



California Council of Community
Behavioral Health Agencies

Mental Health Services Act

2004 -Today

Overview

The Mental Health Services Act (MHSA) is a funding source for vital behavioral health services across the state. In 2004, voters affirmed their desire for this Act through Prop 63, and it continues to be the primary funding source for mental health services and innovation to this day.

The MHSA was the vision of then Assemblymember, now Sacramento Mayor Darrell Steinberg and CBHA Founder Rusty Selix. CBHA continues to advocate for the intent and vision of the MHSA, and we work closely with

our members, state leaders, behavioral health champions, community members, and behavioral health consumers to help protect the future of this Act.

Together, we can ensure that the MHSA continues to fund innovative mental health and substance use prevention and treatment programs across our state. In this summary, we provide information on how you can ensure the vision for the MHSA is realized.



History of the MHSA

In 2004, voters recognized that California's mental health services system needed reform, and they voted in favor of Prop 63, also known as the Mental Health Services Act. The MHSA is a one percent tax on all personal income over \$1 million per year. The MHSA is meant to transform and grow our State's behavioral health safety net in order to serve people experiencing or at risk of experiencing serious mental health issues. The Act also recognizes the importance of engaging and serving the families and communities of people experiencing mental health issues.

What is Unique About the MHSA?

- **The Act recognizes the importance of prevention and early intervention.** For many Californian's, severe or ongoing mental health issues are preventable. The Act's authors envisioned a state in which the occurrence of preventable mental illness was rare, and their hope was that the Act would help fund programs that would make that vision a reality.
- **The Act seeks to honor the dignity, agency, and recovery journey of people living with severe mental illness.** When the Act was created, California lacked behavioral health resources for the people who needed them most. Through funding programs and innovative research, the MHSA aims to provide a better quality of life for people living with severe mental illness, and their families. In order to do this, the Act includes mandates for ensuring a robust community stakeholder engagement process where funds would be targeted to meet the needs of local communities.

What Does the MHSA Fund in California?

The MHSA prioritizes several categories of services. The program is administered through the Department of Health Care Services (DHCS, the State Controller, and county behavioral health departments. The primary programs and services funded through the MHSA include:

- Community program planning and administration
- Prevention and early intervention
- Innovation
- Community services and supports
- Capital (buildings) and information technology
- Education and training
- Expansion of crisis services (added in 2013)



Key Facts and Figures

- Total forecasted funding for MHSA distribution to Counties for FY 22-23 is \$2,805,200,000.
- The Mental Health Services Oversight and Accountability Commission ([MHSOAC](#)) is a statewide commission tasked with ensuring that MHSA funding and programs are administered in a way that benefits all California communities.
- There have been several addendums/changes to the MHSA since its creation in 2004 and those statutes and bills are summarized here: [MHSA Legislative Historical Information](#)



Important Tenets of the MHSA

- Continued administration of the MHSA must be guided by the General Standards of Community Collaboration; Cultural Competence; Client Driven; Family Driven; Wellness, Recovery, and Resilience Focused and Integrated Service Experience.
*9 CCR § 3320
- The Act prioritizes voluntary treatment first while staying silent on the need to utilize innovative models of care for those with serious mental illness who ultimately need to participate in involuntary treatment.
- MHSA funding, programs, and services should be driven by people with lived experience of mental health issues (often referred to as clients/consumers), and their families.
- Our public behavioral health system should provide early intervention services.
- Community self-determination, local control, and stakeholder engagement are vital to ensuring funds are distributed to programs that the community believes in.
- Funds should continue to be used to reduce inequities within the system, and serving underserved and marginalized populations.
- The Act is intended to provide services in community, and where people choose to receive them. This focus on community-based services must be preserved.
- As we learn more about the ways in which peers are vital to recovery, the Act should continue to fund the expansion of peer services.
- The MHSA should be protected from funding diversions for programs other than the intended behavioral health services the Act set out to fund. This honors voter intent, and the behavioral health needs of millions of Californians.
- Accountability measures should continue to guide the success of the Act and the programs it funds.

Want to learn more about how the MHSA can help your communities?

CBHA is here to help. Our Policy Team, and diverse member organizations can help you better understand the impact MHSA funding has on your community, and how you can help grow and preserve these vital programs. Please feel free to reach out to our Senior Advocate for Policy and Legislative Affairs, John Drebinger at jdrebinger@cccbha.org if you have any questions.