



February 1, 2023

Assemblymember Dr. Joaquin Arambula
Chair, Budget Subcommittee 1 on Health and Human Services
1021 O Street, Suite 8230
Sacramento, CA 95814

Senator Caroline Menjivar
Chair, Budget Subcommittee 3 on Health and Human Services
1020 N Street, Room 502
Sacramento, CA 95814

Re: Behavioral Health Continuum Infrastructure Program Funding

Dear Chairs Assembly Member Arambula and Senator Menjivar:

The County Behavioral Health Directors Association (CBHDA) and the California Alliance of Child and Family Services (California Alliance), which represent county mental health plans and community-based organizations respectively, express our concern regarding the delay in Behavioral Health Continuum Infrastructure Program (BHCIP) funding in the Governor’s proposed budget for Fiscal Year 2023-24. Counties and the community-based organizations they partner with provide crucial services to children, youth, families, adults, and older adults throughout the state. While we understand the limitations faced due to the state’s fiscal outlook, funding delays for BHCIP threaten to stall progress California has made in strengthening mental health and substance use disorder care.

The Department of Health Care Services (DHCS) was authorized to establish BHCIP in order to expand the community continuum of behavioral health treatment resources. The grants are intended to fund construction and renovation to close gaps in the state’s behavioral health facility infrastructure over the course of six rounds of funding. The Department has awarded four rounds of grants totaling \$1.22 billion over the past two years, leading to existing and new construction on facilities including community mental health clinics, school-linked health centers, crisis stabilization units, and adolescent residential programs for substance use disorders. The grants have increased providers’ capacity to address the needs of California’s most vulnerable children and families. With Round 4 of funding alone, DHCS estimates 74,867 individuals will be served annually.¹

The need for behavioral health treatment resources is overwhelming and the behavioral health crisis among children and youth is well-documented. The Governor’s Master Plan for Kids’ Mental Health states that suicide rates for children and youth ages 10-18 increased 20% between 2019-2020, with significant disparities among demographic groups.² The California Department of Public Health notes that, “Youth [ages 10-24] who are Black experienced the largest increase in suicide

¹ <https://dashboard.buildingcalhhs.com/>

² [Governor Newsom’s Master Plan for Kids’ Mental Health](#)



rates of 28%” between 2019-2020.³ BHCIP presents an opportunity for California to address the urgent need for additional behavioral health services for our most vulnerable youth. The delay in BHCIP funding would be devastating for individuals across the state in immediate need of these services.

CBHDA and the California Alliance are deeply concerned about the proposed delay in funding, as the behavioral health system is already stretched thin by limited capacity and high demand for services. We urge the Subcommittees to consider these factors as you review and take action on the proposed budget.

We greatly appreciate the Legislature’s attention to this urgent issue and look forward to continuing this conversation. If you have any questions, please do not hesitate to reach out to Adrienne Shilton at ashilton@cacfs.org or Michelle Doty Cabrera at mcabrera@cbhda.org.

Respectfully,

A handwritten signature in black ink, appearing to read "Christine Stoner-Mertz".

Christine Stoner-Mertz, Chief Executive Officer
California Alliance of Child and Family Services

A handwritten signature in black ink, appearing to read "Michelle Doty Cabrera".

Michelle Doty Cabrera, Executive Director
County Behavioral Health Directors Association of California

³ [California Suicide and Self Harm Trends in 2020 Data Brief](#)