

Date of Hearing: April 19, 2016

ASSEMBLY COMMITTEE ON HIGHER EDUCATION

Jose Medina, Chair

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

[Note: This bill was heard in the Assembly Health Committee on April 5, 2016, and approved by a vote of 16–0.]

SUBJECT: College Mental Health Services Program

SUMMARY: Establishes the College Mental Health Services Program (CMHS Program) Act, which creates a grant program (CMHS Program Grant) for California Community Colleges (CCC), the California State University (CSU) and the University of California (UC) to improve access to mental health services and early identification or intervention programs. Specifically, **this bill:**

1) Finds and declares all of the following:

- a) The provisions of this bill are consistent with and further the purposes of the Mental Health Services Act (MHSA);
- 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 has 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; and,
- 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 \$6 and up to \$11 as a result of more students graduating.

- 2) Establishes in the State Treasury the CMHS Trust Account with moneys continuously appropriated to the State Department of Health Care Services to fund the CMHS Grant Program and transfers \$40,000,000 from the MHSF into the CMHS Trust Account annually.
- 3) Requires the Department of Health Care Services (DHCS), in consultation with the California Mental Health Services Authority (CalMHSA), to create a grant program for CCC, CSU and UC to improve access to mental health services and early identification or intervention programs. DHCS and CalMHSA are required to establish guidelines for grant funding that include:
 - a) The ability of the program to fund the matching component, as required;
 - 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 the students' health coverage makes them eligible, ensuring provider reimbursement;
 - c) The ability to participate in evidence-based and community defined best practice programs for mental health services improvements;
 - d) The ability of the campus to serve underserved and vulnerable populations, including, but not limited to, lesbian, gay, bisexual, transgender, questioning, and allied persons, victims of domestic violence and sexual abuse, and veterans;
 - e) The ability of the campus to reduce racial disparities in access to mental health services;
 - f) The ability of the campus to fund mental health stigma reduction activities; and,
 - g) 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.
- 4) Provides that grants may be awarded to a CCC district, the CSU or the UC and that the scale of the program shall determine the amount awarded, but in no case shall the department award more than \$5,000,000 per campus, per application.
- 5) Provides that grants shall only be awarded to a campus that can show a dollar-for-dollar match of funds from the campus.
- 6) Provides that administrative costs for any program shall be limited to 5%.
- 7) Prohibits funds from supplanting existing state or county funds utilized to provide mental health services.
- 8) Allows DHCS and CalMHSA to provide technical assistance to smaller colleges and counties in the application process to ensure equitable distribution of the grant award.
- 9) Requires CCC, CSU and UC campuses that have been awarded grant funds to report annually to their respective CCC Chancellor, CSU Chancellor, and UC Office of the President on the uses of grant funds, as specified. Requires reports to be submitted to DHCS and CalMHSA and the Legislature.
- 10) Sunsets the provisions of this bill on January 1, 2022.

EXISTING LAW:

- 1) Establishes the MHSA, enacted by voters in 2004 by 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.
- 2) Establishes the Mental Health Oversight and Accountability Commission (Commission) to oversee the implementation of MHSA, made up of 16 members appointed by the Governor, unless otherwise specified.
- 3) Specifies that the MHSA can only be amended by a two-thirds vote of both houses of the Legislature and only as long as the amendment is consistent with and furthers the intent of the MHSA. Permits provisions clarifying the procedures and terms of the MHSA to be added by majority vote.
- 4) Requires DHCS to develop and implement mental health plans for Medi-Cal beneficiaries.
- 5) Requires mental health plans, whether administered by public or private entities, to be governed by specified guidelines, including the provision of culturally competent and age-appropriate services, to the extent feasible.
- 6) Requires a mental health plan to assess the cultural competency needs of the program and to include a process to accommodate the significant needs with reasonable timeliness.

FISCAL EFFECT: Unknown.

COMMENTS: *Purpose of this bill.* According to the author, there are tremendous mental health needs that Californians face related to access, care, and homelessness. However, an often forgotten part of this discussion is our college-age students. Unfortunately, many of our public colleges do not have mental health services for their students on campus, particularly community colleges. Due to a lack of access to care, college-aged students often do not seek mental health services when they need them. The stigma around mental health is something that can be improved if we increase access to mental health services for students. The author argues that if students have the resources they need the more likely they will seek help.

MHSA. Proposition 63 was passed by voters in November 2004 and created the MHSA, which imposes a one percent income tax on personal income in excess of \$1 million and creates the 16 member Commission charged with overseeing the implementation. 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 all programs for which MHSA funding is being requested, that identify how the funds will be spent, and which populations will be served. Counties must submit their plans for approval to the Commission before the counties may spend certain categories of funding.

MHSA funding for education programs. In June 2007, the Commission voted to approve \$60 million in statewide initiative funds in response to the mass shooting that occurred on the campus of Virginia Polytechnic Institute. This Student Mental Health Initiative (SMHI) 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.

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.

CSU, UC and CCC SMHI projects. Under the SMHI, the systemwide offices of the CSU and UC were each awarded approximately \$7 million by CalMHSA for a 3-year grant (which ended in December 2015) to provide, primarily, outreach and education activities. In October 2011, the CCC Chancellor's Office (CCCCO) was awarded \$7 million by CalMHSA to establish the CCC SMHI, a partnership between the CCCCCO and the Foundation for Community Colleges. In June of 2015, the program was awarded \$1.4 million (\$700,000 per year) to support phase 2 of the program; implementation began on October 1, 2015 and will conclude on June 30, 2017.

Suggested amendments and clarifications.

- 1) Clarification is needed to specify that applications are submitted by and grant funds are provided to the campus of the CSU and/or UC (rather than to the system office). Additionally, the author and committee may wish to consider whether the bill should authorize multiple campuses (and districts and segments) located in the same region to collaborate on an application and grant program.
- 2) As previously noted, prior MHSA funding was primarily used to support outreach and education activities within the higher education segments. Committee staff understands that that the author intends for funding provided pursuant to this bill to be used to support both direct services (decreasing wait times and increasing provider-to-student ratios, etc.) as well as additional outreach, as needed. This intent could be further clarified in the bill.
- 3) As currently drafted, grant recipients must provide matching funds for the program. Committee staff understands the author's intent is to allow the matching component to include public or private funding, or in kind donations such as facilities or staffing resources.

REGISTERED SUPPORT / OPPOSITION:

Support

California Federation of Teachers
California State Student Association
Faculty Association of California Community Colleges

National Association of Social Workers
North Orange County Community College District
University of California Student Association

Opposition

None on File

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