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SB-929 Community mental health services: data collection. (2021-2022)

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Senate Bill No. 929

CHAPTER 539

An act to amend Section 5402 of the Welfare and Institutions Code, relating to mental health.

[Approved by Governor September 25, 2022. Filed with Secretary of State September 25, 2022.]

LEGISLATIVE COUNSEL'S DIGEST

SB 929, Eggman. Community mental health services: data collection.

Existing law requires the State Department of Health Care Services to collect and publish annually quantitative information concerning the operation of various provisions relating to community mental health services, including the number of persons admitted for evaluation and treatment for certain periods, transferred to mental health facilities, or for whom certain conservatorships are established, as specified. Existing law requires each local mental health director, and each facility providing services to persons under those provisions, to provide the department, upon its request, with any information, records, and reports that the department deems necessary for purposes of the data collection and publication.

This bill would additionally require the department to collect data quarterly and publish, on or before May 1 of each year, a report including quantitative, deidentified information relating to, among other things, the number of persons in designated and approved facilities admitted or detained for 72-hour evaluation and treatment, clinical outcomes and services for certain individuals, waiting periods prior to receiving an evaluation or treatment services in a designated and approved facility, demographic data of those receiving care, the number of all county-contracted beds, and an assessment of the disproportionate use of detentions and conservatorships on various groups. The bill would specify that the information be from each county for some of those data.

The bill would require the Judicial Council to provide the department, by October 1 of each year, with data from each superior court to complete the report, including, among other things, the number and outcomes of certification review hearings, petitions for writs of habeas corpus, and judicial review hearings. The bill would, beginning with the report due May 1, 2025, require the report to also include the progress that has been made on implementing recommendations from prior reports. The bill would require the department to make the report publicly available on the department's internet website. The bill would require each county behavioral health director or other entity involved in implementing the provisions relating to detention, assessment, evaluation, or treatment for up to 72 hours to provide data as prescribed by the department. The bill would authorize the department to impose a plan of correction against a facility or county that fails to submit data timely or as required.

The bill would authorize the department to implement these provisions through information notices or other similar written instructions. The bill would exempt contracts entered into by the department for purposes of these provisions from certain contract-related requirements.

To the extent that the bill would increase the duties of county behavioral health directors, facilities of local entities, or any other local entities with regard to providing the department with new types of data, the bill would impose a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that, if the Commission on State Mandates determines that the bill contains costs mandated by the state, reimbursement for those costs shall be made pursuant to the statutory provisions noted above.

Vote: majority Appropriation: no Fiscal Committee: yes Local Program: yes

THE PEOPLE OF THE STATE OF CALIFORNIA DO ENACT AS FOLLOWS:

SECTION 1. Section 5402 of the Welfare and Institutions Code is amended to read:

5402. (a) The State Department of Health Care Services shall collect data quarterly and publish, on or before May 1 of each year, a report including quantitative, deidentified information concerning the operation of this division. The report shall include an evaluation of the effectiveness of achieving the legislative intent of this part pursuant to Section 5001. Based on information that is available from each county, the report shall include all of the following information:

- (1) The number of persons in designated and approved facilities admitted or detained for 72-hour evaluation and treatment, admitted for 14-day and 30-day periods of intensive treatment, and admitted for 180-day postcertification intensive treatment in each county.
- (2) The number of persons transferred to mental health facilities pursuant to Section 4011.6 of the Penal Code in each county.
- (3) The number of persons for whom temporary conservatorships are established in each county.
- (4) The number of persons for whom conservatorships are established in each county.
- (5) The number of persons admitted or detained either once, between two and five times, between six and eight times, and greater than eight times for each type of detention, including 72-hour evaluation and treatment, 14-day and 30-day periods of intensive treatment, and 180-day postcertification intensive treatment.
- (6) The clinical outcomes for individuals identified in paragraphs (1) to (4), inclusive.
- (7) The services provided or offered to individuals identified in paragraphs (1) to (4), inclusive. Data pertaining to services provided or offered to individuals placed on each type of hold shall include, but not be limited to, assessment, evaluation, medication treatment, crisis intervention, and psychiatric and psychological treatment services. Data pertaining to services shall specify payer information or funding used to pay for services.
- (8) The waiting periods for individuals prior to receiving an evaluation in a designated and approved facility pursuant to Section 5150 or 5151 and waiting periods for individuals prior to receiving treatment services in a designated facility, including the reasons for waiting periods. The waiting period shall be calculated from the date and time when the hold began and end on the date and time when the individual received an evaluation or received evaluation and treatment services in a designated facility.
- (9) If the source of admission is an emergency department, the date and time of service and release from emergency care.
- (10) Demographic data of those receiving care, including age, sex, gender identity, race, ethnicity, primary language, sexual orientation, veteran status, and housing status, to the extent those data are available.
- (11) The number of all county-contracted beds.
- (12) The number and outcomes of all of the following:
 - (A) The certification review hearings held pursuant to Section 5256.
 - (B) The petitions for writs of habeas corpus filed pursuant to Section 5275.
 - (C) The judicial review hearings held pursuant to Section 5276.
 - (D) The petitions for capacity hearings filed pursuant to Section 5332.
 - (E) The capacity hearings held pursuant to Section 5334 in each superior court.
- (13) Analysis and evaluation of the efficacy of mental health assessments, detentions, treatments, and supportive services provided both under this part and subsequent to release.
- (14) Recommendations for improving mental health assessments, detentions, treatments, and supportive services provided both under this part and subsequent to release.

(15) An assessment of the disproportionate use of detentions and conservatorships on various groups, including an assessment of use by the race, ethnicity, gender identity, age group, veteran status, housing status, and Medi-Cal enrollment status of detained and conserved persons. This assessment shall evaluate disproportionate use at the county, regional, and state levels.

(16) An explanation for the absence of any data required pursuant to this section that are not included in the report.

(17) Beginning with the report due May 1, 2025, the report shall also include the progress that has been made on implementing recommendations from prior reports issued under this subdivision.

(b) (1) Each county behavioral health director, each designated and approved facility providing services to persons pursuant to this division, and each other entity involved in implementing Section 5150 shall provide accurate and complete data in a form and manner, and in accordance with timelines, prescribed by the department. County behavioral health agencies and designated and approved facilities shall provide the data specified in paragraphs (1) to (11), inclusive, of subdivision (a), and any other information, records, and reports that the department deems necessary for the purposes of this section. Data shall be submitted on a quarterly basis, or more frequently, as required by the department. The department shall not have access to any patient name identifiers.

(2) All data submitted to the department by each county behavioral health director and each designated and approved facility shall be transmitted in a secure manner in compliance with all applicable state and federal requirements, including, but not limited to, Section 164.312 of Title 45 of the Code of Federal Regulations.

(c) Information published pursuant to subdivision (a) shall not contain data that may lead to the identification of patients receiving services under this division and shall contain statistical data only. Data published by the department shall be deidentified in compliance with subdivision (b) of Section 164.514 of Title 45 of the Code of Federal Regulations.

(d) The Judicial Council shall provide the department, by October 1 of each year, with data from each superior court to complete the report described in this section, including the number and outcomes of certification review hearings held pursuant to Section 5256, petitions for writs of habeas corpus filed pursuant to Section 5275, judicial review hearings held pursuant to Section 5276, petitions for capacity hearings filed pursuant to Section 5332, and capacity hearings held pursuant to Section 5334 in each superior court. The department shall not have access to any patient name identifiers.

(e) The department shall make the report publicly available on the department's internet website.

(f) (1) The department may impose a plan of correction against a facility that fails to submit data timely or as required pursuant to this section.

(2) The department may impose a plan of correction against a county that fails to submit data timely or as required pursuant to this section.

(g) Notwithstanding Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code, the department may implement, interpret, or make specific this section, in whole or in part, by means of information notices, provider bulletins, or other similar instructions, without taking any further regulatory action.

(h) The department may enter into exclusive or nonexclusive contracts, or amend existing contracts, on a bid or negotiated basis for purposes of administering or implementing the requirements of this section. Contracts entered into or amended pursuant to this section shall be exempt from Chapter 6 (commencing with Section 14825) of Part 5.5 of Division 3 of Title 2 of the Government Code, Section 19130 of the Government Code, and Part 2 (commencing with Section 10100) of Division 2 of the Public Contract Code, and shall be exempt from the review or approval of any division of the Department of General Services.

SEC. 2. If the Commission on State Mandates determines that this act contains costs mandated by the state, reimbursement to local agencies and school districts for those costs shall be made pursuant to Part 7 (commencing with Section 17500) of Division 4 of Title 2 of the Government Code.