



September 12, 2025

The Honorable Gavin Newsom
Governor of California
1021 O Street, Suite 9000
Sacramento, CA 95814

RE: SB 27 (UMBERG) CARE Court Expansion – REQUEST FOR VETO

Dear Governor Newsom:

On behalf of the undersigned, we respectfully request your veto on SB 27. From our shared work, we appreciate that we share a common goal with you: ensuring that all Californians have access to the supports and services they need. Unfortunately, SB 27 is not the solution as it would significantly expand eligibility for and referrals to the CARE Court program without addressing ongoing gaps in workforce, housing, or services.

I. SB 27 would dramatically expand eligibility for an infant program.

SB 27 would expand eligibility for CARE Court to include Bipolar I disorder with psychotic features. Counties estimate this would increase eligibility by eight-fold. Given the ongoing behavioral health workforce shortage and that this bill does not provide for more staff, opening the door to such an increase would place a massive strain on already stretched behavioral health systems.

CARE Court is effectively still in its first year, with statewide implementation beginning only in December 2024. Disability Rights California has been part of the CARE Act Working Group and many of the undersigned have been engaged with CARE Act implementation from the start. Very little data on CARE is yet available. Expanding this program at this stage would be premature.

Expanding eligibility and court referrals under SB 27 would also exacerbate already extensive costs to the state, without improving service provision. Initial data from early counties shows that CARE Court participants are placed on the same waitlists for services as anyone seeking services on their own. A recent Assembly Judiciary analysis concluded that “the CARE model ends up being a very expensive way to coordinate (but not directly provide) important services.”

II. There are proven alternatives for addressing mental health needs.

Based on our collective work over decades, we have extensive evidence of interventions that meet the needs of everyone in the community by improving health outcomes, reducing homelessness, and saving money.

Assertive Community Treatment (ACT), which connects individuals with an individualized multidisciplinary package of services and supports, is designed to provide 24/7 support for individuals with the greatest mental health needs. Studies cited by California's Department of Health Care Services speak to its effectiveness in improving mental health outcomes and reducing instances of arrest or institutionalization.

Supportive housing programs, which provide housing and tailored services, have been shown to reduce hospitalizations and to increase mental health and housing stability. Using the Housing First model, three states and 82 communities nationwide achieved net zero veteran homelessness in 2021.

Peer support workers are trained individuals who have lived experience with mental health service systems. Peers are best equipped to make connections, build relationships, and support individuals because they've been there themselves. When we center peer-led responses, people with disabilities are less likely to be admitted to emergency rooms and hospitals, more likely to engage in mental health services and to feel empowered and hopeful, and less likely to need crisis services in the future.

The best way to break cycles and move toward a future that works for all of us is to engage with impacted communities as partners. Regretfully, SB 27 took on significant amendments well into the legislative process, limiting the ability of impacted communities to be part of building the solution.

Rather than expanding CARE Court eligibility, California should focus its investments in community-based services that have been demonstrated to improve outcomes for everyone in the community.

For these reasons, we respectfully request your veto of SB 27.

Sincerely,



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cc: The Honorable Tom Umberg, California State Senate