursuant to this section, including all purposes of the Prevention and Early Intervention Program, the commission shall develop a plan for expenditures of these revenues to further the purposes of this act and the Legislature may appropriate these funds for any purpose consistent with the commission’s adopted plan that furthers the purposes of this act.