

May 12, 2023

Honorable Nancy Skinner, Chair
Senate Budget and Fiscal Review Committee

Attention: Elisa Wynne, Staff Director

Honorable Phil Ting, Chair
Assembly Budget Committee

Attention: Christian Griffith, Chief Consultant

Amendment to Budget Bill Item 4100-001-0001 and Addition of Item 4100-491, and Reimbursements, Support, State Council on Developmental Disabilities

Reimbursement Authority Increase (Issue 007)—It is requested that Item 4100-001-0001 be amended by increasing reimbursements by \$106,000 on a one-time basis to enable the State Council on Developmental Disabilities (Council) to expend funds associated with an agreement with the University of Southern California's University Center for Excellence in Developmental Disabilities. The University Center for Excellence in Developmental Disabilities will establish a public health consortium of disability agencies at the Children's Hospital Los Angeles to work on public health initiatives addressing certain challenges faced by individuals with disabilities across their lifespan. The Council will support and facilitate certain parts of the consortium's work to make sure there is maximum participation and accommodated engagement from individuals with intellectual and/or developmental disabilities.

Reappropriation of Federal Funds and Reimbursements (Issue 010)—It is requested that Item 4100-491 be added to reappropriate up to \$232,000 from Item 4100-001-0890, Budget Act of 2020, and up to \$365,000 from Item 4100-001-0001, Budget Act of 2022. This will allow the Council to fully expend the vaccine access grant provided by the federal Administration for Community Living and the Centers for Disease Control, as well as the wildfire relief grant funded by the California Community Foundation (see Attachment 1).

The effect of the requested action is reflected on the attachment.

If you have any questions or need additional information regarding this matter, please call Kia Cha, Principal Program Budget Analyst, at (916) 445-6423.

JOE STEPHENSHAW
Director
By:

/s/ Erika Li

ERIKA LI
Chief Deputy Director

Attachment

cc: Honorable Anthony J. Portantino, Chair, Senate Appropriations Committee
Attention: Mark McKenzie, Staff Director
Honorable Roger W. Niello, Vice Chair, Senate Budget and Fiscal Review Committee
Attention: Kirk Feely, Fiscal Director
Honorable Chris R. Holden, Chair, Assembly Appropriations Committee
Attention: Jay Dickenson, Chief Consultant
Honorable Vince Fong, Vice Chair, Assembly Budget Committee
Attention: Joseph Shinstock, Fiscal Director
Honorable Dr. Joaquin Arambula, Chair, Assembly Budget Subcommittee No. 1
Honorable Caroline Menjivar, Chair, Senate Budget and Fiscal Review Subcommittee No. 3
Gabriel Petek, Legislative Analyst
Christopher W. Woods, Senate President pro Tempore's Office
Jason Sisney, Assembly Speaker's Office
Paul Dress, Caucus Co-Chief of Staff, Assembly Republican Leader's Office
Katja Townsend, Capitol Director, Assembly Republican Leader's Office
Aaron Carruthers, Executive Director, State Council on Developmental Disabilities
Ken DaRosa, Chief Deputy Director, State Council on Developmental Disabilities
Lynn Villoria, Budget Officer, State Council on Developmental Disabilities

4100-491—Reappropriation, State Council on Developmental Disabilities. The amount specified in the following citations are reappropriated for the purposes provided for in those appropriations and shall be available for encumbrance or expenditure until June 30, 2024:

0001—General Fund

- (1) Up to \$365,000 in Schedule (2) of Item 4100-001-0001, Budget Act of 2022 (Ch. 43, Stats. 2022), related to the wildfire relief grant funded by the California Community Foundation.

0890—Federal Trust Fund

- (1) Up to \$232,000 in Schedule (3) of Item 4100-001-0890, Budget Act of 2020 (Ch. 6, Stats. 2020), as reappropriated by Item 4100-490, Budget Act of 2022 (Ch. 43, Stats. 2022), related to the vaccine access grant from the Administration for Community Living and Centers for Disease Control.

May 12, 2023

Honorable Nancy Skinner, Chair
Senate Budget and Fiscal Review Committee

Attention: Elisa Wynne, Staff Director

Honorable Phil Ting, Chair
Assembly Budget Committee

Attention: Christian Griffith, Chief Consultant

Amendment to Budget Bill Item 4120-001-0001, Support, Emergency Medical Services Authority

California Emergency Medical Services Central Registry (Issue 022)—It is requested that \$190,000 in Item 4120-001-0001 for the California Emergency Medical Advancement Project be redirected to support planning efforts for the Central Registry. Support for the California Emergency Medical Advancement Project was included in Chapter 21, Statutes of 2021 (Assembly Bill 128) and would allow the Emergency Medical Services Authority to track community paramedicine licenses. This functionality is proposed to be incorporated into the planning efforts for the Central Registry.

Appointment of a Chief Medical Officer (Issue 023)—It is requested that Item 4120-001-0001 be increased by \$29,000 ongoing to support departmental indirect costs associated with the appointment of a Chief Medical Officer. Statutory changes were proposed in the Governor's Budget that would require the appointment of a Chief Medical Officer to the Emergency Medical Services Authority. This request augments a proposed April 1 adjustment to the Governor's Budget.

The effect of my requested action is reflected on the attachment.

If you have any questions or need additional information regarding this matter, please call Sonal Patel, Principal Program Budget Analyst, at (916) 445-6423.

JOE STEPHENSHAW

Director

By:

/s/ Erika Li

ERIKA LI

Chief Deputy Director

Attachment

cc: Honorable Anthony J. Portantino, Chair, Senate Appropriations Committee
Attention: Mark McKenzie, Staff Director
Honorable Roger W. Niello, Vice Chair, Senate Budget and Fiscal Review Committee
Attention: Kirk Feely, Fiscal Director
Honorable Chris R. Holden, Chair, Assembly Appropriations Committee
Attention: Jay Dickenson, Chief Consultant
Honorable Vince Fong, Vice Chair, Assembly Budget Committee
Attention: Joseph Shinstock, Fiscal Director
Honorable Dr. Joaquin Arambula, Chair, Assembly Budget Subcommittee No. 1
Honorable Caroline Menjivar, Chair, Senate Budget and Fiscal Review Subcommittee
No. 3
Gabriel Petek, Legislative Analyst
Christopher W. Woods, Senate President pro Tempore's Office
Jason Sisney, Assembly Speaker's Office
Paul Dress, Caucus Co-Chief of Staff, Assembly Republican Leader's Office
Katja Townsend, Capitol Director, Assembly Republican Leader's Office
Marko Mijic, Undersecretary, California Health and Human Services Agency
Brendan McCarthy, Deputy Secretary of Program and Fiscal Affairs, California Health and
Human Services Agency
Julie Souliere, Assistant Secretary, California Health and Human Services Agency
Elizabeth Basnett, Acting Director, Emergency Medical Services Authority
Brian Aiello, Chief Deputy Director, Emergency Medical Services Authority
Richard Trussell, Chief of Administration, Emergency Medical Services Authority

May 12, 2023

Honorable Nancy Skinner, Chair
Senate Budget and Fiscal Review Committee

Attention: Elisa Wynne, Staff Director

Honorable Phil Ting, Chair
Assembly Budget Committee

Attention: Christian Griffith, Chief Consultant

Amendments to Various Budget Bill Items, Local Assistance, Support, Reappropriation, and Statutory Changes, Department of Health Care Access and Information (HCAI)

Reallocate Funds for CalRx Pharmaceutical Drug Procurement (Issue 083)—It is requested that \$2,000,000 in Item 4140-101-0001, Budget Act of 2022, be reappropriated through June 30, 2028, from and for the Capital Infrastructure Security Program, and also for these funds to be used for reproductive health care, if necessary (see Attachment 1 for language). Due to an anticipated U.S. Supreme Court ruling on reproductive health care medication, the Administration is proactively taking action to protect reproductive health freedom by allowing CalRX to procure various pharmaceutical drugs, such as Mifepristone and Misoprostol, if needed. The Capital Infrastructure Security program previously received \$20,000,000 one-time security grants for physical and digital infrastructure. Applications for the program have been undersubscribed, and thus these funds are also available for this use. Corresponding reappropriation language enables flexibility to move funds from the Facilities Development Program (3840) and the Health Care Quality and Affordability Program (3831) if this option is exercised (see Attachment 2). Additionally, this request also includes statutory changes that provide flexibility for CalRx to procure various pharmaceutical drugs in addition to manufacturing insulin.

CalRx Naloxone Initiative (Issue 088)—It is requested that Items 4140-001-3397 and 4140-101-3397 be added to appropriate \$30 million one-time from the Opioid Settlements Fund. These funds will be used to support development, manufacturing, or procurement of a low-cost naloxone nasal spray product. This more affordable version of life-saving medication will enable state programs to purchase more inventory and more broadly reduce financial barriers for other purchasers, particularly community-based organizations, individuals and families. This request includes local assistance funding (\$27.6 million) to contract with a manufacturer to produce naloxone nasal spray at low cost, and state operations funding (\$2.4 million) to support three positions. Corresponding provisional language also accompanies this request and makes these funds available for use through June 30, 2028 (see Attachment 3).

The effect of my requested action is reflected on the attachment.

If you have any questions or need additional information regarding this matter, please call Matthew Aguilera, Principal Program Budget Analyst, at (916) 445-6423.

JOE STEPHENSHAW
Director
By:

/s/ Erika Li

ERIKA LI
Chief Deputy Director

Attachment

cc: Honorable Anthony J. Portantino, Chair, Senate Appropriations Committee
Attention: Mark McKenzie, Staff Director
Honorable Roger W. Niello, Vice Chair, Senate Budget and Fiscal Review Committee
Attention: Kirk Feely, Fiscal Director
Honorable Chris R. Holden, Chair, Assembly Appropriations Committee
Attention: Jay Dickenson, Chief Consultant
Honorable Vince Fong, Vice Chair, Assembly Budget Committee
Attention: Joseph Shinstock, Fiscal Director
Honorable Dr. Joaquin Arambula, Chair, Assembly Budget Subcommittee No. 1
Honorable Caroline Menjivar, Chair, Senate Budget and Fiscal Review Subcommittee No. 3
Gabriel Petek, Legislative Analyst
Christopher W. Woods, Senate President pro Tempore's Office
Jason Sisney, Assembly Speaker's Office
Paul Dress, Caucus Co-Chief of Staff, Assembly Republican Leader's Office
Katja Townsend, Capitol Director, Assembly Republican Leader's Office
Elizabeth Landsberg, Director, Department of Health Care Access and Information
Scott Christman, Chief Deputy Director, Department of Health Care Access and Information
Elia Gallardo, Deputy Director of Legislation, Department of Health Care Access and Information
Mayra Vega, Acting Deputy Director of Administration, Department of Health Care Access and Information

4140-490—Reappropriation, Department of Health Care Access and Information. The amount specified in the following citations are reappropriated for the purposes provided for in those appropriations and shall be available for encumbrance or expenditure until June 30, 2028:

0001 – General Fund

(1) Item 4140-101-0001, Budget Act of 2022 (Chs. 43 and 249, Stats. 2022). Up to \$2,000,000 in Program 3840—Facilities Development, may be used by the department for the original purpose and may be used, if necessary, to address emerging health concerns in reproductive health care. The department may move funds to Program 3831 – Health Care Quality and Affordability if this option is exercised.

4140-001-3397 – For support, Department of Health Care Access and Information, payable from the Opioid Settlements Fund.....2,410,000

Schedule:

(1) 3831 – Health Care Quality and Affordability.....2,410,000

Provisions:

1. Of the funds appropriated in Schedule (1), \$482,000 is available for encumbrance or expenditure until June 30, 2028, to implement the CalRx Naloxone Access Initiative to support the development and manufacture of an at-cost or near-cost generic version of a naloxone nasal spray product.

4140-101-3397 – For local assistance, Department of Health Care Access and Information, payable from the Opioid Settlements Fund.....27,590,000

Schedule:

(2) 3831 – Health Care Quality and Affordability.....27,590,000

Provisions:

2. Of the funds appropriated in Schedule (1), \$27,590,000 is available for encumbrance or expenditure until June 30, 2028, to support the CalRx Naloxone Access Initiative to support the development and manufacture of a low-cost generic version of a naloxone nasal spray product.



May 12, 2023

Honorable Nancy Skinner, Chair
Senate Budget and Fiscal Review Committee

Attention: Elisa Wynne, Staff Director

Honorable Phil Ting, Chair
Assembly Budget Committee

Attention: Christian Griffith, Chief Consultant

Amendment to Budget Bill Items 4170-001-0001 and 4170-101-0001, Support and Local Assistance, California Department of Aging

Master Plan for Aging: Advancing Older Adult Behavioral Healthy (Issue 058)—It is requested that Item 4170-001-0001 be increased by \$1,566,000 in fiscal year 2023-24, 2024-25, and 2025-26, respectively. It is further requested that Item 4170-101-0001 be increased by \$18,434,000 in 2023-24 and 2024-25, and \$8,434,000 in 2025-26. This increase will support the continuation of an Older Adult Friendship Line, a targeted media campaign for older adults, and competitive grants to local jurisdictions to build organizational capacity to identify and address older adult behavioral health and substance use disorder needs.

It is also requested that provisional language be added to both items for an extended encumbrance period until June 30, 2026 (see Attachments 1 and 2).

The effect of my requested action is reflected on the attachment.

If you have any questions or need additional information regarding this matter, please call Andrew Duffy, Principal Program Budget Analyst, at (916) 445-6423.

JOE STEPHENSHAW
Director
By:

/s/ Erika Li

ERIKA LI
Chief Deputy Director

Attachment

cc: On following page

cc: Honorable Anthony J. Portantino, Chair, Senate Appropriations Committee
Attention: Mark McKenzie, Staff Director
Honorable Roger W. Niello, Vice Chair, Senate Budget and Fiscal Review Committee
Attention: Kirk Feely, Fiscal Director
Honorable Chris R. Holden, Chair, Assembly Appropriations Committee
Attention: Jay Dickenson, Chief Consultant
Honorable Vince Fong, Vice Chair, Assembly Budget Committee
Attention: Joseph Shinstock, Fiscal Director
Honorable Dr. Joaquin Arambula, Chair, Assembly Budget Subcommittee No. 1
Honorable Caroline Menjivar, Chair, Senate Budget and Fiscal Review Subcommittee
No. 3
Gabriel Petek, Legislative Analyst
Christopher W. Woods, Senate President pro Tempore's Office
Jason Sisney, Assembly Speaker's Office
Paul Dress, Caucus Co-Chief of Staff, Assembly Republican Leader's Office
Katja Townsend, Capitol Director, Assembly Republican Leader's Office
Brendan McCarthy, Deputy Secretary, Health and Human Services Agency
Darci Delgado, Assistant Secretary, Health and Human Services Agency
Susan DeMarois, Director, California Department of Aging
Mark Beckley, Chief Deputy Director, California Department of Aging
Nicole Shimosaka, Deputy Director of the Division of Administrative Services, California
Department of Aging

Add Provision 1 to Item 4170-001-0001 as follows:

1. Of the funds appropriated in this item, \$1,566,000 in Schedule (6) shall be available for encumbrance or expenditure until June 30, 2026, to provide administrative oversight and support to implement Provision (3) of Item 4170-101-0001.

Amend Item 4170-101-0001 as follows:

“4170-101-0001—For local assistance, California Department of Aging
140,640,000 159,074,000

Schedule:

(1) 3890-Nutrition79,781,000 82,321,000
 (2) 3900-Supportive Services63,832,000
 (3) 3905-Community-Based Programs and Projects4,493,000
(3.5) 3915-Policy and Planning18,434,000
 (4) Reimbursements to 3890-Nutrition=2,907,000 -5,447,000
 (5) Reimbursements to 3900-Supportive Services -66,000
 (6) Reimbursements to 3905-Community-Based Programs and Projects
-4,493,000

Provisions:

1. Notwithstanding any other law, the Department of Finance, upon request by the California Department of Aging, may authorize transfers between Program 3890-Nutrition and Program 3900-Supportive Services in response to budget revisions submitted by the area agencies on aging.

2. (a) Notwithstanding any other law, upon request by the California Department of Aging, the Department of Finance may increase the expenditure authority in Schedule (2) for the Long-Term Care Patient Representative Program established by Chapter 3.6 (commencing with Section 9260) of Division 8.5 of the Welfare and Institutions Code if the expenditure authority in this item is projected to be insufficient to provide adequate patient representative services based on program caseload and service costs. The Department of Finance shall not authorize an increase pursuant to this provision sooner than 30 days after notification in writing of the necessity thereof is provided to the chairpersons of the committees in each house of the Legislature that consider appropriations and the Chairperson of the Joint Legislative Budget Committee, or not sooner than whatever lesser time after that notification the Chairperson of the Joint Legislative Budget Committee, or the chairperson's designee, may determine.

(b) Notwithstanding any other law, if the California Department of Aging is unable to contract with a Long-Term Care Patient Representative Local Program in any area of the state, the department may utilize the expenditure authority in Schedule (2) of this item for state operations to directly provide public patient representative services in that area of the state.

3. Of the amount appropriated in this item, \$37,200,000 shall be available for encumbrance or expenditure until June 30, 2028 to support modernizing the Mello-Granlund Older Californians Act (Division 8.5 (commencing with Section 9000) of the Welfare and Institutions Code). The California Department of Aging, in consultation with the Area Agencies on Aging, shall allocate this funding to pilot programs supporting Community Based Services Programs, Family and Caregiver Supports, Senior Volunteer Development, and/or Aging in Place.

4. Notwithstanding any other law, the California Department of Aging may advance available funds to an area agency on aging in an amount up to one-fourth of the annual allocation when necessary to continue the provision of services or operations when a cashflow problem has been demonstrated, according to the criteria set forth by the California Department of Aging. In addition to this item, this provision shall be applicable to Items 4170-101-0289, 4170-101-0890, 4170-101-3098, and 4170-102-0942.

5. Notwithstanding any other law, the California Department of Aging may provide annual local assistance by direct allocation to an area agency on aging to support older adult programs. Direct allocations will be provided via Memorandum of Understanding and supplemental agreements, wherever necessary, between the department and the area agency on aging. In addition to this item, this provision shall be applicable to Items 4170-101-0289, 4170-101-0890, 4170-101-3098, and 4170-102-0942.

6. Of the funds appropriated in this item, \$18,434,000 in Schedule (3.5) shall be available for encumbrance or expenditure until June 30, 2026, to provide competitive grants to local jurisdictions to support initiatives targeted towards older adult behavior health. A portion of the funding may also be used in support of combatting isolation and reducing stigma through an ethnic media campaign for older adult behavioral health and an Older Adult Friendship Line. The California Department of Aging may utilize funding appropriated in this provision to contract with one or more fiscal intermediaries or other vendors to administer these activities."

May 12, 2023

Honorable Nancy Skinner, Chair
Senate Budget and Fiscal Review Committee

Attention: Elisa Wynne, Staff Director

Honorable Phil Ting, Chair
Assembly Budget Committee

Attention: Christian Griffith, Chief Consultant

**Amendment to Various Budget Bill Items, Reimbursements, and Statutory Changes,
Support and Local Assistance, Department of Health Care Services**

State Operations

Assisted Living Waiver Expansion Permanent Workload (Issue 221)—It is requested that Item 4260-001-0001 be increased by \$308,000 in fiscal year 2023-24, and \$772,000 in fiscal year 2024-25 and ongoing to support 5 permanent positions, and Item 4260-001-0890 be increased by \$625,000 in fiscal year 2023-24 and \$1,566,000 in fiscal year 2024-25 and ongoing to support 10 permanent positions for the administrative, operational, monitoring and oversight needs for the expansion of the Assisted Living Waiver program.

Contingency Management Pilot Extension (Issue 222)—It is requested that Item 4260-001-0001 be increased by \$755,000 in fiscal year 2023-24, \$2,475,000 annually in fiscal year 2024-25 and fiscal year 2025-26, \$1,908,000 in fiscal year 2026-27, and \$1,090,000 in 2027-28, and Item 4260-001-0890 be increased by \$755,000 in fiscal year 2023-24, \$2,475,000 annually in fiscal year 2024-25 and fiscal year 2025-26, \$1,907,000 in 2026-27, and \$1,090,000 in 2027-28 to support 11 positions to extend the Contingency Management Pilot. The Pilot is currently funded through DHCS' approved Home and Community-Based Services Spending Plan, for which funding for this initiative is set to expire on March 31, 2024. The requested resources would extend the Pilot through June 30, 2028 by adding contingency management as a California Advancing and Innovating Medi-Cal Section 1115 demonstration opt-in benefit.

Naloxone Distribution Project Expansion (Issue 223)—It is requested that Item 4260-116-3397 be increased by \$58,000,000 in fiscal year 2023-24, \$28 million annually in fiscal year 2024-25 and fiscal year 2025-26, and \$27,317,000 in fiscal year 2026-27 to expand the distribution of naloxone through the Naloxone Distribution Project.

Control Section 4.05 Adjustment, Budget Act of 2021 (Issue 226)—It is requested that Item 4260-004-0942 be increased by \$650,000 and Item 4260-001-0890 be decreased by \$650,000 ongoing for a net-zero shift of expenditure reductions associated with Control Section 4.05 of the Budget Act of 2021.

Behavioral Health Modernization (Issue 278)—It is requested that Item 4260-001-0001 be increased by \$20,000,000 one-time and Item 4260-001-0890 be increased by \$20,000,000 one-time to support behavioral health modernization efforts.

Local Assistance

Medi-Cal Estimate (Issues 228, 269, 273, and 280)—It is requested that the one-time adjustments below be made to the following items to reflect miscellaneous adjustments outlined in the Medi-Cal estimate.

- Item 4260-101-0001 be increased by \$5,779,559,000 and reimbursements be decreased by \$86,546,000
- Item 4260-101-0232 be decreased by \$3,633,000
- Item 4260-101-0233 be decreased by \$1,941,000
- Item 4260-101-0236 be decreased by \$1,447,000
- Item 4260-101-0890 be decreased by \$369,565,000
- Item 4260-101-3085 be increased by \$4,795,000
- Item 4260-101-3168 be increased by \$7,648,000
- Item 4260-101-3305 be increased by \$44,134,000
- Item 4260-102-0001 be increased by \$2,843,000
- Item 4260-102-0890 be increased by \$7,095,000
- Item 4260-106-0890 be decreased by \$14,120,000
- Item 4260-112-0001 be increased by \$165,751,000
- Item 4260-117-0001 be increased by \$1,239,000
- Item 4260-117-0890 be increased by \$4,043,000

Family Health Estimate (Issue 227)—It is requested that the one-time adjustments below be made to the following items to reflect multiple updates outlined in the Family Health estimate.

- Item 4260-111-0001 be increased by \$23,339,000 and reimbursements be decreased by \$49,000.
- Item 4260-114-0001 be decreased by \$2,004,000
- Item 4260-114-0009 be decreased by \$2,198,000
- Item 4260-114-0890 be increased by \$294,000

Children and Youth Behavioral Health Initiative: Fee Schedule Third Party Administrator (Issues 228, 269, 237 and 280)—It is requested that Item 4260-101-0001 be increased by \$10,000,000 one-time in fiscal year 2023-24 to begin the development and implementation of the infrastructure for provider, billing, and claiming management for behavioral health services provided to students by school-linked providers as part of the Children and Youth Behavioral Health Initiative.

Behavioral Health Federal Funds Adjustment (Issue 220)—It is requested that Item 4260-115-0890 be increased by \$15,209,000 one-time and Item 4260-116-0890 be increased by \$5,848,000 one-time to reflect an adjustment to the projected federal funds to support mental health and substance use disorder services. The increase in Item 4260-115-0890 reflects a one-time increase for a Community Mental Health Services Block Grant awarded in fiscal year 2022-23. The increase in Item 4260-116-0890 reflects a one-time increase for a Substance Abuse Prevention and Treatment Block Grant awarded in fiscal year 2022-23.

Managed Care Organization Tax Renewal (Issue 245)—It is requested that Item 4260-101-0001 be decreased by \$3,486,832,000 and Item 4260-101-0890 be increased by \$4,963,912,000 one-time, and statutory changes be added to reflect the increased expected revenue and General Fund offset from the renewal of the Managed Care Organization Tax to support the Medi-Cal program and maintain a balanced budget.

Medi-Cal Provider Rate Increase (Issue 246)—It is requested that Item 4260-101-0001 be increased by \$89,598,000 in fiscal year 2023-24, \$218,530,000 in fiscal year 2024-25, and ongoing, and Item 4260-101-0890 be increased by \$125,099,000 in fiscal year 2023-24, \$305,116,000 ongoing, and statutory changes be added to increase provider rates for primary care, obstetric care (including doulas), and non-specialty mental health services to at least 87.5 percent of Medicare, effective January 1, 2024.

Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment (CONNECT) (Issue 262)—It is requested that Item 4260-101-0001 be increased by \$4,497,000, Item 4260-101-3085 be decreased by \$87.5 million and Item 4260-101-0890 be increased by \$104,062,000, over five years, to reflect updated Behavioral Health CONNECT costs, formerly known as the California Behavioral Health Community-Based Continuum Demonstration.

Withdrawal of Delay and Fund Source Change for Behavioral Health Bridge Housing Program (Issue 264)—It is requested that Item 4260-101-0001 be decreased by \$250 million in fiscal year 2023-24 and \$250 million in fiscal year 2024-25, and Item 4260-101-3085 be increased by \$500 million in fiscal year 2023-24, available over four years, to support the Behavioral Health Bridge Housing Program. It is also requested that Provision 14 be deleted in Item 4260-101-0001 and Provision 3 be added to Item 4260-101-3085 to conform to this action (see Attachments 1 and 2). This would effectively eliminate the Governor's Budget proposed delay of \$250 million General Fund to 2024-25 and maintain the \$1.5 billion total investment in the program.

Fund Source Change for CalHOPE (Issue 270)—It is requested that Item 4260-101-0001 be decreased by \$40 million one-time and Item 4260-101-3085 be increased by \$50.5 million one-time to continue the temporary support for the CalHOPE program. It is also requested that Provision 15 of Item 4260-101-0001 be deleted and Provision 2 be added to Item 4260-101-3085 to conform to this action (see Attachments 1 and 2).

988 Suicide and Crisis Lifeline (AB 988) (Issue 271)—It is requested that Item 4260-115-3414 be increased by \$15 million one-time to provide additional support to 988 Suicide and Crisis Lifeline centers. It is also requested that Provision 2 be added to Item 4260-115-0890 to provide contract exemption authority for administering or implementing federal grants that support the 988 centers (see Attachment 3).

Language Only

California Children’s Services Whole-Child Model Expansion and Mandatory Managed Care Enrollment of Foster Care Children in Single Plan Counties—It is requested that statutory language be amended to remove Alameda, Imperial, and Contra Costa counties from the list of 15 counties converting to the California Children’s Services Whole-Child Model.

Behavioral Health Payment Reform—It is requested that statutory changes be added to include technical updates and amend the development of the schedules provided to the State Controller’s Office for counties that elect to participate in the transfer of funds to the Medi-Cal County Behavioral Health Fund.

Virtual Services in Driving-Under-the-Influence Programs—It is requested that statutory changes be added to authorize Driving-Under-the-Influence Programs to offer services in virtual settings. The statutory changes also authorize the Department of Health Care Services to issue guidance and compliance standards for these programs in virtual settings.

Long-Term Care Facilities Rate Year Shift—It is requested that statutory changes be added to shift reimbursement for specified long-term care facilities from an August to July rate year basis to a calendar rate year basis, effective January 1, 2024, to align with the managed care rate timeline as these facilities transition onto managed care.

Doula Services Implementation Evaluation—It is requested that statutory changes be added to extend the timeline of the Doula Stakeholder Workgroup to examine implementation of the doula benefit in the Medi-Cal program from April 1, 2022, until December 31, 2023, to April 1, 2023, until June 30, 2025, to align with implementation of the benefit one year later than originally anticipated.

Medical Interpreter Pilot Project—It is requested that statutory language be added to extend the expenditure authority of the Medical Interpreter Pilot Project for a period of 12 months, from June 30, 2024, to June 30, 2025.

Provisional Language Only: Los Angeles County CARE Court Start-Up Funding—It is requested that Provision 21 be added to Item 4260-101-0001 to specify \$15 million one-time is available for Los Angeles County to plan and prepare to implement the Community Assistance, Recovery, and Empowerment Act, for a total of \$22.8 million between fiscal year 2022-23 and fiscal year 2023-24 (see Attachment 1).

The effect of my requested action is reflected on the attachment.

If you have any questions or need additional information regarding this matter, please call Iliana Ramos or Andrew Duffy, Principal Program Budget Analysts, at (916) 445-6423.

JOE STEPHENSHAW
Director
By:

/s/ Erika Li

ERIKA LI
Chief Deputy Director

Attachment

cc: Honorable Anthony J. Portantino, Chair, Senate Appropriations Committee
Attention: Mark McKenzie, Staff Director
Honorable Roger W. Niello, Vice Chair, Senate Budget and Fiscal Review Committee
Attention: Kirk Feely, Fiscal Director
Honorable Chris R. Holden, Chair, Assembly Appropriations Committee
Attention: Jay Dickenson, Chief Consultant
Honorable Vince Fong, Vice Chair, Assembly Budget Committee
Attention: Joseph Shinstock, Fiscal Director
Honorable Dr. Joaquin Arambula, Chair, Assembly Budget Subcommittee No. 1
Honorable Caroline Menjivar, Chair, Senate Budget and Fiscal Review Subcommittee No. 3
Gabriel Petek, Legislative Analyst
Christopher W. Woods, Senate President pro Tempore's Office
Jason Sisney, Assembly Speaker's Office
Paul Dress, Caucus Co-Chief of Staff, Assembly Republican Leader's Office
Katja Townsend, Capitol Director, Assembly Republican Leader's Office
Mark Ghaly, Secretary, California Health and Human Services Agency
Marko Mijic, Undersecretary, California Health and Human Services Agency
Brendan McCarthy, Deputy Secretary, California Health and Human Services Agency
Kimberly Chen, Assistant Secretary, California Health and Human Services Agency
Michelle Baass, Director, Department of Health Care Services
Jacey Cooper, Chief Deputy Director, Department of Health Care Services
Erika Sperbeck, Chief Deputy Director, Department of Health Care Services
Lori Walker, Deputy Director and Chief Financial Officer, Department of Health Care Services
Rafael Davtian, Deputy Director, Department of Health Care Services

Eliminate Provision 14 and 15 of Item 4260-101-0001 as follows:

~~"14. (a) Of the funds appropriated in this item, \$250,000,000 in Schedule (3) is available to implement the Behavioral Health Bridge Housing Program to award competitive grants to qualified counties and tribal entities to address the immediate housing and treatment needs of people experiencing unsheltered homelessness who have serious behavioral health conditions and shall be available for encumbrance or expenditure until June 30, 2027.~~

~~(b) The State Department of Health Care Services shall determine the methodology and distribution of the grant funds appropriated for the Behavioral Health Bridge Housing Program.~~

~~(c) An entity shall expend funds to supplement and not supplant existing funds provided for the housing and treatment needs of people experiencing unsheltered homelessness who have serious behavioral health conditions to receive grant funds.~~

~~(d) The Behavioral Health Bridge Housing Program shall be implemented only if, and to the extent that, the State Department of Health Care Services determines that federal financial participation under the Medi-Cal program is not jeopardized.~~

~~(e) Notwithstanding Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code, the State Department of Health Care Services may implement, interpret, or make specific this provision, in whole or in part, by means of information notices or other similar instructions, without taking any further regulatory action.~~

~~(f) For purposes of implementing the Behavioral Health Bridge Housing Program, the State Department of Health Care Services may enter into exclusive or nonexclusive contracts, or amend existing contracts, on a bid or negotiated basis. Contracts entered into or amended pursuant to this provision shall be exempt from Chapter 6 (commencing with section 14825) of Part 5.5 of Division 3 of Title 2 of the Government Code, Section 19130 of the Government Code, Part 2 (commencing with Section 10100) of Division 2 of the Public Contract Code, and the State Administrative Manual, and shall be exempt from the review or approval of any division of the Department of General Services."~~

~~"15. (a) Of the funds appropriated in this item, \$40,000,000 in Schedule (3) is for the State Department of Health Care Services to support CalHOPE.~~

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

Add Provision 21 to Item 4260-101-0001 as follows:

21. Of the funds appropriated in this Item, \$15,000,000 is available for the State Department of Health Care Services to support Los Angeles County planning and preparation to implement the Community Assistance, Recovery, and Empowerment Act.

Add Provision 2 and 3 to Item 4260-101-3085 as follows:

2. (a) Of the funds appropriated in this item, \$50,500,000 is for the State Department of Health Care Services to support CalHOPE.

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

3. (a) Of the funds appropriated in this item, \$500,000,000 is available to implement the Behavioral Health Bridge Housing Program to award competitive grants to qualified counties and tribal entities to address the immediate housing and treatment needs of people experiencing unsheltered homelessness who have serious behavioral health conditions and shall be available for encumbrance or expenditure until June 30, 2027.

(b) The State Department of Health Care Services shall determine the methodology and distribution of the grant funds appropriated for the Behavioral Health Bridge Housing Program.

(c) An entity shall expend funds to supplement and not supplant existing funds provided for the housing and treatment needs of people experiencing unsheltered homelessness who have serious behavioral health conditions to receive grant funds.

(d) The Behavioral Health Bridge Housing Program shall be implemented only if, and to the extent that, the State Department of Health Care Services determines that federal financial participation under the Medi-Cal program is not jeopardized.

(e) Notwithstanding Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code, the State Department of Health Care Services may implement, interpret, or make specific this provision, in whole or in part, by means of information notices or other similar instructions, without taking any further regulatory action.

(f) For purposes of implementing the Behavioral Health Bridge Housing Program, the State Department of Health Care Services may enter into exclusive or nonexclusive contracts, or amend existing contracts, on a bid or negotiated basis. Contracts entered into or amended pursuant to this provision shall be exempt from Chapter 6 (commencing with section 14825) of Part 5.5 of Division 3 of Title 2 of the Government Code, Section 19130 of the Government Code, Part 2 (commencing with Section 10100) of Division 2 of the Public Contract Code, and the State Administrative Manual, and shall be exempt from the review or approval of any division of the Department of General Services.

Add Provision 2 to Item 4260-115-0890 as follows:

2. For our purposes of administering or implementing federal grants that support the 988 Suicide and Crisis Lifeline centers, the State Department of Health Care Services may enter into exclusive or nonexclusive contracts, or amend existing contracts, on a bid or negotiated basis. Contracts entered into or amended pursuant to this provision shall be exempt from Chapter 6 (commencing with Section 14825) of Part 5.5 of Division 3 of Title 2 of the Government Code, Section 19130 of the Government Code, Part 2 (commencing with Section 10100) of Division 2 of the Public Contract Code, and the State Administrative Manual, and shall be exempt from the review or approval of any division of the Department of General Services.

May 12, 2023

Honorable Nancy Skinner, Chair
Senate Budget and Fiscal Review Committee

Attention: Elisa Wynne, Staff Director

Honorable Phil Ting, Chair
Assembly Budget Committee

Attention: Christian Griffith, Chief Consultant

Amendment to Various Budget Bill Items, Support and Local Assistance, and Statutory Changes, Department of Public Health

Provisional Language: Information Technology, Data Science, and Informatics Framework for a 21st Century Public Health System—It is requested that provisional language in Item 4265-001-0001 be amended to augment this item by up to \$15,882,000 one-time upon approval of enterprise planning and strategy documents (see Attachment 1).

COVID-19 Response Reduced Resources (Issue 386)—It is requested that Item 4265-001-0001 be decreased by \$50 million one-time and provisional language be amended to reduce the amount provided for COVID-19 response (see Attachment 1). As a result of lower revenue projections and a resulting increase in the budget problem, the May Revision proposes adjustments to COVID-19 response expenditures to assist in closing the projected shortfall and ensuring the submission of a balanced budget plan.

Public Health Workforce Investments Restoration (Issue 385)—It is requested that Item 4265-001-0001 be increased by \$19,872,000 in fiscal years 2023-24 and 2024-25, and \$3.2 million in 2025-26, Item 4265-111-0001 be increased by \$928,000 in 2023-24 and 2024-25, and provisional language be added to both items, to restore limited-term investments for public health workforce training and development programs (see Attachments 2 and 3). It is also requested that provisional language in Item 4265-495 be withdrawn to restore investments included in the 2022 Budget Act (see Attachment 4).

Lead Renovation, Repair, and Painting Program (SB 1076) (Issues 358 and 396)—It is requested that Item 4265-001-0001 be increased by \$546,000 and 2 positions in 2023-24, \$6,000 in 2024-25, and \$621,000 and 1 position in 2025-26 and 2026-27, Item 4265-001-3155 be decreased by \$5,511,000 and 32 positions in 2025-26, \$5,188,000 in 2026-27, and \$41,000 and 1 position in 2027-28 and ongoing, and statutory changes be adopted, to reflect adjustments to the Lead Renovation, Repair, and Painting Program (Chapter 507, Statutes of 2022 (SB 1076)) proposal included in the Governor's Budget.

Adjustment to Reflect Available Resources in Breast Cancer Research Account, Breast Cancer Fund (Issue 418)—It is requested that Item 4265-001-0007 be decreased by \$27,000 one-time to reflect updated cigarette tax revenue estimates.

Proposition 99 Expenditure Adjustments (Issues 423-425)—It is requested that the following items be amended to reflect updated cigarette tax revenue estimates:

- Item 4265-001-0231 be increased by \$3,407,000 one-time.
- Item 4265-001-0234 be decreased by \$18,000 one-time.
- Item 4265-001-0236 be decreased by \$57,000 one-time.
- Item 4265-111-0231 be increased by \$1,899,000 one-time.

Genetic Disease Screening Program Estimate (Issues 375 and 429)—It is requested that Item 4265-001-0203 be decreased by \$1,254,000 ongoing and Item 4265-111-0203 be increased by \$1,020,000 ongoing to reflect updated expenditure estimates. It is also requested that provisional language be added to Item 4265-111-0203 to augment expenditure authority to implement activities associated with prenatal screening for Sex Chromosome Aneuploidies (see Attachment 4).

Increased Resources for the Vector-Borne Disease Section (Issue 353)—It is requested that Item 4265-001-0478 be increased by \$68,000 ongoing to support increased program expenditures.

Domestic Violence Training and Education Fund Workload Adjustment (Issue 347)—It is requested that Item 4265-001-0642 be decreased by \$135,000 ongoing and Item 4265-111-0642 be increased by \$135,000 ongoing to increase support for community-based organizations performing domestic violence prevention activities.

Center for Health Care Quality Estimate (Issue 376)—It is requested that Item 4265-001-0890 be increased by \$25,268,000 one-time to reflect updated expenditure estimates.

AIDS Drug Assistance Program Estimate (Issue 354)—It is requested that Item 4265-111-0890 be increased by \$583,000 ongoing to reflect updated expenditure estimates.

Women Infant and Children Program Estimate (Issue 374)—It is requested that Item 4265-111-0890 be increased by \$64.3 million ongoing and Item 4265-111-3023 be decreased by \$4,605,000 ongoing to reflect updated expenditure estimates.

Provisional Language: Public Health Regional Climate Planning Reversion—It is requested that provisional language in Item 4265-495 be amended to specify the amounts associated with the reversion of Climate and Health Resilience Planning Grants (see Attachment 5).

The effect of my requested action is reflected on the attachment.

If you have any questions or need additional information regarding this matter, please call Sonal Patel, Principal Program Budget Analyst, at (916) 445-6423.

JOE STEPHENSHAW

Director

By:

/s/ Erika Li

ERIKA LI

Chief Deputy Director

Attachment

cc: Honorable Anthony J. Portantino, Chair, Senate Appropriations Committee
Attention: Mark McKenzie, Staff Director
Honorable Roger W. Niello, Vice Chair, Senate Budget and Fiscal Review Committee
Attention: Kirk Feely, Fiscal Director
Honorable Chris R. Holden, Chair, Assembly Appropriations Committee
Attention: Jay Dickenson, Chief Consultant
Honorable Vince Fong, Vice Chair, Assembly Budget Committee
Attention: Joseph Shinstock, Fiscal Director
Honorable Dr. Joaquin Arambula, Chair, Assembly Budget Subcommittee No. 1
Honorable Caroline Menjivar, Chair, Senate Budget and Fiscal Review Subcommittee
No. 3
Gabriel Petek, Legislative Analyst
Christopher W. Woods, Senate President pro Tempore's Office
Jason Sisney, Assembly Speaker's Office
Paul Dress, Caucus Co-Chief of Staff, Assembly Republican Leader's Office
Katja Townsend, Capitol Director, Assembly Republican Leader's Office
Marko Mijic, Undersecretary, California Health and Human Services Agency
Brendan McCarthy, Deputy Secretary of Program and Fiscal Affairs, California Health and
Human Services Agency
Julie Souliere, Assistant Secretary, California Health and Human Services Agency
Dr. Tomas Aragon, State Public Health Officer, California Department of Public Health
Susan Fanelli, Chief Deputy Director of Health Quality and Emergency Response,
California Department of Public Health
Brandon Nunes, Chief Deputy Director of Operations, California Department of Public
Health

Amend Provisions 5 and 9 of Item 4265-001-0001 as follows:

"5. (a) Of the amount appropriated in Schedule (2), \$18,146,000 shall be available for encumbrance or expenditure until June 30, 2025, for the Information Technology, Data Science, and Informatics Framework for a 21st Century Public Health System.

(b) This amount may be augmented by up to \$15,882,000 for planning activities associated with Initiative 0 Enterprise Planning and Strategy, Initiative 1 Dynamic Public Health Structure, and Initiative 4 Public Health Data Integration of the Information Technology, Data Science, and Informatics Framework for a 21st Century Public Health System. Expenditure of these funds is contingent upon approval of enterprise planning and strategy documents by the California Health and Human Services Agency and the Department of Technology. Department of Finance approval shall consider verified satisfactory progress associated with Initiative 0 planning. Any necessary Project Approval Lifecycle documents must be approved by the Department of Technology."

"9. ~~(a)~~ Of the amount appropriated in Schedule (1), ~~\$101,300,000~~ \$51,300,000 shall be available for purposes related to COVID-19 response.

~~(b) Up to \$50,000,000 of the amount appropriated in this provision shall be available for encumbrance or expenditure upon approval from the Department of Finance. The Department of Finance shall provide written notification to the Joint Legislative Budget Committee within 10 working days from the date of Department of Finance approval."~~

Add the following provisions to Item 4265-001-0001:

10. (a) Of the amount appropriated in Schedule (2), \$3,200,000 shall be available for encumbrance or expenditure until June 30, 2026, to support a Public Health Workforce Development and Engagement Program aimed at supporting worker upskilling to improve retention of the public health workforce and help incumbent workers develop their skills to meet future public health demands. The State Department of Public Health may use up to \$160,000 of the funding in this provision to administer the program.

(b) (1) "Eligible employee" means a full or part-time employee within a local health department or the State Department of Public Health who has been employed by that entity for a minimum of one year.

(2) "Eligible educational pursuits" includes any of the following: (A) educational programs at regionally accredited institutions in the public health field, such as nursing, microbiology, public health, public administration, epidemiology, lab science, and community health; (B) industry-recognized training programs related to the public health field; (C) continuing education units required to maintain an individual's license or certification; or (D) earn and learn programs, as defined in subdivision (q) of Section 14005 of the Unemployment Insurance Code, in the public health field.

(c) The State Department of Public Health shall use funds to support employees at the department and award grants to local health departments for education and training opportunities for incumbent employees within the governmental public health workforce. Eligible uses of funding shall include any of the following:

(1) Providing stipends to eligible employees to offset the loss of compensation for up to 12 hours per workweek for eligible educational pursuits. Stipends shall be up to \$600 per week per eligible employee for up to 12 weeks per year.

(2) Hiring additional employees to support the goals of the program, such as covering employees while they participate in eligible educational pursuits.

(3) Reimbursement for educational costs for eligible employees, such as tuition, registration fees, or other related educational expenses when participating in eligible educational pursuits.

(d) The State Department of Public Health shall solicit applications internally and from local health departments to participate in the program.

(e) Applications shall include all of the following:

(1) The proposed use of the funds.

(2) The total amount requested.

(3) Any other information required by the department for the purpose of implementing this program.

(f) No later than July 1, 2026, the State Department of Public Health shall, in accordance with Section 9795 of the Government Code, submit to the Legislature a report regarding the uses and outcomes of funds appropriated for the program. The report shall include, at a minimum, all of the following information:

(1) The amount of funding provided to local health departments and State Department of Public Health employees.

(2) The total number of applicants that apply for funding.

(3) The number of individuals participating in eligible educational pursuits.

(4) A summary of the types of credentials and skills attained through the program.

(5) The number of workers hired to cover for employees attaining educational opportunities.

(6) An evaluation of the effectiveness of the program.

11. (a) Of the amount appropriated in Schedule (2), \$8,000,000 shall be available for encumbrance or expenditure until June 30, 2026, to support a Public Health Pathways Training Corps aimed at providing fellowships for early-career public health professionals and internships for students from diverse backgrounds and disproportionately affected communities to conduct communicable disease prevention and control, community engagement, emergency response, and other public health activities at local health department host sites. The State Department of Public Health may use up to \$400,000 of the funding in this provision to administer the program.

(b) The department shall annually accept applications for the program and strive to maximize participation in the program, and place program participants in diverse local health departments throughout the state, including in the rural and Central Valley jurisdictions.

(c) No later than July 1, 2026, the department shall, in accordance with Section 9795 of the Government Code, submit to the Legislature a report on the program that includes all of the following:

(1) The number of applicants.

(2) The number of individuals accepted into the program each year.

(3) Job attainment results following participation in the program, including, but not limited to, the percentage of individuals employed in governmental public health, the percentage employed in the private sector, the percentage employed by hospitals, and the percentage employed in other fields.

(4) The demographics of applicants and program participants.

12. (a) Of the amount appropriated in Schedule (2), \$2,794,000 shall be available for encumbrance or expenditure until June 30, 2026, to increase the number of Public Health Microbiologist Trainees in California. The State Department of Public Health may use up to \$160,000 of the funding in this provision to administer the program.

(b) Upon approval from the Department of Finance, any amount of the funds appropriated in Schedule (2) for the purposes described in this provision may be transferred to Item 4265-111-0001.

13. (a) Of the amount appropriated in Schedule (2), \$2,678,000 shall be available for encumbrance or expenditure until June 30, 2026, to support increased funding for the Lab Aspire Program, which trains and prepares qualified professionals to direct local California Public Health Laboratories. The State Department of Public Health may use up to \$160,000 of the funding in this provision to administer the program.

(b) Upon approval from the Department of Finance, any amount of the funds appropriated in Schedule (2) for the purposes described in this provision may be transferred to Item 4265-111-0001.

14. Of the amount appropriated in Schedule (2), \$3,200,000 shall be available for encumbrance or expenditure until June 30, 2026, to increase the number of fellows in the California Epidemiologic Investigation Service Training Program, which prepares epidemiologists for public health leadership positions throughout California. The State Department of Public Health may use up to \$160,000 of the funding in this provision to administer the program.

Add the following provisions to Item 4265-111-0001:

5. Of the amount appropriated in Schedule (2), \$406,000 shall be available for encumbrance or expenditure until June 30, 2026, to increase the number of Public Health Microbiologist Trainees in California.
6. Of the amount appropriated in Schedule (2), \$522,000 shall be available for encumbrance or expenditure until June 30, 2026, to support increased funding for the Lab Aspire Program, which trains and prepares qualified professionals to direct local California Public Health Laboratories.

Amend Item 4265-495 as follows:

"4265-495—Reversion, State Department of Public Health. As of June 30, 2023, the ~~unencumbered~~ balances specified below, of the appropriations provided in the following citations shall revert to the fund balances of the funds from which the appropriations were made:

0001— General Fund

(1) \$1,250,000 in Provision 11 of Item 4265-001-0001, Budget Act of 2022 (Chs. 43 and 249, Statutes of 2022).

~~(2) Provision 28 of Item 4265-001-0001, Budget Act of 2022 (Chs. 43 and 249, Statutes of 2022).~~

~~(3) Provision 29 of Item 4265-001-0001, Budget Act of 2022 (Chs. 43 and 249, Statutes of 2022).~~

~~(4) Provision 30 of Item 4265-001-0001, Budget Act of 2022 (Chs. 43 and 249, Statutes of 2022).~~

~~(5) Provision 31 of Item 4265-001-0001, Budget Act of 2022 (Chs. 43 and 249, Statutes of 2022).~~

~~(6) Provision 32 of Item 4265-0001-0001, Budget Act of 2022 (Chs. 43 and 249, Statutes of 2022).~~

(7) \$23,750,000 in Provision 6 of Item 4265-111-0001, Budget Act of 2022 (Chs. 43 and 249, Statutes of 2022)."

Add the following provision to Item 4265-111-0203:

1. The Department of Finance may augment this item, after review of a request submitted by the State Department of Public Health that demonstrates a need for additional expenditure authority to support activities to implement screening for Sex Chromosome Aneuploidies in the Prenatal Screening Program. Any augmentation shall be authorized not sooner than 30 days after notification in writing to the Chairperson of the Joint Legislative Budget Committee, or not sooner than whatever lesser time the Chairperson of the Joint Legislative Budget Committee, or the chairperson's designee, may determine.

May 12, 2023

Honorable Nancy Skinner, Chair
Senate Budget and Fiscal Review Committee

Attention: Elisa Wynne, Staff Director

Honorable Phil Ting, Chair
Assembly Budget Committee

Attention: Christian Griffith, Chief Consultant

Amendment to and Addition of Various Budget Bill Items and Reimbursements, Support and Local Assistance, Statutory Changes, Department of Developmental Services

State-Operated Facilities–Enhanced Federal Funding (Issue 081)—It is requested that Item 4300-001-0001 be decreased by \$681,000 and reimbursements be increased by \$681,000 one-time to reflect the estimated receipt of additional federal funds associated with the final extension of the federal public health emergency related to the COVID-19 Pandemic.

Regional Centers–Coordinated Family Support Services (Issue 086)—It is requested that Item 4300-101-0001 be increased by \$10.8 million and reimbursements be increased by \$7.2 million one-time to continue funding the Coordinated Family Support service pilot program through the end of fiscal year 2023-24. The program is currently funded through the Home and Community-Based Services (HCBS) Spending Plan.

Regional Centers–Independent Living Services (Issue 087)—It is requested that Item 4300-101-0001 be increased by \$8.5 million and reimbursements be increased by \$6.5 million ongoing to fund adjusted rate model assumptions for Independent Living Services. These resources increase to an estimated \$60 million (\$34 million General Fund) beginning in 2024-25.

Regional Centers–Provisional Eligibility for Ages 0-2 (Issue 089)—It is requested that Item 4300-101-0001 be decreased by \$13 million and reimbursements be increased by \$13 million to reflect General Fund savings due to the anticipated approval of a federal waiver for services provided to children ages zero to four who are determined provisionally eligible for full services provided through the Lanterman Developmental Disabilities Services Act. It is also requested that statutory changes be added for these purposes.

Regional Centers–Caseload and Utilization May Revision (Issues 090 and 106)—It is requested that Item 4300-101-0001 be decreased by \$5,375,000 and reimbursements be decreased by \$197,027,000 ongoing. These adjustments reflect updated expenditure estimates in operations and purchase of services driven by caseload and utilization. The majority of the decrease in reimbursements is attributed to one-time technical cleanup shifting estimated General Fund reimbursements related to Service Provider Rate Reform to estimated Home and Community-Based Services American Rescue Plan Fund reimbursements. It is also requested that Item 4300-101-0890 be increased by \$3,412,000 ongoing. This adjustment reflects receipt of increased federal grant funding to support the Early Start program.

Regional Centers–Enhanced Federal Funding (Issue 091)—It is requested that Item 4300-101-0001 be decreased by \$71,950,000 and reimbursements be increased by \$71,950,000 one-time to reflect the estimated receipt of additional federal funds associated with the final extension of the federal public health emergency related to the COVID-19 Pandemic.

Regional Centers–Minimum Wage Adjustments: January 2024 (Issue 099)—It is requested that Item 4300-101-0001 be decreased by \$657,000 and reimbursements be decreased by \$358,000 ongoing to reflect updated expenditure estimates associated with the projected increase in the statewide minimum wage on January 1, 2024.

Section 11.95 HCBS Allocation–May Revision 2023 Adjustment, General Fund (Issues 104 and 105)—It is requested that Item 4300-101-0001 be increased by \$7,555,000 and reimbursements be increased by \$117,380,000 one-time to reflect spending adjustments of Home and Community-Based Services American Rescue Plan Fund expenditures on Service Provider Rate Reform acceleration in 2022-23, requiring net General Fund resources in 2023-24 related to continued funding of Department of Developmental Services policy initiatives, including: Language Access and Cultural Competency, Social Recreation and Camping Services, and Service Provider Rate Reform.

Language Only—It is requested that Provision 2 of Item 4300-101-0001 be amended to change General Fund loan authority from \$1,233,464,000 to \$1,239,880,000 to reflect revised estimates regarding federal reimbursements (see Attachment 1).

Reappropriation–2020-21 Community Placement Plan Funding (Issue 088)—It is requested that Item 4300-490 be added to reappropriate \$10,750,000 from Item 4300-101-0001, Budget Act of 2020, to support housing projects under development with units set aside for individuals with intellectual and developmental disabilities (see Attachment 2). Funds were awarded for these purposes through the Department's Community Placement Plan.

The effect of my requested action is reflected on the attachment.

If you have any questions or need additional information regarding this matter, please call Kia Cha, Principal Program Budget Analyst, at (916) 445-6423.

JOE STEPHENSHAW

Director

By:

/s/ Erika Li

ERIKA LI

Chief Deputy Director

Attachment

cc: Honorable Anthony J. Portantino, Chair, Senate Appropriations Committee
Attention: Mark McKenzie, Staff Director
Honorable Roger W. Niello, Vice Chair, Senate Budget and Fiscal Review Committee
Attention: Kirk Feely, Fiscal Director
Honorable Chris R. Holden, Chair, Assembly Appropriations Committee
Attention: Jay Dickenson, Chief Consultant
Honorable Vince Fong, Vice Chair, Assembly Budget Committee
Attention: Joseph Shinstock, Fiscal Director
Honorable Dr. Joaquin Arambula, Chair, Assembly Budget Subcommittee No. 1
Honorable Caroline Menjivar, Chair, Senate Budget and Fiscal Review Subcommittee No. 3
Gabriel Petek, Legislative Analyst
Christopher W. Woods, Senate President pro Tempore's Office
Jason Sisney, Assembly Speaker's Office
Paul Dress, Caucus Co-Chief of Staff, Assembly Republican Leader's Office
Katja Townsend, Capitol Director, Assembly Republican Leader's Office
Marko Mijic, Undersecretary, California Health and Human Services Agency
Brendan McCarthy, Deputy Secretary of Program and Fiscal Affairs, California
Health and Human Service Agency
Debra Cooper, Assistant Secretary, California Health and Human Services Agency
Nancy Bargmann, Director, Department of Developmental Services
Carla Castañeda, Chief Deputy Director, Department of Developmental Services
Brian Winfield, Chief Deputy Director, Department of Developmental Services

Amend Provision 2 of Item 4300-101-0001 as follows:

"2. A loan or loans shall be made available from the General Fund to the State Department of Developmental Services not to exceed a cumulative total of ~~\$1,233,464,000~~\$1,239,880,000. The loan funds shall be transferred to this item as needed to meet cashflow needs due to delays in collecting reimbursements from the Health Care Deposit Fund. All moneys so transferred shall be repaid as soon as sufficient reimbursements have been collected to meet immediate cash needs and in installments as reimbursements accumulate if the loan is outstanding for more than one year."

4300-490— Reappropriation, State Department of Developmental Services. The amount specified in the following citations are reappropriated for the purposes provided in those appropriations and shall be available for encumbrance or expenditure until June 30, 2024:

0001—General Fund

- (1) \$10,750,000 in Item 4300-101-0001, Budget Act of 2020 (Chs. 6 and 7, Stats. 2020), for the purpose of supporting multi-family housing projects with units set aside for individuals with intellectual and developmental disabilities, as funded through the Community Placement Plan.

May 12, 2023

Honorable Nancy Skinner, Chair
Senate Budget and Fiscal Review Committee

Attention: Elisa Wynne, Staff Director

Honorable Phil Ting, Chair
Assembly Budget Committee

Attention: Christian Griffith, Chief Consultant

Amendment to Budget Bill Item 4440-011-0001 and Reimbursement, and Addition of Items 4440-490 and 4440-492, Support, Department of State Hospitals

Enhanced Treatment Program Staffing Delay (Issue 071)—It is requested that Item 4440-011-0001 be decreased by \$3,193,000 in fiscal year 2023-24 one-time to reflect unit activation delay due to delayed construction schedule.

Decreased County Bed Billing Reimbursement Authority (Issue 074)—It is requested that Item 4440-011-0001 be amended by decreasing reimbursements by \$27,419,000 ongoing to align reimbursement authority with the current Lanterman-Petris-Short caseload.

Augmentation for Patient Driven Operating Expenses and Equipment (Issue 075)—It is requested that Item 4440-011-0001 be increased by \$6,072,000 in 2023-24 ongoing and Item 4440-011-0001, Budget Act of 2022 be increased by \$2,462,000 in 2022-23 to support the increased patient census projections.

COVID-19 Update (Issue 078)—It is requested that Item 4440-011-0001 be decreased by \$9,216,000 in 2023-24 one-time and Item 4440-011-0001, Budget Act of 2022 be decreased by \$19,724,000 in 2022-23 to reflect adjustments in COVID-19 infection control measures and practices based on changes in protocol from the California Department of Public Health and the Centers for Disease Control and Prevention.

Incompetent to Stand Trial Solutions (IST) Reappropriation (Issue 079)—It is requested that Item 4440-490 be added to reappropriate up to \$107,020,000 from Item 4440-011-0001 of the 2022 Budget Act to reflect updated implementation timelines across IST related programming, including Community Inpatient Facilities, Community Based Restoration, Diversion, Early Access and Stabilization Services, and Jail Based Competency Treatment. The additional time will allow Department of State Hospitals (DSH) to continue negotiations and implementation of IST solutions across all counties. It is also requested to reappropriate up to \$100 million from Item 4440-011-0001 of the

2021 Budget Act to allow time for the completion of infrastructure projects that DSH is in negotiation with providers to develop and provide funding to support operation of the beds once construction is complete. This will also provide for unforeseen or increased costs to implement solutions or the potential need for additional capacity to respond to the growing referrals. This action will extend the availability of these funds from June 30, 2023 to June 30, 2025 (see Attachment 1). It is also requested position authority for five ongoing positions be added to support increased IST referrals. These positions would be funded with existing IST solutions funding. Additionally, it is requested that \$129,473,000 be shifted from 2022-23 to 2025-26 to align the funding across fiscal years to better reflect anticipated expenditures based on program implementation plans. It is also requested that \$1,543,000 be shifted to program 4400-Administration from 4430-Contracted Patient Services.

Incompetent to Stand Trial Diversion Reappropriation (Issue 081)—It is requested that Item 4440-490 be added to reappropriate up to \$24 million from Item 4440-011-0001 of the 2018 Budget Act to allow counties time to expend the remaining balances of their pilot diversion program funding and meet their contracted number of individuals to be diverted under their contracts. This extension is needed due to activation delays of county diversion programs resulting from the COVID-19 pandemic. This action will extend the availability of these funds until June 30, 2025 (see Attachment 1).

Authorize use of General Fund for Napa Memorial Project and Reappropriation (Issue 080)—It is requested that Item 4440-492 be added to reappropriate up to \$60,000 from Item 4440-011-0001 of the 2021 Budget Act and up to \$60,000 from Item 4440-011-0001 of the 2022 Budget Act to support the completion of the Napa Memorial Project. As part of the re-appropriation, it is requested to use General Fund for this program rather than the originally planned endowment funds, which are now depleted.. These funds would allow DSH to complete the project. This action will extend the availability of these funds from June 30, 2022 and June 30, 2023 to June 30, 2024 (see Attachment 2).

SB 1223 Technical Cleanup (Statutory Changes Only)—It is requested that Statutory Changes be amended and considered in the public safety bill. Judicial Counsel's changes related to SB 1223, modified eligibility requirements for mental health diversion (the process for courts to grant pretrial diversion to individuals experiencing mental health disorders). Desired policy was inadvertently chaptered out. The proposal would provide technical cleanup to Penal Code Section 1370 (see Attachment 3).

Current Year Adjustments

Mission Based Review – Direct Care Nursing (Issue 065)—It is requested that Item 4440-011-0001 be decreased by \$1,028,000 in 2022-23 one-time due to delays in hiring.

Mission Based Review – Protective Services (Issue 066)—It is requested that Item 4440-011-0001 be decreased by \$4,766,000 in 2022-23 one-time due to delays in hiring.

Mission Based Review – Treatment Team and Primary Care (Issue 067)—It is requested that Item 4440-011-0001 be decreased by \$3,971,000 in 2022-23 one-time due to delays in hiring.

Metropolitan Increase Secure Bed Capacity (Issue 069)—It is requested that Item 4440-011-0001 be decreased by \$3,857,000 one-time in 2022-23 due to a miscalculation of projections at Governor's Budget.

DSH Coalinga – Intermediate Care Facility Conversion (Issue 069)—It is requested that Item 4440-011-0001 be decreased by \$2,946,000 one-time in 2022-23 for personnel services savings due to a two-month delay from fire suppression system repairs and subsequent regulatory approval.

CONREP-Non-SVP (Issue 077)—It is requested that Item 4440-011-0001 be decreased by \$13,525,000 in 2022-23 one-time due to program activation adjustments.

COVID-19 Workers Compensation (Issue 084)—It is requested that Item 4440-011-0001 be decreased by \$8 million General Fund in 2022-23 to reflect unspent workers' compensation funding previously authorized for COVID-19 related claims. As a result of lower revenue projections and a resulting increase in the budget problem, the May Revision proposed adjustments to this program to assist in closing the projected shortfall and ensuring the submission of a balanced budget plan. The effect of my requested action is reflected on the attachment.

If you have any questions or need additional information regarding this matter, please call Matt Aguilera, Principal Program Budget Analyst, at (916) 202-9663.

JOE STEPHENSHAW
Director
By:

/s/ Erika Li

ERIKA LI
Chief Deputy Director

Attachment

cc: On following page

cc: Honorable Anthony J. Portantino, Chair, Senate Appropriations Committee
Attention: Mark McKenzie, Staff Director
Honorable Roger W. Niello, Vice Chair, Senate Budget and Fiscal Review Committee
Attention: Kirk Feely, Fiscal Director
Honorable Chris R. Holden, Chair, Assembly Appropriations Committee
Attention: Jay Dickenson, Chief Consultant
Honorable Vince Fong, Vice Chair, Assembly Budget Committee
Attention: Joseph Shinstock, Fiscal Director
Honorable Dr. Joaquin Arambula, Chair, Assembly Budget Subcommittee No. 1
Honorable Caroline Menjivar, Chair, Senate Budget and Fiscal Review Subcommittee No. 3
Gabriel Petek, Legislative Analyst
Christopher W. Woods, Senate President pro Tempore's Office
Jason Sisney, Assembly Speaker's Office
Paul Dress, Caucus Co-Chief of Staff, Assembly Republican Leader's Office
Katja Townsend, Capitol Director, Assembly Republican Leader's Office
Marko Mijic, Undersecretary, Health and Human Services Agency
Brendan McCarthy, Deputy Secretary, Health and Human Services Agency
Darci Delgado, Assistant Secretary, Health and Human Services Agency
Stephanie Clendenin, Director, Department of State Hospitals
Chris Edens, Chief Deputy Director – Program Services, Department of State Hospitals
Brent Houser, Chief Deputy Director – Operations, Department of State Hospitals
Sean Hammer, Admin Deputy Director, Department of State Hospitals
Stephanie Chambers, Chief Financial Officer (A), Department of State Hospitals

Attachment 1

4440-490—Reappropriation, State Department of State Hospitals. The balances of the appropriations provided in the following citations are reappropriated for the purposes provided for in those appropriations and shall be available for encumbrance or expenditure as specified below:

0001—General Fund

- (1) Item 4440-011-0001, Budget Act of 2022, Program 4400-Administration, 4430-Contracted Patient Services and 4450-Evaluation and Forensic Services to support the Incompetent to Stand Trial Solutions, shall be available for encumbrance and expenditure until June 30, 2025.
- (2) Item 4440-011-0001, Budget Act of 2021 (Chs. 21, and 69, Stats. 2021), as reappropriated by Item 4440-490, Budget Act of 2022, 4430-Contracted Patient Services to support the Community Inpatient Facilities as a subset of Incompetent to Stand Trial Solutions, shall be available for encumbrance and expenditure until June 30, 2025.
- (3) Provision 11 of Item 4440-011-0001, Budget Act of 2018 (Chs. 29 and 30, Stats. 2018), as reappropriated by Item 4440-490, Budget Act of 2021, as reappropriated by Item 4440-490, Budget Act of 2022, Program 4430-Contracted Patient Services to support the Incompetent to Stand Trial Diversion Program, shall be available for encumbrance and expenditure until June 30, 2024.

4440-493-Reappropriation, State Department of State Hospitals. The amounts specified in the following citations are reappropriated for the purposes provided for in those appropriations and shall be available for encumbrance or expenditure until June 30, 2024:

- (1) Up to \$60,000 in Item 4440-011-0001, Budget Act of 2021 (Chs. 21 and 69, Stats. 2021), as reappropriated by Item 4440-490, Budget Act of 2022, Program 4410-State Hospitals.
- (2) Up to \$60,000 in Item 4440-011-0001, Budget Act of 2022, Program 4410-State Hospitals.

1370.

(a) (1) (A) If the defendant is found mentally competent, the criminal process shall resume, the trial on the offense charged or hearing on the alleged violation shall proceed, and judgment may be pronounced.

(B) If the defendant is found mentally incompetent, the trial, the hearing on the alleged violation, or the judgment shall be suspended until the person becomes mentally competent.

(i) The court shall order that the mentally incompetent defendant be delivered by the sheriff to a State Department of State Hospitals facility, as defined in Section 4100 of the Welfare and Institutions Code, as directed by the State Department of State Hospitals, or to any other available public or private treatment facility, including a community-based residential treatment system approved by the community program director, or their designee, that will promote the defendant's speedy restoration to mental competence, or placed on outpatient status as specified in Section 1600.

(ii) However, if the action against the defendant who has been found mentally incompetent is on a complaint charging a felony offense specified in Section 290, the prosecutor shall determine whether the defendant previously has been found mentally incompetent to stand trial pursuant to this chapter on a charge of a Section 290 offense, or whether the defendant is currently the subject of a pending Section 1368 proceeding arising out of a charge of a Section 290 offense. If either determination is made, the prosecutor shall notify the court and defendant in writing. After this notification, and opportunity for hearing, the court shall order that the defendant be delivered by the sheriff to a State Department of State Hospitals facility, as directed by the State Department of State Hospitals, or other secure treatment facility for the care and treatment of persons with a mental health disorder, unless the court makes specific findings on the record that an alternative placement would provide more appropriate treatment for the defendant and would not pose a danger to the health and safety of others.

(iii) If the action against the defendant who has been found mentally incompetent is on a complaint charging a felony offense specified in Section 290 and the defendant has been denied bail pursuant to subdivision (b) of Section 12 of Article I of the California Constitution because the court has found, based upon clear and convincing evidence, a substantial likelihood that the person's release would result in great bodily harm to others, the court shall order that the defendant be delivered by the sheriff to a State Department of State Hospitals facility, as directed by the State Department of State Hospitals, unless the court makes specific findings on the record that an alternative placement would provide more appropriate treatment for the defendant and would not pose a danger to the health and safety of others.

(iv) (I) If, at any time after the court finds that the defendant is mentally incompetent and before the defendant is transported to a facility pursuant to this section, the court is provided with any information that the defendant may benefit from diversion pursuant to Chapter 2.8A (commencing with Section 1001.35) of Title 6, the court may make a finding that the defendant is an appropriate candidate for diversion.

(II) Notwithstanding subclause (I), if a defendant is found mentally incompetent and is transferred to a facility described in Section 4361.6 of the Welfare and Institutions Code,

the court may, at any time upon receiving any information that the defendant may benefit from diversion pursuant to Chapter 2.8A (commencing with Section 1001.35) of Title 6, make a finding that the defendant is an appropriate candidate for diversion.

(v) If a defendant is found by the court to be an appropriate candidate for diversion pursuant to clause (iv), the defendant's eligibility shall be determined pursuant to Section 1001.36. A defendant granted diversion may participate for the lesser of the period specified in paragraph (1) of subdivision (c) or ~~two years.~~ *the applicable period described in subparagraph (C) of paragraph (1) of subdivision (f) of Section 1001.36.* If, during that period, the court determines that criminal proceedings should be reinstated pursuant to subdivision ~~(d)~~ (g) of Section 1001.36, the court shall, pursuant to Section 1369, appoint a psychiatrist, licensed psychologist, or any other expert the court may deem appropriate, to determine the defendant's competence to stand trial.

(vi) Upon the dismissal of charges at the conclusion of the period of diversion, pursuant to subdivision ~~(e)~~ (h) of Section 1001.36, a defendant shall no longer be deemed incompetent to stand trial pursuant to this section.

(vii) The clerk of the court shall notify the Department of Justice, in writing, of a finding of mental incompetence with respect to a defendant who is subject to clause (ii) or (iii) for inclusion in the defendant's state summary criminal history information.

(C) Upon the filing of a certificate of restoration to competence, the court shall order that the defendant be returned to court in accordance with Section 1372. The court shall transmit a copy of its order to the community program director or a designee.

(D) A defendant charged with a violent felony may not be delivered to a State Department of State Hospitals facility or treatment facility pursuant to this subdivision unless the State Department of State Hospitals facility or treatment facility has a secured perimeter or a locked and controlled treatment facility, and the judge determines that the public safety will be protected.

(E) For purposes of this paragraph, "violent felony" means an offense specified in subdivision (c) of Section 667.5.

(F) A defendant charged with a violent felony may be placed on outpatient status, as specified in Section 1600, only if the court finds that the placement will not pose a danger to the health or safety of others. If the court places a defendant charged with a violent felony on outpatient status, as specified in Section 1600, the court shall serve copies of the placement order on defense counsel, the sheriff in the county where the defendant will be placed, and the district attorney for the county in which the violent felony charges are pending against the defendant.

(G) If, at any time after the court has declared a defendant incompetent to stand trial pursuant to this section, counsel for the defendant or a jail medical or mental health staff provider provides the court with substantial evidence that the defendant's psychiatric symptoms have changed to such a degree as to create a doubt in the mind of the judge as to the defendant's current mental incompetence, the court may appoint a psychiatrist or a licensed psychologist to opine as to whether the defendant has regained competence. If, in the opinion of that expert, the defendant has regained competence, the court shall proceed as if a certificate of restoration of competence has been returned pursuant to paragraph (1) of subdivision (a) of Section 1372.

(H) (i) The State Department of State Hospitals may, pursuant to Section 4335.2 of the Welfare and Institutions Code, conduct an evaluation of the defendant in county custody to determine any of the following:

(I) The defendant has regained competence.

(II) There is no substantial likelihood that the defendant will regain competence in the foreseeable future.

(III) The defendant should be referred to the county for further evaluation for potential participation in a county diversion program, if one exists, or to another outpatient treatment program.

(ii) If, in the opinion of the department's expert, the defendant has regained competence, the court shall proceed as if a certificate of restoration of competence has been returned pursuant to paragraph (1) of subdivision (a) of Section 1372.

(iii) If, in the opinion of the department's expert, there is no substantial likelihood that the defendant will regain mental competence in the foreseeable future, the committing court shall proceed pursuant to paragraph (2) of subdivision (c) no later than 10 days following receipt of the report.

(2) Prior to making the order directing that the defendant be committed to the State Department of State Hospitals or other treatment facility or placed on outpatient status, the court shall proceed as follows:

(A) (i) The court shall order the community program director or a designee to evaluate the defendant and to submit to the court within 15 judicial days of the order a written recommendation as to whether the defendant should be required to undergo outpatient treatment, or be committed to the State Department of State Hospitals or to any other treatment facility. A person shall not be admitted to a State Department of State Hospitals facility or other treatment facility or placed on outpatient status under this section without having been evaluated by the community program director or a designee. The community program director or designee shall evaluate the appropriate placement for the defendant between a State Department of State Hospitals facility or the community-based residential treatment system based upon guidelines provided by the State Department of State Hospitals.

(ii) Commencing on July 1, 2023, a defendant shall first be considered for placement in an outpatient treatment program, a community treatment program, or a diversion program, if any such program is available, unless a court, based upon the recommendation of the community program director or their designee, finds that either the clinical needs of the defendant or the risk to community safety, warrant placement in a State Department of State Hospitals facility.

(B) The court shall hear and determine whether the defendant lacks capacity to make decisions regarding the administration of antipsychotic medication. The court shall consider opinions in the reports prepared pursuant to subdivision (a) of Section 1369, as applicable to the issue of whether the defendant lacks capacity to make decisions regarding the administration of antipsychotic medication, and shall proceed as follows:

(i) The court shall hear and determine whether any of the following is true:

(I) Based upon the opinion of the psychiatrist or licensed psychologist offered to the court pursuant to subparagraph (A) of paragraph (2) of subdivision (a) of Section 1369, the defendant lacks capacity to make decisions regarding antipsychotic medication,

the defendant's mental disorder requires medical treatment with antipsychotic medication, and, if the defendant's mental disorder is not treated with antipsychotic medication, it is probable that serious harm to the physical or mental health of the defendant will result. Probability of serious harm to the physical or mental health of the defendant requires evidence that the defendant is presently suffering adverse effects to their physical or mental health, or the defendant has previously suffered these effects as a result of a mental disorder and their condition is substantially deteriorating. The fact that a defendant has a diagnosis of a mental disorder does not alone establish probability of serious harm to the physical or mental health of the defendant.

(II) Based upon the opinion of the psychiatrist or licensed psychologist offered to the court pursuant to subparagraph (A) of paragraph (2) of subdivision (a) of Section 1369, the defendant is a danger to others, in that the defendant has inflicted, attempted to inflict, or made a serious threat of inflicting substantial physical harm on another while in custody, or the defendant had inflicted, attempted to inflict, or made a serious threat of inflicting substantial physical harm on another that resulted in the defendant being taken into custody, and the defendant presents, as a result of mental disorder or mental defect, a demonstrated danger of inflicting substantial physical harm on others. Demonstrated danger may be based on an assessment of the defendant's present mental condition, including a consideration of past behavior of the defendant within six years prior to the time the defendant last attempted to inflict, inflicted, or threatened to inflict substantial physical harm on another, and other relevant evidence.

(III) The people have charged the defendant with a serious crime against the person or property, and based upon the opinion of the psychiatrist offered to the court pursuant to subparagraph (C) of paragraph (2) of subdivision (a) of Section 1369, the involuntary administration of antipsychotic medication is substantially likely to render the defendant competent to stand trial, the medication is unlikely to have side effects that interfere with the defendant's ability to understand the nature of the criminal proceedings or to assist counsel in the conduct of a defense in a reasonable manner, less intrusive treatments are unlikely to have substantially the same results, and antipsychotic medication is *diagnostically and medically* appropriate in light of their medical condition.

(ii) (I) If the court finds the conditions described in subclause (I) or (II) of clause (i) to be true, and if pursuant to the opinion offered to the court pursuant to paragraph (2) of subdivision (a) of Section 1369, a psychiatrist has opined that treatment with antipsychotic medications is appropriate for the defendant, the court shall issue an order authorizing the administration of antipsychotic medication as needed, including on an involuntary basis, to be administered under the direction and supervision of a licensed psychiatrist.

(II) If the court finds the conditions described in subclause (I) or (II) of clause (i) to be true, and if pursuant to the opinion offered to the court pursuant to paragraph (2) of subdivision (a) of Section 1369, a licensed psychologist has opined that treatment with antipsychotic medication may be appropriate for the defendant, the court shall issue an order authorizing treatment by a licensed psychiatrist on an involuntary basis. That treatment may include the administration of antipsychotic medication as needed, to be administered under the direction and supervision of a licensed psychiatrist.

(III) If the court finds the conditions described in subclause (III) of clause (i) to be true, and if pursuant to the opinion offered to the court pursuant to paragraph (2) of subdivision (a) of Section 1369, a psychiatrist has opined that it is appropriate to treat the defendant with antipsychotic medication, the court shall issue an order authorizing the administration of antipsychotic medication as needed, including on an involuntary basis, to be administered under the direction and supervision of a licensed psychiatrist.

(iii) An order authorizing involuntary administration of antipsychotic medication to the defendant when and as prescribed by the defendant's treating psychiatrist at any facility housing the defendant for purposes of this chapter, including a county jail, shall remain in effect when the defendant returns to county custody pursuant to subparagraph (A) of paragraph (1) of subdivision (b) or paragraph (1) of subdivision (c), or pursuant to subparagraph (C) of paragraph (3) of subdivision (a) of Section 1372, but shall be valid for no more than one year, pursuant to subparagraph (A) of paragraph (7). The court shall not order involuntary administration of psychotropic medication under subclause (III) of clause (i) unless the court has first found that the defendant does not meet the criteria for involuntary administration of psychotropic medication under subclause (I) of clause (i) and does not meet the criteria under subclause (II) of clause (i).

(iv) In all cases, the treating hospital, county jail, facility, or program may administer medically appropriate antipsychotic medication prescribed by a psychiatrist in an emergency as described in subdivision (m) of Section 5008 of the Welfare and Institutions Code.

(v) If the court has determined that the defendant has the capacity to make decisions regarding antipsychotic medication, and if the defendant, with advice of their counsel, consents, the court order of commitment shall include confirmation that antipsychotic medication may be given to the defendant as prescribed by a treating psychiatrist pursuant to the defendant's consent. The commitment order shall also indicate that, if the defendant withdraws consent for antipsychotic medication, after the treating psychiatrist complies with the provisions of subparagraph (C), the defendant shall be returned to court for a hearing in accordance with subparagraphs (C) and (D) regarding whether antipsychotic medication shall be administered involuntarily.

(vi) If the court has determined that the defendant has the capacity to make decisions regarding antipsychotic medication and if the defendant, with advice from their counsel, does not consent, the court order for commitment shall indicate that, after the treating psychiatrist complies with the provisions of subparagraph (C), the defendant shall be returned to court for a hearing in accordance with subparagraphs (C) and (D) regarding whether antipsychotic medication shall be administered involuntarily.

(vii) A report made pursuant to paragraph (1) of subdivision (b) shall include a description of antipsychotic medication administered to the defendant and its effects and side effects, including effects on the defendant's appearance or behavior that would affect the defendant's ability to understand the nature of the criminal proceedings or to assist counsel in the conduct of a defense in a reasonable manner. During the time the defendant is confined in a State Department of State Hospitals facility or other treatment facility or placed on outpatient status, either the defendant or the people may request that the court review any order made pursuant to this subdivision. The defendant, to the same extent enjoyed by other patients in the State Department of State Hospitals facility

or other treatment facility, shall have the right to contact the patients' rights advocate regarding the defendant's rights under this section.

(C) If the defendant consented to antipsychotic medication as described in clause (iv) of subparagraph (B), but subsequently withdraws their consent, or, if involuntary antipsychotic medication was not ordered pursuant to clause (v) of subparagraph (B), and the treating psychiatrist determines that antipsychotic medication has become medically necessary and appropriate, the treating psychiatrist shall make efforts to obtain informed consent from the defendant for antipsychotic medication. If informed consent is not obtained from the defendant, and the treating psychiatrist is of the opinion that the defendant lacks capacity to make decisions regarding antipsychotic medication based on the conditions described in subclause (I) or (II) of clause (i) of subparagraph (B), the treating psychiatrist shall certify whether the lack of capacity and any applicable conditions described above exist. That certification shall contain an assessment of the current mental status of the defendant and the opinion of the treating psychiatrist that involuntary antipsychotic medication has become medically necessary and appropriate.

(D) (i) If the treating psychiatrist certifies that antipsychotic medication has become medically necessary and appropriate pursuant to subparagraph (C), antipsychotic medication may be administered to the defendant for not more than 21 days, provided, however, that, within 72 hours of the certification, the defendant is provided a medication review hearing before an administrative law judge to be conducted at the facility where the defendant is receiving treatment. The treating psychiatrist shall present the case for the certification for involuntary treatment and the defendant shall be represented by an attorney or a patients' rights advocate. The attorney or patients' rights advocate shall be appointed to meet with the defendant no later than one day prior to the medication review hearing to review the defendant's rights at the medication review hearing, discuss the process, answer questions or concerns regarding involuntary medication or the hearing, assist the defendant in preparing for the hearing and advocating for the defendant's interests at the hearing, review the panel's final determination following the hearing, advise the defendant of their right to judicial review of the panel's decision, and provide the defendant with referral information for legal advice on the subject. The defendant shall also have the following rights with respect to the medication review hearing:

(I) To be given timely access to the defendant's records.

(II) To be present at the hearing, unless the defendant waives that right.

(III) To present evidence at the hearing.

(IV) To question persons presenting evidence supporting involuntary medication.

(V) To make reasonable requests for attendance of witnesses on the defendant's behalf.

(VI) To a hearing conducted in an impartial and informal manner.

(ii) If the administrative law judge determines that the defendant either meets the criteria specified in subclause (I) of clause (i) of subparagraph (B), or meets the criteria specified in subclause (II) of clause (i) of subparagraph (B), antipsychotic medication may continue to be administered to the defendant for the 21-day certification period. Concurrently with the treating psychiatrist's certification, the treating psychiatrist shall file a copy of the certification and a petition with the court for issuance of an order to

administer antipsychotic medication beyond the 21-day certification period. For purposes of this subparagraph, the treating psychiatrist shall not be required to pay or deposit any fee for the filing of the petition or other document or paper related to the petition.

(iii) If the administrative law judge disagrees with the certification, medication may not be administered involuntarily until the court determines that antipsychotic medication should be administered pursuant to this section.

(iv) The court shall provide notice to the prosecuting attorney and to the attorney representing the defendant, and shall hold a hearing, no later than 18 days from the date of the certification, to determine whether antipsychotic medication should be ordered beyond the certification period.

(v) If, as a result of the hearing, the court determines that antipsychotic medication should be administered beyond the certification period, the court shall issue an order authorizing the administration of that medication.

(vi) The court shall render its decision on the petition and issue its order no later than three calendar days after the hearing and, in any event, no later than the expiration of the 21-day certification period.

(vii) If the administrative law judge upholds the certification pursuant to clause (ii), the court may, for a period not to exceed 14 days, extend the certification and continue the hearing pursuant to stipulation between the parties or upon a finding of good cause. In determining good cause, the court may review the petition filed with the court, the administrative law judge's order, and any additional testimony needed by the court to determine if it is appropriate to continue medication beyond the 21-day certification and for a period of up to 14 days.

(viii) The district attorney, county counsel, or representative of a facility where a defendant found incompetent to stand trial is committed may petition the court for an order to administer involuntary medication pursuant to the criteria set forth in subclauses (II) and (III) of clause (i) of subparagraph (B). The order is reviewable as provided in paragraph (7).

(3) When the court orders that the defendant be committed to a State Department of State Hospitals facility or other public or private treatment facility, the court shall provide copies of the following documents prior to the admission of the defendant to the State Department of State Hospitals or other treatment facility where the defendant is to be committed:

(A) The commitment order, which shall include a specification of the charges, an assessment of whether involuntary treatment with antipsychotic medications is warranted, and any orders by the court, pursuant to subparagraph (B) of paragraph (2), authorizing involuntary treatment with antipsychotic medications.

(B) A computation or statement setting forth the maximum term of commitment in accordance with subdivision (c).

(C) (i) A computation or statement setting forth the amount of credit for time served, if any, to be deducted from the maximum term of commitment.

(ii) If a certificate of restoration of competency was filed with the court pursuant to Section 1372 and the court subsequently rejected the certification, a copy of the court order or minute order rejecting the certification shall be provided. The court order shall

include a new computation or statement setting forth the amount of credit for time served, if any, to be deducted from the defendant's maximum term of commitment based on the court's rejection of the certification.

(D) State summary criminal history information.

(E) Jail classification records for the defendant's current incarceration.

(F) Arrest reports prepared by the police department or other law enforcement agency.

(G) Court-ordered psychiatric examination or evaluation reports.

(H) The community program director's placement recommendation report.

(I) Records of a finding of mental incompetence pursuant to this chapter arising out of a complaint charging a felony offense specified in Section 290 or a pending Section 1368 proceeding arising out of a charge of a Section 290 offense.

(J) Medical records, including jail mental health records.

(4) When the defendant is committed to a treatment facility pursuant to clause (i) of subparagraph (B) of paragraph (1) or the court makes the findings specified in clause (ii) or (iii) of subparagraph (B) of paragraph (1) to assign the defendant to a treatment facility other than a State Department of State Hospitals facility or other secure treatment facility, the court shall order that notice be given to the appropriate law enforcement agency or agencies having local jurisdiction at the placement facility of a finding of mental incompetence pursuant to this chapter arising out of a charge of a Section 290 offense.

(5) When directing that the defendant be confined in a State Department of State Hospitals facility pursuant to this subdivision, the court shall commit the defendant to the State Department of State Hospitals.

(6) (A) If the defendant is committed or transferred to the State Department of State Hospitals pursuant to this section, the court may, upon receiving the written recommendation of the medical director of the State Department of State Hospitals facility and the community program director that the defendant be transferred to a public or private treatment facility approved by the community program director, order the defendant transferred to that facility. If the defendant is committed or transferred to a public or private treatment facility approved by the community program director, the court may, upon receiving the written recommendation of the community program director, transfer the defendant to the State Department of State Hospitals or to another public or private treatment facility approved by the community program director. In the event of dismissal of the criminal charges before the defendant recovers competence, the person shall be subject to the applicable provisions of the Lanterman-Petris-Short Act (Part 1 (commencing with Section 5000) of Division 5 of the Welfare and Institutions Code). If either the defendant or the prosecutor chooses to contest either kind of order of transfer, a petition may be filed in the court for a hearing, which shall be held if the court determines that sufficient grounds exist. At the hearing, the prosecuting attorney or the defendant may present evidence bearing on the order of transfer. The court shall use the same standards as are used in conducting probation revocation hearings pursuant to Section 1203.2.

Prior to making an order for transfer under this section, the court shall notify the defendant, the attorney of record for the defendant, the prosecuting attorney, and the community program director or a designee.

(B) If the defendant is initially committed to a State Department of State Hospitals facility or secure treatment facility pursuant to clause (ii) or (iii) of subparagraph (B) of paragraph (1) and is subsequently transferred to any other facility, copies of the documents specified in paragraph (3) shall be electronically transferred or taken with the defendant to each subsequent facility to which the defendant is transferred. The transferring facility shall also notify the appropriate law enforcement agency or agencies having local jurisdiction at the site of the new facility that the defendant is a person subject to clause (ii) or (iii) of subparagraph (B) of paragraph (1).

(7) (A) An order by the court authorizing involuntary medication of the defendant shall be valid for no more than one year. The court shall review the order at the time of the review of the initial report and the six-month progress reports pursuant to paragraph (1) of subdivision (b) to determine if the grounds for the authorization remain. In the review, the court shall consider the reports of the treating psychiatrist or psychiatrists and the defendant's patients' rights advocate or attorney. The court may require testimony from the treating psychiatrist and the patients' rights advocate or attorney, if necessary. The court may continue the order authorizing involuntary medication for up to another six months, or vacate the order, or make any other appropriate order.

(B) Within 60 days before the expiration of the one-year involuntary medication order, the district attorney, county counsel, or representative of any facility where a defendant found incompetent to stand trial is committed may petition the committing court for a renewal, subject to the same conditions and requirements as in subparagraph (A). The petition shall include the basis for involuntary medication set forth in clause (i) of subparagraph (B) of paragraph (2). Notice of the petition shall be provided to the defendant, the defendant's attorney, and the district attorney. The court shall hear and determine whether the defendant continues to meet the criteria set forth in clause (i) of subparagraph (B) of paragraph (2). The hearing on a petition to renew an order for involuntary medication shall be conducted prior to the expiration of the current order.

(8) For purposes of subparagraph (D) of paragraph (2) and paragraph (7), if the treating psychiatrist determines that there is a need, based on preserving their rapport with the defendant or preventing harm, the treating psychiatrist may request that the facility medical director designate another psychiatrist to act in the place of the treating psychiatrist. If the medical director of the facility designates another psychiatrist to act pursuant to this paragraph, the treating psychiatrist shall brief the acting psychiatrist of the relevant facts of the case and the acting psychiatrist shall examine the defendant prior to the hearing.

(b) (1) Within 90 days after a commitment made pursuant to subdivision (a), the medical director of the State Department of State Hospitals facility or other treatment facility to which the defendant is confined shall make a written report to the court and the community program director for the county or region of commitment, or a designee, concerning the defendant's progress toward recovery of mental competence and whether the administration of antipsychotic medication remains necessary.

If the defendant is in county custody, the county jail shall provide access to the defendant for purposes of the State Department of State Hospitals conducting an evaluation of the defendant pursuant to Section 4335.2 of the Welfare and Institutions Code. Based upon this evaluation, the State Department of State Hospitals may make a

written report to the court within 90 days of a commitment made pursuant to subdivision (a) concerning the defendant's progress toward recovery of mental incompetence and whether the administration of antipsychotic medication is necessary. If the defendant remains in county custody after the initial 90-day report, the State Department of State Hospitals may conduct an evaluation of the defendant pursuant to Section 4335.2 of the Welfare and Institutions Code and make a written report to the court concerning the defendant's progress toward recovery of mental incompetence and whether the administration of antipsychotic medication is necessary.

If the defendant is on outpatient status, the outpatient treatment staff shall make a written report to the community program director concerning the defendant's progress toward recovery of mental competence. Within 90 days of placement on outpatient status, the community program director shall report to the court on this matter. If the defendant has not recovered mental competence, but the report discloses a substantial likelihood that the defendant will regain mental competence in the foreseeable future, the defendant shall remain in the State Department of State Hospitals facility or other treatment facility or on outpatient status. Thereafter, at six-month intervals or until the defendant becomes mentally competent, if the defendant is confined in a treatment facility, the medical director of the State Department of State Hospitals facility or person in charge of the facility shall report, in writing, to the court and the community program director or a designee regarding the defendant's progress toward recovery of mental competence and whether the administration of antipsychotic medication remains necessary. If the defendant is on outpatient status, after the initial 90-day report, the outpatient treatment staff shall report to the community program director on the defendant's progress toward recovery, and the community program director shall report to the court on this matter at six-month intervals. A copy of these reports shall be provided to the prosecutor and defense counsel by the court.

(A) If the report indicates that there is no substantial likelihood that the defendant will regain mental competence in the foreseeable future, custody of the defendant shall be transferred without delay to the committing county and shall remain with the county until further order of the court. The defendant shall be returned to the court for proceedings pursuant to paragraph (2) of subdivision (c) no later than 10 days following receipt of the report. The court shall not order the defendant returned to the custody of the State Department of State Hospitals under the same commitment. The court shall transmit a copy of its order to the community program director or a designee.

(B) If the report indicates that there is no substantial likelihood that the defendant will regain mental competence in the foreseeable future, the medical director of the State Department of State Hospitals facility or other treatment facility to which the defendant is confined shall do both of the following:

(i) Promptly notify and provide a copy of the report to the defense counsel and the district attorney.

(ii) Provide a separate notification, in compliance with applicable privacy laws, to the committing county's sheriff that immediate transportation will be needed for the defendant pursuant to subparagraph (A).

(C) If a county does not take custody of a defendant committed to the State Department of State Hospitals within 10 calendar days following notification made

pursuant to clause (ii) of subparagraph (B), the county shall be charged the daily rate for a state hospital bed, as established by the State Department of State Hospitals.

(2) The reports made pursuant to paragraph (1) concerning the defendant's progress toward regaining competency shall also consider the issue of involuntary medication pursuant to paragraph (2) of subdivision (a) of Section 1369. Each report may include, but not be limited to, all of the following:

(A) Whether or not the defendant has the capacity to make decisions concerning antipsychotic medication.

(B) If the defendant lacks capacity to make decisions concerning antipsychotic medication, whether the defendant risks serious harm to their physical or mental health if not treated with antipsychotic medication.

(C) Whether or not the defendant presents a danger to others if the defendant is not treated with antipsychotic medication.

(D) Whether the defendant has a mental disorder for which medications are the only effective treatment.

(E) Whether there are any side effects from the medication currently being experienced by the defendant that would interfere with the defendant's ability to collaborate with counsel.

(F) Whether there are any effective alternatives to medication.

(G) How quickly the medication is likely to bring the defendant to competency.

(H) Whether the treatment plan includes methods other than medication to restore the defendant to competency.

(I) A statement, if applicable, that no medication is likely to restore the defendant to competency.

(3) After reviewing the reports, the court shall determine if grounds for the involuntary administration of antipsychotic medication exist, whether or not an order was issued at the time of commitment, and shall do one of the following:

(A) If the original grounds for involuntary medication still exist, any order authorizing the treating facility to involuntarily administer antipsychotic medication to the defendant shall remain in effect.

(B) If the original grounds for involuntary medication no longer exist, and there is no other basis for involuntary administration of antipsychotic medication, any order for the involuntary administration of antipsychotic medication shall be vacated.

(C) If the original grounds for involuntary medication no longer exist, and the report states that there is another basis for involuntary administration of antipsychotic medication, the court shall determine whether to vacate the order or issue a new order for the involuntary administration of antipsychotic medication. The court shall consider the opinions in reports submitted pursuant to paragraph (1) of subdivision (b), including any opinions rendered pursuant to Section 4335.2 of the Welfare and Institutions Code. The court may, upon a showing of good cause, set a hearing within 21 days to determine whether the order for the involuntary administration of antipsychotic medication shall be vacated or whether a new order for the involuntary administration of antipsychotic medication shall be issued. The hearing shall proceed as set forth in subparagraph (B) of paragraph (2) of subdivision (a). The court shall require witness testimony to occur remotely, including clinical testimony pursuant to subdivision (d) of Section 4335.2 of the Welfare and

Institutions Code. In-person witness testimony shall only be allowed upon a court's finding of good cause.

(D) If the report states a basis for involuntary administration of antipsychotic medication and the court did not issue such order at the time of commitment, the court shall determine whether to issue an order for the involuntary administration of antipsychotic medication. The court shall consider the opinions in reports submitted pursuant to paragraph (1) of subdivision (b), including any opinions rendered pursuant to Section 4335.2 of the Welfare and Institutions Code. The court may, upon a finding of good cause, set a hearing within 21 days to determine whether an order for the involuntary administration of antipsychotic medication shall be issued. The hearing shall proceed as set forth in subparagraph (B) of paragraph (2) of subdivision (a). The court shall require witness testimony to occur remotely, including clinical testimony pursuant to subdivision (d) of Section 4335.2 of the Welfare and Institutions Code. In-person witness testimony shall only be allowed upon a court's finding of good cause.

(4) If it is determined by the court that treatment for the defendant's mental impairment is not being conducted, the defendant shall be returned to the committing court, and, if the defendant is not in county custody, returned to the custody of the county. The court shall transmit a copy of its order to the community program director or a designee.

(5) At each review by the court specified in this subdivision, the court shall determine if the security level of housing and treatment is appropriate and may make an order in accordance with its determination. If the court determines that the defendant shall continue to be treated in the State Department of State Hospitals facility or on an outpatient basis, the court shall determine issues concerning administration of antipsychotic medication, as set forth in subparagraph (B) of paragraph (2) of subdivision (a).

(c) (1) At the end of two years from the date of commitment or a period of commitment equal to the maximum term of imprisonment provided by law for the most serious offense charged in the information, indictment, or misdemeanor complaint, or the maximum term of imprisonment provided by law for a violation of probation or mandatory supervision, whichever is shorter, but no later than 90 days prior to the expiration of the defendant's term of commitment, a defendant who has not recovered mental competence shall be returned to the committing court, and custody of the defendant shall be transferred without delay to the committing county and shall remain with the county until further order of the court. The court shall not order the defendant returned to the custody of the State Department of State Hospitals under the same commitment. The court shall notify the community program director or a designee of the return and of any resulting court orders.

(2) (A) The medical director of the State Department of State Hospitals facility or other treatment facility to which the defendant is confined shall provide notification, in compliance with applicable privacy laws, to the committing county's sheriff that immediate transportation will be needed for the defendant pursuant to paragraph (1).

(B) If a county does not take custody of a defendant committed to the State Department of State Hospitals within 10 calendar days following notification pursuant to subparagraph (A), the county shall be charged the daily rate for a state hospital bed, as established by the State Department of State Hospitals.

(3) Whenever a defendant is returned to the court pursuant to paragraph (1) or (4) of subdivision (b) or paragraph (1) of this subdivision and it appears to the court that the defendant is gravely disabled, as defined in subparagraph (A) or (B) of paragraph (1) of subdivision (h) of Section 5008 of the Welfare and Institutions Code, the court shall order the conservatorship investigator of the county of commitment of the defendant to initiate conservatorship proceedings for the defendant pursuant to Chapter 3 (commencing with Section 5350) of Part 1 of Division 5 of the Welfare and Institutions Code. Hearings required in the conservatorship proceedings shall be held in the superior court in the county that ordered the commitment. The court shall transmit a copy of the order directing initiation of conservatorship proceedings to the community program director or a designee, the sheriff and the district attorney of the county in which criminal charges are pending, and the defendant's counsel of record. The court shall notify the community program director or a designee, the sheriff and district attorney of the county in which criminal charges are pending, and the defendant's counsel of record of the outcome of the conservatorship proceedings.

(4) If a change in placement is proposed for a defendant who is committed pursuant to subparagraph (A) or (B) of paragraph (1) of subdivision (h) of Section 5008 of the Welfare and Institutions Code, the court shall provide notice and an opportunity to be heard with respect to the proposed placement of the defendant to the sheriff and the district attorney of the county in which the criminal charges or revocation proceedings are pending.

(5) If the defendant is confined in a treatment facility, a copy of any report to the committing court regarding the defendant's progress toward recovery of mental competence shall be provided by the committing court to the prosecutor and to the defense counsel.

(d) With the exception of proceedings alleging a violation of mandatory supervision, the criminal action remains subject to dismissal pursuant to Section 1385. If the criminal action is dismissed, the court shall transmit a copy of the order of dismissal to the community program director or a designee. In a proceeding alleging a violation of mandatory supervision, if the person is not placed under a conservatorship as described in paragraph (3) of subdivision (c), or if a conservatorship is terminated, the court shall reinstate mandatory supervision and may modify the terms and conditions of supervision to include appropriate mental health treatment or refer the matter to a local mental health court, reentry court, or other collaborative justice court available for improving the mental health of the defendant.

(e) If the criminal action against the defendant is dismissed, the defendant shall be released from commitment ordered under this section, but without prejudice to the initiation of proceedings that may be appropriate under the Lanterman-Petris-Short Act (Part 1 (commencing with Section 5000) of Division 5 of the Welfare and Institutions Code).

(f) As used in this chapter, "community program director" means the person, agency, or entity designated by the State Department of State Hospitals pursuant to Section 1605 of this code and Section 4360 of the Welfare and Institutions Code.

(g) For the purpose of this section, "secure treatment facility" does not include, except for State Department of State Hospitals facilities, state developmental centers, and

correctional treatment facilities, any facility licensed pursuant to Chapter 2 (commencing with Section 1250) of, Chapter 3 (commencing with Section 1500) of, or Chapter 3.2 (commencing with Section 1569) of, Division 2 of the Health and Safety Code, or any community board and care facility.

(h) This section does not preclude a defendant from filing a petition for habeas corpus to challenge the continuing validity of an order authorizing a treatment facility or outpatient program to involuntarily administer antipsychotic medication to a person being treated as incompetent to stand trial.



May 12, 2023

Honorable Nancy Skinner, Chair
Senate Budget and Fiscal Review Committee

Attention: Elisa Wynne, Staff Director

Honorable Phil Ting, Chair
Assembly Budget Committee

Attention: Christian Griffith, Chief Consultant

Amendment to Budget Bill Item 4440-301-0001, and Addition of Items 4440-301-0660 and 4440-496, Capital Outlay, Department of State Hospitals

Atascadero: Potable Water Booster Pump System—It is requested that Item 4440-301-0001 be increased by \$4,669,000 one-time for the construction phase of this project and Item 4440-496 be added to revert \$2,046,000 of existing authority for the construction phase, resulting in a net increase of \$2,623,000 (see Attachment 1). This request will address a flawed initial estimate, the need for supplemental well drilling, and repairs to a defective fire hydrant and pipework.

Metropolitan: Consolidation of Police Operations—It is requested that Item 4440-301-0660 be added in the amount of \$39,952,000 one-time to reflect an increase for the construction phase of this project (see Attachment 2). It is further requested that Item 4440-496 be added to revert \$27,530,000 of existing authority for the construction phase, resulting in a net increase of \$12,422,000 (see Attachment 1). This request will address a flawed initial estimate, a required new intersection into the hospital, and higher than anticipated Essential Services Act compliance costs.

The effect of my requested action is reflected on the attachment.

If you have any questions or need additional information regarding this matter, please call Matt Schuller, Principal Program Budget Analyst, at (916) 445-9694.

JOE STEPHENSHAW
Director
By:

/s/ Erika Li

ERIKA LI
Chief Deputy Director

Attachment

cc: On following page

cc: Honorable Anthony J. Portantino, Chair, Senate Appropriations Committee
Attention: Mark McKenzie, Staff Director
Honorable Roger W. Niello, Vice Chair, Senate Budget and Fiscal Review Committee
Attention: Kirk Feely, Fiscal Director
Honorable Chris R. Holden, Chair, Assembly Appropriations Committee
Attention: Jay Dickenson, Chief Consultant
Honorable Vince Fong, Vice Chair, Assembly Budget Committee
Attention: Joseph Shinstock, Fiscal Director
Honorable Dr. Joaquin Arambula, Chair, Assembly Budget Subcommittee No.1
Honorable Caroline Menjivar, Chair, Senate Budget and Fiscal Review Subcommittee No. 3
Gabriel Petek, Legislative Analyst
Christopher W. Woods, Senate President pro Tempore's Office
Jason Sisney, Assembly Speaker's Office
Paul Dress, Caucus Co-Chief of Staff, Assembly Republican Leader's Office
Katja Townsend, Capitol Director, Assembly Republican Leader's Office
Brent Houser, Chief Deputy Director of Operations, Department of State Hospitals
Robert Horsley, Chief Operating Officer, Administrative Services Division, Department of State
Hospitals
Joshua Kaiser, Chief Construction Officer, Administrative Services Division, Department of
State Hospitals

4440-496—Reversion, State Department of State Hospitals. As of June 30, 2023, the unencumbered balances of the appropriations provided in the following citations shall revert to the fund balances of the funds from which the appropriations were made.

0001—General Fund

(1) Item 4440-301-0001, Budget Act of 2022

(1) 0005035-Atascadero: Potable Water Booster Pump System

(a) Construction

0660—Public Buildings Construction Fund

(1) Item 4440-301-0660, Budget Act of 2021, as reappropriated by Item 4440-491, Budget Act of 2022

(1) 0001416-Metropolitan: Consolidation of Police Operations

(a) Construction

(2) Item 4440-301-0660, Budget Act of 2022

(1) 0001416-Metropolitan: Consolidation of Police Operations

(a) Construction

4440-301-0660—For capital outlay, State Department of State Hospitals, payable from the Public Buildings Construction Fund..... 39,952,000

Schedule:

(1) 0001416-Metropolitan: Consolidation of Police Operations..... 39,952,000

(a) Construction..... 39,952,000

Provisions:

1. The Department of State Hospitals, the Department of General Services, and the State Public Works Board are authorized to execute and deliver any and all leases, contracts, agreements, or other documents necessary or advisable to consummate the sale and issuance of bonds in accordance with the State Building Construction Act of 1955 (Part 10b (commencing with Section 15800) of Division 3 of Title 2 of the Government Code) or otherwise to effectuate the financing of the scheduled project.

May 12, 2023

Honorable Nancy Skinner, Chair
Senate Budget and Fiscal Review Committee

Attention: Elisa Wynne, Staff Director

Honorable Phil Ting, Chair
Assembly Budget Committee

Attention: Christian Griffith, Chief Consultant

Addition of Budget Bill Items 4700-492 and 4700-495, Local Assistance, Department of Community Services and Development

Department of Community Services and Development: Technical Adjustment to Shift Reversion of 2022 Balance (Issue 018)—It is requested that Item 4700-495 be added to revert the unexpended balance of the local assistance appropriation made for the California Arrearage Payment Program in the 2022 Budget Act. The Governor's Budget reverted these funds in statewide Control Section 4.06. This is a technical adjustment to provide transparency at the department/agency level by shifting the reversions from the statewide control section to the applicable departmental budget. To effectuate this change, it is requested that Item 4700-495 be added (see Attachment 1).

This reversion item also applies to an additional \$149,358,000 in unexpended funds beyond the initial \$400 million included in Control Section 4.06 for the California Arrearage Payment Program. As a result of lower revenue projections and a resulting increase in the budget problem, the May Revision proposes to revert these additional funds to assist in closing the projected shortfall and ensuring the submission of a balanced budget plan.

Reappropriation of Greenhouse Gas Reduction Funds for Low-Income Weatherization Program (Issue 017)—It is requested that Item 4700-492 be added to extend the liquidation period for encumbrances from Item 4700-101-3228, Budget Act of 2019, by an additional year to June 30, 2024. This will allow the Department to complete existing

projects in the Low-Income Weatherization Program funded by this appropriation (see Attachment 2).

The effect of the requested action is reflected on the attachment.

If you have any questions or need additional information regarding this matter, please call Kia Cha, Principal Program Budget Analyst, at (916) 445-6423.

JOE STEPHENSHAW

Director

By:

/s/ Erika Li

ERIKA LI

Chief Deputy Director

Attachment

cc: Honorable Anthony J. Portantino, Chair, Senate Appropriations Committee
Attention: Mark McKenzie, Staff Director
Honorable Roger W. Niello, Vice Chair, Senate Budget and Fiscal Review Committee
Attention: Kirk Feely, Fiscal Director
Honorable Chris R. Holden, Chair, Assembly Appropriations Committee
Attention: Jay Dickenson, Chief Consultant
Honorable Vince Fong, Vice Chair, Assembly Budget Committee
Attention: Joseph Shinstock, Fiscal Director
Honorable Dr. Joaquin Arambula, Chair, Assembly Budget Subcommittee No. 1
Honorable Caroline Menjivar, Chair, Senate Budget and Fiscal Review Subcommittee No. 3
Gabriel Petek, Legislative Analyst
Christopher W. Woods, Senate President pro Tempore's Office
Jason Sisney, Assembly Speaker's Office
Paul Dress, Caucus Co-Chief of Staff, Assembly Republican Leader's Office
Katja Townsend, Capitol Director, Assembly Republican Leader's Office
Dr. Mark Ghaly, Secretary, Health and Human Services Agency
Marko Mijic, Undersecretary, Health and Human Services Agency
Brendan McCarthy, Deputy Secretary, Health and Human Services Agency
Debra Cooper, Assistant Secretary, Health and Human Services Agency
David Scribner, Director, Department of Community Services and Development
Jason Wimbley, Chief Deputy Director, Department of Community Services and Development
Chris Vail, Chief Financial Officer, Department of Community Services and Development

4700-495—Reversion, Department of Community Services and Development.
Notwithstanding any other law, as of June 30, 2023, the unencumbered balance of the appropriation provided in the following citation shall revert to the balance in the fund from which the appropriation was made:

3398—California Emergency Relief Fund

(1) Item 4700-101-3398, Budget Act of 2022

4700-492—Reappropriation, Department of Community Services and Development.
Notwithstanding any other law, the period to liquidate encumbrances of the following
citations is extended to June 30, 2024:

3228—Greenhouse Gas Reduction Fund

(1) Item 4700-101-3228, Budget Act of 2019



May 12, 2023

Honorable Nancy Skinner, Chair
Senate Budget and Fiscal Review Committee

Attention: Elisa Wynne, Staff Director

Honorable Phil Ting, Chair
Assembly Budget Committee

Attention: Christian Griffith, Chief Consultant

Amendment to Budget Bill Item 5160-001-0890, Support, Department of Rehabilitation

Additional Federal Fund Authority for Vocational Rehabilitation Program (Issue 025)—It is requested that Item 5160-001-0890 be increased by \$60 million in fiscal years 2023-24, 2024-25, and 2025-26 for the Vocational Rehabilitation Program. The Department has received additional federal funds from a reallocation from the 2021-22 national vocational rehabilitation grant and has available grant funds from its 2021-22 base grant which has not been fully expended. In addition, the Department anticipates receiving another reallocation from the 2022-23 national vocational rehabilitation grant. This request enables the Department to provide additional vocational rehabilitation services to individuals with disabilities to achieve competitive integrated employment, independent living, and equality.

The effect of the requested action is reflected on the attachment.

If you have any questions or need additional information regarding this matter, please call Kia Cha, Principal Program Budget Analyst, at (916) 445-6423.

JOE STEPHENSHAW

Director

By:

/s/ Erika Li

ERIKA LI

Chief Deputy Director

Attachment

cc: On following page

cc: Honorable Anthony J. Portantino, Chair, Senate Appropriations Committee
Attention: Mark McKenzie, Staff Director
Honorable Roger W. Niello, Vice Chair, Senate Budget and Fiscal Review Committee
Attention: Kirk Feely, Fiscal Director
Honorable Chris R. Holden, Chair, Assembly Appropriations Committee
Attention: Jay Dickenson, Chief Consultant
Honorable Vince Fong, Vice Chair, Assembly Budget Committee
Attention: Joseph Shinstock, Fiscal Director
Honorable Dr. Joaquin Arambula, Chair, Assembly Budget Subcommittee No. 1
Honorable Caroline Menjivar, Chair, Senate Budget and Fiscal Review Subcommittee No. 3
Gabriel Petek, Legislative Analyst
Christopher W. Woods, Senate President pro Tempore's Office
Jason Sisney, Assembly Speaker's Office
Paul Dress, Caucus Co-Chief of Staff, Assembly Republican Leader's Office
Katja Townsend, Capitol Director, Assembly Republican Leader's Office
Dr. Mark Ghaly, Secretary, Health and Human Services Agency
Marko Mijic, Undersecretary, Health and Human Services Agency
Brendan McCarthy, Deputy Secretary, Health and Human Services Agency
Debra Cooper, Assistant Secretary, Health and Human Services Agency
Joe Xavier, Director, Department of Rehabilitation
Victor Duron, Chief Deputy Director, Department of Rehabilitation
David Kwan, Assistant Deputy Director, Department of Rehabilitation
Rowena Okada, Budget Analyst, Department of Rehabilitation

May 13, 2023

Honorable Nancy Skinner, Chair
Senate Budget and Fiscal Review Committee

Attention: Elisa Wynne, Staff Director

Honorable Phil Ting, Chair
Assembly Budget Committee

Attention: Christian Griffith, Chief Consultant

**Amendment to Budget Bill Items 5175-101-0890 and 5175-101-8004, Local Assistance,
Department of Child Support Services**

Local Assistance May Revise (Issue 019)—It is requested that Item 5175-101-0890 be decreased by \$64,382,000 ongoing to update federal fund local assistance expenditures based on additional child support collections data becoming available. It is estimated there will be a corresponding increase in collections received for the federal government's share of child support recoupment.

It is also requested that Item 5175-101-8004 be increased by \$64,382,000 ongoing to reflect an estimated increase in collections received for the federal government's share of child support recoupment based on updated child support collections information.

The effect of the requested action is reflected on the attachment.

If you have any questions or need additional information regarding this matter, please call Kia Cha, Principal Program Budget Analyst, at (916) 445-6423.

JOE STEPHENSHAW
Director
By:

/s/ Erika Li

ERIKA LI
Chief Deputy Director

Attachment

cc: On following page

cc: Honorable Anthony J. Portantino, Chair, Senate Appropriations Committee
Attention: Mark McKenzie, Staff Director
Honorable Roger W. Niello, Vice Chair, Senate Budget and Fiscal Review Committee
Attention: Kirk Feely, Fiscal Director
Honorable Chris R. Holden, Chair, Assembly Appropriations Committee
Attention: Jay Dickenson, Chief Consultant
Honorable Vince Fong, Vice Chair, Assembly Budget Committee
Attention: Joseph Shinstock, Fiscal Director
Honorable Dr. Joaquin Arambula, Chair, Assembly Budget Subcommittee No. 1
Honorable Caroline Menjivar, Chair, Senate Budget and Fiscal Review Subcommittee No. 3
Gabriel Petek, Legislative Analyst
Christopher W. Woods, Senate President pro Tempore's Office
Jason Sisney, Assembly Speaker's Office
Paul Dress, Caucus Co-Chief of Staff, Assembly Republican Leader's Office
Katja Townsend, Capitol Director, Assembly Republican Leader's Office
Dr. Mark Ghaly, Secretary, Health and Human Services Agency
Marko Mijic, Undersecretary, Health and Human Services Agency
Brendan McCarthy, Deputy Secretary, Health and Human Services Agency
Nick Picinich, Assistant Secretary, Health and Human Services Agency
David Kilgore, Director, Department of Child Support Services
Kristen Donadee, Chief Deputy Director, Department of Child Support Services
Nan Chen, Chief Financial Officer, Department of Child Support Services

May 12, 2023

Honorable Nancy Skinner, Chair
Senate Budget and Fiscal Review Committee

Attention: Elisa Wynne, Staff Director

Honorable Phil Ting, Chair
Assembly Budget Committee

Attention: Christian Griffith, Chief Consultant

Amendment to, Elimination of, and Addition of Various Budget Bill Items and Reimbursements, Statutory Changes, Support and Local Assistance, Department of Social Services

Support

Preschool Development Grant Reimbursement Authority (Issue 210)—It is requested that Item 5180-001-0001 be amended by increasing reimbursements by \$892,000 one-time. This request allows the Department of Social Services to assist the California Health and Human Services Agency with the administration of the federal Preschool Development Grant, which is described in Issue 061 of the California Health and Human Services Agency Letter.

Provisional Language Only: Adoption Facilitator Program Fund—It is requested that Item 5180-001-3422 be amended to revise the fund title from “Adoption Facilitator Program Civil Penalty Fund” to “Adoption Facilitator Program Fund” and to correctly cite the statutory reference under Provision 1 (see Attachment 1).

Local Assistance

May Revision Caseload Adjustments (Issues 164, 165, 166, 167, 172, 214, 217)—The May Revision proposes a net increase of \$1,931,478,000 ongoing (\$528,783,000 General Fund and \$1,472,243,000 reimbursements), partially offset by a net decrease of \$69,548,000 (\$69,458,000 federal funds and \$90,000 special funds), primarily resulting from updated caseload estimates since the Governor’s Budget. Realigned programs are displayed for the purpose of federal fund and other technical adjustments. Caseload and workload changes since the Governor’s Budget are displayed in the following table:

Program	Item	Change from Governor's Budget
California Work Opportunity and Responsibility to Kids (CalWORKs)	5180-101-0001	(426,556,000)
	5180-101-0890	(4,155,000)
Child Care	5180-101-0001	326,123,000
	5180-101-0890	(393,599,000)
	5180-104-0001	1,062,000
	Reimbursements	(46,006,000)
Kinship Guardianship Assistance Payment	5180-101-0001	8,903,000
Supplemental Security Income/State Supplementary Payment (SSI/SSP)	5180-111-0001	20,398,000
In-Home Supportive Services (IHSS)	5180-111-0001	575,471,000
	Reimbursements	1,232,756,000
Other Assistance Payments	5180-101-0001	52,566,000
	5180-101-0122	(290,000)
	5180-101-0890	109,806,000
	5180-101-8075	200,000
	Reimbursements	35,433,000
County Administration and Automation Projects	5180-141-0001	(23,002,000)
	5180-141-0890	164,371,000
	Reimbursements	89,764,000
Child Welfare Services	5180-151-0001	9,882,000
	5180-151-0890	1,886,000
Community Care Licensing	5180-151-0890	152,000
Special Programs	5180-151-0001	6,000
Realigned Programs		
Adoption	5180-101-0001	(10,323,000)
	5180-101-0890	90,798,000
Foster Care	5180-101-0001	(1,959,000)
	5180-101-0890	(11,325,000)
	5180-141-0890	(33,000)
Child Welfare Services	5180-151-0001	6,094,000
	5180-151-0890	(25,473,000)
	Reimbursements	4,707,000
Adult Protective Services	Reimbursements	65,825,000

CalWORKs Family Reunification Automation and County Administration Funding

(Issue 206)—It is requested that Item 5180-101-0001 be increased by \$1,877,000 ongoing for county administration needed to provide CalWORKs payments to families who have had children removed from the home and are in court-ordered family reunification. It is also requested that Item 5180-141-0001 be increased by \$1,937,000 one-time for automation costs necessary to implement this program.

CalWORKs AB 85 Maximum Aid Payment Increase (Issue 224)—It is requested that Item 5180-101-0001 be increased by \$111,207,000 ongoing to reflect a 3.6-percent increase to the CalWORKs Maximum Aid Payment levels. The increased grant costs are funded entirely by 1991 Realignment revenue in the Child Poverty and Family Supplemental Support Subaccount.

Projected Current Year Savings for General Child Care Program (Issue 228)—The May Revision reflects anticipated one-time 2022-23 savings of \$587,859,000 in Item 5180-101-0001 of the 2022 Budget Act, but preserves expenditure authority should expenditures increase. These projected savings are based on estimated General Child Care expenditures that will go into contract by the end of fiscal year 2022-23.

Federal Reimbursement of Food Benefit Theft (Issue 222)—It is requested that Item 5180-101-0890 be increased by \$30,954,000 one-time and Item 5180-141-0890 be increased by \$11,946,000 one-time to reflect new federal financial participation for food benefit theft and necessary automation changes. The federal Consolidated Appropriations Act of 2023 mandates federal reimbursement of stolen federal Supplemental Nutrition Assistance Program benefits.

Work Number Contract (Issue 203)—It is requested that Item 5180-101-0890 be increased by \$3.3 million ongoing, Item 5180-141-0001 be increased by \$3,849,000 ongoing, and Item 5180-141-0890 be increased by \$3,849,000 ongoing to provide funding for counties for updated contract costs associated with the third-party employment phone verification services used to assist county welfare departments with eligibility determinations.

IHSS Provider Eligibility for Minor Recipients (Issue 212)—It is requested that Item 5180-111-0001 be increased by \$27,892,000 ongoing, reimbursements be increased by \$32,765,000 ongoing, and accompanying statutory changes be added to improve access to services for IHSS minor recipients.

California Statewide Automated Welfare System (CalSAWS) Bi-Directional Interface with Child Welfare Services-California Automated Response and Engagement System (CWS-CARES) (Issue 201)

—It is requested that Item 5180-141-0001 be increased by \$25 million one-time, to be available over two years beginning in 2023-24, and accompanying provisional language be added to Item 5180-141-0001 (see Attachment 2) for the development of a bi-directional interface between the CalSAWS and CWS-CARES systems.

County CalFresh Administration Rebase (Issue 219)—It is requested that Item 5180-141-0001 be increased by \$159,539,000 one-time and Item 5180-141-0890 be increased by \$192,496,000 one-time to reflect a revised budgeting methodology for county CalFresh administration activities, pursuant to Chapter 537, Statutes of 2022.

California Food Assistance Program (CFAP) Expansion: Automation and Outreach (Issue 218)—It is requested that Item 5180-141-0001 be increased by \$40 million one-time to support a revised automation and program outreach timeline for the expansion of the CFAP program to individuals 55 years of age or older regardless of immigration status.

BenefitsCal Enhancements (Issue 209)—It is requested that Item 5180-141-0001 be increased by \$1.5 million in 2023-24 and that Item 5180-141-0890 be increased by \$1.5 million in 2023-24 and \$1,750,000 in 2024-25 to migrate features of GetCalFresh.org to BenefitsCal.

Child Welfare Services-California Automated Response and Engagement System (CWS-CARES) Project (Issues 213 and 216)—It is requested that Item 5180-141-0001 be increased by \$83,380,000 one-time and reimbursements be increased by \$1,182,000 one-time, and Item 5180-141-0890 be increased by \$79,160,000 one-time, to support continued project development costs. It is also requested that Item 5180-001-0001 be increased by 7.3 positions and Item 5180-001-0890 be increased by 2.7 positions. Additionally, it is requested that provisional language be amended to allow Finance to augment the project's expenditure authority by \$36,557,000 (\$18,278,000 General Fund), should project activities accelerate (see Attachment 2). See Issue 66 in the California Health and Human Services Agency Finance Letter.

CalFresh Oral Notice of Work Rules (Issue 200)—It is requested that Item 5180-141-0001 be increased by \$3,396,000 ongoing and that Item 5180-141-0890 be increased by \$4,852,000 ongoing, for county administration workload to comply with new federal CalFresh Oral Notice of Work Rules requirements.

Summer Electronic Benefit Transfer (EBT) Program (Issue 204)—It is requested that Item 5180-141-0001 be increased by \$23.5 million one-time and Item 5180-141-0890 be increased by \$23.5 million one-time for outreach and automation changes necessary to provide federally funded summer EBT benefits to school children qualifying for free or reduced lunch beginning Summer 2024.

Behavioral Health Community-Based Organized Networks of Equitable Care and Treatment (CONNECT) (Issue 208)—It is requested that Item 5180-151-0001 be decreased by \$7,897,000 and Item 5180-151-0890 be decreased by \$2,945,000 to reflect the shift in costs associated with full implementation of the Child and Family Teams component of the Behavioral Health CONNECT waiver, formerly known as Behavioral Health Community-Based Continuum Demonstration, from January 2024 to January 2025.

Rapid Response Program Augmentation (Issue 227)—It is requested that Item 5180-151-0001 be increased by \$150 million one-time and provisional language be added to support the Rapid Response program (see Attachment 3).

Services for Survivors and Victims of Hate Crimes (Issue 231)—It is requested that Item 5180-151-0001 be increased by \$10 million and provisional language be amended to support community-based organizations to provide services for victims of hate incidents (see Attachment 3).

CalWORKs County Staff Training Racial Equity and Implicit Bias Reappropriation (Item 178)—It is requested that Item 5180-494 be added to reappropriate \$10 million from Item 5180-101-0001 of the 2022 Budget Act to continue the development of county staff training on racial equity and implicit bias (see Attachment 4).

Rapid Response Reappropriation (Issue 189)—It is requested that Item 5180-494 be added to reappropriate \$76,746,000 from Item 5180-151-0001 of the 2021 Budget Act to continue the Rapid Response efforts (see Attachment 4).

Afghan Integration and Resettlement Support Project Reappropriation (Issue 194)—It is requested that Item 5180-494 be added to reappropriate \$7.6 million from Item 5180-151-0001 of the 2021 Budget Act to continue the Afghan Integration and Resettlement Support Project (see Attachment 4).

Enhanced Services Programs for Asylees Reappropriation (Item 195)—It is requested that Item 5180-494 be added to reappropriate \$6 million from Item 5180-151-0001 of the 2021 Budget Act to continue the Enhanced Services Programs for Asylees program (see Attachment 4).

Child Welfare Training Reappropriation (Issue 180)—It is requested that Item 5180-494 be added to reappropriate \$7 million from Item 5180-151-0001 of the 2022 Budget Act to extend the availability of resources for the Child Welfare Training Program (see Attachment 4).

Tribal Dependency Representation Reappropriation (Issue 185)—It is requested that Item 5180-494 be added to reappropriate \$4,145,000 from Item 5180-151-0001 of the 2022 Budget Act to extend the availability of resources for the Tribal Dependency Representation Program (see Attachment 4).

Tribally Approved Homes Compensation Reappropriation (Issue 184)—It is requested that Item 5180-494 be added to reappropriate \$4,777,000 from Item 5180-151-0001 of the 2022 Budget Act to extend the availability of resources for the Tribal Approved Homes Compensation Program (see Attachment 4).

Tribal Technical Assistance Reappropriation (Issue 182)—It is requested that Item 5180-494 be added to reappropriate \$100,000 from Item 5180-151-0001 of the 2022 Budget Act to extend the availability of resources for Tribal Technical Assistance (see Attachment 4).

California Newcomer Education and Well-Being Reappropriation (Issue 192)—It is requested that Item 5180-494 be added to reappropriate \$901,000 from Item 5180-161-0001 of the 2021 Budget Act to continue the California Newcomer Education and Well-Being program (see Attachment 4).

Single Allocation Partial Reversion (Issue 223)—It is requested that Item 5180-495 be added to revert \$280 million from Item 5180-101-0001, CalWORKs program, appropriated in Chapter 240 of the Statutes of 2021 (SB 170) for the CalWORKs Single Allocation (see Attachment 5).

Special Fund Abolishment—It is requested that Fund 8065 (Safely Surrendered Baby Fund) and Fund 8106 (Special Olympics Fund) be abolished due to voluntary tax contributions coming in below the required minimum contribution as determined by the Franchise Tax Board. It is also requested that Item 5180-001-8065 be eliminated to conform to this action.

The effect of my requested action is reflected on the attachment.

If you have any questions or need additional information regarding this matter, please call Gabrielle Santoro, Hinnaneh Qazi, or Justin Freitas, Principal Program Budget Analysts, at (916) 445-6423.

JOE STEPHENSHAW
Director
By:

/s/ Erika Li

ERIKA LI
Chief Deputy Director

Attachment

cc: On following page

cc: Honorable Anthony J. Portantino, Chair, Senate Appropriations Committee
Attention: Mark McKenzie, Staff Director
Honorable Roger W. Niello, Vice Chair, Senate Budget and Fiscal Review Committee
Attention: Kirk Feely, Fiscal Director
Honorable Chris R. Holden, Chair, Assembly Appropriations Committee
Attention: Jay Dickenson, Chief Consultant
Honorable Vince Fong, Vice Chair, Assembly Budget Committee
Attention: Joseph Shinstock, Fiscal Director
Honorable Dr. Joaquin Arambula, Chair, Assembly Budget Subcommittee No. 1
Honorable Caroline Menjivar, Chair, Senate Budget and Fiscal Review Subcommittee No. 3
Gabriel Petek, Legislative Analyst (3)
Christopher W. Woods, Senate President pro Tempore's Office
Jason Sisney, Assembly Speaker's Office
Paul Dress, Caucus Co-Chief of Staff, Assembly Republican Leader's Office
Katja Townsend, Capitol Director, Assembly Republican Leader's Office
Marko Mijic, Undersecretary, Health and Human Services Agency
Brendan McCarthy, Deputy Secretary, Health and Human Services Agency
Nick Picinich, Assistant Secretary, Health and Human Services Agency
Kim Johnson, Director, Department of Social Services
Claire Ramsey, Chief Deputy Director, Department of Social Services
Jennifer Troia, Chief Deputy Director, Department of Social Services
Marcela Ruiz, Chief Deputy Director, Department of Social Services
Salena Chow, Chief Operating Officer, Department of Social Services
Yang Lee, Chief Financial Officer, Department of Social Services
Nathan Hart, Budget Bureau Chief, Department of Social Services

Amend Item 5180-001-3422 as follows:

“5180-001-3422—For support of State Department of Social Services, payable from the Adoption Facilitator Program ~~Civil Penalty~~ Fund 0

Schedule:

(1) 4275-Social Services and Licensing 0

Provisions:

1. The Department of Finance may increase the expenditure authority in this item based on the amount of revenue collected pursuant to Chapter 1.5 (commencing with Section 8638.1) of Part 2 of Division 13 of the Family Code.”

Amend Provision 10 of Item 5180-141-0001 as follows:

"10. (a) Of the funds appropriated in Schedule (1), ~~\$83,380,000~~ ~~\$55,806,000~~ is for the support of activities related to the Child Welfare Services-California Automated Response and Engagement System (CWS-CARES) project. Expenditure of these funds is contingent upon approval of project documents by the Department of Finance and the Department of Technology. This amount may be augmented up to a maximum of ~~\$18,278,000~~ ~~\$17,381,000~~ for project activities related to the implementation and data infrastructure contracts upon approval by the Department of Finance, in consultation with the Department of Technology. In providing approval, the Department of Finance shall consider verified satisfactory progress toward milestones associated with the CWS-CARES Product Roadmap, product adoption, and the roadmap change management process. Such an augmentation shall only be used to support an acceleration of planned project activities and shall not be used to increase total project costs. Any such augmentation shall be authorized no less than 30 calendar days following written notification to the Chairperson of the Joint Legislative Budget Committee, or a lesser period if requested by the Department of Finance and approved by the Chairperson of the Joint Legislative Budget Committee, or the chairperson's designee.

(b) The Department of Finance may authorize the transfer of funds appropriated for the CWS-CARES project in Schedule (1) to Item 5180-001-0001, for project-related activities, including, but not limited to, necessary personal services expenditures, interagency agreements, and contracts.

(c) The State Department of Social Services, in coordination with other state entities and counties involved in the CWS-CARES project efforts, shall (1) provide stakeholders, counties, and the Legislature with monthly project status reports, including newly executed contracts, their purpose, and cost and (2) convene a regularly scheduled quarterly forum to provide project updates to stakeholders and legislative staff. The forums shall include updates on the progress of project development and implementation, expenditures incurred to date, significant issues and risks overcome in the prior quarter and presently being addressed, and upcoming project milestones and significant events.

(d) Of the amount appropriated in this item, \$100,000 is available to fund reimbursements to Indian tribes, as defined in subdivision (a) of Section 224.1 of the Welfare and Institutions Code, or the tribe's designee, for costs associated with participating with the State Department of Social Services to guide the development of an automated system used for Child Welfare Services.

Notwithstanding any other law, the amount and manner of reimbursements shall be determined by the State Department of Social Services in written directives."

Add provision 12 to Item 5180-141-0001 as follows:

12. Of the funds appropriated in Schedule (1), \$25,000,000 shall be available to develop an Interface with the Child Welfare Services-California Automated Response and Engagement System. These funds shall be available for encumbrance or expenditure until June 30, 2025.

Amend provision 14 Item 5180-151-00001:

- “14. (a) Of the funds appropriated in Schedule (2), ~~\$40,000,000~~ \$50,000,000 shall be available to the State Department of Social Services for grants to nonprofits or community-based organizations to provide services to victims of hate incidents, including, but not limited to, legal services, health care, mental health, victim's compensation, or counseling. Notwithstanding any other law, the department may enter into agreements with the State Department of Fair Employment and Housing, the California Commission on Asian and Pacific Islander American Affairs, or any other state agency for purposes of implementing this program.
- (b) Notwithstanding any other law, the department's allocation of these funds shall be exempt from the requirements of Article 4 (commencing with Section 19130) of Chapter 5 of Part 2 of Division 5 of Title 2 of the Government Code, and from the Public Contract Code and the State Contracting Manual, and shall not be subject to the review or approval of the Department of General Services.
- (c) Notwithstanding the rulemaking provisions of the Administrative Procedure Act (Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code), the department may implement and administer this provision without adopting regulations.
- (d) These funds shall be available for encumbrance or expenditure until June 30, 2026.”

Add provision 19 to Item 5180-151-0001 as follows:

19. (a) Of the amount appropriated in Schedule 2, \$150,000,000 is for the Rapid Response program as described in Chapter 5.7 (commencing with Section 13400) of Part 3 of Division 9 of the Welfare and Institutions Code.
- (b) In accordance with Section 1621(d) of Title 8 of the United States Code, this provision provides for services for undocumented persons.
- (c) Upon approval of the Department of Finance, funds appropriated in Schedule (2) for the purposes described in this provision may be transferred to Item 5180-001-0001 to implement and administer the Rapid Response Program.

5180-494—Reappropriation, State Department of Social Services. The amount specified in the following citations are reappropriated for the purposes provided for in those appropriations and shall be available for encumbrance or expenditure until June 30, 2024:

0001—General Fund

- (1) Up to \$901,000 of the amount appropriated in Schedule (1) of Item 5180-161-0001, Budget Act of 2020 (Chs. 6 and 7, Stats. 2020) for the California Newcomer Education and Well-Being program.
- (2) Up to \$76,746,000 of the amount appropriated in Provision 23 of Item 5180-151-0001, Budget Act of 2021 (Chs. 21 and 240, Stats. 2021 and Ch. 44, Stats. 2022) for Rapid Response.
- (3) Up to \$7,600,000 of Section 19.57 (f)(5)(g), Budget Act of 2021 (Chs. 21 and 240, Stats. of 2021 and Ch. 44, Stats.2022), for the Refugees from Afghanistan/Afghan Integration and Resettlement Services.
- (4) Up to \$6,000,000 of the amount appropriated in Schedule (2) of Item 5180-151-0001, Budget Act of 2021 (Chs. 21 and 240, Stats. 2021 and Ch. 44, Stats. 2022) for the Enhanced Services Programs for Asylees (ESPA).
- (5) Up to \$7,000,000 of the amount appropriated in Provision 17 of Item 5180-151-0001, Budget Act of 2022 (Chs. 43 and 249, Stats. 2022) for the Child Welfare Training Program.
- (6) Up to \$10,000,000 of the amount appropriated in Provision 19(a) of Item 5180-101-0001, Budget Act of 2022 (Chs. 43 and 249, Stats. 2022), to train CalWORKs county staff on Racial Equity and Implicit Bias.
- (7) Up to \$4,145,000 of the amount appropriated in Provision 34 of Item 5180-151-0001, Budget Act of 2022 (Chs. 43 and 249, Stats. 2022) to provide funding to support legal counsel to represent an Indian tribe in California Indian child custody proceedings, as defined by subdivision (d) of Welfare and Institutions Code section 224.1, that is initiated or ongoing in the juvenile court.

- (8) Up to \$4,777,000 of the amount appropriated in Provision 35 of Item 5180-151-0001, Budget Act of 2022 (Chs. 43 and 249, Stats. 2022) to provide financial assistance with recruiting and approving homes for the purpose of foster or adoptive placement of an Indian child.

- (9) Up to \$100,000 of the amount appropriated in Schedule (1), Provision 36, of Item 5180-151-0001, Budget Act of 2022 (Chs. 43 and 249, Stats. 2022) for costs associated with providing technical assistance to county interagency leadership teams to develop tribal consultation processes, as required by Section 16521.6 of the Welfare and Institutions Code, as amended by Section 50 of Assembly Bill 153 (Chapter 86, Statutes of 2021).

5180-495—Reversion, State Department of Social Services. As of June 30, 2023, the balances specific below, of the appropriations provided in the following citations shall revert to the balances in the funds from which the appropriations were made.

0001—General Fund

(1) Item 5180-101-0001, Budget Act of 2021 (Chs. 21 and 240, Stats. 2021). \$280,000,000 appropriated in Program 42700100—CalWORKs for the CalWORKs Single Allocation.