



July 22, 2020

The Honorable Senator Pan, Chair  
Senate Health Committee  
State Capitol, Room 2191  
Sacramento, CA 95814

**Subject: Support – AB 3242 (Irwin): Mental health: involuntary commitment**

Dear Chairman Pan,

On behalf of the members of the California Association of Public Hospitals and Health Systems and the millions of patients they serve, I am writing to voice our support for AB 3242, which would permanently allow counties and hospitals to conduct 5150 involuntary hold assessments via telehealth.

California's 21 public health care systems include both county-operated or -affiliated facilities and the University of California medical centers. These systems are the core of the state's health care safety net, delivering high-quality care to more than 2.85 million patients annually, regardless of ability to pay or insurance status. Most patients seen in public health care systems are either Medi-Cal beneficiaries or remain uninsured. Statewide, we provide nearly 40 percent of all hospital care to the state's uninsured, and 35 percent of all hospital care to the Medi-Cal population. Public health care systems also operate over half of the state's top-level trauma and burn centers, and train half of all physicians in the state.

As safety net providers that serve many vulnerable populations in our communities, we recognize the toll that the COVID-19 public health emergency is having on Californians' physical and emotional well-being. Barrier-free access to health and behavioral health care services is more important than ever. Although the COVID-19 crisis has created enormous challenges for California's health care system, it has also opened new ways of thinking about how we deliver care. During the pandemic, telehealth has quickly proven to be a safe and effective way to ensure patients receive the assessments, evaluations, and timely follow-up care they deserve, in the most expedient way possible.

As hospitals designated by their county to perform 5150 assessments, public health care systems support the use of telehealth to ensure patients experiencing a behavioral health crisis receive the evaluation and supports they need as quickly as possible. Telehealth has of course been essential to caring for patients in the current environment of physical distancing, but it is also a safe and efficient practice that should be maintained beyond the COVID-19 emergency period. Over the last few months, providers have adapted quickly and made tremendous strides

to shift care to telehealth modalities. We must support their efforts to maintain these care delivery options in the long term.

It is for these reasons that we support AB 3242. We would be pleased to further discuss our position with you and answer any questions you may have. Please contact Kelly Brooks-Lindsey, our Sacramento representative, at 916-272-0011 if you would like to follow-up. Thank you for your consideration.

Sincerely,



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