Wednesday, January 15, 2025 1:30 pm to 5:00 pm

Hilton La Jolla Torrey Pines 10950 North Torrey Pines Road La Jolla, CA 92037 Fairway I Room Zoom Meeting Link

Meeting ID: 825 6528 8596 Passcode: 474826 Join by phone: (669) 900-6833 Passcode: 474826

1:30 pm	Welcome, Introductions, and Housekeeping Barbara Mitchell, Chairperson and Council Staff	
1:40 pm	Committee "Meet & Greet" with new CBHPC Staff Barbara Mitchell, Chairperson, and All Committee Members	ıb 1
1:55 pm	October 2024 Meeting Minutes Javier Moreno, Chair-Elect	ıb 2
2:00 pm	Partner's Voice: Behavioral Health Transformation Ta Stan Galperson, Psy.D, Director of the Residential and Outpatie Programs, Tarzana	ib 3 ent
2:45 pm	Public Comment on Partner Presentation Behavioral	
2:50 pm	Break	
3:05 pm	Auditor's Report on Drug and Alcohol Treatment Facilities Discussion Committee Members	ıb 4
3:15 pm	Behavioral Health Transformation Ad-Hoc Update Ta Barbara Mitchell, Chairperson and Javier Moreno, Chair-Elect	ıb 5
3:25 pm	Behavioral Health Transformation Discussion All Council Members	ıb 6
3:45 pm	Public Comment on Behavioral Health Transformation	
3:50 pm	Break	
4:00 pm	Follow-up Discussion: 2025 Committee Meeting Structure & Legislative Activities Javier Moreno, Chair-Elect and All LPPC Members	ıb 7

4:35 pm CBHPC Workgroup Updates Tab 8

Workgroup Liaisons

4:40 pm General Public Comment

4:45 pm Meeting Wrap-up and Next Steps

5:00 pm Adjourn

The scheduled times on the agenda are estimates and subject to change.

Public Comment: Limited to a 2-minute maximum to ensure all are heard.

Committee Members

Barbara Mitchell, Chairperson Javier Moreno, Chair-Elect

Amanda Andrews, Karen Baylor, Stephanie Blake, Monica Caffey, Erin Franco, Veronica Kelley, Steve Leoni (On Leave), Catherine Moore, Noel O'Neill, Liz Oseguera, Sarah Poss, Darlene Prettyman, Marina Rangel, Danielle Sena, Karrie Sequeira, Daphne Shaw, Deborah Starkey, Tony Vartan, Susan Wilson, Uma Zykofsky

Wednesday, January 15, 2025

Agenda Item: Committee "Meet & Greet" with new CBHPC Staff

Enclosures: None

Background/Description:

The Council hired a new Behavioral Health Policy Consultant responsible for the ongoing coordination of public policy, legislative, and advocacy activities of the California Behavioral Health Planning Council.

The start date for new Council staff, Maydy Lo, is January 6, 2025. This is an opportunity for the committee to meet and get to know the new staff person.

California Behavioral Health Planning Council Legislation and Public Policy Committee (LPPC) Meeting Wednesday, January 15, 2025

Agenda Item: October 2024 Meeting Minutes

Enclosures: None

Background/Description:

There are not minutes to approve. Draft minutes will be presented at the next meeting.

Wednesday, January 15, 2025

Agenda Item: Partner's Voice: Behavioral Health Transformation

Enclosures: None

How This Agenda Item Relates to Council Mission

To review, evaluate and advocate for an accessible and effective behavioral health system.

This presentation is intended to provide the committee with the perspective of a partner organization providing a full continuum of care for substance use disorder (SUD) with a focus on SUD integration and the housing continuum. This information will assist the committee in identifying areas of advocacy and inform the policy recommendations developed by the committee.

Background/Description:

As Director of the Residential and Outpatient Programs at Tarzana Treatment Centers in Tarzana, Dr. Galperson oversees one of the largest rehabilitation programs in Los Angeles County. He has held both clinical and administrative positions in several well-known treatment facilities since 1986. He holds a Master's Degree in Counseling, and earned his Doctorate in Clinical Psychology in 1995. He became a member of the Tarzana Treatment Center management team in January of 1996.

Dr. Galperson will address the following questions in his presentation.

- 1. What general services and housing services does Tarzana provide?
- 2. Is there a formal SUD housing continuum in California? If so, what does it entail?
- 3. What various SUD housing options are available? How are they accessed?
- 4. Is SUD housing covered by Medi-Cal?
- 5. What are the housing options for individuals with SUD who wish to live in a completely sober environment? (address perceived challenges with housing first models)
- 6. Is there a sufficient amount of SUD housing? (If not, what is needed?)
- 7. What policy recommendations do you have for the committee regarding SUD housing?

Wednesday, January 15, 2025

Agenda Item: Auditor's Report on Drug and Alcohol Treatment Facilities Discussion

Enclosures: Drug and Alcohol Treatment Facilities (Report 2023-120) Fact Sheet

Drug and Alcohol Treatment Facilities (Report 2023-120) Full Report

Background/Description:

In October of 2024 the State Auditor released a report on Drug and Alcohol Treatment Facilities. The Department of Health Care Services licenses residential drug and alcohol recovery and treatment facilities that provide substance use disorder services, such as detoxification and counseling. To protect the health and safety of treatment facility residents, the Department of Health Care Services inspects facilities to ensure that they meet requirements in state law and investigates complaints about facilities and treatment counselors.

The audit focused primarily on residential treatment facilities, with a specific review of the concentration of treatment facilities serving six or fewer residents within residential communities.

The agenda item is to primarily share about the release of this report. No actions will be taken however committee members may make suggestions for future presentations or advocacy, if appropriate.

Wednesday, January 15, 2025

Agenda Item: Behavioral Health Transformation Ad-Hoc Update

Enclosures: Behavioral Health Transformation Full Service Partnerships (FSPs)

Listening Session Response Letter (November 2024)

Behavioral Health Transformation Policy Manual Module 1 Letter (December 2024)

Background/Description:

In June of 2024 the Officer Team established an Ad Hoc working group to guide the California Behavioral Health Planning Council's advocacy efforts around the implementation of Proposition 1, now referred to as the Behavioral Health Transformation.

Committee members from the Ad-Hoc group will provide an update on activities since the October meeting and respond to any questions members may have.

Wednesday, January 15, 2025

Agenda Item: Behavioral Health Transformation Discussion

Enclosures: Behavioral Health Services Act (BHSA) Council Prioritization Document

Background/Description:

The Executive Committee created a list of CBHPC Areas of Interest document to assist the Council in tracking, reviewing, and evaluating the Behavioral Health Transformation Implementation and assigning related work activities to the appropriate committees.

The Legislation and Public Policy Committee will review the document to identify and discuss priority areas assigned to the committee. The discussion may include but is not limited to:

- Identification of subject areas the committee needs to become more familiar with in order to make policy recommendation.
- Components of the Behavioral Health Transformation that needs to be tracked.
- The identification of partners who perspectives need to be included as the Council reviews, evaluates and advocates throughout the implementation.
- Potential policy recommendations.
- Recommendations of items for the Ad Hoc to address.

Behavioral Health Transformation is a priority to the Council due to our mandated in Welfare and Institutions Codes Section 5604.2 (a), Section 5610 (a) (1), Section 5610 (b) (1) and Section 5664. (a).

Prioritization of Sections for BHSA								
Topic	Code Section(s)	Implementation Date (Effective Date)	Lead Committee	All Relevant Committees	Committee Action Update			
Definitions of who can be served under BHSA	SEC 2(b); SEC 12 4094 (f)(1)(B); SEC 12 4094 (h); 4096.5(b); SEC 38 5806(a),(2)(a),(D)(E)(5)(7)(8)(9)(10); SEC 46 5835(2)(A); SEC 50 5840(E)(i)(ii) and (c)(3); SEC 53 5840.6(c)(1) and (f)(2); SEC 55 5840.7(a) (1)(3)(6); SEC 76 5868(a)(2)(A)(D)(3)(4)(5)(8)(9)(10); SEC 78 5878.1(a); SEC 81 5878.3(a)(1)(A)(c); SEC 95 5892(d) and (L)(7)	July 1, 2026 (All sections)	TBD	LPPC, HHC, SMC				
FSPs and restrictive nature of who is eligible/time limitations	Part 4.1: 5887(d)(1); 5887.1; SEC 95 5892(a)(2A)	July 1, 2026 (Both sections)	SMC	LPPC, SMC				
Data Requirements	SEC 109 WIC 5963.02 (b), WIC 5963.04 (a)(2); SEC 18 WIC 5604.2 (a)(7); SEC 25 WIC 5610 (b)(1); SEC 27 WIC 5613, SEC 30 WIC 5664 (a)	January 1, 2025 (SEC 27 County Data to Boards and DHCS, SEC 25 WIC 5610 (b)(1), SEC 109 WIC 5963.04 (a)(2) BHOATR), July 1, 2025 (SEC 109 Integrated Plan Data), July 1, 2026 (SEC 25 WIC 5610 (b)(1))	POC	POC				
Outcomes	SEC 64. WIC 5848 (c),(e); SEC 84 WIC 5886 (k)(1); SEC 113 WIC 14707.5 (b)(2), (c), (d), (e)(1); SEC 114 WIC 14707.5; SEC 25 WIC 5610 (b)(1)	January 1, 2025 (SEC 64, SEC 84, SEC 113, SEC 114) July 1, 2026 (SEC 25)	POC	POC				
Integrated Plan (3-year County Plans)	SEC 40 5813.5 (d)(g)(4); SEC 63 5847; SEC 95 5892(a)(1)(B)(C); Chapter 3 Article 2 5963, 5963.01, 5963.02, 5963.03, 5963.04, 5963.05	January 1, 2025 (Chapter 3 Article 2 5963.03, 5963.05); July 2026 (Chapter 3 Article 2 5963.04 County Behavioral Health Outcomes, Accountability, and Transparency Report) July 1, 2026 (SEC 40 5813.5 (d)(g)(4)), SEC 95 5892(a)(1)(B)(C), Chapter 3 Article 2 5963, 5963.01, 5963.02)	SMC	SMC				
Engaging Stakeholders with Emphasis on Consumer Voice	SEC 38 WIC 5806 (1); SEC 64 WIC 5848 (a); SEC 95 WIC 5892 (c)(3), (e)(1)(C)	January 1, 2025 (SEC 38 Stakeholder Engagement on IPs)	POC	POC				
Statewide Workforce	SEC 2(e); 1095.5(a)(1); SEC 12 4094 (f)(1)(C)(D); SEC 38 5806 (C) and (b)(c); SEC 42 5830 (c)(3); SEC 53 5840.6(c)(4)(6); SEC 55 5840.7(c); SEC 66 5848.5(b)(3)(4)(8-b-iv-vi); SEC 95 5892(f)(1)(D) and (L)(5)	January 1, 2025 (SEC 10, SEC 66) July 1, 2026 (All Other Sections)	WEC	WEC				
Housing Continuum	SEC 43 5830 (a)(1) SEC 95 5892 (a)(1)(A),(b)(1)	July 1, 2026 (Both sections)	HHC	HHC, SMC				
Implementation of SUD services in all parts of the mental health service system	SEC 2(b); SEC 40 5813.5(j)(k); SEC 50 5840(a)(1),(3), and (e); SEC 53 5840.6(e)(4); SEC 55 5840.7(a)(1)(5); SEC 81 5878.3(d)(2); SEC 90 5891(a)(1); SEC 92 5891.5(a)	July 1, 2026 (All sections)	SMC	LPPC, SMC				
Effective collaboration with partners in the behavioral health transformation for a statewide plan that serves all Californians	SEC 109 5963.06. (c)(11); SEC 58 WIC 5845 (f)(13), (g)(1)	December 21, 2029 (SEC 109) January 1, 2026 (SEC 58 Collaboration between BHSOAC with CBHDA, DHCS, CBHPC on reports and recommendations)	TBD	TBD				

Торіс	Code Section(s)	Implementation Date (Effective Date)	Lead Committee	All Relevant Committees	Committee Action Update
Behavioral Health Board	SEC 15 WIC 5604; SEC 19 WIC 5604.2; SEC 109 WIC 5963.03 (b)	January 1, 2025 (All sections)	POC	POC	
Voluntary vs. Involuntary Services*	SEC 12 4094(h); SEC 13;SEC 38 5806(E); SEC 61 5845.5(e)(2); SEC 74 5852.5(a), SEC 85 5886 (F)(viii); SEC 95 5892(d)	January 1, 2025 (SEC 61, SEC 74, SEC 85) July 1, 2026 (All Other Sections)	SMC	LPPC, PRC, SMC	
Crisis Continuum*	SEC 2(i); SEC 12 4094; SEC 13 4096.5; SEC 32 5675; SEC 36 5805; SEC 53 5840.6(7) and (e)(1) ; SEC 55 5840.7(a)(1)(2)(10); SEC 66 5848.5; SEC 74 5852.5(a); SEC 76 5868; Part 4.1 5887(e); SEC 95 5892(f)(1)(E)(vi)(IV)	January 1, 2025 (SEC 66, SEC 74)	SMC	SMC	

Wednesday, January 15, 2025

Agenda Item: Follow-up Discussion: 2025 Committee Meeting Structure & Legislative

Activities

Enclosures: LPPC Legislation Process Flow Chart

LPPC Legislation Process Overview

How This Agenda Item Relates to Council Mission

To review, evaluate and advocate for an accessible and effective behavioral health system.

The Council is mandated to advocate for an accountable system of responsive services that are strength-based, recovery-oriented, culturally, and linguistically responsive, and cost-effective. To achieve these ends in an effective manner, the Council's Legislation and Public Policy Committee take positions on legislation and advocates for those positions throughout the legislative session.

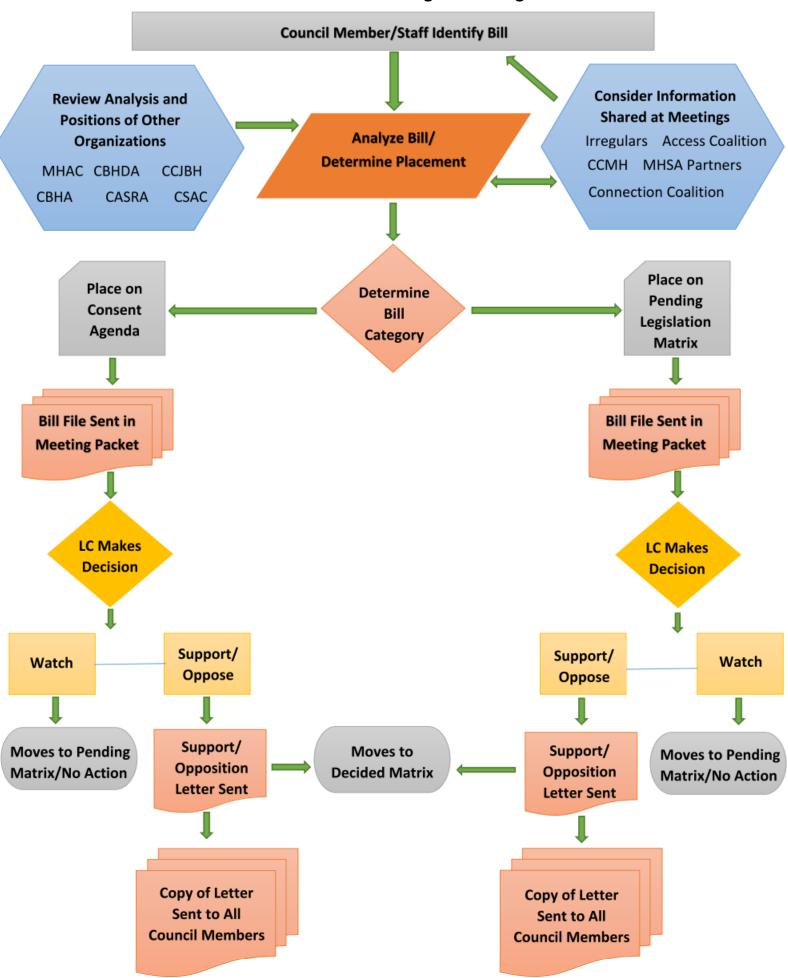
Background/Description:

At the June 2024 committee meeting members expressed a desire to discuss the structure of the committee meetings. In October the committee identified ways to create more time to discuss legislation and effectively take positions on more bills.

Council Staff will review and summarize the key items from the October discussion and guide the committee in formalizing any required structural changes.

The Council's current process for taking positions is attached for reference.

California Behavioral Health Planning Council Legislation Process



California Behavioral Health Planning Council Legislation Committee Legislation Process Overview

The California Behavioral Health Planning Council (CBHPC) provides support for legislation and policy that furthers the Council's Vision. This includes increasing public behavioral health awareness through collaboration with local consumer advocacy agencies for access and improved quality of care and by responding to proposed legislation, rulemaking, and budget bills based on the CBHPC Policy Platform.

In reaching a decision on a position to be taken on a bill, the Legislation Committee may consider the following options:

- Support This means there is absolute support, no issues or questions.
- Support in concept This means there are a few questions, however the CONCEPT or INTENT is what is being supported. The concern(s) can be documented in any following written communication to the bill's author(s)/sponsor(s) and/or the Assembly/Senate Committee the legislation will be heard in.
- Neutral/Watch This means that due to 1) not obtaining a consensus on position; 2) there is hesitation on providing a negative position; 3) there remains too much ambiguity, or 4) the bill is known to be a 'spot' or placeholder bill, the Legislation Committee can vote to "watch" the progression of the legislation and to revisit at future Legislation Committee meetings. In cases of "Neutral" vote, no letter is sent to the Legislature.
- Oppose This means there is absolute opposition and there are no ways/means to rectify the position.
- Oppose unless amendments This occurs when suggested language can be provided in the letter to effect a change in the content and/or language that would then cause a position change from opposition to support.

In an effort to cover as many bills as possible, the Council often partners with other organizations, who also monitor and take positions on legislation, to identify bills, share information/ analyses with each other. Organizations such as the Council on Criminal Justice and Behavioral Health (CCJBH), County Behavioral Health Directors Association of California (CBHDA), CA Association of Social Rehab Agencies (CASRA), CA Coalition of Community BH Agencies (CBHA), Mental Health America California (MHAC), California State Association of Counties (CSAC), and many others.

In order for the Legislation Committee to be able to take positions on bills in a timely manner, a consistent and timely process has been established. The process to facilitate the decision-making on as many bills as possible is outlined below:

1. For each Legislation Committee meeting, staff will prepare a list of bills for the Legislation Committee to consider taking positions on. This list titled "CBHPC Pending Legislation" and will include the bill number (linked to current version), the author, and a brief summary of the bill. When available, staff will provide a Fact Sheet for each bill under consideration. Legislation Committee members have the

California Behavioral Health Planning Council Legislation Committee Legislation Process Overview

option to request hardcopies of any of the bills under consideration, otherwise the current version of the bill can be accessed through the link included in the bill number.

- 2. Once a position is taken and a letter has been sent, staff will move the bill information to a second list titled "CBHPC Legislative Positions". This list will include the bill number, author, a brief summary and the position taken. This list will be posted to the Council's website to serve as a tool for members to use in attending outside meetings and reporting out of Council positions. If the committee takes a watch position on a bill, it will remain on the CBHPC Pending Legislation list. Additionally, at staff's discretion, bills the Legislation Committee took an oppose position on may return to the "Pending Legislation" list if they are amended, for reconsideration by the committee.
- 3. To expedite meetings and reserve time for bills that need to be discussed, the Legislation Committee will have a section on the agenda labeled "Consent Agenda." Items on the consent agenda will be non-controversial items that do not appear to require much, if any, discussion. The consent agenda allows the Legislation Committee to group such bills together under one heading and vote on them at one time. If a member feels discussion is needed on any of the bills on the consent agenda, he/she may request removal of that bill from the consent agenda for separate discussion. Removal enables the bill to be considered and voted upon separately, if discussion is needed.
- 4. The Legislation Committee will take the lead on all legislation, including legislation that falls under the Council's structured priority areas (Workforce and Education, Systems and Medicaid, Housing and Homelessness, Patient Rights'). The Chairperson and Chair-Elect of the Legislation Committee will collaborate with other committees, as needed. When another committee identifies a bill for action, the Legislation Committee must be notified so staff can include it on the Pending Legislation list for consideration.
- 5. The Legislation Committee determined it will meet outside the Council Quarterly Meetings as needed. A *minimum* of ten (10) Legislation Committee members must be present to achieve a quorum. The primary purpose of the in between meetings will be to vote on bills that need action *prior* to the next Quarterly Meeting.

The Council has to uphold the <u>Bagley-Keene Open Meeting Act</u>. Thus, the staff will work with the Legislation Committee to assure dates are known well in advance due to public noticing requirements.

California Behavioral Health Planning Council Legislation Public Policy Committee

Wednesday, January 15, 2025

Agenda Item: CBHPC Workgroups Updates

Enclosures: None

How This Agenda Item Relates to Council Mission

To review, evaluate and advocate for an accessible and effective behavioral health system.

This agenda item provides the opportunity for the Legislation and Public Policy Committee to coordinate the activities of the California Behavioral Health Planning Council (CBHPC) workgroups with the advocacy of the Legislation and Public Policy committee.

Background/Description:

CBHPC's Executive Committee would like to ensure the Planning Council's workgroups are integrated into the work of all committees. Committee members who attended each workgroup will report on discussions held during each workgroup meeting to identify any points of collaboration with Legislation and Public Policy committee activities.

CBHPC workgroups:

- Reducing Disparities Workgroup
 - Representative: Uma Zykofsky
- Children and Youth Workgroup
 - Representative: Erin Franco and Noel O'Neill
- Substance Use Disorder Workgroup
 - Representative: Javier Moreno