

AGENDA

PART A: HEALTH

ASSEMBLY BUDGET SUBCOMMITTEE NO. 1 ON HEALTH AND HUMAN SERVICES

ASSEMBLYMEMBER DR. JOAQUIN ARAMBULA, CHAIR

WEDNESDAY, MAY 26, 2021

1:30 PM - STATE CAPITOL, ROOM 437

Due to the regional stay-at-home order and guidance on physical distancing, seating for this hearing will be very limited for press and for the public. All are encouraged to watch the hearing from its live stream on the Assembly's website at <https://www.assembly.ca.gov/todaysevents>.

We encourage the public to provide written testimony before the hearing. Please send your written testimony to: BudgetSub1@asm.ca.gov. Please note that any written testimony submitted to the committee is considered public comment and may be read into the record or reprinted.

A moderated telephone line will be available to assist with public participation. After all witnesses on all panels and issues have concluded, and after the conclusion of member questions, the public may provide public comment by calling the following toll-free number:

1-877-692-8957 / access code: 131 54 37

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PUBLIC COMMENT WILL BE TAKEN ON ALL ITEMS ON THE AGENDA AT THE CONCLUSION OF VOTING AND SUBCOMMITTEE DISCUSSION.

ACTION-ONLY ISSUES

State Office of the Surgeon General 0530 California Health and Human Services Agency 4140 Office of Statewide Health Planning and Development 4150 Department of Managed Health Care 4260 Department of Health Care Services 4265 California Department of Public Health			
Issue	Proposal Name	Proposal Description	Staff Comments and Recommendations
Multi-Department/Agency May Revision Proposals			
1	Children and Youth Behavioral Health Initiative	<p>The administration proposes to: “transform California’s children and youth behavioral health (BH) system into a world-class, innovative, up-stream focused, ecosystem where ALL children and youth are routinely screened, supported and served for emerging and existing BH needs. Services are statewide, evidence based, culturally competent, and equity focused.” \$4 billion over five years, including \$2.3 billion one-time and \$300 million General Fund and certain federal matching funds ongoing starting in 2022-23.</p> <p>CHHS Agency Public Education and Change (Issue 43)—It is requested that Item 0530-062-8506 be added in the amount of \$25.1 million and 1 position one-time to support the Office of the Surgeon General in a public awareness campaign on Adverse Childhood Experiences (ACEs) and development of a trauma-informed training curriculum for the education sector.</p> <p>CHHS Agency Coordination, Subject Matter Expertise, and Evaluation (Issue 44)—It is requested that Item 0530-062-8506 be added in the amount of \$10 million ongoing for coordination, subject matter expertise, and evaluation of the Children and Youth Behavioral Health Initiative.</p> <p>OSHPD (Issue 115)—It is requested that Item 4140-062-8506 be added in the amount of \$35 million one-time and Item 4140-162-8506 be added in the amount of \$665 million one-time to support behavioral health providers</p>	<p>Staff Recommendation: <u>Hold open</u> and recommends full Budget Committee approves of this proposal with modifications that invest resources into immediate crisis response programs, including the Mental Health Student Services Partnership Grant Program and mobile crisis services for youth.</p> <p>Heard in Sub 1: May 19, 2021</p>

		<p>through existing and new health workforce development programs. For the combined fiscal years 2022-23 and 2023-24, the Budget estimates an additional \$190 million one-time General Fund for workforce development programs and \$10 million one-time General Fund for associated state operations.</p> <p>DMHC trailer bill—DMHC requests trailer bill to impose new requirements on health plans to support the overall implementation of this initiative.</p> <p>DHCS (Issues 301 and 315)—It is requested that Item 4260-062-8506 be added in the amount of \$22 million one-time and 78 positions, Item 4260-162-8506 be added in the amount of \$228 million one-time, and statutory changes be added to provide resources to support children and youth behavioral health.</p> <p>CDPH Public Education and Change Campaign—It is requested that Item 4265-062-8506 be added in the amount of \$5 million and 10 positions to implement the California Youth Behavioral Health Initiative.</p>	
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4120 Emergency Medical Services Authority (EMSA)			
Issue	Proposal Name	Proposal Description	Staff Comments and Recommendations
EMSA May Revision Proposals			
2	Increased Emergency Preparedness and Response Capability (Issue 030)	It is requested that Item 4120-001-0001 be increased by \$8,495,000 and 14 positions to maintain and store critical equipment and medical supplies acquired during the COVID-19 Pandemic, and provide resources for the Operations Center and for exercises and training.	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 19, 2021
3	Medical Surge Staffing Program (Issue 031)	It is requested that Item 4120-001-0001 be increased by \$1,414,000 and 6 positions for recruitment, on-boarding, and program management of the California Health Corps Program California Medical Assistance Teams program, and the Disaster Healthcare Volunteers/Medical Reserve Corps Program.	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 19, 2021
4	Human Resources Workload Support (Issue 032)	It is requested that Item 4120-001-0001 be increased by \$851,000 and 5 positions for administrative services support for the Human Resources Unit to address workload associated with routine and emergency response personnel services functions.	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 19, 2021
5	Statewide Emergency Medical Services Data Solution (Issue 045)	It is requested that Item 4120-001-0001 be increased by \$10 million and 2 positions one-time for planning and readiness activities to establish a statewide emergency services data infrastructure that strengthens real-time information sharing and data analytics for the state and locals, emergency medical services providers, and health care providers.	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 19, 2021

4140 Office of Statewide Health Planning and Development (OSHPD)			
Issue	Proposal Name	Proposal Description	Staff Comments and Recommendations
OSHPD January Budget Proposals			
6	Office of Health Care Affordability (BCP, TBL)	The Governor's budget includes proposed trailer bill and BCP to establish a Health Care Affordability Program. Specifically, OSHPD requests 58 positions and \$11.2 million in 2021-22, 106 positions and \$24.5 million in 2022-23, 123 positions and \$27.3 million in 2023-24, and annually thereafter from the California Health Data and Planning Fund to establish the Health Care Affordability Program.	Staff Recommendation: <u>Hold open</u> and recommends full Budget Committee approves of the proposed funding and placeholder trailer bill. Heard in Sub 1: May 12, 2021
OSHPD January Proposals Modified at May Revise			
7	Geriatric Care Workforce Programs (Issue 113)	It is requested that Item 4140-101-0001 be increased by \$5 million one-time, available over six years, to provide an augmentation to the \$3 million one-time General Fund proposed at the Governor's Budget for geriatric workforce programs. It is also requested that corresponding provisional language be amended to effectuate the augmentation.	Staff Recommendation: Approve as budgeted and as modified at the May Revision. Heard in Sub 1: May 19, 2021
OSHPD May Revision Proposals			
8	OSHPD Recast and Modernization (BCP, TBL)	OSHPD requests nine positions and total expenditure authority from various fund sources of \$6.3 million in 2021-22 and 13 positions and \$3.9 million annually thereafter to recast and reorganize the Office into the Department of Health Care Access and Information (HCAI). The reorganization includes transferring the Office of Rural Health and the J-1 Visa Waiver Program from DHCS to the new department.	Staff Recommendation: <u>Hold open</u> and recommends full Budget Committee approves of resources and placeholder trailer bill. Heard in Sub 1: May 12, 2021
9	Song-Brown Healthcare Workforce Program Augmentation (Issue 114)	It is requested that Item 4140-101-0001 be increased by \$50 million one-time, available over six years, for additional awards to support and sustain new primary care residency programs through the Song-Brown Health Care Workforce Training Program.	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 19, 2021

10	Withdrawal of Proposed Loan from the Hospital Building Fund to the General Fund (Issue 105)	It is requested that Item 4140-011-0121 be eliminated to withdraw a proposed \$40 million one-time loan from the Hospital Building Fund to the General Fund included in the Governor's Budget.	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 19, 2021
11	Medically Underserved Account for Physicians, HPEF Extension of Encumbrance Liquidation Period	It is requested that Item 4140-494 be amended to extend the period to liquidate encumbrances from Item 4140-001-8034, Budget Act of 2018 and encumbrances from Item 4140-001-8034, Budget Act of 2019 to support the Steven M. Thompson Physician Corps Loan Repayment Program. This will allow Program grantees additional time to fulfill their respective service grant agreements.	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 19, 2021

4150 Department of Managed Health Care (DMHC)			
Issue	Proposal Name	Proposal Description	Staff Comments and Recommendations
DMHC Spring Finance Proposals			
12	Annual Health Care Services Plan Health Equity and Quality Reviews (SFL Issues 022 and 177, BCP, TBL)	The Governor's Spring Finance Letter includes both proposed trailer bill and a BCP to establish and enforce health equity and quality standards for all DMHC licensed full-service and behavioral health plans on an annual basis.	Staff Recommendation: Approve as proposed with modified placeholder trailer bill to clarify regulatory implementation. Heard in Sub 1: May 12, 2021

4260 Department of Health Care Services (DHCS)			
Issue	Proposal Name	Proposal Description	Staff Comments and Recommendations
DHCS January Budget Proposals			
13	CalAIM	<p>The California Advancing and Innovating Medi-Cal (CalAIM) is the DHCS framework for changes to the Medi-Cal program that encompasses broad-based delivery system, program, and payment reform. CalAIM advances several key priorities of the Newsom Administration by leveraging Medicaid as a tool to help address many of the complex challenges facing California's most vulnerable residents, such as homelessness, behavioral health care access, children with complex medical conditions, the growing number of justice-involved populations who have significant clinical needs, and the growing aging population.</p> <p>Through a combination of BCPs and trailer bill, CalAIM encompasses a significant number of proposed reforms to the Medi-Cal program. Many of these reforms are being vetted by the Legislature through policy bills as well as through the budget process.</p>	<p>Staff Recommendation: <u>Hold open</u> and recommends full Budget Committee approves of requested resources and significant portions of the CalAIM components through placeholder trailer bill.</p> <p>Heard in Sub 1: March 9, 16, and 25, 2021</p>
14	CalAIM State Operations Resources	DHCS requests 69.0 permanent positions, limited term resources equivalent to 46.0 positions and expenditure authority of \$23,860,000 (\$11,041,000 General Fund; \$12,819,000 Federal Fund) for fiscal year 2021-22. The resources are needed to implement the comprehensive set of proposals that encompass DHCS's CalAIM initiative.	<p>Staff Recommendation: Approve as proposed.</p>
15	Mental Health Services Act Flexibilities Trailer Bill	DHCS proposes trailer bill to extend certain temporary adjustments to the Mental Health Services Act through June 30, 2022 to increase funding flexibility for counties to respond to the COVID-19 public health emergency.	<p>Staff Recommendation: Approve placeholder trailer bill.</p> <p>Heard in Sub 1: February 22, 2021 May 12, 2021</p>

16	Long-Term Health Care Facilities Penalties for Improper Discharges Trailer Bill	<p>DHCS proposes trailer bill language to assess monetary penalties against a long-term health care facility for noncompliance with a hearing decision issued by DHCS that orders the readmission of a resident after a finding that the facility improperly transferred, discharged, or failed to readmit a resident.</p> <p>This propose trailer bill language would authorize the department to assess penalties of up to \$1,000 for each calendar day the facility fails to comply with a hearing decision, beginning on the sixth calendar day after the date of service of the decision. Penalties would not exceed a total of \$100,000 for each hearing decision noncompliance episode. The language would authorize DHCS to waive a portion of penalties upon a facility's successful demonstration of hardship.</p>	<p>Staff Recommendation: <u>Hold open</u> and recommends full Budget Committee approve with modified placeholder trailer bill to address concerns of nursing homes related to the hearing process.</p> <p>Heard in Sub 1: March 8, 2021</p>
DHCS Spring Finance Proposals			
17	Annual Health Care Services Plan Health Equity and Quality Reviews (SFL Issues 022 and 177, BCP and TBL)	<p>DHCS requests 2 positions and expenditure authority of \$296,000 (\$148,000 General Fund (GF); \$148,000 Federal Fund (FF)) in 2021-22 and 2 positions and \$278,000 (\$139,000 GF; \$139,000 FF) in 2022-23 and ongoing to coordinate with DMHC on the establishment and enforcement of health equity and quality standards and to perform related data analysis.</p>	<p>Staff Recommendation: Approve as proposed with modified placeholder trailer bill with clarifications on implementation issues.</p> <p>Heard in Sub 1: May 12, 2021</p>
18	Office of Medicare Innovation and Integration (SFL Issue 173)	<p>DHCS requests 4.0 permanent positions and expenditure authority of \$602,000 (\$452,000 General Fund (GF); \$150,000 Federal Fund (FF)) in fiscal (FY) year 2021-22 and \$566,000 (\$425,000 GF; \$141,000 FF) in FY 2022-23 and ongoing to establish a new DHCS Office of Medicare Innovation and Integration. This Office is proposed to provide focused leadership and expertise to lead innovative models for Medicare beneficiaries in California, including both Medicare-only beneficiaries and individuals dually eligible for Medicare and Medi-Cal.</p>	<p>Staff Recommendation: Approve as proposed with placeholder trailer bill to establish this Office in law and define its functions.</p> <p>Heard in Sub 1: May 12, 2021</p>

19	Local Educational Agencies Medi-Cal Billing Option Program Expansion (SFL 172)	DHCS, Local Governmental Financing Division (LGFD) and Office of Legal Services (OLS), request 8.0 permanent positions and expenditure authority \$2,238,000 (\$1,119,000 General Fund (GF); \$1,119,000 Federal Fund (FF)) in fiscal year (FY) 2021-22 for the expansion and improvement of school based health care. The request includes limited-term contract authority of \$1,000,000 (\$500,000 GF) in FY 2021-2022, and \$1,000,000 (\$500,000 GF) in FY 2022-23 to hire a contractor to help implement the expansion of the Local Educational Agencies Medi-Cal Billing Option Program.	<p>Staff Recommendation: <u>Hold open.</u></p> <p>Heard in Sub 1: May 12, 2021</p>
20	Behavioral Health Quality Improvement Program (SFL Issue 174)	DHCS requests \$940,000 (\$470,000 General Fund; \$470,000 Federal Fund) in FY 2021-22 and \$913,000 (\$457,000 General Fund; \$456,000 Federal Fund) in FY 2022-23 to support the equivalent of 3.0 positions and contract resources to administer the Behavioral Health Quality Improvement Program (BH-QIP). The BH-QIP will assist county Mental Health Plans and county Drug Medi-Cal programs prepare for opportunities through CalAIM.	<p>Staff Recommendation: <u>Hold open</u> and recommends full Budget Committee takes action to conform to actions taken on full CalAIM package.</p> <p>Heard in Sub 1: May 12, 2021</p>
21	Medi-Cal Program Integrity Data Analytics (SFL Issue 167)	DHCS, Audits and Investigations (A&I), requests one-year limited-term (LT) contract expenditure authority of \$6,885,000 (\$1,130,000 General Fund (GF); \$5,755,000 Federal Fund (FF)) in fiscal year (FY) 2021-22 to extend funding for the Medi-Cal Program Integrity Data Analytics (MPIDA) service.	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 12, 2021</p>
22	Interoperability Federal Final Rule Compliance (SFL Issue 168)	DHCS requests funding for 5.0 existing permanent positions, one-year limited-term (LT) contract funding, and expenditure authority of \$2,854,000 (\$713,000 General Fund (GF); \$2,141,000 Federal Fund (FF)) in fiscal year (FY) 2021-22 and \$737,000 (\$184,000 GF; \$553,000 FF) in FY 2022-23 and ongoing. The requested resources are needed to plan for and support DHCS compliance with the Centers for Medicare & Medicaid Services (CMS) and the Office of the National Coordinator (ONC) for Health	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 12, 2021</p>

		Information Technology's Interoperability and Patient Access Rule (CMS-9115-F).	
23	Managed Care Plan Statewide Procurement (SFL Issue 169)	DHCS, Managed Care Operations Division (MCO) and Managed Care Quality and Monitoring Division (MCQMD), requests 11.0 permanent positions, four-year limited-term (LT) resources equivalent to 7.0 positions, and expenditure authority of \$2,672,000 (\$1,336,000 General Fund (GF); \$1,336,000 Federal Fund (FF)) for fiscal year (FY) 2021-22, \$2,510,000 (\$1,255,000 GF; \$1,255,000 FF) in FY 2022-23 through FY 2024-25 and \$1,554,000 (\$777,000 GF; \$777,000 FF) in FY 2025-26 and ongoing to support the statewide Managed Care Program procurement effort.	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 12, 2021
24	Provider Application and Verification for Enrollment (PAVE) (SFL Issue 171)	DHCS, Enterprise Technology Services (ETS) in partnership with the Provider Enrollment Division, requests one-year limited-term contract funding in the amount of \$7,168,000 (\$1,792,000 General Fund (GF); \$5,376,000 Federal Fund (FF)) in fiscal year (FY) 2021-22 for enhancements (change requests) to the Provider Application and Validation for Enrollment (PAVE) system, including functionality to support provider enrollment activities within DHCS.	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 12, 2021
DHCS January Proposals Modified at the May Revision			
25	Withdraw Program Suspensions TBL	It is requested that Provision 2 of Item 4260-001-3305, Provision 17 of Item 4260-101-0001, Provision 4 of Item 4260-101-0890, and Provision 10 of Item 4260-101-3305 be eliminated to withdraw program suspensions proposed in the Governor's Budget. Additionally, related statutory changes are requested to withdraw suspensions in current law.	Staff Recommendation: Approve as proposed with placeholder trailer bill. Heard in Sub 1: May 19, 2021
26	Medi-Cal Estimate (GB and MR Issues 237, 307, 310, 312, and 315)	The May 2021 Medi-Cal estimate proposes \$115.6 billion in total funds, including \$21.5 billion in General Fund, \$79 billion in federal funds, and \$15.1 billion in other non-federal funds. This	Staff Recommendation: Approve the balance of Estimate, with any changes necessary to

		includes \$828 million from the Coronavirus Fiscal Recovery Fund of 2021.	conform to other actions that have been, or will be, taken. Heard in Sub 1: May 19, 2021
27	COVID-19 Medi-Cal Caseload Impacts (Issue 296)	It is requested that Item 4260-101-0001 be decreased by \$1,715,828,000 one-time, Item 4260-101-0890 be decreased by \$2,162,073,000 one-time, Item 4260-113-0001 be decreased by \$92,673,000 one-time, and Item 4260-113-0890 be decreased by \$172,126,000 one-time to reflect COVID-19 impacts on Medi-Cal caseload. Compared to Governor's Budget, caseload is estimated to decrease by approximately 371,800 average monthly enrollees in 2020-21 and 1,107,400 average monthly enrollees in 2021-22. The change is primarily due to updated actuals and the assumption that only the continuous coverage requirement, and not labor market impacts, will drive COVID-19 caseload increases.	Staff Recommendation: Approve the balance of the caseload estimate, with any changes necessary to conform to other actions that have been, or will be, taken. Heard in Sub 1: May 19, 2021
28	Family Health Estimate (GB and MR Issue 236)	It is requested that Item 4260-111-0001 be increased by \$7,108,000 ongoing, reimbursements be increased by \$77,000 ongoing, and Item 4260-114-0001 be decreased by \$2,582,000 ongoing. These changes reflect revised expenditures due to caseload and other miscellaneous adjustments outlined in the Family Health Estimate.	Staff Recommendation: Approve the balance of Estimate, with any changes necessary to conform to other actions that have been, or will be, taken. Heard in Sub 1: May 19, 2021
29	Medi-Cal Telehealth Flexibilities Proposal	The Governor's January Budget included proposed trailer bill to make permanent various flexibilities for Medi-Cal providers to utilize telehealth, as provided during the Public Health Emergency. This proposal updates the proposed payment structure for audio-only telephonic care. The Governor's telehealth trailer bill proposal was heard in Subcommittee on May 12, 2021. The May Revise proposes to extend Medi-Cal telehealth services by providing a reimbursement rate for audio-only services at 65 percent of the	Staff Recommendation: Reject proposed trailer bill and adopt modified placeholder trailer bill consistent with AB 32 (Aguiar-Curry). Heard in Sub 1: May 12, 2021 May 19, 2021

		<p>fee-for-service rate, and via a comparable alternative to prospective payment system (PPS) rates for clinics to maintain an incentive for in-person care. Provides that this reimbursement will only be available to providers within California or border communities, and who are able to provide in-person services to any client served by audio-only telehealth.</p>	
30	<p>Behavioral Health Continuum Infrastructure Program (GB and SFL Issues 175 and 195, MR Issues 302 and 314)</p>	<p>The Governor's January Budget includes \$750 million General Fund for the Behavioral Health Continuum Infrastructure Program.</p> <p>The Governor's Spring Finance Letter includes a BCP for state operations resources to support the Behavioral Health Continuum Infrastructure Program, as described here: DHCS requests \$2,191,000 General Fund in fiscal year (FY) 2021-22 and \$2,155,000 General Fund in FY 2022-23 and in FY 2023-24 to administer the Behavioral Health Continuum Infrastructure Program (BH-CIP). This funding would be shifted from the \$750 million one-time General Fund in local assistance proposed in the 2021 Governor's Budget.</p> <p>The requested resources include limited-term contract authority of \$1,500,000 General Fund annually from FY 2021-22 to FY 2023-24 to provide training and technical assistance to counties on real estate acquisition and rehabilitation, to conduct outreach and education activities, and to develop and manage the contracting process.</p> <p>The May Revise increases the Governor's Budget proposal for behavioral health infrastructure (\$750 million General Fund) by \$10 million ARPA and shifts \$300 million General Fund to ARPA. Also includes \$1.4 billion (\$1.2 billion General Fund and \$220 million ARPA) for the program in 2022-23 (some of these amounts are included in the Children and Youth Behavioral Health Initiative described above). Of the funding, a minimum of \$10 million ARPA</p>	<p>Staff Recommendation: <u>Hold open</u> and recommends full Budget Committee approves of this proposal with modified placeholder trailer bill to clarify allowable uses and accountability for these funds.</p> <p>Heard in Sub 1: February 22, 2021 May 12, 2021 May 19, 2021</p>

		<p>in 2021-22 and \$255 million (\$220 million ARPA and \$25 million General Fund) in 2022-23 is available for increased infrastructure targeted to individuals age 25 and younger.</p> <p>Includes \$250 million one-time General Fund to provide competitive grants for increased infrastructure targeted to justice-involved individuals with a serious mental illness who are deemed incompetent to stand trial (IST). Related to an intent to reallocate Relinquished County Jail Bond Authority to purchase or modify community mental health facilities, this proposal is intended to provide community based alternatives to incarceration or unnecessary state hospitalization.</p> <p>It is requested that Item 4260-001-0001 be increased by \$12.5 million one-time, Item 4260-062-8506 be added in the amount of \$10 million one-time, Item 4260-101-0001 be decreased by \$62.5 million one-time, Item 4260-162-8506 be added in the amount of \$300 million one-time, and statutory changes be added to augment the Behavioral Health Continuum Infrastructure Program proposed in the Governor's Budget. It is also requested that provisional language be added to Items 4260-001-0001 and 4260-101-0001.</p>	
31	Increase Access to Behavioral Health Services	<p>The Governor's January Budget requests \$389.0 million (\$194.5 million GF, \$194.5 million FF) for a local assistance incentive program through Medi-Cal Managed Care Plans, in partnership with schools and county behavioral health departments, to increase the number of K-12 students receiving preventive, early intervention, and behavioral health services from school-affiliated behavioral health providers.</p> <p>The May Revise Children and Youth Behavioral Health Initiative proposes to add significant resources for this purpose.</p>	<p>Staff Recommendation: <u>Hold open</u> and recommends full Budget Committee takes action that conforms to comprehensive action taken on the Children and Youth Behavioral Health Initiative.</p> <p>Heard in Sub 1: February 22, 2021 May 12, 2021 May 19, 2021</p>

DHCS May Revision Proposals			
32	Expand Medi-Cal to Undocumented Older Adults 60+ (MR Issue 313) TBL	The May Revision includes \$69 million (\$50 million General Fund) in 2021-22 and \$1 billion (\$859 million General Fund) ongoing to expand Medi-Cal, including In-Home Supportive Services, to undocumented adults aged 60 and older effective no sooner than May 1, 2022, and statutory changes be added to expand Medi-Cal coverage to undocumented adults aged 60 and older.	<p>Staff Recommendation: Approve modified proposal to expand Medi-Cal coverage to undocumented adults aged 50 and older, including sufficient resources and placeholder trailer bill.</p> <p>Heard in Sub 1: May 19, 2021</p>
33	CalAIM Population Health Management Service (MR Issues 294 and 304) BCP, TBL	It is requested that Item 4260-001-0001 be increased by \$1.5 million, Item 4260-001-0890 be increased by \$13.5 million, Item 4260-101-0001 be increased by \$30 million, and Item 4260-101-0890 be increased by \$270 million one-time to provide Medi-Cal population health management services utilizing administrative and clinical data as part of CalAIM efforts proposed in the Governor's Budget. It is also requested that provisional language be added to Item 4260-101-0001 and Item 4260-101-0890.	<p>Staff Recommendation: <u>Hold open</u> and recommends full Budget Committee takes action to conform to actions taken on full CalAIM package.</p> <p>Heard in Sub 1: May 19, 2021</p>
34	Unfreeze Intermediate Care Facilities for the Developmentally Disabled (ICF-DD) Rates (MR Issue 289)	It is requested that Item 4260-101-0001 be increased by \$8,778,000 ongoing, Item 4260-101-0890 be increased by \$10,464,000 ongoing, and statutory changes be added to unfreeze rates for Intermediate Care Facilities for the Developmentally Disabled.	<p>Staff Recommendation: <u>Hold open</u> and recommends approval by full Budget Committee, augmented to smooth rate throughout 2021-22.</p> <p>Heard in Sub 1: May 19, 2021</p>
35	Unfreeze Free-Standing Pediatric Subacute Facility Rates (MR Issue 290)	It is requested that Item 4260-101-0001 be increased by \$2,328,000 ongoing, Item 4260-101-0890 be increased by \$2,873,000 ongoing, and statutory changes be added to unfreeze rates for Free-Standing Pediatric Subacute Facilities.	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 19, 2021</p>

36	Medication Therapy Management Program (MR Issue 292)	It is requested that Item 4260-101-0001 be increased by \$4,181,000, Item 4260-101-0890 be increased by \$7,736,000, Item 4260-113-0001 be increased by \$237,000, Item 4260-113-0890 be increased by \$441,000 on an ongoing basis, and statutory changes be added, to implement a program for specialty pharmacy services in Medi-Cal.	<p>Staff Recommendation: Approve as proposed and adopt placeholder trailer bill.</p> <p>Heard in Sub 1: May 19, 2021</p>
37	Doula Benefit (MR Issue 297)	It is requested that Item 4260-101-0001 be increased by \$147,000 ongoing, Item 4260-101-0890 be increased by \$242,000 ongoing, Item 4260-113-0001 be increased by \$5,000 ongoing, and Item 4260-113-0890 be increased by \$9,000 ongoing—growing annually thereafter—to cover doula services in the Medi-Cal program, effective January 1, 2022.	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 19, 2021</p>
38	Community Health Workers (MR Issue 298)	It is requested that Item 4260-101-0001 be increased by \$6,154,000 ongoing and Item 4260-101-0890 be increased by \$10,169,000 ongoing—growing annually thereafter—to cover services provided by Community Health Workers in the Medi-Cal program, effective January 1, 2022.	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 19, 2021</p>
39	Medically Tailored Meals Expansion (MR Issue 299)	It is requested that Item 4260-101-0001 be increased by \$9.3 million one-time, and statutory changes be added, to continue providing medically tailored meals, and to cover additional health conditions, until their availability through the CalAIM initiative.	<p>Staff Recommendation: Approve as proposed and adopt modified placeholder trailer bill to more clearly define the program.</p> <p>Heard in Sub 1: May 19, 2021</p>
40	CalAIM: Providing Access and Transforming Health (PATH) (MR Issue 300)	It is requested that Item 4260-101-0001 be increased by \$100 million one-time and Item 4260-101-0890 be increased by \$100 million one-time, and statutory changes be added, to build capacity for effective pre-release care for justice-involved populations to enable coordination with justice agencies and Medi-Cal coverage of services 30 days prior to release. It is also requested that provisional language be added to Items 4260-101-0001 and 4260-101-0890.	<p>Staff Recommendation: <u>Hold open</u> and recommends full Budget Committee takes action that conforms to actions taken on full CalAIM package.</p> <p>Heard in Sub 1: May 19, 2021</p>

41	Medi-Cal Eligibility Extension for Postpartum Individuals (MR Issue 303)	It is requested that Item 4260-101-0001 be increased by \$45,273,000, Item 4260-101-0890 be increased by \$45,273,000, and statutory changes be added to extend Medi-Cal eligibility from 60 days to 12 months for most postpartum individuals. This proposal aligns with the American Rescue Plan Act of 2021, which allows states to receive federal funding if they extend Medi-Cal eligibility from 60 days to 12 months for most postpartum individuals, effective April 1, 2022 for up to five years. Estimated costs to implement the extension between 2022-23 and 2027-28 are \$362.2 million (\$181.1 million General Fund) annually.	<p>Staff Recommendation: Approve as proposed and adopt placeholder trailer bill.</p> <p>Heard in Sub 1: May 19, 2021</p>
42	Restoration of Medi-Cal Dental Fee-For-Service in Sacramento and Los Angeles Counties	It is requested that Item 4260-101-0001 be decreased by \$8,026,000, Item 4260-101-0890 be decreased by \$11,930,000 one-time, and statutory changes be added to eliminate dental managed care and restore dental fee-for-service in both Sacramento and Los Angeles counties.	<p>Staff Recommendation: <u>Hold open.</u></p> <p>Heard in Sub 1: May 19, 2021</p>
43	San Mateo Dental Integration Pilot Program	It is requested that Item 4260-101-0001 be increased by \$243,000, Item 4260-113-0001 be increased by \$38,000, Item 4260-101-0890 be increased by \$345,000, and Item 4260-113-0890 be increased by \$71,000 one-time to implement a dental integration pilot program in San Mateo County pursuant to SB 849 (Committee on Budget and Fiscal Review, Chapter 47, Statutes of 2018).	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 19, 2021</p>
44	Support for Public Hospitals and Health Systems (Issue 295)	It is requested that Item 4260-162-8506 be added in the amount of \$300 million one-time to support public hospitals and health care systems' unreimbursed costs associated with providing care to COVID-19 Medi-Cal FFS patients.	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 19, 2021</p>

45	Miscellaneous Baseline Adjustment: Behavioral Health Federal Funds Right-Sizing (MR Issues 283, 284)	It is requested that Item 4260-115-0890 be increased by \$138,040,000 and Item 4260-116-0890 be increased by \$334,966,000 to reflect the projected federal funds to support mental health and substance use disorder services.	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 19, 2021</p>
46	Medi-Cal Drug Rebate Fund Reserve in Current Year (MR Issue 293)	In fiscal year 2020-21, expenditures in Item 4260-101-0001 are increasing by \$222 million one-time to maintain a reserve of the equivalent amount in the Medi-Cal Drug Rebate Fund. The reserve is intended to alleviate the General Fund impact related to drug rebate volatility.	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 19, 2021</p>
47	Proposition 56 Loan Repayment Program (MR Issue 286)	It is requested that Item 4260-112-3305 be increased by \$1,953,000 one-time to reflect additional funds available for the Proposition 56 Loan Repayment Program based on past-year and estimated current year expenditures.	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 19, 2021</p>
48	DHCS Transfer of Programs to OSHPD (MR Issue 251)	It is requested that Item 4260-001-0001 be decreased by \$690,000 and 4 positions, Item 4260-001-0890 be decreased by \$676,000, and Item 4260-111-0890 be decreased by \$498,000 ongoing to shift various activities from DHCS to the proposed new Department of Health Care Access and Information, as part of the OSHPD recast and modernization.	<p>Staff Recommendation: <u>Hold open</u> and recommend full Budget Committee takes action that conforms to action taken on OSHPD recast and modernization proposal.</p> <p>Heard in Sub 1: May 19, 2021</p>
49	Health Information Exchange Extension of Funding	It is requested that provisional language be added to Item 4260-101-0001 extending the availability of any available General Fund in the California Health Information Exchange Onboarding Program (Cal-HOP) through the end of 2021-22 for interoperability or data exchange purposes.	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 19, 2021</p>
50	California Community Transitions Trailer Bill	DHCS proposes statutory changes to institute closer alignment between state funding and federal Money Follows the Person Program funding and requirements.	<p>Staff Recommendation: Approve placeholder trailer bill.</p> <p>Heard in Sub 1: May 19, 2021</p>

51	Accelerated Enrollment for Adults	DHCS proposes to expand accelerated enrollment to adults, ages 19 through 64, using the California Healthcare Eligibility, Enrollment and Retention System (CalHEERS) at the time of application. Accelerated enrollment for adults provides immediate and temporary benefits while income verifications are pending. The budget includes costs of \$14.3 million total funds (\$7.2 million General Fund) in FY 2021-22.	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 19, 2021
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4265 California Department of Public Health (CDPH)			
Issue	Proposal Name	Proposal Description	Staff Comments and Recommendations
CDPH January Budget Proposals			
52	California Parkinson's Disease Registry Program Extension (AB 2821) BCP	CDPH, Center for Healthy Communities (CHC), California Parkinson's Disease Registry (CPDR) is requesting a one-time appropriation of \$408,591 General Fund to support redirection of two existing positions and to continue outreach and surveillance efforts. The approval of AB 2821 (Nazarian, Chapter 103, Statutes of 2020) extends the authority of CPDR to continue data collection until January 1, 2022, and this proposal seeks fiscal support for the legislatively mandated extension period.	Staff Recommendation: <u>Hold open</u> and recommends full Budget Committee approves CDPH proposal modified to eliminate the sunset, augment the program budget and expand its scope to cover neurological diseases. Heard in Sub 1: February 8, 2021
53	Health Care and Essential Workers: Personal Protective Equipment (SB 275) BCP	CDPH, Center for Health Care Quality (CHCQ) requests 0.5 Research Scientist Supervisor I and 0.5 Associate Governmental Program Analyst and \$164,000 in 2021-22 and ongoing from the Licensing and Certification Fund (Fund 3098) for establishing regulations for a personal protective equipment (PPE) stockpile to build an adequate future supply of PPE, as specified in the language of the bill, for all health care and essential workers in the state as mandated by SB 275 (Pan, Leyva, Chapter 301, Statutes of 2020).	Staff Recommendation: Approve as budgeted. Heard in Sub 1: February 8, 2021
54	Improving the California Prenatal Screening Program BCP	CDPH requests 3 positions and \$449,000 in State Operations expenditure authority in 2021-22 and ongoing and Local Assistance expenditure authority of \$3.9 million in 2021-22 and \$20.2 million in 2022-23 and ongoing from the Genetic Disease Testing Fund (Fund 0203) in order to meet current standards of care and improve the screening process for the California Prenatal Screening Program.	Staff Recommendation: Approve as budgeted. Heard in Sub 1: February 8, 2021
55	Transfer Cannabis Resources to the proposed	The Governor's Budget reflects a decrease of 119.0 positions and \$29.0 million expenditure authority in CDPH State Operations. This decrease	Staff Recommendation: Approve of action to conform to action taken

	Department of Cannabis Control	includes \$28.4 million in Cannabis Control Fund (Fund 3288) and \$527,000 in Reimbursement Fund (Fund 0995). The proposed changes will support the consolidation of resources within the proposed new Department of Cannabis Control.	on the proposal to create the new Department of Cannabis Control. Heard in Sub 1: February 8, 2021
CDPH Spring Finance Proposals			
56	Establishing the Office of Suicide Prevention (AB 2112) (SFL Issue 226) BCP, TBL	CDPH, Center for Healthy Communities (CHC), Injury and Violence Prevention Branch (IVPB) requests five positions and \$780,235, General Fund appropriation in 2021-22 and ongoing to establish and administer an Office of Suicide Prevention as authorized by AB 2112 (Ramos, Chapter 142, Statutes of 2020).	Staff Recommendation: <u>Hold open</u> and recommends full Budget Committee approve proposal, modified to include an augmentation to support additional staff and functions. Heard in Sub 1: May 12, 2021
57	Cosmetic Fragrance and Flavor Ingredient Right to Know Act of 20202 Implementation (SB 312) (SFL Issue 224)	CDPH, Center for Healthy Communities, Occupational Health Branch, requests \$26,000 General Fund in 2021-22 and \$52,000 ongoing General Fund to pay for costs associated with changes, maintenance, and operation of an existing database needed to accommodate the mandates of SB 312 (Leyva, Chapter 315, Statutes of 2020).	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 12, 2021
CDPH January Proposals Modified in the May Revision			
58	AIDS Drug Assistance Program (ADAP) Estimate	It is requested that funding for Health and Safety Code section 120956 be decreased by \$13,927,000 ongoing to reflect a projected decrease in medication expenditures, insurance premium expenditures, and medical out-of-pocket costs.	Staff Recommendation: Approve May Revision Estimate, reflecting any additional changes approved as part of the final 2021 Budget Act. Heard in Sub 1: May 19, 2021

59	Women, Infants, and Children (WIC) Program Estimate	It is requested that Item 4265-111-0890 be increased by \$52,946,000 ongoing and Item 4265-111-3023 be increased by \$15,497,000 ongoing to reflect adjusted expenditure estimates.	<p>Staff Recommendation: Approve May Revision Estimate, reflecting any additional changes approved as part of the final 2021 Budget Act.</p> <p>Heard in Sub 1: May 19, 2021</p>
60	Genetic Disease Screening Program (GDSP) Estimate	It is requested that Item 4265-111-0203 be decreased by \$230,000 ongoing to reflect adjusted expenditure estimates.	<p>Staff Recommendation: Approve May Revision Estimate, reflecting any additional changes approved as part of the final 2021 Budget Act.</p> <p>Heard in Sub 1: May 19, 2021</p>
61	Center for Health Care Quality (Licensing & Certification) Estimate	<p>Current Year 2020-21 CDPH/CHCQ projects a revised 2020-21 expenditure authority of \$344.9 million, which is a \$3.8 million increase from the 2021-22 Governor's Budget. This increase is due to \$3.8 million in supplemental awards related to the Coronavirus Aid, Relief, and Economic Security Act (CARES Act).</p> <p>Budget Year 2021-22 For 2021-22, CDPH estimates expenditures will total \$394.0 million, which is an increase of \$2.5 million from the 2021-22 Governor's Budget. This increase includes \$2.5 million in supplemental awards related to the CARES Act.</p>	<p>Staff Recommendation: Approve May Revision Estimate, reflecting any additional changes approved as part of the final 2021 Budget Act.</p> <p>Heard in Sub 1: May 19, 2021</p>
62	Tobacco Tax Revenue (Propositions 99 and 56) and Special Funds' Adjustments	Proposes various adjustments to special funds, based on revenue estimates. Please see the May 19 th agenda for details.	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 19, 2021</p>
63	Support for Alzheimer's Disease Awareness, Research, and Training	It is requested that Item 4265-001-0001 be increased by \$5,375,000 one-time and Item 4265-111-0001 be increased by \$2,125,000 to supplement the Governor's Budget proposal activities in	<p>Staff Recommendation: Approve as proposed in the May Revise.</p>

		public awareness and promulgating standards of care.	<p>Heard in Sub 1: May 19, 2021*</p> <p>*The January budget proposal was heard in Sub 1 on February 8, 2021, and approved on May 12, 2021.</p>
CDPH May Revision Proposals			
64	Pandemic Response Review	It is requested that Item 4265-001-0001 be increased by \$3 million one-time to support a review of the state's pandemic response from an emergency response perspective.	<p>Staff Recommendation: <u>Hold open</u> and recommends full Budget Committee reject this proposal and approve augmentations and placeholder trailer bill to ensure accountability with new county funding, including articulation of specific funding purposes and priorities.</p> <p>Heard in Sub 1: May 19, 2021</p>
65	Expansion of Pre-Exposure Prophylaxis (PrEP) Assistance Program (PrEP-AP)	It is requested that statutory changes be added to amend Health and Safety Code section 120972, subdivision (a)(4), to allow PrEP-AP to pay for specified ancillary services for a person dispensed or furnished PrEP and post-exposure prophylaxis medication pursuant to Business and Professions Code sections 4052-4052.03.	<p>Staff Recommendation: Approve as proposed and adopt placeholder trailer bill.</p> <p>Heard in Sub 1: May 19, 2021</p>
66	Resources for COVID-19 Pandemic Response External Challenges	It is requested that Item 4265-001-0001 be increased by \$6 million one-time to support costs incurred from legal challenges to the state's COVID-19 pandemic response. It is also requested that provisional language be added to allow CDPH to use this appropriation for this specific purpose.	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 19, 2021</p>
67	Rescind Rhesus Isoimmunization Hemolytic Disease (Rh-HDN) Disease Reporting Requirement	It is requested that Health and Safety Code section 125075 be eliminated to allow hospitals and physicians attending newborn infants not be required to report each occurrence of the disease Rh-HDN due to its extremely low morbidity and mortality rate. This would allow providers	<p>Staff Recommendation: Approve as proposed and adopt placeholder trailer bill.</p>

		to focus on treatment and prevention of higher priority diseases and conditions in newborns.	Heard in Sub 1: May 19, 2021
68	Exemption from Public Contract Code (PCC) for Lesbian, Bisexual, Transgender and Queer (LBTQ) Women's Health Equity Initiative	It is requested that statutory changes be added to provide a PCC exemption for the LBTQ Women's Health Equity Initiative, which was included by the Legislature in the 2019 Budget Act, to allow smaller community-based organizations to successfully compete for grants and contracts.	Staff Recommendation: Approve as proposed and adopt placeholder trailer bill. Heard in Sub 1: May 19, 2021
69	Technical Adjustments in the CDPH budget	<p>Emergency Item Reimbursement—It is requested that provisional language be added to build reimbursement authority in Item 4265-001-0001 for the Department's Emergency Preparedness Office to take in Federal Emergency Management Agency monies related to wildfires.</p> <p>Adjustment to Reflect Substance Use Disorder Response Navigators Technical Adjustment—It is requested that provisional language be added to allow the Department of Public Health to transfer \$1.8 million from Item 4265-001-0001 to Item 4265-111-0001 in 2020-21 to bolster local harm reduction resources.</p> <p>Epidemiology and Laboratory Capacity Grants—It is requested that provisional language be added to Item 4265-001-0001 to allow the Department of Public Health to accept federal grants for epidemiology and laboratory capacity and to transfer funds to Item 4265-111-0001.</p> <p>American Rescue Plan Grants—It is requested that provisional language be added to Items 4265-001-0890 and 4265-111-0890 to allow the Department of Public Health to accept federal grants from the American Rescue Plan Act</p>	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 19, 2021

4440 Department of State Hospitals (DSH)			
Issue	Proposal Name	Proposal Description	Staff Comments and Recommendations
DSH January Proposals Modified at the May Revision			
70	Conditional Release Program (CONREP) Adjustments	<p>Sexually Violent Predator Caseload Update (Issue 077)—It is requested that Item 4440-011-0001 be increased by \$1,845,000 in 2021-22 and annually thereafter to reflect the Department of State Hospital's updated caseload for the Sexually Violent Predator Conditional Release Program.</p> <p>Continuum of Care (Issue 078)—It is requested that Item 4440-011-0001 be decreased by \$2,738,000 in 2021-22 and annually thereafter due to delays in construction and contract negotiations.</p> <p>Mobile Forensic Assertive Community Treatment Team (Issue 079)—It is requested that Item 4440-011-0001 be increased by \$4,090,000 to contract for an additional 80 Conditional Release Program beds with the Mobile Forensic Assertive Community Treatment Team model. Funding increases to \$6,465,000 in 2024-25 and annually thereafter.</p>	<p>Staff Recommendation: Approve CONREP adjustments as proposed in the May Revision.</p> <p>Heard in Sub 1: May 19, 2021</p>
71	Community Care Demonstration Project (GB and MR Issue 113) (BCP, TBL)	<p>The Governor's January Budget requests 4.0 positions and \$233.2 million General Fund in FY 2021-22 and 4.0 positions and \$136.4 million General Fund in FY 2022-23 and ongoing to establish the Community Care Demonstration Project for Felony Incompetent to Stand Trial (IST) (CCPD-IST), for the department to contract with counties to provide a continuum of services to felony ISTs in the county as opposed to state hospitals.</p> <p>It is requested that Item 4440-011-0001 be decreased by \$233,187,000 and 4 positions to reflect the withdrawal of the Governor' Budget Community Care Demonstration Project proposal. Ongoing funding of \$136,437,000 annually and associated provisional language and statutory changes are also withdrawn.</p>	<p>Staff Recommendation: Approve the withdrawal of this January budget proposal.</p> <p>Heard in Sub 1: May 19, 2021*</p> <p>*The January proposal was heard by the Subcommittee on February 22, 2021 and was left open.</p>

DSH Spring Proposals			
72	Increased Investigation Workload (SFL Issue 068)	DSH requests \$337,000 General Fund in fiscal year (FY) 2021-22 and \$266,000 annually thereafter to support the reclassification of 20.0 Hospital Police Officer (HPO) positions to Investigators.	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 12, 2021</p>
73	Statewide Ligature Risk Special Repair Funding Expenditure Authority (SFL Issue 069)	DSH requests authority, through provisional language, in fiscal year (FY) 2021-22 and annually thereafter until 2026-27, to extend the encumbrance and expenditure authority for ligature risk special repair funding authorized in the 2020 Budget Act.	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 12, 2021</p>
DSH May Revision Proposals			
74	Discontinue Lanterman-Petris-Short Patient Contracts with Counties (MR Issues 093 and 094)	It is requested that Item 4440-011-0001 be increased by \$16,602,000 and reimbursements be decreased by \$24,704,000, and Item 4440-017-0001 be increased by \$480,000 to discontinue the state hospitals as a treatment option for Lanterman-Petris-Short (LPS) patients over three years, provide treatment for these patients at the county level only, and utilize the state hospital beds for Incompetent to Stand Trial (IST) treatment. DSH will repurpose bed capacity currently used for LPS patients for IST patients. Funds increase to \$145,526,000 General Fund in 2024-25 and annually thereafter. This funding includes resources equivalent to 3 limited-term positions to manage the implementation.	<p>Staff Recommendation: <u>Hold open.</u></p> <p>Heard in Sub 1: May 19, 2021</p>
75	Jail Based Competency Treatment Program (MR Issues 080 and 081)	It is requested that Item 4440-011-0001 be increased by \$13,293,000 and 7 positions to reflect updated assumptions regarding the timing of contract execution and program activation for existing counties, and reflect the expansion of Jail Based Competency Treatment Programs into 11 new counties. Funding increases to \$22,477,000 in 2022-23 and annually thereafter.	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 19, 2021</p>

76	Community-Based Restoration Program (MR Issue 082)	It is requested that Item 4440-011-0001 be increased by \$28,330,000 and 4.5 positions to expand the current Los Angeles County Community-Based Restoration program and establish new programs in 17 additional counties. Funding increases to \$49,755,000 in 2024-25 and annually thereafter. It is also requested that provisional language be added to expedite any contracts necessary to establish the new programs.	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 19, 2021</p>
77	Re-Evaluation Services for Felony Incompetent to Stand Trial Patients (MR Issue 104)	It is requested that Item 4440-011-0001 be increased by \$12,729,000 and 15.5 positions to partner with local county jails to re-evaluate individuals deemed Incompetent to Stand Trial on a felony charge who have waited in jail 60 days or more pending placement to a state hospital treatment program. Funding decreases to \$9,176,000 in 2023-24 and annually thereafter.	<p>Staff Recommendation: Approve as proposed and adopt placeholder trailer bill.</p> <p>Heard in Sub 1: May 19, 2021</p>
78	Non-Restorable Felony Incompetent to Stand Trial Patient Statutory Changes	The Administration proposes statutory changes to require felony Incompetent to Stand Trial patients deemed not restorable to mental competency to be returned to the county within 10 days and remain in the county, otherwise DSH will charge the county a daily bed rate, and corresponding statutory changes to allow DSH to collect a daily bed rate.	<p>Staff Recommendation: Approve as proposed and adopt placeholder trailer bill.</p> <p>Heard in Sub 1: May 19, 2021</p>
79	Felony Mental Health Diversion Program Expansion	The Administration proposes statutory changes that authorize DSH to require counties expanding a current state-funded Diversion program to exclusively divert IST patient defendants. The proposed changes will also eliminate the county match requirement for expanding programs if a county has already met its maximum match requirement under the original program contract. The Governor's Budget included \$47,584,000 one-time General Fund to expand the Mental Health Diversion Program to 33 additional counties.	<p>Staff Recommendation: Approve as budgeted and adopt placeholder trailer bill.</p> <p>Heard in Sub 1: May 19, 2021</p>

80	COVID-19 Worker's Compensation Claims (SB 1129) (MR Issue 074)	It is requested that Item 4440-011-0001 be increased by \$16,489,000 with resources equivalent to 7 limited-term positions for payment and processing of worker's compensation claims resulting from illness or injury sustained by state hospitals' employees who contract COVID-19 while performing essential work duties at a state hospital facility. Funding for worker's compensation claims is included annually until fiscal year 2024-25. It is also requested that provisional language be added to this item for additional worker's compensation expenditures, if necessary, and to revert unspent funds at the close of the fiscal year.	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 19, 2021</p>
81	Statewide Integrated Healthcare Provider Network (MR Issue 108)	It is requested that Item 4440-011-0001 be increased by \$6,346,000 with resources equivalent to 6 limited-term positions to contract for a healthcare provider network, including prior authorization and third-party administration services. Funding decreases to \$2,246,000 in 2022-23 and 2023-24.	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 19, 2021</p>
82	MR Infrastructure Package—One-Time Deferred Maintenance (MR Issue 114)	It is requested that Item 4440-011-0001 be increased by \$85 million one-time to fund 8 critical deferred maintenance projects across the five state hospital facilities. It is also requested that provisional language be added to extend the encumbrance and expenditure period to June 30, 2025.	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 19, 2021</p>
83	Metropolitan State Hospital Increased Secure Bed Capacity (MR Issue 075)	It is requested that Item 4440-011-0001 be increased by \$17,000 and be decreased by 1.2 positions in 2021-22 and annually thereafter to correct a position funding calculation that was not made ongoing in the 2020 Budget Act.	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 19, 2021</p>
84	Mission Based Review: Protective Services (MR Issue 083)	It is requested that Item 4440-011-0001 be increased by \$6,534,000 and 35.8 positions to restore resources to implement a standardized staffing model for Protective Services at Napa State Hospital and Outside Custody functions at all five hospitals. Funding increases to \$11,846,000 and 82.1 positions in 2024-25 and annually thereafter.	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 19, 2021</p>

85	Mission Based Review: Direct Care Nursing (MR Issue 084)	It is requested that Item 4440-011-0001 be increased by \$434,000 in 2021-22 and annually thereafter to address updated bargaining unit contract negotiations and pay differentials for previously approved, unestablished positions phased-in over several years.	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 19, 2021
86	Mission Based Review: Treatment Team (MR Issue 085)	It is requested that Item 4440-011-0001 be increased by \$22,778,000 and 44.3 positions to align resources with the staffing study methodology for standardize clinician-to-patient ratios. Funding increases to \$54,091,000 and 213.3 positions in 2025-26 and annually thereafter.	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 19, 2021
87	Mission Based Review: Workforce Development (MR Issue 088)	It is requested that Item 4440-011-0001 be decreased by \$40,000 in 2021-22 and annually thereafter to reclassify 1 position to perform enhanced recruitment and outreach efforts.	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 19, 2021
88	Mission Based Review: Court Evaluations and Reports (MR Issue 091)	It is requested that Item 4440-011-0001 be increased by \$222,000 in 2021-22 and annually thereafter to address updated bargaining unit contract negotiations and pay differentials for previously approved, unestablished positions phased-in over several years.	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 19, 2021
89	Enhanced Treatment Program (MR Issue 090)	It is requested that Item 4440-011-0001 be increased by \$329,000 and decreased by 8.2 positions in 2021-22 to address updated bargaining unit contract negotiations and pay differentials for previously approved, unestablished positions phased-in over several years. Funding increases to \$1,015,000 in 2022-23 and annually thereafter.	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 19, 2021
90	Felony Mental Health Diversion Program Reappropriation (MR Issue 109 and 097)	It is requested that Item 4440-011-0001 be increased by \$6.6 million to reflect the carryover and reappropriation of the unencumbered balance of the Diversion Program funding until June 30, 2022. It is also requested that Item 4440-490 be amended to reflect the reappropriation.	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 19, 2021

91	Technical Adjustment (Issues 099 and 100)	It is requested that Items 4440-011-0001 and reimbursements, and 4440-017-0001 be amended to reflect a net-zero funding shift between subprograms to accurately display expenditures.	Staff Recommendation: Approve as proposed. Heard in Sub 1: May 19, 2021
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4560 Mental Health Services Oversight and Accountability Commission (OAC)			
Issue	Proposal Name	Proposal Description	Staff Comments and Recommendations
OAC January Proposals Modified at the May Revision			
92	Mental Health Student Services Act Funding (GB and MR Issue 25)	<p>The Governor's January Budget requests \$25 million one-time Mental Health Services Fund, available over five years, for the Commission to augment the Mental Health Student Services Act Partnership Grant Program, which funds partnerships between county mental health plans and schools.</p> <p>The May Revision requests that Item 4560-001-3085 be increased by \$5 million one-time and Item 4560-101-3085 be increased by \$25 million one-time, available over five years respectively, to support the Mental Health Student Services Act Partnership Grant Program through additional grants to county behavioral health departments for partnerships with schools. The funding will also support contract resources for an evaluation of grant awards between fiscal year 2019-20 and 2022-23.</p>	<p>Staff Recommendation: <u>Hold open</u> and recommends full Budget Committee approves with an increased augmentation.</p> <p>Heard in Sub 1: February 22, 2021 May 19, 2021</p>
OAC Spring Proposals			
93	Mental Health Services Fund Liquidation Period Extension – County Mental Health Innovation Planning (SFL Item 22)	The OAC requests an extension to the time period to liquidate \$400,000 in encumbrances from Item 4560-001-3085, Budget Act of 2018, to support County Mental Health Innovation Planning.	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 12, 2021</p>
94	Mental Health Services Fund Liquidation Period Extensions – Triage Personnel Grant Program (SFL Item 23)	The OAC requests that Item 4560-494 be added to extend the period to liquidate \$5.9 million in encumbrances from Item 4560-101-3085, Budget Act of 2018, to support the Triage Personnel Grant Program.	<p>Staff Recommendation: Approve as proposed.</p> <p>Heard in Sub 1: May 12, 2021</p>

4800 Covered California (CovCA)			
Issue	Proposal Name	Proposal Description	Staff Comments and Recommendations
CovCA Spring Finance Proposals			
95	Hospital Discharge Data Sharing Trailer Bill	CovCA proposes trailer bill to require OSHPD to make hospital discharge data available to Covered California to improve accuracy of annual premium rate setting. The proposed provisions protect patients' rights to confidentiality, and require Covered California to provide the Governor and Legislature with a report detailing the impact of these requirements on Covered California, including the impact on health plan premium rates offered through the state exchange, by August 1, 2023.	<p>Staff Recommendation: Approve as proposed and adopt placeholder trailer bill.</p> <p>Heard in Sub 1: May 12, 2021</p>
CovCA May Revision Proposals			
96	Advanced Premium Assistance Subsidy Program (MR Issue 23)	It is requested that Item 4800-101-0001 be decreased by \$405,647,000 one-time, and corresponding provisional language changes be made, to reflect savings resulting from new federal subsidy levels pursuant to the American Rescue Plan Act of 2021 subsuming the state subsidy program.	<p>Staff Recommendation: <u>Hold open.</u></p> <p>Heard in Sub 1: May 19, 2021</p>
97	Statutory Changes: Health Care Affordability Reserve Fund	It is requested that statutory changes be added to establish the Health Care Affordability Reserve Fund and to provide a one-time General Fund transfer of \$333,439,000 for the purpose of future health care affordability measures. The total equals the projected individual mandate penalty revenue in fiscal year 2020-21 and 2021-22, less the 2021-22 cost of the proposed One-Dollar Premium Subsidy Program described below.	<p>Staff Recommendation: <u>Hold open.</u></p> <p>Heard in Sub 1: May 19, 2021</p>
98	One-Dollar Premium Subsidy Program (MR Issue 24)	It is requested that Item 4800-101-0001 be increased by \$20 million ongoing, and corresponding statutory changes made, to provide payments, on or after January 1, 2022, of no less than one dollar to qualified health plan issuers on behalf of qualified individuals enrolled in a qualified health plan through the exchange in the individual market that equal the cost of providing abortion services for which federal funding is prohibited.	<p>Staff Recommendation: Approve as proposed and adopt placeholder trailer bill.</p> <p>Heard in Sub 1: May 19, 2021</p>

