

Little Hoover Commission Report critical of State Oversight of MHSA

Says we can't tell if act is achieving goals, Calls for more OAC Power

On January 28th the Little Hoover Commission released a report on the Mental Health Services Act. The detailed report had lots of information that included a lot of positive statements. However, the press release and subsequent news coverage focuses only on a finding that after \$13.5 Billion we cant tell if we have accomplished the goals of reducing homelessness, incarceration and hospitalization.

Their main recommendations are generally supportable:

1 restore to OAC authority to approve or deny PEI plans

2 give OAC to withhold funds from counties not spending funds in accordance with act with an appeal to DHCS that must overturn OAC finding within 60 days or it becomes final

3 More power for OAC to require all data it needs

4 require state agency spending to go through OAC for review before programmed by finance

5 more transparency of data

6 Making sure OAC collects and reports on how all funds are spent and extent to which they achieve goals

A key finding buried in the report and not highlighted to the press is that programs are working as intended (both PEI and CSS) and system is much better because of it. The report also notes that the results are inconclusive about overall benefits in reducing homelessness and increasing employment and school success. They mainly say this is because of lack of data but they do include a few comments about the recession significantly reducing MHSA and related funding.

My suggested response for us and other interest groups is to acknowledge the need for more comprehensive data in an accessible transparent system where we can see where every dollar (not just MHSA) is going and are measuring their impact. We can also support the need to give the Oversight Commission the powers it needs to do its job.

At the same time we should highlight that the programs are effective and that we do have data that the people who are getting services are showing the intended results of reduced hospitalizations, homelessness and incarcerations. Our PEI programs also show that they are helping more people get care earlier- mainly in primary care and

schools and also reducing disparities. However, we still largely have a fail first system and still have a long way to go in reducing disparities. Moreover, due to the recession MESA and other fund revenues dropped dramatically for most of the past six years. The new money has mainly made up for other losses, so it is unrealistic to have expected dramatic overall societal reductions. The good news is that we know programs are working and with economy recovering there is every reason to believe that we will soon be able to show those dramatic improvements everyone expected when the act was approved.