VOTE-ONLY AGENDA

HEALTH

ASSEMBLY BUDGET SUBCOMMITTEE NO. 1 ON HEALTH AND HUMAN SERVICES

ASSEMBLYMEMBER DR. JOAQUIN ARAMBULA, CHAIR

WEDNESDAY, MAY 18, 2022

1:30 PM, STATE CAPITOL, ROOM 447

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VOTE-ONLY ITEMS

0530 (0530 California Health and Human Services Agency (CHHS)			
Item	Proposal Name	Proposal Description	Staff Comments and Recommendations	
1	California Healthcare Eligibility, Enrollment, and Retention System Governor's Budget (GB) Budget Change Proposal (BCP)	The Office of Systems Integration (OSI) requests \$1.3 million (\$332,000 General Fund) in fiscal year (FY) 2022-23 and ongoing and 6.0 permanent positions to support the stabilization of critical services within the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS). This proposal expands the CalHEERS team to develop, test, and implement federal and state mandated system changes. It also addresses the increased workload needed to manage the recent change in the Systems Integrator prime vendor contract.	Staff Recommendation: Approve as proposed. Heard in Sub 1: February 14, 2022	
2	Electronic Visit Verification Phase II GB BCP	The OSI, DHCS, and the Department of Developmental Services request 16 positions (six at OSI, six at DHCS, and four at DDS) and total expenditure authority of: • \$13 million (\$3 million General Fund and \$10 million federal funds) in 2022-23, • \$11.3 million (\$3 million General Fund and \$8.2 million General Fund and \$8.2 million federal funds) in 2023-24, • \$9.3 million (\$2.5 million General Fund and \$6.8 million federal funds) in 2024-25, • \$9.4 million (\$2.6 million General Fund and \$6.8 million federal funds) in 2025-26, and • \$9.1 million (\$2.5 million General Fund and \$6.7 million federal funds) in 2026-27 to continue the multi-departmental effort for the Phase II of implementing Electronic Visit Verification (EVV) for personal care services and home health care services. The federal 21st Century CURES Act requires states to implement an EVV system for all Medicaid-funded Personal Care Services (PCS) by January 1, 2020, and for all Home Health Care Services (HHCS) by January 1, 2023.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 28, 2022	

4120 E	4120 Emergency Medical Services Authority (EMSA)			
Item	Proposal Name	Proposal Description	Staff Comments and Recommendations	
3	Replacement and Upgrade of Aging Vehicle and Radio Fleet Assets GB BCP	EMSA requests \$8,664,000 General Fund in Fiscal Year 2022-23 and \$50,000 in 2023-24 and ongoing. The one-time funding will be utilized to replace aging fleet assets. The ongoing request is to fund the California Radio Interoperability System's (CRIS) subscription fees required for the requested radio equipment.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 21, 2022	
4	California Poison Control System Funding Augmentation GB BCP	EMSA requests a Local Assistance augmentation of: • \$1,056,000 General Fund in 2022-23, • \$1,470,000 General Fund in 2023-24, and • ongoing funding of \$1,715,000 General Fund and \$349,000 Reimbursements to support the California Poison Control System (CPCS). This augmentation is in response to increased salaries and benefit expenses resulting from negotiated union bargaining agreements and will continue stable funding for day-to-day operations of the CPCS and continue statewide access to the CPCS.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 21, 2022	
5	Paramedic Disciplinary Review Board (AB 450) GB BCP	EMSA requests three positions and \$703,000 Emergency Medical Services Personnel (EMSP) Fund in 2022-23 and \$665,000 EMSP Fund in 2023-24 and ongoing to implement AB 450 (Gonzalez, L., Rodriguez, Chapter 463, Statutes of 2021) which establishes the Paramedic Disciplinary Review Board (Board) to take disciplinary action against a paramedic (EMT-P) license holder, review and revise the criteria for the revocation or suspension of an EMT-P license, the probation of EMT-P personnel, the appeal of a licensure decision by EMSA, and hear appeals regarding the denial of licensure by EMSA.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 21, 2022	

6	California Emergency Medical Services Data Resource System Funding Reappropriation April 1 (A1) BCP	EMSA requests the reappropriation of \$10 million General Fund, and provisional language authorizing encumbrance or expenditure until June 30, 2024, to continue and complete the project planning process for the California Emergency Medical Services (EMS) Data Resource System (CEDRS), and increase data interoperability between hospitals, EMS agencies, and other healthcare organizations, providing continuity of care to currently uncovered areas of the state.	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 2, 2022
7	Increased Resources for Information Technology Mission Efficiency A1 BCP	EMSA requests 2 positions and \$443,000 General Fund in 2022-23 and ongoing to allow EMSA to manage growth in information technology (IT) staffing, allow for more health informatics strategic planning, and enhance the Office of Information Technology and address security deficiencies to meet EMSA's current and long-term IT infrastructure needs.	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 2, 2022
8	Multicounty Local Emergency Medical Services Agency Funding Increase A1 BCP	EMSA requests \$2,010,000 General Fund ongoing to support California's multicounty Local Emergency Medical Services Agencies (LEMSAs) to address service delivery gaps driven by cost increases from increased natural disasters and tourism, population growth, and increased mandates over time.	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 2, 2022

4140 E	4140 Department of Health Care Access and Information			
Item	Proposal Name	Proposal Description	Staff Comments and Recommendations	
9	Workforce Augmentation and Budget Alignment GB BCP	HCAI requests net expenditure authority from special funds and reimbursements of \$2.8 million in 2022-23 and \$2.7 million annually thereafter to shift program funding for the Peer Personnel and Mini-Grants Programs from state operations to local assistance consistent with current practice, increase funding for the Mini-Grants Program and the Song-Brown Healthcare Workforce Training Program, and continue its service agreement to administer the County Medical Services Program Loan Repayment Program.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 14, 2022	
10	Skilled Nursing Facilities: Annual Consolidated Financial Report (SB 650) GB BCP	 HCAI requests: 4.0 positions and \$1,433,000 expenditure authority in 2022-23, 6.0 positions and \$1,209,000 expenditure authority in 2023-24, and \$955,000 expenditure authority ongoing from the California Health Data and Planning Fund to implement SB 650 (Stern, Chapter 493, Statutes of 2021) which requires organizations that operate, conduct, own, manage, or maintain one or more SNFs to prepare and file with HCAI a consolidated financial report which includes the same set of financial statements currently submitted individually by each SNF. 	Staff Recommendation: Approve as proposed. Heard in Sub 1: February 7, 2022	
11	Excise Tax: Electronic Cigarettes (SB 395) GB BCP	 HCAI requests: four positions and expenditure authority from the Small and Rural Hospital Relief Fund of \$876,000 in 2022-23, \$842,000 in 2023-24, and \$684,000 annually thereafter to allow HCAI to support administration of the Small and Rural Hospital Relief Program, which supports seismic upgrades for small, rural, and critical access hospitals, pursuant to the requirements of SB 395 (Caballero, Chapter 489, Statutes of 2021). 	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 14, 2022	

		SB 395 authorizes a tax of 12.5 percent on the sale of electronic cigarettes and requires revenues from this tax to be deposited in the California Electronic Cigarette Excise Tax Fund which are continuously appropriated for various purposes. Five percent of the revenue will support the Health Professions Career Opportunity Program at HCAI, which exposes students to health careers by awarding grants to institutions to support conferences, workshops, or career exploration activities.	
12	Hospital Equity Reporting (AB 1204) GB BCP	 HCAI requests: 2.0 positions and \$366,000 in 2022-23, 4.0 positions and \$1,073,000 in 2023-24, 5.0 positions and \$1,223,000 in 2024-25, and 5.0 positions and \$861,000 in 2025-26 and annually thereafter from the California Health Data and Planning Fund to implement the Hospital Equity Reporting requirements pursuant to AB 1204 (Wicks, Chapter 751, Statutes of 2021). 	Staff Recommendation: Approve as proposed. Heard in Sub 1: February 7, 2022
13	Health Care Debt and Fair Billing (AB 1020) GB BCP	 HCAI requests: 16 positions and \$3.9 million (\$1.9 million General Fund) in expenditure authority in 2022-23, 18 positions and \$3.6 million (\$1.8 General Fund) in 2023-24, and \$3.6 million (\$1.8 General Fund) annually thereafter to implement AB 1020 (Friedman, Chapter 473, Statutes of 2021). AB 1020 expands HCAI's existing data collection effort by creating new notice requirements for hospital discount payment and charity care policies, limitations on the sale of patient debt, and penalties for violations. 	Staff Recommendation: Approve as proposed. Heard in Sub 1: February 7, 2022

14	Reproductive Health Care Workforce and Capital Infrastructure GB BCP	HCAI requests General Fund expenditure authority of \$40 million in 2022-23, available for encumbrance and expenditure through June 30, 2028 to support implementation of some of the recommendations of the California Future of Abortion Council, by supporting workforce development and capital infrastructure for providers of reproductive health services.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 14, 2022
15	Small Rural Hospital Improvement Program Increase in Expenditure Authority A1 BCP	HCAI requests an increase in expenditure authority of \$56,000 in 2022-23 and ongoing from the Federal Trust Fund to continue support for the Small Rural Hospital Improvement Program.	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 2, 2022
16	Children and Youth Behavioral Health Initiative Budget Bill Language (BBL)-only	HCAI requests that provisional language be added to Item 4140-001-0001 to extend the encumbrance and expenditure authority to administer programs in the Children and Youth Behavioral Health Initiative to June 30, 2028. HRSA increased funding to the State Offices of Rural Health to account for additional small rural hospitals and allow states to maximize award amounts to the hospitals.	Staff Recommendation: Approve as proposed. Heard in Sub 1:

4150 E	4150 Department of Managed Health Care (DMHC)			
Item	Proposal Name	Proposal Description	Staff Comments and Recommendations	
17	Office of Plan Licensing Workload GB BCP	 DMHC requests: three positions and expenditure authority from the Managed Care Fund of \$628,000 in 2022-23, \$604,000 in 2023-24, one additional position and \$842,000 in 2024-25, and \$834,000 annually thereafter to address additional workload in its Office of Plan Licensing related to major transaction reviews of health plans, and in response to AB 595 (Wood, Chapter 292, Statutes of 2018). AB 595 authorizes DMHC to disapprove a health plan merger or acquisition upon finding the merger either violates the Knox-Keene Act, substantially lessens competition in health care service plan products, or creates a monopoly in the state. AB 595 also clarifies DMHC's existing authority to review mergers and secure health plan undertakings to benefit consumers, and adds requirements to ensure transparency and public participation for major mergers. 	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 28, 2022	
18	Office of Plan Monitoring Workload GB BCP	DMHC requests 11 positions and expenditure authority from the Managed Care Fund of \$3.3 million in 2022-23, and \$3.2 million annually thereafter to address routine and follow-up medical surveys on an increasing number of licensed health plans, support increased rates charged by clinical consultants, and manage additional workload from an increase in network review volume, complexity, and technological expertise requirements.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 28, 2022	

19	Help Center Workload GB BCP	DMHC requests 21 positions and expenditure authority from the Managed Care Fund of \$3.6 million in 2022-23 and \$3.4 million annually thereafter to address the increased volume of workload in its Help Center's Consumer and Provider complaint sections including meeting mandated timeframes for complaint review, facilitating a more robust case-auditing process, and aligning supervisory staffing with department growth.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 28, 2022
20	Administrative Workload GB BCP	DMHC requests 12 positions and expenditure authority from the Managed Care Fund of: • \$3.5 million in 2022-23, • \$3.4 million annually between 2023-24 and 2028-29, and • \$2.2 million annually thereafter to support administrative workload including human resources, business services, legal services, information technology, support for addressing systemic racism in the workplace, and to align supervisory, analytical and professional staffing with department growth.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 28, 2022
21	Protection of Patient Choice in Telehealth Provider Act (AB 457) GB BCP	 DMHC requests: 3.0 positions and limited term expenditure authority (equivalent to 1.0 position) and \$1,130,000 from the Managed Care Fund in 2022-23, 3.0 positions and \$957,000 in 2023-24, 3.0 positions and \$614,000 in 2024-25 and ongoing to meet the requirements of AB 457 (Santiago, Chapter 439, Statutes of 2021). AB 457 establishes the Protection of Patient Choice in Telehealth Provider Act, which requires health care service plans (health plans) to provide certain notices to enrollees when offering services through third-party corporate telehealth providers and requires health plans to file an array of reports with the DMHC regarding the utilization of corporate telehealth plans to ensure that corporate telehealth providers send 	Staff Recommendation: Approve as proposed. Heard in Sub 1: February 14, 2022

		patient records to enrollees' primary care providers.	
22	Health Care Coverage: Deductibles and Out-of-Pocket Expenses (SB 368) GB BCP	 DMHC requests: 2.0 positions and limited term expenditure authority (equivalent to 0.5 position) and \$591,000 from the Managed Care Fund in 2022-23, 2.0 positions and limited term expenditure authority (equivalent to 0.5 position) and \$571,000 in 2023-24, 2.0 positions and \$456,000 in 2024-25 and ongoing to review health care service plan documents as specified pursuant to SB 368 (Limón, Chapter 602, Statutes of 2021), which requires health care service plans to provide an enrollee with their accrual balance toward their deductible and their out-of-pocket maximum for covered benefits. 	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 28, 2022
23	Follow-Up Appointments for Mental Health and Substance Use Disorder Timely Access Standards (SB 221) GB BCP	 DMHC requests: 16.0 positions and expenditure authority (equivalent to 0.5 position) and \$3,882,000 from the Managed Care Fund in 2022-23, 19.0 positions and expenditure authority (equivalent to 0.5 position) and \$4,479,000 in 2023-24, 19.0 positions and expenditure authority (equivalent to 0.5 position) and \$4,267,000 in 2024-25, 19.0 positions and expenditure authority (equivalent to 0.5 position) and \$4,357,000 in 2025-26, 19.0 positions and \$4,151,000 in 2026-27, 19.0 positions and \$4,241,000 in 2027-28 and annually thereafter to address timeliness standards for follow-up appointments for certain mental health and substance use disorder providers as specified pursuant to SB 221 (Wiener, Chapter 724, Statutes of 2021). 	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 7, 2022

24	Health Care Coverage: Step Therapy (AB 347) GB BCP	DMHC requests 12 positions and expenditure authority from the Managed Care Fund of \$3.1 million in 2022-23, and \$3 million annually thereafter to address step therapy requirements implemented pursuant to AB 347 (Arambula, Chapter 742, Statutes of 2021).	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 28, 2022
		AB 347 establishes a timeline for approval or denial of step therapy exception requests for prescription drugs based on the existing timeline for prior authorization requests for prescription drugs.	
25	Health Care Coverage: Employer Associations (SB 255) GB BCP	DMHC requests one position and expenditure authority from the Managed Care Fund of \$237,000 in 2022-23 and \$229,000 annually thereafter to conduct annual reviews of Multiple Employer Welfare Arrangement (MEWA) documents, pursuant to SB 255 (Portantino, Chapter 725, Statutes of 2021).	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 28, 2022
26	Health Care Coverage: Small Employer Groups (SB 718) GB BCP	DMHC requests expenditure authority from the Managed Care Fund of \$313,000 in 2022-23 and \$301,000 in 2023-24 through 2026-27 to receive and review Multiple Employer Welfare Arrangement (MEWA) documents for compliance with SB 718 (Bates, Chapter 736, Statutes of 2021). SB 718 creates an exception from Knox-Keene Act requirements that a small employer cannot purchase large group health care coverage through an association health plan or MEWA. SB 718 requires a MEWA that intends to offer large group coverage to its members to meet specified requirements.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 28, 2022

27	Administrative Support Services A1 BCP	 DMHC) requests: 8.0 positions and \$1,301,000 in 2022-23, and \$1,237,000 in 2023-24 and annually thereafter from the Managed Care Fund to support business management services, fiscal services, human resource administrative services, information technology, and to bring analytical and professional staffing in line with the department's growth. 	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 2, 2022
28	Health Plans and Health Insurance: Third Party Payment Limited-Term Workload Extension (AB 290) A1 BCP	The DMHC requests a two-year limited-term extension of expenditure authority of \$782,000 in 2022-23 and \$750,000 in 2023-24 from the Managed Care Fund to address the workload and meet the requirements pursuant to AB 290 (Wood, Chapter 862, Statutes of 2019). AB 290 requires the DMHC to establish an Independent Dispute Resolution Process (IDRP) through which providers and health plans can seek rates above the Medicare rates, receive plan data regarding cost savings and recoupments and review health plan Evidence of Coverage (EOC) and other health plan documents to verify plan compliance with the bill's provisions.	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 2, 2022

4260 E	4260 Department of Health Care Services (DHCS)			
Item	Proposal Name	Proposal Description	Staff Comments and Recommendations	
29	Further Strengthen Fiscal Functions and Outcomes GB BCP	 DHCS requests: 10.0 permanent positions, two-year limited-term resources equivalent to 5.0 positions, and expenditure authority of \$2,362,000 (\$1,181,000 General Fund, \$1,181,000 Federal Fund) in 2022-23, \$2,227,000 (\$1,114,000 GF, \$1,113,000 FF) in 2023-24, and \$1,485,000 (\$743,000 GF; \$742,000 FF) in 2024-25 and ongoing to build upon the 2019-20 BCP relating 	Staff Recommendation: Approve as proposed. Heard in Sub 1: February 14, 2022	
		to efforts to strengthen fiscal estimates and cash flow monitoring and to provide resources for increasing and complex workloads.		
30	Short-Term Residential Therapeutic Program Approval, Oversight and Monitoring GB BCP	DHCS requests nine positions and expenditure authority of \$1.3 million (\$661,000 General Fund and \$661,000 federal funds) annually to provide oversight, monitoring, and reviews of short-term residential therapeutic programs, mental health program approval, and children's crisis residential programs.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 28, 2022	
31	Behavioral Health Workload GB BCP	 DHCS requests: 33.0 permanent positions, the conversion of 1.0 limited-term (LT) resource to permanent position, three-year LT resources equivalent to 5.0 positions, and expenditure authority of \$21,239,000 (\$9,755,000 General Fund (GF); \$10,601,000 Federal Fund (FF); \$883,000 reimbursement authority) in fiscal year (FY) 2022-23, \$20,942,000 (\$9,629,000 GF; \$10,430,000 FF; \$883,000 reimbursement authority) in FY 2023-24 through FY 2024-25, \$5,230,000 (\$1,773,000 GF; \$2,574,000 FF, \$883,000 reimbursement authority) in FY 2025-26, \$4,347,000 (\$1,773,000 GF; \$2,574,000 FF) in FY 2026-27, and \$3,643,000 (\$1,421,000 GF; 	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 7, 2022	

		\$2,222,000 FF) in FY 2027-28 and ongoing to address increased behavioral health workload. The request includes three-year, LT contract authority of \$15,000,000 (\$7,500,000 GF; \$7,500,000 FF) per year for technical assistance/training. The ongoing workload is related to network adequacy oversight, data and operational quality improvement, administration of recurring federal grants, oversight of new behavioral health investments, and licensing legal work. The limited-term workload is related to the five-year administration of a Medi-Cal mobile crisis intervention services benefit, technical assistance to counties for compliance with implementation of the 90-day justice inreach program and federally-required interoperability standards, five-year administration of the Children's Crisis Continuum pilot, and three-year support of the Family First Prevention Services	
32	Behavioral Health Timely Access to Care Oversight (SB 221) GB BCP	Act. DHCS requests: 8.0 permanent positions and expenditure authority of \$1,320,000 (\$660,000 General Fund (GF); \$660,000 Federal Fund (FF)) in fiscal year (FY) 2022-23, and \$1,248,000 (\$624,000 GF; \$624,000 FF) in FY 2023-24 and ongoing to perform compliance oversight of Medi-Cal managed care plan timely access to care requirements for follow-up behavioral health services, as required by SB 221 (Wiener, Chapter 724, Statutes of 2021).	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 7, 2022
33	Medication Assisted Treatment Expansion Program GB BCP	DHCS requests: • 5.0 permanent positions and expenditure authority of \$101,000,000 (\$96,000,000 General Fund (GF) and \$5,000,000 Opioid Settlement Fund [OSF]) in 2022-23, and • \$61,000,000 GF in 2023-24 and ongoing	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 7, 2022

		to support the Medication Assisted Treatment (MAT) Expansion Project in further reducing overdose and death related to opioid misuse by expanding the Naloxone Distribution Project, supporting 100 new MAT access points statewide, expanding MAT in county jails, and increasing MAT services within state-licensed facilities.	
34	Maternal Care and Services (SB 65) GB BCP	DHCS requests: • two-year limited-term (LT) resources equivalent to 2.0 positions and expenditure authority of \$510,000 (\$255,000 General Fund, \$255,000 Federal Fund) in 2022-23, • \$492,000 (\$246,000 GF, \$246,000 FF) in 2023-24, and • two-year contract authority of \$215,000 (\$108,000 GF, \$107,000 FF) in 2022-23 through 2023-24 to implement SB 65 (Skinner, Chapter 449, Statutes of 2021) and to track benefit implementation and manage the stakeholder process. SB 65 requires DHCS to convene a workgroup by April 1, 2022, through December 31, 2023, to examine the implementation of doula services as a new benefit.	Staff Recommendation: Approve as proposed Heard in Sub 1: February 14, 2022
35	Reducing Premiums for Title XXI and Working Disabled Adults GB BCP	 DHCS requests: \$53 million total funds (\$19 million General Fund) in FY 2022-23 and \$89 million total funds (\$31 million General Fund) ongoing, and trailer bill language to eliminate premiums for programs under the Children's Health Insurance Program (CHIP) and the 250 Percent of Federal Poverty Level Working Disabled Program. 	Staff Recommendation: Approve as proposed. Heard in Sub 1: February 14, 2022
36	Medi-Cal Enterprise Systems Modernization: Federal Draw and Reporting – Operations GB BCP	DHCS requests: • two-year limited term contract expenditure authority of \$4,579,000 (\$2,290,000 General Fund (GF); \$2,289,000 Federal Fund (FF)) in fiscal year (FY) 202223, and • \$4,579,000 (\$1,145,000 GF; \$3,434,000 FF) in FY 2023-24	Staff Recommendation: Approve as proposed. Heard in Sub 1: February 14, 2022

		to support the Federal Draw and Reporting (FDR) system operations as part of its Medi-Cal Enterprise Systems (MES) Modernization. The proposed funding reflects 75/25 enhanced federal financial participation upon federal certification of system in FY 2022-23.	
37	Encounter Data Improvement Support GB BCP	DHCS requests expenditure authority of \$17.5 million (\$15.7 million federal funds and \$1.7 million reimbursements) in 2022-23 and \$17.4 million (\$15.7 million federal funds and \$1.7 million reimbursements) in 2023-24 to advance improvements in data quality in managed care and county behavioral health.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 28, 2022
38	Increased Program Workload GB BCP	DHCS requests: 31.5 permanent positions, 4.0 limited-term (LT) resources to permanent positions, and expenditure authority of \$5,608,000 (\$2,521,000 General Fund (GF); \$2,783,000 Federal Fund (FF); \$304,000 Reimbursement Fund (RF)) in fiscal year (FY) 2022-23, and \$5,320,000 (\$2,390,000 GF; \$2,644,000 FF; \$286,000 RF) in FY 2023-24 and ongoing to address increased workloads in the following areas: Benefits Division Local Governmental Financing Division (Behavioral Health Financing Branch) Medi-Cal Dental Services Division Administration	Staff Recommendation: Approve as proposed. Heard in Sub 1: February 14, 2022

39	Transforming Quality Outcomes and Health Equity in Medi-Cal GB BCP	 DHCS requests: 19.0 permanent positions and expenditure authority of \$4,689,000 (\$2,345,000 General Fund, \$2,344,000 Federal Fund) in 2022-23, \$4,463,000 (\$2,232,000 GF, \$2,231,000 FF) in 2023-24, \$4,083,000 (\$2,042,000 GF, \$2,041,000 FF) in 2024-25 through FY 2026-27, and \$3,083,000 (\$1,542,000 GF, \$1,541,000 FF) in 2027-28 and ongoing to administer and lead quality improvement and health equity efforts for the Medi-Cal program. 	Staff Recommendation: Approve as proposed. Heard in Sub 1: February 14, 2022
40	California Medi- Cal Enterprise Systems Modernization A1 BCP	 DHCS requests: 5.0 permanent positions and limited term contract expenditure authority of \$20,794,000 (\$2,721,000 General Fund (GF); \$18,073,000 Federal Fund (FF)) in fiscal year (FY) 2022-23, \$14,214,000 (\$2,886,000 GF; \$11,328,000 FF) in FY 2023-24, and \$1,007,000 (\$205,000 GF, \$802,000 FF) in FY 2024-25 and ongoing to support information technology (IT) modernization projects. 	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 2, 2022

41	COVID-19 Public Health Emergency - Resuming Regular Operations A1 BCP	 DHCS requests: three-year limited-term (LT) resources equivalent to 8.0 positions and expenditure authority of \$26,234,000 (\$13,117,000 General Fund (GF); \$13,117,000 Federal Fund (FF)) in fiscal year (FY) 2022-23, and \$1,162,000 (\$581,000 GF; \$581,000 FF) in FY 2023-24 and FY 2024-25. DHCS states that the requested resources and contract dollars are needed to unwind the array of program policy and system-related changes that were put in place during the course of the COVID-19 Public Health Emergency (PHE), including resuming Medi-Cal redeterminations for all Medi-Cal beneficiaries and completing all pending case actions for any change of circumstances, all within the 12-month timeframe outlined by State Health Official Letter 21-002, once the COVID-19 PHE is officially terminated at the federal level. 	Heard in Sub 1:
42	Data Analytics and Management Support A1 BCP	 DHCS requests: 13.0 permanent positions, funding for 5.0 existing permanent positions, three-year limited-term (LT) resources equivalent to 4.0 positions, conversion of 2.0 LT resource to permanent, LT contract resources, and expenditure authority of \$7,587,000 (\$3,794,000 General Fund (GF); \$3,793,000 Federal Fund (FF)) in fiscal year (FY) 2022-23, \$8,970,000 (\$4,485,000 GF; \$4,485,000 FF) in FY 2023-24, \$8,470,000 (\$4,235,000 GF; \$4,235,000 FF) in FY 2024-25, and \$5,396,000 (\$2,698,000 GF; \$2,698,000 FF) in FY 2025-26 and ongoing to address increased workload related to departmental data analytic, data provisioning, and data reporting functions to improve data management and transparency. 	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 2, 2022

43	Interoperability Federal Rule Implementation A1 BCP	 Funding for 6.0 existing permanent positions, three-year limited term (LT) resources equivalent to 12.0 positions, one-year LT resources equivalent to 8.0 positions, the extension of 1.0 LT resource for one-year, re-appropriation of contract funding, and expenditure authority of \$4,520,000 (\$2,260,000 General Fund (GF); \$2,260,000 Federal Fund (FF)) in fiscal year (FY) 2022-23, \$2,896,000 (\$1,448,000 GF; \$1,448,000 FF) in FY 2023-24 and FY 2024-25, and \$1,110,000 (\$555,000 GF; \$555,000 FF) in FY 2025-26 and ongoing. The resources are being requested to implement and plan for the new interoperability rules required by the federal Centers for Medicare and Medicaid Services. 	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 2, 2022
44	Office of Compliance A1 BCP	 DHCS requests: 12.0 permanent positions, limited-term contracts resources, and expenditure authority of \$2,140,000 (\$1,070,000 General Fund (GF); \$1,070,000 Federal Fund (FF)) in fiscal year (FY) 2022-23, \$2,032,000 (\$1,016,000 GF; \$1,016,000 FF) in FY 2023-24, and \$1,782,000 (\$891,000 GF; \$891,000 FF) in FY 2024-25 and ongoing to enhance internal audit functions, federal compliance monitoring, and enterprise risk management activities. 	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 2, 2022
45	Shift of Suicide Prevention Voluntary Contribution Fund Administrator for 9-8-8 National Suicide Prevention Lifeline Grants A1 TBL	DHCS requests statutory changes be adopted to shift provisions applicable to the continuously-appropriated Suicide Prevention Voluntary Contribution Fund from the Mental Health Services Oversight and Accountability Commission to DHCS effective July 1, 2022. This shift would authorize DHCS to grant an estimated \$1,050,000 in fiscal year 2022-23 to crisis centers. AB 984 (Lackey, Chapter 445, Statutes of 2019) requires the funds primarily support grants to crisis centers.	Staff Recommendation: Approve as proposed. Heard in Sub 1:

4265 C	California Departm	ent of Public Health (CDPH)	
Item	Proposal Name	Proposal Description	Staff Comments and Recommendations
46	Los Angeles County Contract Extension GB BCP	CDPH requests expenditure authority from the Licensing and Certification Fund of \$18.4 million annually to extend and augment the department's health care facility certification contract with the Los Angeles County Department of Public Health to account for updated indirect cost and employee benefit rates, personnel costs, and lease costs.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 21, 2022
47	Health Facilities Oversight GB BCP	CDPH requests two positions and expenditure authority from the Licensing and Certification Fund of \$4 million in 2022-23 and \$284,000 annually thereafter to increase infection prevention and to provide quality assurance in Nursing Home Administrator training.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 21, 2022
48	COVID-19 Emergency Response and Operations GB BCP	CDPH requests \$760.8 million General Fund in 2022-23 to continue the state's efforts to protect public health and safety against the spread of COVID-19 by providing vaccinations (including boosters), diagnostic testing, contact tracing, health staff support for facilities in need, operations support, and emergency response activities at the border. These proposed funds will support pandemic response efforts through December 31, 2022.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 21, 2022
49	Cannery Inspection Program Activities GB BCP	CDPH requests expenditure authority from the Cannery Inspection Fund of \$900,000 annually to allow CDPH to manage its cannery inspection workload. CDPH reports the Food Safety Fund has been absorbing some of the costs that should have been attributed to the Cannery Inspection Fund, and as a result its reserve is steadily declining.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 21, 2022

50	Fluoroscopy: Temporary Permit (AB 356) GB BCP	CDPH requests one position and expenditure authority from the Radiation Control Fund of \$114,000 annually to issue temporary permits to operate or supervise the operation of fluoroscopic X-ray equipment, pursuant to the requirements of AB 356 (Chen, Chapter 459, Statutes of 2021). AB 356 authorized CDPH to issue a temporary permit authorizing use of fluoroscopic X-ray equipment to licensed physicians while completing the fluoroscopy examination process.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 21, 2022
51	Industrial Hemp Products (AB 45) GB BCP	CDPH requests 18 positions and General Fund expenditure authority of \$4 million in 2022-23, 7 additional positions and expenditure authority from the Industrial Hemp Enrollment and Oversight Fund of \$5.2 million annually thereafter to allow CDPH to implement the regulation of industrial hemp products mandated by AB 45 (Aguiar-Curry, Chapter 576, Statutes of 2021). AB 45 authorizes CDPH to establish a program regulating the use of industrial hemp and its cannabinoids, extracts, or derivatives in foods, beverages, cosmetics, and pet food products. AB 45 also prohibits the manufacture of industrial hemp inhalable products, except for the sole purpose of sale in other states.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 21, 2022
52	Priority Inland Water-Contact Recreation Sites: Water Quality Monitoring (AB 1066) GB BCP	CDPH requests General Fund expenditure authority of \$195,000 in 2022-23 to co-chair a working group from the California Water Quality Monitoring Council to study water hazards at priority water-contact recreation sites, pursuant to the requirements of AB 1066 (Bloom, Chapter 711, Statutes of 2021). AB 1066 requires the California Water Quality Monitoring Council to establish a working group, co-chaired by the State Water Resources Control Board and CDPH, to study water recreation hazards at priority water-contact recreation sites, including any inland water that may be used for recreation that involves body contact with the water.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 21, 2022

53	Commercial Fishing Inspection: Crab Traps (SB 80) GB BCP	CDPH requests three positions and General Fund expenditure authority of \$710,000 annually to review and approve crab evisceration food safety plans for commercial processors, establish labeling requirements for eviscerated crab, and issue evisceration orders to be followed by crab processors during elevated domoic acid events, pursuant to the requirements of SB 80 (McGuire, Chapter 757, Statutes of 2021). SB 80 authorizes the California Department of Fish and Wildlife to open waters to Dungeness crab or rock crab fishing if CDPH issues an order requiring the evisceration of the crab prior to manufacture, sale, delivery, or offering for sale.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 21, 2022
54	eWIC Post- Implementation Support GB BCP	CDPH requests 25 positions and federal fund expenditure authority of \$2.9 million annually to modernize services and provide ongoing support for a recently implemented management information system (WIC WISE), the WIC Electronic Benefit Transfer card, the WIC App, WIC Direct, as well as users of these technologies.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 21, 2022
55	Maternal Care Services (SB 65) GB BCP	CDPH requests 16 positions and General Fund expenditure authority of \$5.5 million annually to establish the California Pregnancy-Associated Review Committee to conduct a review of pregnancy-related deaths, analyze common causes of severe maternal morbidity, and make recommendations to prevent maternal mortality and morbidity, pursuant to SB 65 (Skinner, Chapter 449, Statutes of 2021).	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 21, 2022

56	Adjustment to Support Home Visiting Programs GB BCP	CDPH requests 19.7 positions and General Fund expenditure authority of \$37.5 million annually to expand the California Home Visiting Program (CHVP), an evidence-based program that offers home visiting to pregnant and newly parenting families focused on building family resilience by promoting positive parenting and child development, increasing positive childhood experiences, and improving health and social outcomes.	
	Black Infant Health Program GB BCP	CDPH requests 7.3 positions and General Fund expenditure authority of \$12.5 million annually to expand the Black Infant Health (BIH) program, which provides group-based interventions for Black birthing parents to reduce maternal and infant disparities. This funding would increase the number of BIH sites and participants and add strategies that support participant access and engagement.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 21, 2022
57	Books for Low Income Children GB BCP	CDPH requests General Fund expenditure authority of \$10 million in 2022-23 to support Books for Low-Income Children, an early childhood literacy program for participants in the WIC program. CDPH plans to use these resources to address some of the barriers that prevent participation by some WIC agencies and would seek matching funds to increase the number of books provided to families from three books per child to between four and six books per child.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 21, 2022
58	Homelessness: California Interagency Council on Homelessness (AB 1220) GB BCP	CDPH requests 2 positions and \$389,000 from the General Fund in 2022-23 and ongoing to provide CDPH program coordination, data analytics, and technical assistance to the California Interagency Council on Homelessness and to embed public health interventions in State strategies to maximize population health benefits and healthcare cost savings by ending homelessness in California.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 21, 2022

59	End of Life (SB 380) GB BCP	CDPH requests one position and General Fund expenditure authority of \$151,000 in 2022-23 and \$147,000 annually thereafter to manage an increase in processing of End of Life Act documents due to the reduced waiting period between initial and final requests implemented by SB 380 (Eggman, Chapter 542, Statutes of 2021).	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 21, 2022
60	Sexual Orientation and Gender Identity Data Collection Pilot Project (AB 1094) GB BCP	CDPH requests General Fund expenditure authority of \$541,000 in 2022-23 through 2024-25 to establish and administer a three-year sexual orientation and gender identity data collection pilot project, pursuant to AB 1094 (Arambula, Chapter 177, Statutes of 2021). AB 1094 requires CDPH to establish a three-year pilot program in up to six	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 21, 2022
		counties for training coroners and medical examiners on the identification and collection of sexual orientation and gender identity information in cases of violent death.	
61	Air Quality (AB 619) GB BCP	CDPH requests three positions and General Fund expenditure authority of \$586,000 annually to create and maintain an air quality plan, pursuant to AB 619 (Calderon, Chapter 412, Statutes of 2021). AB 619 requires CDPH to develop a plan	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 21, 2022
		with recommendations and guidelines for counties to use in the case of a significant air quality event caused by wildfires or other sources.	
62	Alzheimer's Healthy Brain Initiative GB BCP	CDPH requests General Fund expenditure authority of \$10 million in 2022-23, available for encumbrance or expenditure until June 30, 2025 to allocate grants to six existing local health jurisdictions, and expand to up to six additional jurisdictions, to participate in the California Healthy Brain Initiative Pilot Program.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 21, 2022

63	Public Health: COVID-19 (SB 336) GB BCP	CDPH requests General Fund expenditure authority of \$307,000 in 2022-23 and 2023-24 to operate and maintain an e-mail distribution list for organizations, communities, nonprofits, and individuals to receive information regarding COVID-19 public health orders, pursuant to the requirements of SB 336 (Ochoa Bogh, Chapter 487, Statutes of 2021).	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 21, 2022
64	Sexually Transmitted Disease: Testing (SB 306) GB BCP	CDPH requests 3 positions and \$475,000 General Fund in 2022-23 and ongoing to manage the increased workload related to the requirements of SB 306 (Pan, Chapter 486, Statutes of 2021), which allows Human Immunodeficiency Virus (HIV) test counselors to perform any HIV, hepatitis C virus (HCV), or other sexually transmitted disease (STD) test that is classified as waived under the federal Clinical Laboratory Improvements Act (CLIA).	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 21, 2022
65	Public Health Electronic Licensing Program for Tissue Banks and Biologics Facilities GB BCP	CDPH requests six positions and expenditure authority of \$3.6 million (\$583,000 Tissue Bank License Fund and \$3 million Clinical Laboratory Improvement Fund) in 2022-23, and \$2 million (\$583,000 Tissue Bank License Fund and \$1.4 million Clinical Laboratory Improvement Fund) annually thereafter to allow CDPH to: 1) increase inspections and oversight of tissue banks, blood banks, and biologics facilities; and 2) establish the Electronic Tissue and Biologics System (ETABS) to migrate facility licensing processes from paper-based to an online platform.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 21, 2022
66	Children and Youth Behavioral Health Initiative BBL-only	CDPH requests provisional language be added to Item 4265-001-0001 to extend the encumbrance and expenditure authority of funding for the Children and Youth Behavioral Initiative until June 30, 2024.	Staff Recommendation: Approve as proposed. Heard in Sub 1:

4440 E	4440 Department of State Hospitals (DSH)			
Item	Proposal Name	Proposal Description	Staff Comments and Recommendations	
67	Atascadero - Sewer and Wastewater Treatment Plant GB Capital Outlay (CO) BCP	DSH requests General Fund expenditure authority of \$4.1 million in 2022-23 to support preliminary plans for Atascadero State Hospital to provide upgrades to the sewer collection system, installation of a screening system, and connection to the City of Atascadero's wastewater treatment system.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 7, 2022	
68	Metropolitan - Central Utility Plant Replacement GB COBCP	DSH requests General Fund expenditure authority of \$1.8 million in 2022-23 to support preliminary plans for Metropolitan State Hospital to replace its existing Central Utility Plant, which supplies steam for hot water and central heating and chilled water for air conditioning to 32 patient housing and administrative buildings.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 7, 2022	
69	Metropolitan - Fire Water Line Connection to Water Supply GB COBCP	DSH requests General Fund expenditure authority of \$548,000 in 2022-23 to support preliminary plans for Metropolitan State Hospital to provide the capacity of water required for its fire sprinkler system to comply with current fire code requirements.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 7, 2022	
70	Administrative Services Workload GB BCP	PSH requests 12 positions and General Fund expenditure authority of \$1.7 million annually to address additional administrative workload resulting from increases in staff in recent years and to address complex policy issues. Over the past several fiscal years, the Legislature has approved DSH proposals that have significantly increased the number of staff positions throughout the state hospital system. The DSH Mission-Based Review proposals, covering the areas of protective services, treatment teams, direct care nursing, workforce development, and court evaluations and reports, will add a total of 829.5 positions to DSH once fully implemented. In addition, expansions of capacity at Metropolitan and Coalinga State Hospitals will add 475.7 positions and 81.2 positions, respectively, when fully implemented. Several other proposals, including implementation of an electronic	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 7, 2022	

		health records system and development of tele-psychiatry resources, have also increased staff positions at DSH.	
71	Data Governance and De- identification Compliance GB BCP	DSH requests General Fund expenditure authority of \$1.5 million in 2022-23 and 2023-24 to allow DSH to establish the leadership for its Research, Evaluation, and Data Insights (REDI) Program, which would implement a comprehensive data strategy, stablish a data governance structure, and comply with state data deidentification guidelines.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 7, 2022
72	DSH-Napa Camille Creek Implementation, Monitoring, and Adaptive Management Plan Staffing GB BCP	DSH requests six positions and General Fund expenditure authority of \$1.1 million in 2022-23 and \$1 million annually thereafter for DSH to implement and maintain operations of water storage facilities at Napa State Hospital in compliance with the California Fish and Game Code.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 7, 2022
73	Electronic Health Records Phase 3 - Wireless Network Upgrades GB BCP	 DSH requests: six positions and General Fund expenditure authority of \$2.4 million in 2022-23, two additional positions and General Fund expenditure authority of \$19.8 million in 2023-24, two additional positions and General Fund expenditure authority of \$20.8 million in 2024-25, and \$8.2 million annually thereafter to prepare for and support operation of the Enterprise Continuum Electronic Health Records (EHR) Project. 	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 7, 2022
74	Increasing Regulations Resources to Improve Operations and Mitigate Departmental Risk GB BCP	DSH requests three positions and General Fund expenditure authority of \$510,000 annually to meet demand for DSH to promulgate regulations, resulting in standardization of practices, transparency, and accountability across the DSH integrated behavioral health system.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 7, 2022

75	Statewide Plant Operations Workload GB BCP	DSH requests 26 positions and General Fund expenditure authority of \$2.6 million annually for DSH to expand plant operations capacity at the five state hospitals to address deferred maintenance backlogs, regulatory compliance projects, and preventative maintenance programs. This request would allow DSH to develop and maintain a "proper" maintenance program with continuous inspections, data collection, and an analysis of operations.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 7, 2022
76	Quality Improvement and Internal Auditing, Monitoring, Risk Management, and Hospital Support GB BCP	DSH requests 11 positions and General Fund expenditure authority of \$1.6 million annually to allow DSH to support standards compliance and quality improvement operations, and provide resources to conduct independent financial, operational, compliance, and performance audits.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 7, 2022
77	Workplace Violence Prevention in Healthcare Reporting Compliance GB BCP	DSH requests six positions and General Fund expenditure authority of \$1.6 million in 2022-23 and \$1.1 million annually thereafter to support DSH compliance with reporting requirements for prevention of workplace violence in the five state hospitals. DSH also requests one-time consultant services for improving data collection and reporting capabilities through its Wellness and Recovery Model Support System (WaRMSS).	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 7, 2022
78	Atascadero - Potable Water Booster System GB COBCP	DSH requests General Fund expenditure authority of \$1.9 million in 2022-23 for the construction phase of the continuing project to install a potable water booster pump system to improve the performance of the main water system at Atascadero State Hospital.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 7, 2022
79	Patton - Fire Alarm System Upgrade – Reappropriation GB COBCP	DSH requests reappropriation of General Fund expenditure authority of \$9.4 million originally approved in the 2018 Budget Act to support the construction phase of a project to remove and replace fire alarm systems in four secured patient housing buildings and treatment areas at Patton State Hospital.	Staff Recommendation: Approve as proposed. Heard in Sub 1: March 7, 2022

80 DSH requests: Staff Pharmacy Modernization Recommendation: a reappropriation of \$2.7 million Project -General Fund from fiscal year 2021-Approve as proposed. Phase 3 22 to 2022-23, A1 BCP \$3.2 million General Fund in 2023-24, \$3 million General Fund in 2024-Heard in Sub 1: May 2, 2022 25, \$2.9 million General Fund in 2025-26, and \$1.2 million General Fund in 2026-27... ...to continue the implementation phase of the Pharmacy Modernization project. This project includes the implementation of an inventory control system, unit dose repackaging equipment, automated drug dispensing system equipment and pharmacy data integration. DSH explains that a re-appropriation is needed due to delays in the Project Approval Lifecycle (PAL) process, attributable to the impacts of the COVID-19 Pandemic and an extended procurement phase.

4560 N	4560 Mental Health Services Oversight and Accountability Commission (OAC)			
Item	Proposal Name	Proposal Description	Staff Comments and Recommendations	
81	Children and Youth Behavioral Health Initiative - Evidence- Based Behavioral Health Programs Reimbursement GB BCP	The OAC requests \$42.9 million one-time in reimbursement authority in 2022-23 to reflect an interagency agreement with DHCS to support the statewide expansion of evidence-based behavioral health programs as part of the CYBHI. These funds will support statewide development and expansion of evidence-based and community-defined promising interventions proven to improve outcomes for children and youth with, or at high risk for, mental health conditions.	Staff Recommendation: Approve as proposed. Heard in Sub 1: February 28, 2022	
82	Mental Health Student Services Act Partnership Grant Program Augmentation GB BCP	The OAC requests 2 permanent positions and \$16,646,000 one-time Mental Health Services Fund (MHSF) in 2022-23, available over five years, and a net-zero shift of \$1,224,000 MHSF from local assistance to state operations in 2023-24 and annually thereafter to support the administration and evaluation of the Mental Health Student Services Act (MHSSA) Partnership Grant Program.	Staff Recommendation: Approve as proposed. Heard in Sub 1: February 28, 2022	
83	Evaluation of Full-Service Partnership Model Outcomes (SB 465) GB BCP	The OAC requests 1.0 permanent position and \$400,000 Mental Health Services Fund in 2022-23 and annually thereafter to annually report the outcomes for those receiving community mental health services under a full service partnership, to issue a progress report when a report is otherwise not due, to report any barriers to receiving the data relevant to completing this report, and include recommendations to strengthen full service partnerships to reduce incarceration, hospitalization, and homelessness, as required by SB 465 (Eggman, Chapter 544, Statutes of 2021).	Recommendation: Approve as proposed. Heard in Sub 1: March 7, 2022	
84	Mental Health Student Services Act Partnership Grant Program Position Authority A1 BCP	The OAC requests 5 positions in 2022-23 and ongoing to support the administration of a one-time 2021-22 Mental Health Services Fund augmentation to the Mental Health Student Services Act Partnership Grant Program. These positions will support grants to all 58 county mental health plans, regional collaboration meetings of grantees,	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 2, 2022	

	information sharing, state reporting evaluation of program effectiveness, and	
	contract monitoring.	