



California Behavioral Health Planning Council

ADVOCACY • EVALUATION • INCLUSION

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MS 2706

June 10, 2024

The Honorable Gavin C. Newsom
California State Capitol
Sacramento, CA 95814

RE: Opposition to May Revision Proposed Health Care Workforce Development Budget Cuts

Dear Governor Newsom,

The California Behavioral Health Planning Council (CBHPC) is a 40-member advisory body with the authority to review, evaluate, and advocate for persons with Serious Mental Illness (SMI) and youth with Severe Emotional Disturbances (SED) in Welfare and Institutions Code §5771 and §5772. The recommendations outlined in this letter are in alignment with the Council's [Policy Platform](#) and our vision of a behavioral health system that makes it possible for individuals with lived experience of a serious mental illness or substance use disorder to lead fulfilling and purposeful lives.

CBHPC's Workforce and Employment Committee (WEC) is tasked with addressing the workforce shortage in California's public behavioral health system (PBHS) as well as the future of funding for workforce efforts to meet the diverse needs of the individuals served. State law provides CBHPC with specific responsibilities in advising the Department of Health Care Services (DHCS) and Access Information (HCAI) on policy development of education and training. The Council is also required to provide oversight for the development of the Five-Year Workforce Education and Training Development Plan (WET Plan), which includes the review and final approval of the plan. The WEC works closely with HCAI staff to provide input, feedback, and guidance for the Plan.

The Council advocated for establishing Peer Certification in state law through Senate Bill 803, starting with a letter written in 2015, "[Peer Certification: What Are We Waiting For?](#)". Additional letters of advocacy for Peer Certification, Community Health Worker Benefit, Occupational Therapists, and other provider types are located under the [Committee](#)



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[Documents](#) section of the Workforce and Employment Committee Webpage.

The WEC continues to meet with the Department of Health Care Services (DHCS), California Mental Health Services Authority (CalMHSA), peer-run organizations, and county partners to improve and effectively implement the Medi-Cal Peer Certification Program.

The CBHPC recently met with behavioral health stakeholders with concerns about the proposed funding cuts. We share strong opposition to the following budget cuts proposed by the May Revision for health workforce development:

- 1) \$854.6 million budget reduction for various behavioral health care workforce initiatives that aim to increase education and training as well as the number of underrepresented individuals in health care professions.
- 2) \$189.4 million budget reduction for the Mental Health Services Act (MHSA) Fund for behavioral health workforce programs.

We acknowledge that there is funding for workforce initiatives in the Behavioral Health Services Act (BHSA), however, this funding is not sufficient to build and sustain a robust behavioral health workforce that meets the needs of all Californians served in the Public Behavioral Health System. According to the Steinberg Institute, California will need approximately 375,000 behavioral health providers in the next 10 years to meet the current and future demand for services. A 2022 University of San Francisco report also reveals that demand for such services escalated during the 2010s and further during the COVID-19 pandemic, highlighting significant racial/ethnic and socio-economic discrepancies in the unmet needs for behavioral health services. Therefore, a substantial, multi-year funding commitment is essential to address the current workforce shortage, beyond what the BHSA may offer.

Regarding the reduction of \$854.6 million reduction for behavioral health care workforce initiatives, CBHPC shares concern for reductions in programs administered by the Department of Health Care Access and Information (HCAI) as described in #1-6 on Page 3 of the Steinberg Institute's letter of opposition. We would like to add a concern regarding reductions to HCAI's Peer Personnel Training and Placement Program, as well as expand on the shared concerns on the funding cut that impacts Community Health Workers and University and College grants for behavioral health professionals.



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Peer Personnel Training and Placement Program

The peer workforce is composed of diverse, competent, and culturally responsive providers that fill the behavioral health workforce gap for California's diverse population. A 2023 Report by the California Behavioral Health Directors Association (CBHDA), authored by the Healthforce Center at UC San Francisco, "[Building the Future Behavioral Health Workforce](#)," found that Black and Latino(a) providers are substantially underrepresented among psychiatrists and clinical and counseling psychologists, and most behavioral health professionals speak only English. It is crucial that funding through the Peer Personnel Training and Placement Program remains intact to support the capacity for the current and future peer workforce that meets the racial/ethnic and cultural needs of California's diverse population.

Community Health Workers (CHWs)

The proposed decrease of \$188.9 million in F Y 2024-25 and \$57.5 million in FY 2025-26 that supports workforce development for CHWs is of great concern. Community Health Workers bridge the gap between racial/ethnic and culturally responsive providers and meet the needs of their local communities. CHWs act as a bridge between the community and the health care system. We must ensure a diverse, culturally responsive provider workforce is available to reach underserved communities with mental health and substance use disorders.

University and College Grants for Behavioral Health Professionals

The \$52 million decrease in FY 2025-26 that currently supports the expansion of grants for behavioral health professionals is concerning due to the current workforce budget crisis. Only one-third of Californians who live with a mental illness receive the care they need due to a shortage of behavioral health professionals. California's current behavioral health workforce meets approximately 26% of its need ([Steinberg Institute](#)). Maintaining grants to support the creation of more behavioral health professionals is vital to addressing the behavioral health workforce capacity deficits in California.

The CBHPC strongly opposes the budget cuts proposed by the May Revision for health workforce development and programs. We ask the Legislature to consider restoring these proposed budget cuts that impact the HCAI's funding for workforce education and training, program support and certification for Peer Support Specialists and Community Health Workers (CHWs), and funding that supports efforts to increase behavioral health workforce capacity to meet the growing needs of individuals living with mental health and substance use disorders.



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Thank you for your attention to these important issues. We welcome the opportunity to further discuss our concerns at your convenience.

If you have any questions, please contact Jenny Bayardo, Executive Officer, at (916) 750-3778 or Jenny.Bayardo@cbhpc.dhcs.ca.gov.

Sincerely,

Deborah Starkey
Chairperson

CC: Mary Hernandez, Chief Deputy Legislative Secretary, Office of Governor Newsom
Angela Pontes, Chief Deputy Legislative Secretary, Office of Governor Newsom
Honorable Assembly Speaker Robert Rivas
Honorable Senate Pro Temp Mike McGuire
Elizabeth Landsberg, Director, CA Department of Health Care Access & Information

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