Introduced by Senator Eggman (Coauthors: Senators Allen and Rubio)

(Coauthor: Assembly Member Gallagher)

February 8, 2023

An act to add Article 7.1 (commencing with Section 1323.2) to Chapter 2 of Division 2 of the Health and Safety Code, relating to health and care facilities, and making an appropriation therefor.

LEGISLATIVE COUNSEL'S DIGEST

SB 363, as amended, Eggman. Facilities for inpatient and residential mental health and substance use disorder: database.

Existing law generally requires the State Department of Public Health to license, inspect, and regulate health facilities, defined to include, among other types of health facilities, an acute psychiatric hospital. Existing law generally requires the State Department of Social Services to license, inspect, and regulate various types of care facilities, including, among others, a community crisis home. Existing law requires the State Department of Health Care Services to license and regulate facilities that provide residential nonmedical services to adults who are recovering from problems related to alcohol, drug, or alcohol and drug misuse or abuse, and who need alcohol, drug, or alcohol and drug recovery treatment or detoxification services.

This bill would require, by January 1, 2025, 2026, the State Department of Health Care Services, in consultation with the State Department of Public Health and the State Department of Social Services, and by conferring with specified stakeholders, to develop a real-time, internet-based database to collect, aggregate, and display $SB 363 \qquad \qquad -2-$

information about beds in specified types of facilities, such as chemical dependency recovery hospitals, acute psychiatric hospitals, and mental health rehabilitation centers, among others, to identify the availability of inpatient and residential mental health or substance use disorder treatment. The bill would require the database to include a minimum of specific information, including the contact information for a facility's designated employee, the types of diagnoses or treatments for which the bed is appropriate, and the target populations served at the facility, and have the capacity to, among other things, enable searches to identify beds that are appropriate for individuals in need of inpatient or residential mental health or substance use disorder treatment.

This bill would authorize the department to impose a plan of correction or assess penalties against a facility that fails to submit data accurately, timely, or as otherwise required and would establish a process for facilities to appeal these penalties. The bill would create the Available Care for Inpatient and Residential Mental Health or Substance Use Disorder Treatment Database Maintenance and Oversight Fund for the receipt of any penalties. Because the bill would continuously appropriate moneys in the fund for administrative costs of implementing the database, it would create an appropriation.

Vote: $\frac{2}{3}$. Appropriation: yes. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

SECTION 1. Article 7.1 (commencing with Section 1323.2) is added to Chapter 2 of Division 2 of the Health and Safety Code, to read:

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Article 7.1. Availability of Inpatient and Residential Mental Health and Substance Use Disorder Treatment Beds

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1323.2. (a) (1) The State Department of Health Care Services, in consultation with the State Department of Public Health and the State Department of Social Services, shall develop a real-time, internet-based database to collect, aggregate, and display information about beds in all of the following facilities to identify the availability of inpatient and residential mental health or substance use disorder treatment:

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1 (A) General acute care hospitals designated as part of 2 supplemental psychiatric unit or chemical dependency service.

- (B) Chemical dependency recovery hospitals.
- 4 (C) Acute psychiatric hospitals and licensed long-term care facilities with a mental health program approval or certification from the State Department of Health Care Services.
 - (D) Psychiatric health facilities.
- 8 (E) Mental health rehabilitation centers.
 - (F) Inpatient psychiatric facilities.
- 10 (G) Crisis stabilization units.

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- (H) Licensed community care facilities with a mental health program approval or certification from the State Department of Health Care Services.
- (I) Licensed residential alcoholism or drug abuse recovery or treatment facilities.
- (2) The facilities specified in paragraph (1) shall submit accurate and timely data to the database in a form and manner prescribed by the State Department of Health Care Services in consultation with the State Department of Public Health and the State Department of Social Services.
 - (3) The database shall be operational by January 1, 2025. 2026.
- (b) (1) Except as described in paragraph (3), the database created pursuant to subdivision (a) shall include, at a minimum, all of the following:
- 25 (A) The contact information for the facility's designated 26 employee.
 - (B) The facility's license type.
 - (C) Whether the facility provides substance use disorder treatment, mental health treatment, medical treatment, or any combination of those treatments.
 - (D) Whether the bed is secure for the treatment of a person who, as a result of a mental health disorder, is a danger to others or to themselves or gravely disabled, pursuant to Part 1 (commencing with Section 5000) of Division 5 of the Welfare and Institutions Code.
- 36 (E) The types of diagnoses or treatments for which the bed is appropriate.
 - (F) The age ranges for which the bed is appropriate.
- 39 (G) Whether the bed is available.

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(H) Whether the bed is available for children subject to a petition, and those adjudicated a dependent, pursuant to Section 300 of the Welfare and Institutions Code, nonminor dependents as defined in subdivision (v) of Section 11400 of the Welfare and Institutions Code, or minors subject to a petition, and those adjudicated a ward, pursuant to Section 601 or 602 of the Welfare and Institutions Code.

- (I) For perinatal residential alcoholism or drug abuse recovery or treatment facilities, whether the bed is available for a minor child of individuals receiving treatment at the facility.
 - (J) The target populations served at the facility.
- (K) The levels of care provided at the facility, including, but not limited to, medically or clinically managed detoxification.
- (L) Specific services available, by bed, to assist with determining appropriate placement for treatment, including, but not limited to, medications for addiction treatment.
 - (M) Type of payment accepted at the facility.
- (2) The database created pursuant to subdivision (a) shall have the following capabilities, at minimum:
 - (A) To collect data.
- (B) To enable searches to identify beds that are appropriate for individuals in need of inpatient or residential mental health or substance use disorder treatment.
- (3) The database shall not include any information relating to state hospitals under the jurisdiction of the State Department of State Hospitals.
- (4) The database and the information contained therein shall be maintained in a manner that complies with all applicable state and federal confidentiality laws. The database and the information contained therein shall not be publicly available, and the State Department of Health Care Services may limit access to entities authorized by the department in a manner that is consistent with state and federal confidentiality laws.
- (c) (1) The State Department of Health Care Services shall have the authority to impose a plan of correction or assess civil money penalties pursuant to paragraph (2), or both, against a facility specified in subdivision (a) that fails to submit data accurately, timely, or as required pursuant to this section.
- (2) The department may determine a reasonable length of time for completion of a plan of correction. The department may issue

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a notice of imposition of civil money penalties if the facility fails to complete a plan of correction by the time specified. The department may assess penalties against a facility in the amount of one hundred dollars (\$100) per day from the date of notice of imposition of penalties.

- (3) A facility may submit a written appeal to the department within 15 working days of the issuance of the notice specified in paragraph (2). The facility shall include any supporting documentation and explain any mitigating circumstances. The department shall make a determination on the appeal within 30 calendar days of receipt of a complete appeal.
- (4) A facility may request a formal hearing within 30 calendar days of the department's determination on the appeal pursuant to paragraph (3). Except for licensed residential alcoholism or drug abuse recovery or treatment facilities, hearings to review the imposition of civil money penalties shall be conducted pursuant to the requirements set forth in Section 100171. Civil money penalties against a facility shall continue to accrue until the effective date of the final decision of the department.
- (5) Notwithstanding Section 100171, hearings to review the imposition of civil money penalties against licensed residential alcoholism or drug abuse recovery or treatment facilities shall be conducted pursuant to the requirements set forth in Section 11834.37.
- (6) The State Department of Health Care Services may obtain a court order to recover unpaid civil money penalties against a facility identified in subdivision (a).
- (d) The Available Care for Inpatient and Residential Mental Health or Substance Use Disorder Treatment Database Maintenance and Oversight Fund is hereby created in the State Treasury, to be administered and overseen by the State Department of Health Care Services. Civil money penalties assessed and collected pursuant to this section shall be deposited into this fund. Notwithstanding Section 13340 of the Government Code, the funds deposited in this fund shall be continuously appropriated, without regard to fiscal year, to the State Department of Health Care Services for purposes of funding its administrative costs associated with implementing this section.
- (e) The department shall confer with stakeholders to inform the development of the database. Stakeholders represented in this

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process shall include, but are not limited to, the State Department of Public Health, the State Department of Social Services, the 3 County Behavioral Health Directors Association of California, the 4 California Hospital Association, organizations representing 5 providers, consumers, and family members, organizations that have experience providing inpatient psychiatric level of care or 6 7 services in a general acute care hospital, chemical dependency 8 recovery hospital or an acute psychiatric hospital, licensed long-term care facilities with a mental health program approval or 10 certification from the State Department of Health Care Services, 11 organizations that have experience providing psychiatric crisis 12 stabilization, organizations that have experience providing services 13 in community care facilities with a State Department of Health 14 Care Services mental health program approval or certification, 15 psychiatric health facilities and mental health rehabilitation centers, 16 and organizations that have experience providing residential 17 alcoholism or drug abuse recovery or treatment services. The 18 department and stakeholders shall consider strategies for facility 19 use of the database. 20

- (f) (1) The State Department of Health Care Services and the State Department of Social Services may enter into exclusive or nonexclusive contracts, or amend existing contracts, on a bid or negotiated basis for purposes of administering or implementing the requirements of this section.
- (2) Contracts entered into or amended pursuant to this section 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, and 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.
- (g) 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 section, in whole or in part, by means of information notices, provider bulletins, or other similar instructions, without further regulatory action.