



CBHA Public Newsletter

March 17th, 2022

A Message From CBHA Leadership: A Behavioral Health Advocacy Update

Dear Colleagues,

Happy Saint Patrick's Day! CBHA is also proud to celebrate Women's History and National Social Work Month throughout March. This year's National Social Work Month theme is "The Time is Right for Social Work." This is particularly timely because, as you know, our state and nation face a behavioral crisis compounded by a workforce shortage.

In response to these crises, CBHA is proud to report on March 9th, 2022 Governor Newsom signed **AB 666 (Quirk-Silva)**! Initially introduced by Assemblymember Chiu, AB 666 (Quirk-Silva) will require the Department of Health Care Services (DHCS) to issue a statewide substance use disorder (SUD) workforce needs assessment report that evaluates the current state of the SUD workforce, determines barriers to entry into the SUD workforce, and assesses the state's systems for regulating and supporting the SUD workforce. The bill will authorize the DHCS to implement SUD workforce development programming that includes a number of program elements, including stipends to cover costs related to testing, registration, and certification for specified individuals and tuition reimbursements for undergraduate and graduate students who complete coursework in programs related to SUDs.



CBHA would like to thank our co-sponsor, California Consortium of Addiction Programs and Professionals (CCAPP), our legislative champions Assemblymember Quirk-Silva and Assemblymember Chiu, and Governor Newsom for their partnership and leadership in making AB 666 law. Please [click here](#) to read Assemblymember Quirk-Silva's press release.

CBHA is proud to be sponsoring several other pieces of critical behavioral health legislation, including **SB 387 (Portantino)**, **AB 686 (Arambula)**, **AB 2733 (Choi)**, and **AB 1969 (Gipson)**. If you would like to learn more about the bills and how to support them, please reach out to our Senior Advocate of Policy & Legislative Affairs, Robb Layne, at rlayne@cccbha.org.

Over the past weeks, CBHA has advocated tirelessly for behavioral health in Governor Newsom's proposed budget. CBHA has joined partners, including the Steinberg Institute, in advocating for a \$30 million investment into critical infrastructure for the 988 mental health crisis line. The request is crucial as 988 will go live in July. **Please check out the USA Today article below, featuring Jonathan Porteus, Chief Executive Officer of WellSpace Health and CBHA member, explaining the urgency of this funding.**

CBHA is also supporting a proposal sponsored by Assemblymember Gipson, which will provide \$10 million in funding to establish the Student Mental Health Peer to Peer Mental Health Pilot Program in schools. This program, administered by the California Department of Education, will provide grants to Local Education Agencies for the peer-to-peer mental health school pilots to address the student mental health crisis. [Click here](#) to read our coalition's letter outlining the budget ask.

CBHA also participated in budget subcommittee hearings on 2/24, 3/7, and 3/14. Colleagues from the California Alliance of Child and Family Services, California Association of Alcohol and Drug Program Executives (CAADPE), County Behavioral Health Directors Association of California (CBHDA), and the California Youth Empowerment Network (CAYEN) also recently commented on the Governor's proposal during subcommittee hearings. To watch the hearings, please [click here](#).

Finally, we are excited to share CBHA will be a co-chair of NAMI California's Mental Health Crisis Prevention Voluntary Tax Contribution Fund! The Mental Health Crisis Prevention Voluntary Tax Contribution Fund allows Californians to divert a portion of their tax returns toward NAMI California's Crisis Intervention Team (CIT) program, which works with law enforcement agencies throughout the state to improve law enforcement's response to those experiencing a mental health crisis. CBHA will be following up with more information on how you can support the fund.

Please don't hesitate to reach out to CBHA as a partner and resource as we advocate for behavioral health in California and across the nation.

In Service,



Le Ondra Clark Harvey, Ph.D.
Chief Executive Officer

The Suicide Lifeline Will Soon be 3 Digits: Is the Country Ready for the Switch to 988? By USA TODAY

Featuring CBHA Member Agency, WellSpace Health

"Jonathan Porteus' health center in California receives about 70,000 calls a year to its suicide prevention line, but that volume may soon triple, he says.



The Sacramento-based center, WellSpace Health, is one of more than 200 crisis centers connected to the National Suicide Prevention Lifeline that are actively ramping up their capacity in anticipation of a new three-digit number, 988, that will connect callers around the country to the lifeline come July.

"I want to be optimistic," Porteus, WellSpace Health's CEO, said of meeting the demand. "You have to answer the phone every time it rings."

Following federal legislation and rules from the Federal Communications Commission, all phone service providers will be required to connect callers who dial 988 to the National Suicide Prevention Lifeline by July 16.

The existing lifeline relies on a 10-digit number, 1-800-273-8255. The switch to 988 presents both an opportunity and a challenge for advocates who see the potential to expand services while also worrying about added pressures on an already strained mental health care system.

The switch to 988 is "an opportunity to reimagine crisis services more broadly," said Robert Gebbia, CEO of the American Foundation for Suicide Prevention.

Legislation in more than two dozen states has passed or is pending to fund 988 services or study funding, according to the National Alliance on Mental Illness. More than \$280 million in federal funds announced late last year are being injected to boost the technical support and call center staffing efforts. And local jurisdictions around the nation are enacting new services to send mental health care clinicians and peers to respond to crisis, rather than law enforcement.

Still, the rollout comes amid what the overwhelming majority of Americans say is a mental health crisis amid the COVID-19 pandemic in the United States, raising worries over whether the easier-to-remember crisis line number going online will be able to meet increased demand for people experiencing suicidal thoughts and concerned family members calling for loved ones."

Click the button below to read more!

[Read More](#)

Behavioral Health Advocates Applaud Congress for Passage of Omnibus Spending Package

President Biden has signed into law the **Consolidated Appropriations Act, 2022**. The omnibus spending package includes billions of dollars in support for crucial, life-saving mental health and substance use services. CBHA's federal affiliate, the **National Council for**

Mental Wellbeing, advocated diligently for a number of these funding priorities, including additional funding for Certified Community Behavioral Health Clinic (CCBHC) Expansion Grants, the creation of a new Behavioral Health Crisis Coordinating Office at Substance Abuse and Mental Health Services Administration, as well as critically necessary resources for the National Suicide Prevention Lifeline.

NATIONAL COUNCIL
for Mental Wellbeing

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Key mental health and substance use treatment provisions in the bill include:

- **Telehealth in Medicare:** The Consolidated Appropriations Act, 2022 makes several changes aimed at expanding and extending telehealth flexibilities, including:
 - The removal of geographic requirements and expansion of originating sites for telehealth services; an expansion of practitioners eligible to furnish telehealth services - to include occupational therapists, physical therapists, speech-language pathologists, and audiologists; a delay to the in-person requirements under Medicare for mental health services furnished through telehealth and telecommunications technology; and an authorization for the furnishing of audio-only telehealth services.
 - Each of the aforementioned changes would be effective for 151 days after the conclusion of the COVID-19 Public Health Emergency.
- **Substance Abuse and Mental Health Services Administration (SAMHSA):** \$6.5 billion in funding for SAMHSA – an increase of \$530 million above the FY 2021 enacted level. SAMHSA funding includes:
 - A \$100 million increase to the Mental Health Block Grant (MHBG), including an increase to the mental health crisis systems set-aside in the MHBG to five percent of the total.
 - \$3.9 billion for substance use treatment, including continued funding for opioid prevention and treatment, recovery, and tribal focused treatment efforts. This includes \$1.85 billion for the Substance Abuse Prevention and Treatment Block Grant (SABG); \$1.525 billion for State Opioid Response Grants; \$34.9 million for Pregnant & Postpartum Women; \$13 million for Building Communities of Recovery; and \$101 million for Medication Assisted Treatment.
 - \$315 million to fund Certified Community Behavioral Health Clinics Expansion Grants.
 - Includes \$101.6 million for the National Suicide Prevention Lifeline (Lifeline) to support the implementation of the Lifeline's new 988 number and \$38.8 million for Garrett Lee Smith Youth Suicide Prevention grants.
 - Provides \$5 million to establish an office dedicated to the implementation of the 988 Lifeline and coordination of crisis care across Department of Health and Human Services operating divisions, including Centers for Medicare & Medicaid Services (CMS) and HRSA. The office will support technical assistance and coordination of the nation's crisis care network, the implementation of the 988 Lifeline, and the development of a crisis care system with the objective of expanding crisis care services and follow-up care, including through services provided by, Community Mental Health Centers, CCBHCs, and other community providers.
 - Increases for mental health resources for children and youth, including \$120 million for Project AWARE; \$81.8 million for the National Child Traumatic Stress Initiative; and \$10 million for Infant and Early Childhood Mental Health.
 - Creates a new Mental Health Crisis Response Partnership Pilot Program, which will provide \$10 million to help communities create mobile behavioral health crisis response teams.
- **Health Resources and Services Administration (HRSA)** – \$8.9 billion for HRSA, an increase of \$1.4 billion above the 2021 enacted level. The amount includes:
 - \$1.3 billion for HRSA's Bureau of Health Professions programs to support health workforce development, including \$24 million for the Substance Use Disorder Treatment and Recovery Loan Repayment Program.
 - \$1 billion for programs to improve maternal and child health, including \$6.5 million for Screening and Treatment for Maternal Depression and Related Disorders.
 - \$366 million for Rural Health Programs.

*We appreciate UST, long-time **Affinity Member**, for their partnerships that both provide our members exceptional services and sponsor our advocacy efforts.*



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California Council of Community Behavioral Health Agencies

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