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CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES Senate Bill (SB) 43, Changes to "Gravely Disabled" Behavioral Health Information Notice: 24-011 Frequently Asked Questions (FAQs)

On October 10, 2023, the Governor signed <u>Senate Bill (SB) 43</u>, which made substantive changes to the Lanterman-Petris-Short (LPS) Act and a related provision of the Health and Safety Code (HSC). On March 25, 2024, DHCS issued <u>Behavioral Health</u> <u>Information Notice (BHIN) 24-011</u> to summarize the changes.

These FAQs were developed to clarify key components of the BHIN in response to stakeholder requests.

1. What is SB 43's new definition of "gravely disabled"?

<u>SB 43</u> amended the definitions of "gravely disabled" contained in subdivisions (h)(1)(A) and (h)(2) of <u>W&I Code § 5008</u>.

SB 43 amended the LPS Act's definition of "gravely disabled" in two ways, shown in bold text below. "Gravely disabled" now means a condition in which a person:

- as a result of a mental health disorder, impairment by chronic alcoholism, severe substance use disorder, or a co-occurring mental health disorder and severe substance use disorder,
- is unable to provide for their basic personal needs for food, clothing, shelter, *personal safety, or necessary medical care*.

This new definition applies to the three primary LPS Act processes:

- Crisis Intervention: Assessment, evaluation and crisis intervention or placement in an LPS-designated facility for evaluation and treatment for up to 72 hours (W&I Code § <u>5150</u>).
- Intensive Treatment: Up to 14 days (W&I Code § <u>5250</u>); if necessary and appropriately authorized, the intensive treatment period for grave disability may be extended for up to two periods of 30 days each (W&I Code § <u>5270.15</u>, <u>5270.70</u>).
- Conservatorship: Up to one year, and renewable, for ongoing behavioral health treatment and support (W&I Code § <u>5350</u>).





2. What types of facilities can accept a person for assessment, evaluation, and crisis intervention or placement for evaluation and treatment (up to 72 hours, per W&I Code § 5150) for grave disability *due to a severe substance use disorder only*?

Any facility that can provide assessment, evaluation, and crisis intervention, as these services are defined in W&I Code § 5008 and § 5150.4, can accept a person on a 5150 hold for grave disability due to a severe substance use disorder only. Examples include, but are not limited to, emergency departments, certified crisis stabilization units, and hospital medical units. Facilities do <u>not</u> need to be designated by a county, or have the designation approved by DHCS, to provide assessment, evaluation, and crisis intervention services as described in this question.

3. What types of facilities can admit a person for intensive treatment (up to 14 days, per W&I Code § 5250, or for up to two additional 30-day periods per W&I Code § 5270.15 and 5270.55) for grave disability *due to a severe substance use disorder only*?

The following facility types – <u>after designation by counties and approval by DHCS</u> – may admit people who are gravely disabled due to a severe substance use disorder only:

- General acute care hospitals (GACHs) with distinct part units providing chemical dependency recovery services as a supplemental service (as defined in <u>HSC § 1250(a)</u> and <u>HSC § 1250.3(e)-(g)</u>);
- Acute psychiatric hospitals (APHs) with distinct part units providing chemical dependency recovery services as a supplemental service (as defined in <u>HSC §</u> <u>1250(b)</u> and <u>HSC § 1250.3(e)-(g)</u>); and
- Certified crisis stabilization units (CSUs) in accordance with § <u>1840.338</u> and § <u>1840.348</u> of Title 9 of the California Code of Regulations.

Hospitals can apply to provide chemical dependency recovery services as a supplemental service. Please visit the California Department of Public Health's <u>facility</u> <u>licensing and certification page</u> to learn more; questions may be directed to <u>CABHospitals@cdph.ca.gov</u>.

To be approved by DHCS, county-designated facilities must meet the requirements set forth in § 821 of Title 9 of the California Code of Regulations. SB 43 did not change the facility designation requirements that exist in state law.

4. What types of facilities can admit a person for treatment of a co-occurring mental health disorder and a severe substance use disorder?

The following facility types – <u>after designation by counties and approval by DHCS</u> – are allowed to treat people with co-occurring mental health disorder and severe substance use disorder:

- Acute Psychiatric Hospitals
- General Acute Care Hospitals
- Skilled Nursing Facilities with Special Treatment Programs
- Certified Crisis Stabilization Units
- Psychiatric Health Facilities
- Mental Health Rehabilitation Centers

5. When will DHCS update advisement forms 1801, 1802, and 1808 and post them on its website?

DHCS has updated forms 1801, 1802, and 1808 to incorporate changes made by SB 43. These optional forms are available on the DHCS Website under <u>Mental Health</u> <u>Certification Forms</u>.

6. Do counties have to use the DHCS advisement forms 1801, 1802, 1808?

No. Although DHCS provides template advisement forms, local entities are permitted to develop and use their own forms, as long as they contain information required by statute (see W&I Code § 5252, and § 5150 (g) through (j)). SB 43 did not change these advisement requirements.

7. What are SB 43's new LPS data reporting requirements?

Effective January 1, 2024, DHCS is required to collect and report on additional data regarding the following (<u>W&I Code § 5402 (a)</u>):

The number of persons admitted or detained in the county by length of treatment:

- 72-hour evaluations and crisis intervention (W&I Code § 5150);
- 14-day (W&I Code § <u>5250</u>, <u>5260</u>) and 30-day periods of intensive treatment (W&I Code § <u>5270.15</u>, <u>5270.70</u>);
- For whom temporary conservatorships are established (W&I Code § <u>5352.1</u>);
- 180-day post certification intensive treatment (W&I Code § <u>5300</u>);
- For whom conservatorships are established in each county (W&I Code § 5350); and

• Transfers to mental health facilities pursuant to Penal Code § <u>4011.6</u>. **By each Condition**:

- Danger to self;
- Danger to others;
- Grave disability due to a mental health disorder;
- Grave disability due to a severe substance use disorder; and
- Grave disability due to both a mental health disorder and a severe substance use disorder.

Requirements for LPS designated facilities and other entities:

LPS designated facilities and other entities shall collect and report data to the county behavioral health director consistent with the county's policies and procedures, if established pursuant to W&I Code § 5402(b)(2)(B).

Requirements for county behavioral health directors:

County behavioral health directors are responsible for establishing policies and procedures to ensure compliance with data requirements and providing DHCS with the additional data. Each county behavioral health director must submit accurate and complete data received from each designated and approved facility and each other entity involved in implementing W&I Code Section 5150. Only county behavioral health directors shall submit data to DHCS pursuant to W&I Code § 5402(b)(1)(A)-(C).

County Boards of Supervisors are encouraged to review this data to identify and address trends, opportunities, and challenges.

Requirements for DHCS:

<u>W&I Code § 5402</u> requires DHCS to collect data quarterly from county behavioral health directors and publish, on or before May 1 of each year, a report including quantitative, deidentified information about operation of the LPS Act.

On March 29, 2024, DHCS issued <u>BHIN 24-013</u> to launch phase 2 of online data collection via the "Nintex" platform; this guidance includes SB 43's data collection and reporting requirements. For questions pertaining to LPS data, please email <u>MHDATA@dhcs.ca.gov</u>.

8. Do counties have to adopt the changes to the definition of "gravely disabled" made by SB 43?

The policy changes made by SB 43 became effective January 1, 2024.

However, SB 43 permits a county, by adoption of a resolution of its governing body, to defer implementation of the changes to the definition of "gravely disabled" in W&I Code § 5008(h) until January 1, 2026 at the latest (<u>W&I, Code § 5008(h)(4)</u>).

9. Where can definitions be found for "severe substance use disorder", "personal safety", and "necessary medical care"?

The definitions for these terms may be found in <u>W&I Code § 5008</u>. For convenience, the definitions are provided below:

"Severe substance use disorder" means a diagnosed substance-related disorder that meets the diagnostic criteria of "severe" as defined in the most current version of the Diagnostic and Statistical Manual of Mental Disorders.

"Personal safety" means the ability of one to survive safely in the community without involuntary detention or treatment pursuant to [the LPS Act].

"**Necessary medical care**" means care that a licensed health care practitioner, while operating within the scope of their practice, determines to be necessary to prevent serious deterioration of an existing physical medical condition which, if left untreated, is likely to result in serious bodily injury as defined in W&I Code § <u>15610.67</u>.