

MEMORANDUM

DATE	May 5, 2016
то	Board of Psychology
FROM	Jason Glasspiegel Central Services Coordinator
SUBJECT	Agenda Item #22 (a)(4) – Legislative Update – AB 2017 (McCarty) College Mental Health Services Program

Background:

This bill establishes the College Mental Health Services Trust Account and appropriates an unspecified amount annually to that account from the Mental Health Services Fund, to be used to create a grant program for public community colleges, colleges, and universities to improve access to mental health services on campus.

Location: Assembly Appropriations Committee

Status: In Assembly Committee on Appropriations: To Suspense File.

Action Requested:

The Policy and Advocacy Committee recommended the full Board take a "Support" position.

Attachment A is the language of AB 2017 (McCarty)
Attachment B is the Assembly Appropriations Analysis of AB 2017 (McCarty)



AB-2017 College Mental Health Services Program. (2015-2016)

AMENDED IN ASSEMBLY APRIL 07, 2016

AMENDED IN ASSEMBLY MARCH 30, 2016

CALIFORNIA LEGISLATURE - 2015-2016 REGULAR SESSION

ASSEMBLY BILL

No. 2017

Introduced by Assembly Member McCarty

February 16, 2016

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

LEGISLATIVE COUNSEL'S DIGEST

AB 2017, as amended, McCarty. College Mental Health Services Program.

Existing law, the Mental Health Services Act, an initiative measure 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. The act provides that it may be amended by the Legislature by a 2/3 vote of each house as long as the amendment is consistent with and furthers the intent of the act.

The act establishes the Mental Health Services Fund, continuously appropriated to and administered by the State Department of Health Care Services, to fund specified county mental health programs, including prevention and early intervention programs and programs implemented under the Adult and Older Adult Mental Health System of Care Act. The act authorizes the payment of administrative costs of the state from the fund in an amount not greater than 5% of the annual total deposited in the fund and otherwise specifies the distribution of moneys in the fund.

This bill bill, until January 1, 2022, would establish the College Mental Health Services Trust Account, would transfer an unspecified amount \$40,000,000 annually to that account from the Mental Health Services Fund, and would appropriate those funds to the department to create a grant program for public community colleges, colleges, and universities to improve access to mental health services on campus, as specified. The bill would require campuses that have been awarded grants annually to report on the use of grant funds.

By changing the funding structure approved by the voters, this bill would amend the Mental Health Services Act. The bill would state the finding of the Legislature that the measure is consistent with and furthers the purposes of the Mental Health Services Act. The bill would make other finding and declarations.

Vote: 2/3 Appropriation: yes Fiscal Committee: yes Local Program: no

THE PEOPLE OF THE STATE OF CALIFORNIA DO ENACT AS FOLLOWS:

- **SECTION 1.** (a) The Legislature finds and declares that this measure is consistent with and furthers the purposes of the Mental Health Services Act within the meaning of Section 18 of that act.
- (b) Students, faculty, health practitioners, and college administrators are reporting increased rates of mental health needs by students attending public colleges in California.
- (c) One in four students have a diagnosable mental illness and 40 percent of students do not seek mental health when they need it.
- (d) Eight out of 10 people who experience psychosis have their first episode between 15 and 30 years of age.
- (e) 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.
- (f) 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.
- (g) 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.
- (h) 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.
- (i) Research shows that for each dollar invested in student prevention and early intervention mental health services, California will see a return of at least six dollars (\$6) and up to eleven dollars (\$11) as a result of more students graduating.
- **SEC. 2.** 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) There is hereby established in the State Treasury the College Mental Health Services Trust Account. Notwithstanding Section 13340 of the Government Code, moneys in the account are hereby continuously appropriated to the State Department of Health Care Services to fund the grant program established pursuant to this part.
- (b) Notwithstanding Section 5892 or any other law, ______dollars (\$_____) forty million dollars (\$40,000,000) shall be transferred from the Mental Health Services Fund into the College Mental Health Services Trust Account annually.
- **5832.2.** (a) The department, in consultation with the California Mental Health Services Authority (CalMHSA), shall create a grant program for public community colleges, colleges, and universities to improve access to mental health services and early identification or intervention programs. The department and CalMHSA shall establish guidelines for grant funding that shall include, but not be limited to, all of the following:
- (1) The ability of the program to fund the matching component required by subdivision (c).
- (2) 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 the students' health coverage makes them eligible, ensuring provider reimbursement.
- (3) The ability to participate in evidence-based and community defined best practice programs for mental health services improvements.
- (4) The ability of the campus to serve underserved and vulnerable populations, including, but not limited to, lesbian, gay, bisexual, transgender, questioning, and allied (LGBTQA) persons, victims of domestic violence and sexual abuse, and veterans.
- (5) The ability of the campus to reduce racial disparities in access to mental health services.

- (6) The ability of the campus to fund mental health stigma reduction activities.
- (7) 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.
- (b) Grants may be awarded to a community college district in the California Community College system, the California State University system, or the University of California system. The scale of the program shall determine the amount awarded, but in no case shall the department award more than five million dollars (\$5,000,000) per campus, per application.
- (c) Grants shall only be awarded to a campus that can show a dollar-for-dollar match of funds from the campus.
- (d) Administrative costs associated with administering an approved program shall be limited to 5 percent for any grantee.
- (e) The funding provided pursuant to this part shall not be used to supplant existing state or county funds utilized to provide mental health services.

(d)

- (f) The department and CalMHSA may provide technical assistance to smaller colleges and counties in the application process to ensure equitable distribution of the grant award.
- **5832.3.** (a) Community colleges and campuses in the California State University system that have been awarded grants pursuant to this part shall report annually to the respective Chancellor's Office and campuses in the University of California system shall report annually to the University of California Office of the President on the use of grant funds. This report shall include, but not be limited to, all of the following:
- (1) How grant funds and matching funds are being used.
- (2) Available evaluation data, including outcomes of the campus mental health programs funded pursuant to the grant program.
- (3) Program information regarding services being offered and the number of individuals being served.
- (b) The Chancellor's offices and the University of California Office of the President shall—forward electronically submit the reports of the campuses required pursuant to subdivision (a), at one time annually, to the department, CalMHSA, and the Legislature for evaluation of the grant program.
- **5832.4.** This part shall remain in effect only until January 1, 2022, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2022, deletes or extends that date.

Date of Hearing: May 4, 2016

ASSEMBLY COMMITTEE ON APPROPRIATIONS

Lorena Gonzalez, Chair

AB 2017 (McCarty) – As Amended April 7, 2016

Policy Committee:

Health

Vote: 16 - 0

Higher Education

13 - 0

Urgency: No

State Mandated Local Program: No

Reimbursable: No

SUMMARY:

This bill creates the College Mental Health Services Program, a matching grant program to enhance the provision of mental health services on state college campuses. Specifically, this bill:

- 1) Transfers \$40 million annually from the Mental Health Services Fund to the College Mental Health Services Trust Account, which it establishes in the state Treasury as a continuously appropriated fund for purposes of the grant program.
- 2) Requires the Department of Health Care Services (DHCS) to, in consultation with the California Mental Health Services Authority (CalMHSA), create a grant program for public community colleges, colleges, and universities to improve access to mental health services and early identification or intervention programs.
- 3) Authorizes grants to be awarded to a community college district in the California Community College (CCC) system, the California State University (CSU) system, or the University of California (UC) system, and limits amounts to no more than five million dollars (\$5,000,000) per campus, per application.
- 4) Requires a dollar-for-dollar match of funds from the campus, limits administrative costs to 5 percent for any grantee, and prohibits the funding from being used to supplant existing state or county funds utilized to provide mental health services.
- 5) Requires CSU and CCC campuses to report to their respective Chancellor's offices, and UC campuses to report to the Office of the President on the use of grant funds, and requires reports be submitted to DHCS.
- 6) Sunsets the program on January 1, 2022.

FISCAL EFFECT:

- 1) \$40 million annually from the Mental Health Services Account to fund the grant program.
- 2) Staff costs to DHCS of \$240,000 for fiscal year 2016-17, and \$364,000 ongoing for the length of the program (Mental Health Services Account).
- 3) Systems note potential difficulty in generating matching funds. The UC notes in the last grant request for proposal from CalMHSA for an similar program, upon which this one appears to

be modeled, CalMHSA insisted on a cash match, requiring UC to put up "new dollars" as a match to receive funding. Furthermore, the match was specific to prevention dollars, which prevented UC from matching with funds being used for staffing direct services. They note the majority of UC's mental health budget is allocated to staffing direct services, with only about 10% going to prevention, given the immense demand for services. Thus, UC appears limited if a cash match of new funds was required. However, if the guidelines were more flexible, allowing for student fee revenue or in-kind contributions to meet the matching requirement, campuses could access the grant program.

The CCC notes note community colleges have limited ability to meet the matching funds requirement due to statutory restrictions on allocations of general fund expenditures. They also most districts charge a health fee, which could be used to provide a match if that is allowable source.

COMMENTS:

- 1) **Purpose**. The author cites significant unmet need for mental health services, and indicates college-aged students often do not seek mental health services when they need them. Ensuring access to mental health in our colleges will reduce stigma and student success.
- 2) Background. Existing law establishes the Mental Health Services Act (MHSA), enacted by voters in 2004 through Proposition 63, to provide funds to counties to expand services, develop innovative programs, and integrated service plans for mentally ill children, adults, and seniors through a 1% income tax on personal income above \$1 million. MHSA addresses prevention, early intervention, and service needs, as well as provided funding for infrastructure, technology, and training needs for the community mental health system. MHSA requires each county mental health department to prepare and submit a three-year plan to DHCS that must be updated each year, and approved by DHCS after review and comment by the Commission. In their three-year plans, counties are required to include a list of programs, identify how the funds will be spent, and identify which populations will be served.
- 3) MHSA funding for education programs. In June 2007, the Commission voted to approve the \$60 million Student Mental Health Initiative (SMHI), which allocated \$34 million to higher education institutions and \$26 million for K-12 programs for a period of four years. The higher education programs focused on three key strategic directions: training, peer support activities, and suicide prevention. Any college, district, multi-campus collaborative, or system within one of the three California public higher education systems was eligible and program applications were based on demonstrated need that emphasized culturally relevant and appropriate approaches. The SMHI was evaluated by RAND and demonstrated a positive return on investment through greater student achievement.
- 4) CalMHSA. The CalMHSA was established by California counties in June 2009 as a Joint Powers Authority responsible for funding and implementing mental health services programs and projects. CalMHSA is headed by a separate Board of Member Counties and an Executive Committee comprised of officers and statewide regional representatives. Among other responsibilities, CalMHSA is responsible for implementation and oversight of the SMHI.

- 5) Support. This bill is co-sponsored by the Steinberg Institute and Faculty Association of California Community Colleges (FACCC), and it is supported by a number of other groups. Supporters note the mental health needs of college students are great. Studies show one in four individuals lives with a mental illness, meaning at any given moment a minimum of 750,000 students are suffering from depression, anxiety, psychosis, or some other mental health condition. The Steinberg Institute argues that establishing this program would dramatically change the lives of these students by providing funding to target improved linkages and increased services for students.
- 6) Staff Comments. This bill would benefit from clarification on a number of issues:
 - a) The MHSA has a variety of existing allocations. Where within the MHSA structure does the \$40 million come from?
 - b) This bill does not specify whether the continuously appropriated fund it creates can fund the DHCS administrative costs.
 - c) It is unclear what activities can be supported by the grant funds. This should be specified.
 - d) One provision of the bill notes "smaller colleges and counties" can receive technical assistance. However, counties are not specified as potential grant recipients.
 - e) It is unclear whether grants are for multiple years or are annual awards.
 - f) The bill specifies grants funding guidelines that shall include the "ability" of campuses to do a number of things. It is unclear whether this list comprises the activities the grant will fund, prerequisites the campus must meet, or a scheme for prioritizing grants by need. Spelling each of these aspects out more clearly, as appropriate, is advisable.
 - g) This bill states that the scale of the program shall determine the amount awarded but does not define scale. It is unclear if campuses are competing based on their full-time student population, total student population, or some other measure.
 - h) This bill states that grants can only be awarded to recipients who have demonstrated dollar-for-dollar matching of funds from the campus. Allowable matching funds and the availability of in-kind donations, if applicable, should be specified.
 - i) It should be specified whether grants are made to each campus or to the system-wide offices. This bill requires the system-wide offices to do the reporting, but implies campuses are the grant recipients. This should be clarified and the entity receiving the grant should submit the report.
 - j) This bill has a sunset date but no evaluation. Should it be evaluated before the sunset?
 - k) Is there a justification for a continuous appropriation for this program?

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