



PROP. 63: MENTAL HEALTH SERVICES ACT INFORMATION SHEET
A GUIDE FOR COURTS TO ACCESS FUNDING

This Information Sheet provides an overview of the Mental Health Services Act (MHSA) and how courts may access funding. The MHSA, passed by voters in 2004 as Proposition 63, is funded through a 1 percent tax on personal income over \$1 million and provides funding to expand community mental health services. The dollars are divided among counties and used to address mental health throughout the state, with a focus on prevention, treatment, and innovation.

Access to MHSA Funds

For all MHSA funding, a local court, in collaboration with any stakeholder, may access funding through the county’s local community program planning process. Therefore, it is important to build strong relationships between the courts (i.e., court leaders) and behavioral health departments (i.e., directors) to leverage important MHSA funding to better serve vulnerable populations in our court system.

Counties receive approximately \$2 billion annually in state support for MHSA programs. The Mental Health Services Oversight and Accountability Commission (MHSOAC) fiscal reporting tool displays information about funding and expenditures by each county. Follow the MHSOAC link to access the Fiscal Reporting Tool. <https://mhsoc.ca.gov/transparency-suite/monthly-allocation/>

Five MHSA Funding Categories

- 1. Community Services & Supports
- 2. Capital Facilities & Technological Needs
- 3. Workforce Education & Training
- 4. Prevention & Early Intervention
- 5. Innovation

MHSOAC: <http://mhsoc.ca.gov>

The MHSA’s five funding categories (also referred to as components) represent the different areas for project funding. Many innovative, recovery and resiliency-based programs in California are funded under one of these areas:

1. Community Services and Supports (CSS): CSS is the largest funding category of the MHSA. It provides services for individuals with severe mental illness using a client-centered, family-driven wellness and recovery-focused approach and includes local partnerships to provide wraparound services to fully meet consumers’ needs.

2. Capital Facilities and Technological Needs (CFTN): The CFTN component works toward the creation of facilities used for the delivery of MHSA services to mental health clients and their families or for administrative offices.

3. Workforce Education and Training (WET): WET funds are allocated to develop a diverse workforce. Clients and families/caregivers are given skills training to promote wellness and other positive mental health outcomes, deliver client- and family-driven services, and conduct outreach to unserved and underserved populations.

4. Prevention and Early Intervention (PEI): Funds are allocated to provide programs that emphasize an early response to emerging mental health needs before they become severe and disabling. All counties with populations greater than 100,000 must spend at least 51 percent of allocated PEI funds to serve individuals 25 years old or younger.

5. Innovation (INN): The primary purpose of MHSA’s Innovation projects is to improve and increase access to mental health care, promote interagency and community collaborations, and increase the quality of mental health services through measurable outcomes.

ACCESSING MHSA FUNDS: INNOVATION (INN) PROJECTS

Innovation (INN) projects provide local courts a unique funding opportunity with flexibility to develop new practices or promising approaches to solve persistent mental health challenges. An INN project may focus on virtually any new mental health approach to help bolster statewide learning. Projects require MHSOAC approval and are developed through the community planning process to meet the needs of each community, especially underserved/unserved groups including children, transitional age youth, LGBTQ, veterans, parents/caregivers of children and diverse racial & ethnic communities. Primary areas of focus include increasing: access to mental health care, services to diverse populations, education for service providers, housing & employment support for individuals with or at risk for serious mental illness.

Identify Need

Mental health impacts local courts in family law, dependency, juvenile justice, and adult criminal cases. Identifying a mental health gap in the community can help improve the delivery of critical mental health services that courts often facilitate and coordinate for litigants. The planning and application process for INN projects requires collaboration with stakeholders. Follow the MHSOAC links below to access the Innovation Toolkit and Innovative Project Plan Template:

- **INN Toolkit:** https://mhsoc.ca.gov/sites/default/files/documents/2018-05/INN_Toolkit_Full.pdf
- **Template:** <https://mhsoc.ca.gov/initiatives/innovation-incubator>

Community Planning

All Innovation projects are planned through a community planning process. Counties use this process to determine how best to improve programs and use MHSA funds. County MHSA websites also contain helpful information, such as the county's three-year plan, annual MHSA revenue and expenditure report, community planning meetings and dates, and announcements.

Partnerships

Mental health boards, behavioral health directors, and boards of supervisors (or governing bodies) play a significant role in the local approval process of Innovation projects. Counties must complete the following three steps for Innovation project plans before submission to the MHSOAC:

1. INN plan posted for 30 days;
2. Undergo public hearing;
- and 3. Obtain board of supervisors approval.

Visit the websites below for information about the role of behavioral health directors:

- County Behavioral Health Directors Association of California: www.cbhda.org

MHSOAC Review Process

- Commission staff reviews the proposal to see if it meets regulatory requirements.
- Once the county meets regulatory requirements, it is scheduled to present to the commission.
- Commission staff completes the staff analysis.
- Commission staff works with the county to obtain materials for presentation to the commission.
- On approval by the commission, its staff mails the approval letter to the county.

Explore the MHSOAC Program Search Tool: <http://transparency.mhsoc.ca.gov/searchpage>

Counties fund more than 2,000 MHSA programs annually. The Program Search Tool allows users to search county MHSA programs by keyword and to filter by fiscal year, county, MHSA component and target population; view a program profile; and compare up to three programs side by side.