SUMMARY

SB 26 aims to enhance California’s CARE Court program by building upon two previously introduced bills: SB 1338 and SB 35. Specifically, this bill addresses the public sector’s shortage of behavioral healthcare workers by implementing a CARE scholarship to encourage graduate students to pursue behavioral healthcare careers in county behavioral health agencies.

BACKGROUND

SB 1338, colloquially known as CARE Court or the CARE Act program, demonstrated a significant shift in the state’s approach to behavioral health. The bill aimed to provide and assist with comprehensive care for individuals suffering from behavioral health issues that often occurred from repeated incarceration and exposure to homelessness. This groundbreaking framework calls for state and local agencies to adopt proactive measures and shift to a more organized and refined care system.

After the implementation of SB 1338, SB 35 was passed the following year to continue to refine the CARE Court proposal, thereby avoiding implementation obstacles and enhancing resource accessibility for individuals suffering from the effects of behavioral health issues. The bill incorporated significant changes, including eliminating a filing fee, revising practitioner rights, and streamlining court proceedings. These measures contributed to Governor Newsom’s initiative to transform behavioral healthcare and innovate inclusive community housing options.

However, the shortage of behavioral healthcare workers remains a critical obstacle to CARE Court’s success. In one survey, only 27% of Californians said their community has enough behavioral health professionals to serve the needs of residents. Among adults in the state with any psychiatric illness, 63% said they received no behavioral health services in the past year. There is an egregious shortage due to an underinvestment in behavioral health care by public insurance programs and private insurers, a lack of coverage, low reimbursement rates, structural barriers, and disincentives to entering the behavioral health workforce.

California cannot effectively implement the CARE Court program without increasing the number of behavioral health practitioners willing to work for this program. Due to the costs of higher education in behavioral and behavioral health, graduates are incentivized to work for private industry to subsidize their education costs. As a result, very few behavioral health practitioners work for the public at the state and county level, making it increasingly difficult for the state to provide adequate behavioral and behavioral health care to its vulnerable citizens.

SOLUTION

SB 26 addresses the behavioral healthcare workforce shortage by requiring the Department of Health Care Access and Information to administer an annual scholarship to increase the number of culturally competent, licensed marriage and family therapists needed to work for county behavioral health agencies to
implement CARE Court. To be eligible for this scholarship, the applicant must agree to work for a county behavioral health agency supporting the county’s CARE Act needs and obligations for at least three years upon licensure as a marriage and family therapist, clinical social worker, professional clinical counselor, or psychologist.

FOR MORE INFORMATION

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