


MEMORANDUM

DATE	May 3, 2017
TO	Policy and Advocacy Committee
FROM	 Konnor Leitzell Student Assistant
SUBJECT	Agenda Item #6(c)(31) – AB 1136 (Eggman) Health Facilities: Residential Mental or Substance Use Disorder Treatment

Background:

This bill would require the California Department of Public Health (CDPH) to develop an internet-based database to collect information about the availability of beds in inpatient psychiatric facilities, crisis stabilization units, residential community mental health facilities, and residential substance use disorder (SUD) treatment facilities. This database would include the following:

- The contact information for the psychiatric health facility's designated employee
- The license type of the facility
- Whether the facility provides substance abuse treatment
- Whether the facility provides medical treatment
- Whether the available bed is secure
- The types of diagnoses for which the available bed is appropriate; and
- The age ranges for which the bed is appropriate.

Location: Assembly Committee on Appropriations

Status: Re-referred to Assembly Committee on Appropriations

Votes: 4/25/2017 Assembly Committee on Health (15-0-0)

Action Requested:

No action is required at this time. Staff will continue to watch AB 1136 (Eggman) to understand the possible impact it may have on access to mental health care and the availability of inpatient and outpatient mental health services.

Attachment A: AB 1136 (Eggman) text

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AB-1136 Health facilities: residential mental or substance use disorder treatment. (2017-2018)

SECTION 1. Article 7.1 (commencing with Section 1323.3) is added to Chapter 2 of Division 2 of the Health and Safety Code, to read:

Article 7.1. Availability of Inpatient Care for Mental or Substance Use Disorder Crisis

1323.3. (a) The State Department of Public Health shall develop and submit a proposal to solicit a grant authorized under the federal 21st Century Cures Act (Public Law 114-255) to develop a real-time, Internet-based database to collect, aggregate, and display information about beds in inpatient psychiatric facilities, crisis stabilization units, residential community mental health facilities, and licensed residential substance use disorder treatment facilities in order to facilitate the identification and designation of facilities for the temporary treatment of individuals in mental or substance use disorder crisis.

(b) (1) A database created using grant funds received as a result of the proposal submitted pursuant to subdivision (a) shall include, at a minimum, all of the following:

(A) The contact information for the facility's designated employee.

(B) The facility's license type.

(C) If the facility provides substance abuse treatment.

(D) If the facility provides medical treatment.

(E) If the available bed is secure.

(F) The types of diagnoses for which the bed is appropriate.

(G) The age ranges for which the bed is appropriate.

(2) A database created using grant funds received as a result of the proposal submitted pursuant to subdivision (a) shall have the capacity to do both of the following:

(A) Collect data.

(B) Enable searches to identify available beds that are appropriate for the treatment of individuals in a mental health or substance use disorder crisis.

(c) The department shall confer with stakeholders to inform the development of the proposal developed pursuant to this article. Stakeholders represented in this process shall include, but not be limited to, organizations that have experience providing inpatient psychiatric care, organizations that have experience providing psychiatric crisis stabilization, organizations that have experience providing residential community mental health services, and organizations that have experience providing residential substance use disorder treatment.

(d) (1) The department shall submit to the federal Health and Human Services Secretary an evaluation of the effect of any grant funds received as a result of the proposal submitted pursuant to subdivision (a) on all of the following:

(A) Local crisis response services and measures for individuals receiving crisis planning and early intervention supports.

(B) Individuals reporting improved functional outcomes.

(C) Individuals receiving regular followup care following a crisis.

(2) The department shall also submit the evaluation described in paragraph (1) to the Legislature in compliance

with Section 9795 of the Government Code.