



Honorable Mark Leno, Chair
Senate Budget and Fiscal Review Committee

Attention: Ms. Keely Bosler, Staff Director (2)

Honorable Bob Blumenfield, Chair
Assembly Budget Committee

Attention: Mr. Christian Griffith, Chief Consultant (2)

Streamline State Oversight of the Mental Health Services Act

Consistent with the Governor's 2011-12 proposal to realign government services, including mental health services to counties, it is proposed that state oversight of the Mental Health Services Act (MHSA) be streamlined to improve program efficiency, and that state administrative support related to the implementation of the MHSA be reduced in order to direct more MHSA funding to county mental health programs.

The Governor's intent is to amend the MHSA to more clearly define the roles of the Mental Health Services Oversight and Accountability Commission (OAC), the Department of Mental Health (DMH), and the other departments currently involved in implementing the MHSA. The state would no longer have the responsibility of reviewing and approving county three-year MHSA plans. These amendments can be implemented through a two-thirds vote of the Legislature because they further the intent of the MHSA by increasing funding for mental health services at the local level.

Under this proposal, the OAC would act in an advisory role to county mental health programs providing statewide MHSA policy direction and technical support. The OAC would no longer be required to review and approve the Prevention and Early Intervention and Innovative program components of county three-year plans.

The DMH's role in the implementation of the MHSA would be reduced significantly. The DMH would have responsibility for evaluating program outcomes and monitoring county compliance with the MHSA. Like the OAC, the DMH would no longer be required to review and approve county three-year plans. Additionally, the DMH would no longer be required to contract with counties for the administration of MHSA programs, administer the Mental Health Services Fund (MHSF), or provide technical support to counties. Statewide administration of the MHSA housing program, suicide prevention, and mental illness stigma reduction would remain with the DMH.

County allocation amounts and the distribution of MHSF funds to counties also would change under this proposal. Rather than the DMH allocating funding to counties based on approval of county plans, it is intended that the State Controller would allocate funding directly to counties. The Administration will be working with county representatives to determine an appropriate allocation method.

Furthermore, this proposal would reduce or eliminate funding to a number of state departments that receive direct appropriations from the MHSF. Although the activities provided by these departments have been important to the implementation of the MHSA, under a more streamlined, county-focused program, these activities are more appropriately provided by individual counties to address program need. This proposal would reduce MHSF state administrative spending by \$30.5 million and 143.2 positions, and no department budget will be augmented. It is requested the following items be reduced or deleted to reflect the changes necessary to implement this proposal.

Department of Consumer Affairs Regulatory Boards (Issue 120)—It is requested that Item 1110-001-3085 be eliminated to reflect efficiencies in the implementation of the MHSA, resulting in a decrease of \$120,000 and 1.0 position, and that Item 1110-001-0773 be amended to reflect this change.

Department of Aging (Issue 201)—It is requested that Item 4170-001-3085 be eliminated to reflect efficiencies in the implementation of the MHSA, resulting in a decrease of \$259,000 and 2.0 positions.

Department of Alcohol and Drug Programs (Issue 201)—It is requested that Item 4200-001-3085 be eliminated to reflect efficiencies in the implementation of the MHSA, resulting in a decrease of \$267,000 and 2.0 positions, and that Item 4200-001-0001 be amended to reflect this change.

Department of Health Care Services (Issue 280)—It is requested that Item 4260-001-3085 be decreased by \$657,000 and 2.0 positions, and that Item 4260-001-0001 be amended to reflect this change. This adjustment will leave sufficient resources to improve mental health care for Medi-Cal beneficiaries with serious mental illnesses and support mental health functions provided through the comprehensive Section 1115 Waiver and the Specialty Mental Health Waiver.

Managed Risk Medical Insurance Board (Issue 201)—It is requested that Item 4280-001-3085 be eliminated to reflect efficiencies in the implementation of the MHSA, resulting in a decrease of \$177,000 and 2.0 positions, and that Item 4280-001-0001 be amended to reflect this change.

Department of Mental Health (Issue 201)—It is requested that Item 4440-001-3085 be decreased by \$25,631,000 and 112.2 positions, and that Item 4440-001-0001 be amended to reflect this change. This adjustment will leave sufficient resources for the DMH to provide program evaluation and monitoring, statewide support of the MHSA housing program, suicide prevention program, and mental illness stigma reduction, as well as contract funding for the California Institute for Mental Health and the National Alliance on Mental Illness.

Mental Health Services Oversight and Accountability Commission (Issue 201)—It is requested that Item 4560-001-3085 be decreased by \$1,345,000 and 12.0 positions. This adjustment will leave sufficient resources for the OAC to provide statewide policy direction and technical support and staff Commission meetings.

Department of Rehabilitation (Issue 201)—It is requested that Item 5160-001-3085 be eliminated to reflect efficiencies in the implementation of the MHSA, resulting in a decrease of \$216,000 and 1.0 position, and that Item 5160-001-0001 be amended to reflect this change.

Department of Social Services (Issue 202)—It is requested that Item 5180-001-3085 be eliminated to reflect efficiencies in the implementation of the MHSA, resulting in a decrease of \$766,000 and 5.0 positions, and that Item 5180-001-0001 be amended to reflect this change.

Department of Education (Issue 680)—It is requested that Item 6110-001-3085 be eliminated to reflect efficiencies in the implementation of the MHSA, resulting in a decrease of \$711,000 and 3.0 positions, and that Item 6110-001-0001 be amended to reflect this change.

California State Library (Issue 001)—It is requested that Item 6120-011-3085 be eliminated to reflect efficiencies in the implementation of the MHSA, resulting in a decrease of \$179,000, and that Item 6120-011-0001 be amended to reflect this change.

Board of Governors of the California Community Colleges (Issue 474)—It is requested that Item 6870-003-3085 be eliminated to reflect efficiencies in the implementation of the MHSA, resulting in a decrease of \$216,000 and 1.0 position.

The effect of my requested action is reflected on the attachment.

If you have any questions or need additional information regarding this matter, please call John Doyle, Assistant Program Budget Manager, at (916) 445-6423.

ANA J. MATOSANTOS
Director

By:



MICHAEL COHEN
Chief Deputy Director

Attachment

cc: Honorable Christine Kehoe, Chair, Senate Appropriations Committee
Attention: Mr. Bob Franzoia, Staff Director
Honorable Bob Huff, Vice Chair, Senate Budget and Fiscal Review Committee
Attention: Mr. Seren Taylor, Staff Director
Honorable Felipe Fuentes, Chair, Assembly Appropriations Committee
Attention: Mr. Geoff Long, Chief Consultant
Honorable Jim Nielsen, Vice Chair, Assembly Budget Committee
Attention: Mr. Eric Swanson, Staff Director
Honorable Carol Liu, Chair, Senate Budget and Fiscal Review Subcommittee No. 1
Honorable Holly Mitchell, Chair, Assembly Budget Subcommittee No. 1
Honorable Susan Bonilla, Chair, Assembly Budget Subcommittee No. 2
Honorable Joan Buchanan, Chair, Assembly Budget Subcommittee No. 4
Honorable Mark DeSaulnier, Chair, Senate Budget and Fiscal Review Subcommittee No. 3
Honorable Michael Rubio, Chair, Senate Budget and Fiscal Review Subcommittee No. 4
Mr. Mac Taylor, Legislative Analyst (4)
Mr. Craig Cornett, Senate President pro Tempore's Office (2)
Mr. Christopher W. Woods, Assembly Speaker's Office (2)
Ms. Deborah Gonzalez, Policy and Fiscal Director, Assembly Republican Leader's Office

MHSA Reduction Finance Letter by Department Budget Year 2011-12.
(Dollars in Thousands)

Department	Governor's Budget		Proposed Finance Letter Reductions		Revised Budget		Comments
	Amount	Positions	Amount	Positions	Amount	Positions	
Judicial	\$ 1,063	6	\$ -	0	\$ 1,063	6	Supports staff providing technical assistance to trial courts in addressing the needs of mentally ill adults and juveniles.
SCO	\$ 1,733	0	\$ -	0	\$ 1,733	0	The current assessment is for the 21st Century Project, which reflects fixed costs consistent with project accounting.
DCA	\$ 120	1	\$ 120	1	\$ -	0	Does not provide direct access to services. Provides input on the development of mental health professional licensing exams.
OSHPD	\$ 895	5	\$ -	0	\$ 895	5	Operates a statewide loan forgiveness program for mental health professionals. This program is more appropriately administered at a statewide level.
Aging	\$ 259	2	\$ 259	2	\$ -	0	Provides referrals to mental health services for the elderly. Under this proposal, county mental health programs would have the discretion to provide these services.
DADP	\$ 267	2	\$ 267	2	\$ -	0	Does not provide direct access to services. These resources fund outreach activities targeting individuals with co-occurring disorders, such as substance abuse and mental illness, to establish referrals and maintain an informational website.
DHCS	\$ 1,522	4	\$ 657	2	\$ 865	2	Reduce funding to \$865,000 and 2.0 positions to improve mental health care for Medi-Cal beneficiaries with serious mental illness or serious emotional disturbances and provide oversight of county programs that perform this function.
MRMIB	\$ 177	2	\$ 177	2	\$ -	0	Does not provide direct services. Funds are used to evaluate process and policies for access to mental health services in the Healthy Families Program.
DDS	\$ 1,133	1	\$ -	0	\$ 1,133	1	Coordinates statewide system of mental health services for developmentally disabled.
DMH	\$ 34,617	146.5	\$ 25,631	112.2	\$ 8,986	34.3	Funding will provide the necessary resources for the DMH to evaluate program outcomes and monitor county compliance with the MHSA.
OAC	\$ 4,529	22	\$ 1,345	12	\$ 3,184	10	Funds the OAC's revised advisory and statewide policy role.
DOR	\$ 216	1	\$ 216	1	\$ -	0	Funds are used to provide training to vocational service providers.
DSS	\$ 766	5	\$ 766	5	\$ -	0	Funding is used to provide support, training, and assistance to counties to develop procedures, protocols, and tools necessary to implement and administer the CA Wraparound program. The funding also supports the coordination and collaboration with national partners and the development of performance outcomes. Under this proposal, these services can be administered by county mental health programs.
CDE	\$ 711	3	\$ 711	3	\$ -	0	Under this proposal, county mental health programs can work with local education agencies, county offices of education, and special education local plan areas to provide necessary services.

MHSA Reduction Finance Letter, by Department. Budget Year 2011-12.
(Dollars in Thousands)

Department	Governor's Budget		Proposed Finance Letter Reductions		Revised Budget		Comments
	Amount	Positions	Amount	Positions	Amount	Positions	
CSL	\$ 179	0	\$ 179	0	\$ -	0	Under this proposal, informational services can be provided by county mental health programs.
CCC	\$ 216	1	\$ 216	1	\$ -	0	Under this proposal, county mental health programs can work with community colleges to determine appropriate service levels.
FISCAL	\$ 190	0	\$ -	0	\$ 190	0	The current assessment is for the FISCAL Project, which reflects fixed costs consistent with project accounting.
Military	\$ 552	3	\$ -	0	\$ 552	3	Provides mental health referral services to National Guard members returning from active duty. The military has seen a rise in the number of service members requiring mental health services.
DVA	\$ 507	2	\$ -	0	\$ 507	2	Provides mental health referral services to veterans. The military has seen a rise in the number of service member requiring mental health services.
Totals	\$ 49,652	206.5	\$ 30,544	143.2	\$ 19,108	63.3	