## **Introduced by Senator Padilla**

February 20, 2025

An act to add Section 12817 to the Government Code, relating to artificial intelligence.

## LEGISLATIVE COUNSEL'S DIGEST

SB 579, as introduced, Padilla. Mental health and artificial intelligence working group.

Existing law establishes the Government Operations Agency, which consists of several state entities, including, but not limited to, the State Personnel Board, the Department of General Services, and the Office of Administrative Law. Under existing law, the Government Operations Agency is under the direction of an executive officer known as the Secretary of Government Operations, who is appointed by, and holds office at the pleasure of, the Governor, subject to confirmation by the Senate.

This bill would require the secretary, by July 1, 2026, to appoint a mental health and artificial intelligence working group, as specified, that would evaluate certain issues to determine the role of artificial intelligence in mental health settings. The bill would require the working group to take input from various stakeholder groups, including health organizations and academic institutions. The bill would require the working group to produce a report of its findings to the Legislature by July 1, 2028.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

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The people of the State of California do enact as follows:

SECTION 1. Section 12817 is added to the Government Code, 1 2 to read:

3 12817. (a) The Secretary of Government Operations shall 4 appoint a mental health and artificial intelligence working group 5 and designate the chairperson of that group on or before July 1, 2026, to evaluate all of the following: 6

7 (1) The role of artificial intelligence in improving mental health 8 outcomes, ensuring ethical standards, promoting innovation, and 9 addressing concerns regarding artificial intelligence in mental 10 health settings.

11 (2) The current and emerging artificial intelligence technologies 12 that have the potential to improve mental health diagnosis, 13 treatment, monitoring, and care. The evaluation shall include artificial-intelligence-driven therapeutic tools, virtual assistants, 14 15 diagnostics, and predictive models.

16 (3) The potential risks associated with artificial intelligence to 17 mental health, including reliance on automated systems, privacy concerns, or unintended consequences on mental health treatment. 18 19 (b) The working group shall consist of all of the following

## 20 participants:

21 (1) Four appointees who are mental health professionals.

22 (2) Three appointees who are artificial intelligence and 23 technology experts.

24 (3) Two appointees with a background in patient advocacy.

25 (4) Two appointees who are experts in ethics and law.

26 (5) One appointee representing a public health agency.

27 (6) The State Chief Information Officer, or their designee.

28 (7) The Director of Health Care Services, or their designee.

29 (8) The chief information officers of three other state agencies, 30 departments, or commissions.

(9) One Member of the Senate, appointed by the Senate 31

32 Committee on Rules, and one Member of the Assembly, appointed 33 by the Speaker of the Assembly.

(c) (1) The working group shall take input from a broad range 34 35 of stakeholders with a diverse range of interests affected by state

36 policies governing emerging technologies, privacy, business, the

37 courts, the legal community, and state government.

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1 (2) This input shall come from groups, including, but not limited 2 to, health organizations, academic institutions, technology 3 companies, and advocacy groups.

4 (d) (1) On or before July 1, 2028, the working group shall report
5 to the Legislature on the potential uses, risks, and benefits of the
6 use of artificial intelligence technology in mental health treatment
7 by state government and California-based businesses.

8 (2) This report shall include best practices and recommendations 9 for policy around facilitating the beneficial uses and mitigating 10 the potential risks surrounding artificial intelligence in mental 11 health treatment.

12 (3) The report shall include a framework for developing training

13 for mental health professionals to enhance their understanding of

artificial intelligence tools and how to incorporate them into theirpractice effectively.

16 (4) A report submitted pursuant to this subdivision shall be 17 submitted in compliance with Section 9795.

18 (e) The members of the working group shall serve without

19 compensation, but shall be reimbursed for all necessary expenses

20 actually incurred in the performance of their duties.

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