

| Bill #<br>Author    | Summary   | Tier/Position<br>Recommend. | NAMI CA<br>Policy Priority  |
|---------------------|---|-----------------------------|---|
| SB 1363<br>Moorlach | Would allow an individual to designate on his or her tax return that a specified amount in excess of his or her personal income tax liability be transferred to the National Alliance on Mental Illness California Voluntary Tax Contribution Fund, which would be created by this bill. The bill would conform with those aforementioned administrative requirements by continuously appropriating those funds to the Franchise Tax Board, the Controller and the California Highway Patrol for administrative costs.  | Support<br>(Tier 1)         | #3 Crisis Services,<br>#1 Access to Treatment                                     |
| SB 906<br>Beall     | Would require the State Department of Health Care Services to establish, no later than July 1, 2019, a statewide peer, parent, transition-age, and family support specialist certification program, as a part of the state's comprehensive mental health and substance use disorder delivery system and the Medi-Cal program. The bill would include 4 certification categories: adult peer support specialists, transition-age youth peer support specialists, family peer support specialists, and parent peer support specialists.   | Support<br>(Tier 1)         | #1 Access to Treatment,<br>#6 Full Array of Services<br>and Supports for All Ages |
| AB 2022<br>Chu      | Current law requires the governing board of any school district to give diligent care to the health and physical development of pupils and authorizes the governing board of a school district to employ properly certified persons for the work. This bill would state the intent of the Legislature to enact legislation that would require at least one mental health professional at each elementary and secondary school campus.   | Support<br>(Tier 2)         | #6 Full Array of Services<br>and Supports for All Ages,<br>#1 Access to Treatment |
| SB 215<br>Beall     | Would authorize a court, with the consent of the defendant and a waiver of the defendant's speedy trial right, to postpone prosecution of a misdemeanor or a felony punishable in a county jail, and place the defendant in a pretrial diversion program for up to 2 years if the court is satisfied the defendant suffers from a mental disorder, that the defendant's mental disorder played a significant role in the commission of the charged offense, and that the defendant would benefit from mental health treatment. For specified offenses, the bill would condition granting diversion on the consent of the prosecution. | Support<br>(Tier 2)         | #4 Criminal Justice and<br>Forensic Issues  |

|                   |  |                     |  |
|-------------------|--|---------------------|--|
| SB 968<br>Pan     | Would require the Trustees of the California State University, the governing board of each community college district, and the governing body of each independent institution of high education that is a qualifying institution, and request the Regents of the University of California, to hire one fulltime equivalent mental health counselor per 1,000 students at each of their respective campuses to the fullest extent consistent with state and federal law. The bill would define mental health counselor for purposes of this provision.  | Support<br>(Tier 2) | #6 Full Array of Services and Supports for All Ages,<br>#1 Access to Treatment |
| SB 1125<br>Atkins | Same day billing bill. Would authorize reimbursement for a maximum of 2 visits taking place on the same day at a single location if after the first visit the patient suffers illness or injury requiring additional diagnosis or treatment, or if the patient has a medical visit and another health visit, as defined.   | Support<br>(Tier 2) | #1 Access to Treatment   |
| AB 2639<br>Berman | Would require the State Department of Education to identify one or more evidence-based online training programs that a local education agency, as defined, can use to train school staff and pupils as part of the local educational agency's policy on pupil suicide prevention. The bill would require the department to provide a grant to a county office of education to acquire and disseminate a training program identifies by the department to local educational agencies at no cost. The bill would make its requirements contingent on funds being appropriated in the annual Budget Act or another statute for its purposes | Support<br>(Tier 2) | # 3 Crisis Services,<br>#6 Full Array of Services and Supports for All Ages    |
| SB 1010<br>Beall  | Would require CDCR, on or before January 1, 2020, to create the Supportive Housing Pilot Program, which would establish a process and timeline for finalizing a memorandum of understanding with one or more counties in which the department would agree to use current funding to, among other things, refer eligible parolees to participating counties for mental health treatment, housing navigation services, and supportive housing services, and to use remaining resources, as specified, to pay for bridge rental assistance, as defined, and services in supportive housing during the program participant's term of parole. | Support<br>(Tier 2) | #2 Housing,<br>#1 Access to Treatment  |

|                            |  |                                   |   |
|----------------------------|--|-----------------------------------|---|
| AB 2983<br>Arambula        | Would prohibit a general acute care hospital or an acute psychiatric hospital from requiring a person who voluntarily seeks care to be in custody as a danger to himself or herself or others or gravely disabled as a condition of accepting a transfer of that person. By creating a new crime, this bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.  | Support<br>(Tier 2)               | #4 Criminal Justice and Forensic Issues, #1 Access to Treatment             |
| AB 1795<br>Gipson          | Would authorize a local emergency medical services agency to submit, as part of its emergency services plan, a plan to transport specified patients to a community care facility, as defined, in lieu of transportation to a general acute care hospital. The bill would make conforming changes to the definition of advanced life support to include prehospital emergency care provided before and during, transport to a community care facility, as specified.  | Support<br>(Tier 2)<br>IN CONCEPT | #3 Crisis Services  |
| AB 2393<br>Comm. on Health | Would prohibit a county from charging fees for Medi-Cal specialty mental health services to Medi-Cal beneficiaries who do not have a share of cost and Medi-Cal beneficiaries who have met their share of cost, and would authorize a county to charge fees to individuals who are not Medi-Cal beneficiaries and Medi-Cal beneficiaries who have a share of cost that has not been met, in accordance with the patient's ability to pay for community mental health services rendered, but not in excess of actual costs.   | Support<br>(Tier 3)               | #1 Access to Treatment  |
| AB 2325<br>Irwin           | Would prevent a county from denying an eligible veteran county mental or behavioral health services while the veteran is waiting for a determination of eligibility for, and availability of, mental or behavioral health services provided by the United States Department of Veterans Affairs. The bill would make specific findings and declarations about the county's duty to provide mental and behavioral health services to veterans.  | Support<br>(Tier 3)               | #6 Full Array of Services and Supports for All Ages, #1 Access to Treatment |
| SB 972<br>Portantino       | Would require a public school, including a charter school, or a private school that serves pupils in any of grades 7 to 12, inclusive, that issues pupil identification cards to have printed on the back of the pupil identification cards the telephone number for a suicide prevention hotline. The bill would require a public or private institution of higher education that issues student identification cards to have printed on the back of the student identification cards the telephone number for a suicide prevention hotline. Because the bill would impose a new duty on campuses of the California Community Colleges, the bill would impose a state-mandated local program. | Support<br>(Tier 3)               | #3 Crisis Services, #6 Full Array of Services and Supports for All Ages     |

|                     |  |                     |  |
|---------------------|--|---------------------|--|
| AB 3148<br>Arambula | Current law provides that it is the policy of the state that all minors and nonminors in foster care have specified rights, including, among others, the right to receive mental health services. This bill would declare the intent of the Legislature to enact legislation to provide children in foster care with early detection of mental health problems and trauma-informed, proper, and critical mental health services.   | Support<br>(Tier 3) | #6 Full Array of Services and Supports for All Ages            |
| AB 870<br>Levine    | Would require a court, upon the conviction of a defendant for a felony resulting in sentencing to state prison, to recommend in writing that the defendant receive a mental health evaluation if the court finds that the defendant at the time of the commission of the offense was suffering from a serious mental illness or has a demonstrated history of mental illness.  | Support<br>(Tier 3) | #4 Criminal Justice and Forensic Issues                        |
| SB 960<br>Leyva     | Would require the Department of Corrections and Rehabilitation to submit a report, as specified, to the Legislature on or before April 1 of each year, on the department's efforts to respond to and prevent suicides and attempted suicides among inmates, including, among other things, identifying recommendations that would affect the department's efforts to respond to and prevent suicides and attempted suicides among inmates, describing the progress in implementing those recommendations, and describing the department's progress in identifying and implementing mental health programs that may ameliorate risk factors associated with suicides among inmates.             | Support<br>(Tier 3) | #4 Criminal Justice and Forensic Issues,<br>#3 Crisis Services |
| SB 688<br>Moorlach  | Current law requires the State Department of Health Care Services, in consultation with the commission and the County Behavioral Health Directors Association of California, to develop and administer instructions for the Annual Mental Health Services Act Revenue and Expenditure Report, which gathers specified information on mental health spending as a result of the MHSA, including the expenditures of funds distributed to each county. Current law requires counties to electronically submit the report to the department and the commission. This bill would require counties to prepare the reports in accordance with generally accepted accounting principles, as specified | Support<br>(Tier 3) |  |

|                     |  |                     |   |
|---------------------|--|---------------------|---|
| AB 417<br>Limon     | Authorizes, for a period of not more than 180 days, and only until November 1, 2018, the State Department of Public Health to permit an acute psychiatric hospital that was affected by a wildfire during the month of December 2017, and that is in the County of Ventura, to provide outpatient mental health services that were approved by the department and operational as supplemental services before the wildfire occurred, while the inpatient operations of the acute psychiatric hospital are voluntarily suspended.   | Support<br>(Tier 3) | #1 Access to Treatment                        |
| AB 1136<br>Eggman   | Would require the State Department of Public Health to develop and submit a proposal to solicit a grant under the federal 21st Century Cures Act to develop a real-time, Internet-based database to collect, aggregate, and display information about beds in inpatient psychiatric facilities, crisis stabilization units, residential community mental health facilities, and licensed residential substance use disorder treatment facilities.  | Support<br>(Tier 3) | #1 Access to Treatment                        |
| AB 2112<br>Santiago | Current federal law, the 21st Century Cures Act, authorizes the United States Secretary of Health and Human Services to award competitive grants to state and local governments and Indian tribes and tribal organizations to enhance community-based crisis response systems that, among other things, promote integration and coordination between local public and private entities engaged in crisis response, and addresses gaps in community resources for crisis intervention and prevention. This bill would require the State Department of Health Care Services to develop and submit an application to solicit a grant under the federal authority described above to develop a community-based crisis response plan and would require the grant application to include, at a minimum, a plan for specified objectives. | Sponsor<br>(Tier 3) | #3 Crisis Services,<br>#1 Access to Treatment |

|                     |   |       |  |
|---------------------|---|-------|--|
| SB 10<br>Hertzberg  | Revises existing pretrial release procedures by limiting pretrial detention to specified persons, eliminating the use of bail schedules, and requiring each country to establish a pretrial services agency.  | Watch | #4 Criminal Justice and Forensic Issues    |
| AB 2657<br>Weber    | Would authorize an educational provider, as defined, to use behavioral restraints, which includes physical and mechanical restraints, or seclusion, as defined, only if a pupil's behavior presents an imminent danger of serious physical harm to the pupil or others, and if other specified conditions are met. The bill would prohibit an educational provider from using a behavioral restraint or seclusion in certain circumstances, including, but not limited to, using seclusion or a behavioral restraint for the purpose of coercion, discipline, convenience, or retaliation, and would prohibit the use of certain restraint and seclusion techniques.                    | Watch |  |
| SB 1187<br>Beall    | Would revise and recast the provisions relating to the evaluation of mental competence to stand trial in various ways, including, most notably, conforming the process whereby a person is involuntarily administered psychotropic medication with other areas of law, reducing the term for commitment to a treatment facility when a felony was committed to the shorter of 2 years or the a period of commitment equal to the maximum term of imprisonment provided by law for the most serious offense charged, and authorizing the court to begin a conservatorship investigation at any time in the process. This bill contains other related provisions and other existing laws. | Watch | #4 Criminal Justice and Forensic Issues    |
| AB 1971<br>Santiago | Current law requires the State Department of Health Care Services to perform various functions with regard to the statewide delivery of mental health services, including, but not limited to, implementation of related planning, research, evaluation, technical assistance, and quality assurance responsibilities. This bill would make a nonsubstantive change in those provisions.  | Watch | #1 Access to Treatment, Family Involvement |

|                        |  |       |  |
|------------------------|--|-------|--|
| AB 1927<br>Bonta       | Would require the Department of Justice to develop and launch a secure Internet-based platform to allow a person who resides in California to voluntarily add his or her own name to the California Do Not Sell List. The bill would require the department to ensure that information on the list is uploaded and reflected in the National Instant Criminal Background Check System. The bill would make it a crime, punishable as misdemeanor or a felony, to transfer a firearm to a person who is validly registered on the California Do Not Sell List. By creating a new crime, this bill would impose a state-mandated local program.  | Watch |  |
| AB 2193<br>Maienschien | Would make it the duty of licensed health care practitioners who treat or attend the mother or child, or both, to screen the mother for maternal mental health conditions, as defined, at least once during pregnancy and once during the postpartum period and to report the findings of the screening to the mother's primary care physician if the health care practitioner is not the mother's primary care physician. The bill would also make it the duty of any facility where those practitioners treat or attend the mother or child, or both, in the first postdelivery appointment to ensure that those practitioners perform the required screening and report the findings. | Watch | #6 Full Array of Services and Supports for All Ages,<br>#1 Access to Treatment |
| AB 1968<br>Low         | Would require that a person who has been taken into custody, assessed, and admitted to a designated facility because he or she is a danger to himself, herself, or others, as a result of a mental health disorder more than once within a 5-year period to be prohibited from owning a firearm for the remainder of his or her life. Because a violation of the firearm prohibition would be a crime, the bill would impose a state-mandated local program. This bill contains other related provisions and other existing laws.  | Watch |  |

|                             |   |              |  |
|-----------------------------|---|--------------|--|
| <p>AB 1095<br/>Anderson</p> | <p>Current law prohibits a person from having his or her probation, mandatory supervision, postrelease community supervision, or parole revoked while that person is mentally incompetent. If a defendant is found mentally incompetent during postrelease community supervision or parole revocation hearings, current law requires the court to dismiss the pending revocation matter and return the defendant to supervision, and authorizes the court take other action, including referring the matter to the public guardian of the county of commitment to initiate conservatorship proceedings only if there are no other reasonable alternatives to meet the defendant's mental health needs, as specified. This bill would delete the authority of the court to dismiss the pending revocation matter and would delete the above-described restriction on the court's authority to order the matter to the public guardian.</p> | <p>Watch</p> |  |
| <p>SB 1004<br/>Weiner</p>   | <p>Would amend the Mental Health Services Act by requiring counties to expend Mental Health Services Act prevention and early intervention funds on early psychosis and mood disorder detection and intervention, college mental health outreach, engagement, and service delivery, and childhood trauma prevention and early intervention, as specified. This bill would declare that its provisions further the intent of the MHSA</p>  | <p>Watch</p> |  |
| <p>SB 1019<br/>Beall</p>    | <p>Current law provides that funds appropriated by the Legislature to the California Health Facilities Financing Authority and the Mental Health Services Oversight and Accountability Commission for the purposes of the Investment in Mental Health Wellness Act of 2013 be made available to selected counties or counties acting jointly, except as otherwise provided, and used to provide, among other things, a complete continuum of crisis services for children and youth 21 years of age and under regardless of where they live in the state. The act requires the commission to allocate funds to triage personnel, as specified. This bill would require the commission, when making these funds available, to allocate at least onehalf of those funds for services or programs targeted at children and youth 18 years of age and under.</p>  | <p>Watch</p> | <p>#6 Full Array of Services and Supports for All Ages</p> |



|                        |  |       |  |
|------------------------|--|-------|--|
| AB 2287<br>Kiley       | Would establish the Office of Mental Health Services within the California Health and Human Services Agency, as specified. The bill would transfer various functions of the State Department of Health Care Services under the act to the office. Under this bill, the office would succeed to, and be vested with, all the duties, powers, responsibilities, and jurisdiction, vested in the department, regarding oversight of the Mental Health Services Fund, as specified. The bill would also require the office to assume certain duties, including, among others, initiating investigations, advising counties, conducting research, and reporting to the Legislature, by December 31, 2020, of any additional authority it deems necessary to complete its duties and to ensure county compliance with the act, as specified. | Watch |  |
| AB 1893<br>Maienschein | Current law requires the State Department of Public Health to develop and maintain a statewide community-based comprehensive perinatal services program to, among other program objectives, ensure the appropriate level of maternal, newborn, and pediatric care services necessary to provide the healthiest outcome for mother and infant. This bill would require the department to investigate and apply for federal funding opportunities regarding maternal mental health, as specified, and to prepare a report to the Legislature on or before January 1, 2020, on how the department plans to use the federal funding it receives.   | Watch | #6 Full Array of Services and Supports for All Ages,<br>#1 Access to Treatment |
| AB 2043<br>Arambula    | Would state the intent of the Legislature to enact legislation that would build upon the current CCR implementation effort by establishing a response system, as specified, for caregivers of current or former foster youth who are experiencing emotional, behavioral, or other needs that require immediate support. The bill would state the intent of the Legislature to include a statewide hotline in the response system to provide triage and, as appropriate, deploy a mobile and coordinated in-home response.  | Watch | #6 Full Array of Services and Supports for All Ages,<br>#1 Access to Treatment |
| AB 2843<br>Gloria      | Would state the intent of the Legislature to enact legislation that would require a county that receives reallocated funds from the Mental Health Services Fund to spend those funds within 2 years of adopting an expenditure plan for those funds. It would further state the intent of the Legislature that any funds not expended by a county within those 2 years would revert to the Mental Health Services Fund to be redistributed to cities within that county.   | Watch |  |