



May 30, 2025

The Honorable Caroline Menjivar  
Chair, Senate Health Committee  
1021 O Street, Room 3310  
Sacramento, CA 95814

**SUBJECT: AB 416 (Krell) — SUPPORT**

Dear Senator Menjivar,

Every day, as many as 1 in 5 patients visiting California hospital emergency departments need treatment for behavioral health conditions. Given the growing number of individuals seeking care for behavioral health, the California Hospital Association (CHA) supports efforts to ensure hospitals have the tools they need so they can care for all patients.

**That's why CHA, on behalf of more than 400 hospitals and health systems, supports Assembly Bill (AB) 416, which would authorize trained emergency department (ED) physicians to hold individuals in the ED if they are a danger to themselves or others, or if they are gravely disabled, so they can receive appropriate evaluation and treatment.**

While California's lack of inpatient psychiatric beds is a major factor driving longer ED stays for patients awaiting crisis care, another important factor is the lack of county-designated professionals permitted to initiate an involuntary hold.

Under the Lanterman-Petris-Short (LPS) Act, each county mental health director has the authority to determine which professionals (in addition to peace officers) they wish to "designate" as having the weighty ability to place an individual on an involuntary psychiatric hold. Each county can also determine the qualifications and training required of these individuals. While some counties permit local hospital ED physicians and other staff to obtain this authority, many have limited their eligibility to county employees or community-based agencies.

AB 416 would simply give ED physicians a pathway to be trained and authorized by the county mental health director. Under the bill, ED physicians would be required to participate in and successfully complete their local county's training to then be authorized to place an individual on an involuntary psychiatric hold.

Most patients with behavioral health needs who present to hospital EDs do not need to be placed on involuntary holds to facilitate treatment. However, for those who may need to be protected — through the LPS Act involuntary detention process — from harming themselves or others, hospital ED physicians should

have the ability to become trained and designated so they can fully and expeditiously meet their patients' needs.

For these reasons, **CHA supports AB 416.**

Sincerely,

A handwritten signature in black ink, appearing to be 'Leah Barros', with a long horizontal flourish extending to the right.

Leah Barros  
Consulting Lobbyist, California Hospital Association

cc: The Honorable Maggie Krell  
The Honorable Members of the Senate Health Committee  
Jen Flory, Principal Consultant, Senate Health Committee  
Tim Conaghan and Joe Parra, Consultants, Senate Republican Caucus