Proposition 63: The Mental Health Services Act (MHSA)
Mental Health Services Oversight and Accountability Commission (MHSOAC)

Highlights from MHSOAC Evaluation Activities: July 2014

Prop 63 (MHSA), passed by voters in 2004, was designed to improve quality of life for Californians living with mental illness and support transformation of the public community-based mental health system. The MHSOAC oversees implementation of Prop 63 (MHSA) and evaluates the performance of California’s public mental health system, including services offered via the Prevention and Early Intervention (PEI) component, and those within Community Services and Supports (CSS), such as Full Service Partnerships. The MHSOAC is committed to using evaluation to promote improvements in the quality of statewide mental health services.

The Impact of Full Service Partnerships (FSPs)

Full Service Partnerships provide an array of services to high-risk individuals facing serious mental health issues. FSPs are designed to provide “whatever it takes” to promote recovery and account for over 51% of the CSS funds expended by counties. The MHSOAC has funded several recent evaluations examining the benefits of FSPs.

Increased Access to Primary Care Physicians
FSP consumer access to health care services has improved since passage of Prop 63 (MHSA).
- The percentage of FSP consumers reporting access to a primary care physician increased significantly since passage of Prop 63 (MHSA). This increase was particularly pronounced among adults and older adults.

Access to a Primary Care Physician

Reductions in Emergencies and Homelessness
- Participants reaching one year of continuous FSP enrollment experienced 30% fewer substance abuse related emergency events, compared to the year prior to enrollment.
- Over 50% of individuals who were homeless at the time of enrollment were no longer homeless, incarcerated, or in an emergency shelter upon discharge. (FY 2011/12)

Financial Benefits of FSPs
As FSP clients with severe mental illness improve, they are less likely to require ongoing psychiatric care and emergency room visits, or be involved in the criminal justice system, which saves the State money in these areas.
- A recent evaluation showed that 81% of FSP program costs were offset by savings in these areas—a savings of $161.5M over two years.

The Impact of Prevention and Early Intervention (PEI)

Prop 63 (MHSA) established the PEI component to serve individuals at risk for mental illness and those showing early signs of mental illness. A recent evaluation examined PEI programs in FY 2011/12.
- Over 365,000 consumers at risk for, or with early onset of, mental illness were directly served by PEI programs in one year across the State.

Benefits were identified for specific types of early intervention programs (in a subset of counties):
- Programs for children and youth with emotional disturbance resulting from trauma
  - Following participation, individuals’ functioning improved. For example, they had better social relationships and experienced less distress.
- First Break and Early Psychosis programs
  - Individuals reported fewer arrests after participation. Individuals in some programs also showed less depression following participation.
- Programs for older adults showing early signs of depression
  - Participants reported reduced symptoms of depression and anxiety after participation.