



SB 1019 (Gonzalez) Mental Health Services Access and Awareness

SUMMARY

Senate Bill (SB) 1019 will address disparities in access to and awareness of mental health services for Black, Indigenous, and People of Color (BIPOC) communities.

SB 1019 will require Medi-Cal Managed Care Plans (MCP's) to develop and implement culturally and linguistically relevant outreach to inform Medi-Cal members of their right to timely mental health services. Additionally, SB 1019 will require the Department of Health Care Services (DHCS) to implement tools and protocols for assessing the quality of care and identifying disparities that exist in the utilization of MCP services for "mild to moderate" mental health needs.

BACKGROUND/PROBLEM

Following the passage of the Affordable Care Act in 2014, Medi-Cal mental health benefits are now delivered through two separate systems. California's 58 counties are responsible for providing Medi-Cal specialty mental health services for adults who live with a serious mental health condition, while Medi-Cal MCP's are responsible for providing services to adult Medi-Cal members who experience "mild-to-moderate" behavioral or mental health conditions.

Roughly one in five Medi-Cal beneficiaries will experience mental health symptoms in a given year, and the ongoing global pandemic has only exacerbated the extraordinary need for mental health services. This is especially true in BIPOC communities, which were hit the hardest by the COVID-19 pandemic. Black and Latino Americans are nearly three times as likely to be hospitalized for COVID-

19 as white Americans, and over twice as likely to die from COVID-19.¹

While access to mental health services is critical and timely for all Medi-Cal recipients, there are still significant racial disparities present in the actual utilization of MCP mental health services. A lack of awareness and misinformation on the scope of mental health services available among Medi-Cal enrollees and physicians has greatly contributed to the devastatingly low utilization rates. Data has shown that Asian and Pacific Islander and Latino Medi-Cal enrollees access mental health services at the lowest rates of all ethnic groups, and access in the LGBTQ communities is so low that data is not even publicly available.²

SOLUTION

SB 1019 will address these shortcomings of access and awareness by requiring MCPs to engage in direct education of their enrollees and mental health service providers, and by requiring DHCS to develop tools to better understand and address these discrepancies.

Specifically, SB 1019 will require MCP's to conduct annual outreach and provide culturally and linguistically relevant education and materials to members and primary care physicians on their right to timely mental health services under their Medi-Cal plan, how to find a provider, and how to seek assistance navigating mental health services.

¹ https://cpehn.org/assets/uploads/2021/09/Medi-Cal-Managed-Care-Plan-Mental-Health-Services_September-2021-1.pdf

² <https://www.chcf.org/wp-content/uploads/2020/11/MentalHealthDisparitiesRaceEthnicityAdultsMediCal.pdf>

Additionally, the bill requires DHCS to work with consumer advocates to develop tools, surveys, and protocols for assessing the quality of care and improving consumer experience with mental health services in MCPs.

Finally, SB 1019 requires DHCS to report on consumer experience to the legislature every three years and provide information on why disparities exist, recommendations for improvement, and data that provides granular information for subpopulations.

SUPPORT

California Pan-Ethnic Health Network (Sponsor)
Access Reproductive Justice
American Academy of Pediatrics, CA, Chapter 2
API Equality-LA
Asian Americans Advancing Justice- CA
Asian Resource, Inc.
Association of California Healthcare Districts
Association of Regional Center Agencies
Bakersfield American Indian Health Project
Be Smooth, Inc.
Black Women for Wellness Action Project
CA Council of Community Behavioral Health Agencies
Cal Voices
California Alliance of Child and Family Services
California Association of Marriage and Family Therapists
California Black Health Network
California Commission on Asian and Pacific Islander
American Affairs
California Hospital Association
California Immigrant Policy Center
California Institute for Behavioral Health Solutions
California Latinas for Reproductive Justice
California LGBTQ Health and Human Services Network
California Medical Association
California Rural Legal Assistance Foundation, Inc.
California State Association of Psychiatrists
Central Valley Immigrant Integration Collaborative
Children Now
County Behavioral Health Directors Association of CA
Desert Aids Project Health
Disability Rights CA
Empowering Pacific Islander Communities
Having Our Say Coalition
Health Access California
Hispanas Organized for Political Equality (HOPE)
Hmong Cultural Center of Butte County
Indian Health Center of Santa Clara Valley

Korean Community Center of the East Bay
Latino Coalition for a Healthy California
Little Manila Rising
Los Angeles Unified School District
Maternal and Child Health Access
Mental Health Advocacy Services
Mi Familia Vota
Multi-Ethnic Collaborative of Community Agencies
National Alliance on Mental Illness (NAMI-CA)
National Association of Social Workers, California Chapter
National Health Law Program
Orange County United Way
Peers Envisioning and Engaging in Recovery Services
Racial and Ethnic Mental Health Disparities Coalition
Regional Pacific Islander Taskforce
South Asian Network
Southeast Asia Resource Action Center
Street Level Health Project
Sycamores
Thai Community Development Center
The Cambodian Family
The Children's Partnership
The Steinberg Institute
United Women of East Africa Support Team
Vision y Compromiso
Western Center on Law and Poverty
Young Invincibles

CONTACT

Caila Pedroncelli, Legislative Aide
(916) 651-4033
Caila.Pedroncelli@sen.ca.gov