## \*\*\*Adopted\*\*\* AMENDMENT No. 1 PROPOSED TO

House Bill NO. 250

## By Senator(s) Committee

15	Amend by striking all after the enacting clause and inserting
16	in lieu thereof the following:
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18	SECTION 1. Section 43-14-1, Mississippi Code of 1972, is
19	reenacted and amended as follows:
20	43-14-1. (1) The purpose of this chapter is to pilot the
21	development of a coordinated interagency system of necessary
22	services and care in two (2) regions of the state, designated by
23	the Children's Advisory Council established herein, for children
24	and youth up to age twenty-one (21) with serious
25	emotional/behavioral disturbance or mental illness who require
26	services from a multiple services and multiple programs system, in
27	the most fiscally responsible (cost efficient) manner possible,
28	based on an individualized plan of care which takes into account
29	other available interagency programs, including, but not limited
30	to, Early Intervention Act of Infants and Toddlers, Section
31	41-87-1 et seq., Early Periodic Screening Diagnosis and Treatment,
32	Section 43-13-117(5), waivered program for home- and
33	community-based services for developmentally disabled people,
34	Section 43-13-117(29), and waivered program for targeted case
35	management services for children with special needs, Section
36	43-13-117(31), and is tied to clinically appropriate outcomes.
37	Some of the outcomes are to reduce the number of inappropriate

38 out-of-home placements inclusive of those out-of-state.

There is established a Children's Advisory Council 39 (2) 40 comprised of one (1) member from each of the appropriate child-serving divisions or sections of the State Department of 41 42 Health, the Department of Human Services, the State Department of Mental Health, the State Department of Education, the Division of 43 44 Medicaid of the Governor's Office, a family member designated by 45 Mississippi Families as Allies for Children's Mental Health, Inc. and a representative from the Mississippi Council of Youth Court 46 47 Judges.

The Children's Advisory Council shall oversee a pool of 48 (3) 49 state funds contributed by each participating agency that 50 currently expends funds for services, including residential and 51 psychiatric care for the children and youth who are to be served 52 by this chapter. This pool of funds shall be available for providing necessary community-centered services based on an 53 54 individualized plan of care. The monetary contribution of each 55 participating agency shall be determined as fair and equitable by the governing board or other duly authorized state level oversight 56 57 authority for such agency by July 1 of each fiscal year, to begin 58 July 1, 1998. In lieu of contributing funds, the State Department 59 of Health shall contribute to the pilot system of care program described in this section in-kind health/medical services through 60 the department to the children and youth to be served by this 61 62 chapter.

The local coordinating care entity to administer the 63 (4) pilot program in the two (2) designated regions shall be 64 65 designated by the Children's Advisory Council. Each local coordinating care entity is an administrative body capable of 66 securing and insuring the delivery of services and care across all 67 necessary agencies and/or any other appropriate service 68 provider(s) to meet each child or youth's authorized plan of care. 69 70 After June 30, 1999, the Children's Advisory Council will add an 71 additional coordinating care entity so that all of the children in 72 the State of Mississippi served by this chapter will be covered by

73 June 30, 2000. Those local coordinating care entities designated 74 by the Children's Advisory Council shall be those that clearly 75 reflect their capability to select and secure appropriate services 76 and care in the most cost-efficient and timely manner for the 77 children and youth who are to be served by this chapter. 78 (5) Each state agency named in subsection (2) of this 79 section shall enter into a binding interagency agreement to 80 participate in the oversight of the pilot system of care program for the children and youth described in this section. The 81 82 agreement shall be signed and in effect by July 1, 1998, and shall remain in effect for a period of three (3) years, through June 30, 83 84 2001. SECTION 2. Section 43-14-3, Mississippi Code of 1972, is 85 86 reenacted as follows: 87 43-14-3. The powers and responsibilities of the Children's Advisory Council shall be as follows: 88 (a) 89 To select two (2) regions of the state in which to 90 pilot the system of care; To implement a Request for Proposal process through 91 (b) 92 which a local coordinating care entity will be selected in the two 93 (2) designated regions to perform the functions provided in 94 Section 43-14-7;(c) To serve in an advisory capacity and to provide 95 96 state level leadership and oversight to the development of the 97 pilot system of care; (d) To insure the creation and availability of an 98 annual pool of funds from each participating agency member of the 99 100 Children's Advisory Council that includes an amount to be 101 contributed by each agency and a process for utilization of those 102 funds;

103 (e) To contract and expend funds for any contractual 104 technical assistance and consultation necessary to plan and 105 develop a functional and flexible blended pool of funds. 106 SECTION 3. Section 43-14-5, Mississippi Code of 1972, is 107 reenacted as follows:

108 43-14-5. There is created in the State Treasury a special fund into which shall be deposited all funds contributed by the 109 110 Department of Human Services, Department of Mental Health and 111 State Department of Education for the operation of the pilot 112 system of care program. By the first quarter of the 1998 and 1999 state fiscal year, each agency named in this section shall pay 113 114 into the special fund out of its annual appropriation a sum equal 115 to the amount determined by the board or other duly authorized state level oversight authority for that agency and accepted by 116 117 the board or other duly authorized state level oversight authority 118 for each other agency on the Children's Advisory Council. Additionally, the Division of Medicaid shall use all unmatched 119 funds not committed for another purpose to match federal Medicaid 120 121 funds for any Medicaid approved services that will be used in the 122 pilot program for Medicaid eligible children and youth to be 123 served by this chapter.

124 SECTION 4. Section 43-14-7, Mississippi Code of 1972, is 125 reenacted as follows:

126 43-14-7. (1) The Children's Advisory Council shall contract 127 with the selected local coordinating care entity in the two (2) 128 designated regions in the pilot program, and these entities shall 129 administer the program according to the terms of the contract with 130 the Children's Advisory Council.

131 (2) Persons eligible for services provided through the pilot 132 system of care program are persons under the age of twenty-one 133 (21) with serious emotional or behavioral disorders or mental illnesses who require services from a multiple services and 134 135 multiple programs system, including other interagency programs 136 which serve the children and youth to be served by this chapter including, but not limited to, Early Intervention Act of Infants 137 138 and Toddlers, Section 41-87-1 et seq., Early Periodic Screening Diagnosis and Treatment, Section 43-13-117(5), waivered program 139 for home- and community-based services for developmentally 140 disabled people, Section 43-13-117(29), and waivered program for 141 142 targeted case management services for children with special needs,

143 Section 43-13-117(31). Those children and youth to be served by this chapter who are eligible for Medicaid shall be screened 144 145 through the Medicaid Early Periodic Screening Diagnosis and 146 Treatment (EPSDT) and their needs for medically necessary services 147 shall be certified through the EPSDT process. Children who are not Medicaid eligible, but who meet the other eligibility 148 149 criteria, shall be screened through a process similar to EPSDT, 150 and if determined eligible, shall have access to their necessary services in the pilot system of care program through a mechanism 151 152 determined by the Children's Advisory Council and funded through the operating fund provided in Section 43-14-5. 153

154 (3) Services that may be provided through the pilot system 155 of care program shall include, but not be limited to, intensive 156 home-based intervention, respite, therapeutic recreational 157 services, emergency and crisis management, care management, day 158 treatment, diagnosis and therapy. Services provided through the 159 pilot system of care program shall be provided in the home setting 160 of the recipient whenever feasible, rather than in a clinical 161 setting. Services in the community of the recipient shall be 162 considered and implemented before authorizing a more restrictive, 163 out-of-home community setting. Where appropriate, other 164 interagency programs which serve the children and youth to be served by this chapter, including, but not limited to, Early 165 166 Intervention Act of Infants and Toddlers, Section 41-87-1 et seq., Early Periodic Screening Diagnosis and Treatment, Section 167 168 43-13-117(5), waivered program for home- and community-based services for developmentally disabled people, Section 169 170 43-13-117(29), and waivered program for targeted case management 171 services for children with special needs, Section 43-13-117(31), shall be utilized. 172

(4) The local coordinating care entity authorized to operate the pilot program shall employ case managers who shall be responsible for setting up an interdisciplinary team composed of members of the child's family or other primary caregivers, and appropriate professional service providers. This team shall

178 determine an individualized and clinically appropriate plan of care for the child. The case manager shall arrange for those 179 180 services called for in each plan of care to be provided to the 181 child. Where appropriate other interagency programs which serve 182 the children and youth to be served by this chapter, including, but not limited to, Early Intervention Act of Infants and 183 184 Toddlers, Section 41-87-1 et seq., Early Periodic Screening 185 Diagnosis and Treatment, Section 43-13-117(5), waivered program for home- and community-based services for developmentally 186 187 disabled people, Section 43-13-117(29), and waivered program for targeted case management services for children with special needs, 188 189 Section 43-13-117(31), shall be utilized.

(5) Payment for services dictated by the plan of care shall
be made to the providers of the services by the selected local
coordinating care entity in the two (2) designated regions
utilizing the blended fund pool established for the pilot program.
SECTION 5. Section 43-14-9, Mississippi Code of 1972, is

195 amended as follows:

196 43-14-9. Sections 43-14-1 through 43-14-7 shall stand
197 repealed on July 1, <u>2001</u>.

SECTION 6. Section 43-27-307, Mississippi Code of 1972, is amended as follows:

43-27-307. The Juvenile Health Recovery Advisory Board shall 200 201 submit to the Governor and the Legislature, on or before April 15, 202 2000, a recommendation for a comprehensive, multidisciplinary plan 203 for the care, treatment and placement of children identified in Section 2 of this act. The advisory board shall submit to the 204 205 Governor and the Legislature, on or before September 15, 2000, 206 recommended rules and regulations for the operation of the 207 Juvenile Health Recovery Program.

208 <u>SECTION 7.</u> A special Joint Committee is created to Study and 209 Make Recommendations Concerning the Coordination of Necessary 210 Multiple Services to Children and Youth of the State and to 211 Recommend a Blended Funding Source for Such Programs. The joint 212 committee shall be composed of the Chairman of the Senate Public

Health and Welfare Committee, the Chairman of the House Public 213 214 Health and Welfare Committee, the Chairman of the Senate 215 Appropriations Committee, the Chairman of the House Appropriations Committee, two (2) members of the Senate Public Health and Welfare 216 217 Committee and two (2) members of the Senate Appropriations 218 Committee to be appointed by the Lieutenant Governor, two (2) 219 members of the House Public Health and Welfare Committee and two 220 (2) members of the House Appropriations Committee to be appointed by the Speaker of the House. 221

222 Within fifteen (15) days after sine die adjournment of the 223 2000 Regular Session of the Legislature, the Lieutenant Governor 224 and Speaker shall appoint the members of the committee. After the 225 members are appointed, the joint committee shall meet on a date 226 designated by the Lieutenant Governor in Jackson, Mississippi, to 227 select a chairman, organize the committee and establish rules for 228 transacting its business and keeping records. An affirmative vote 229 of a majority of the members shall be required in the adoption of 230 rules, resolutions and reports. All members of the joint committee shall be notified in writing of all regular and special 231 232 meetings of the committee, which notices shall be mailed at least 233 five (5) days before the dates of the meetings.

234 The joint committee shall study and make recommendations to the Legislature regarding the development and funding of a 235 236 coordinated interagency system of necessary services and care for 237 (a) children and youth up to age twenty-one (21) with serious 238 emotional/behavioral disturbance or mental illness who require services from a multiple services and multiple programs system; 239 240 (b) children suspended or expelled from a local school district 241 for serious and chronic misconduct; (c) children with alcohol and drug abuse problems; (d) children with co-occurring disorders 242 243 (mental illness and alcohol and drug abuse problems); (e) neglected, abused or delinquent children with serious emotional or 244 245 behavioral problems that would be subject to the jurisdiction of the Department of Human Services or the youth court; and (f) those 246 247 children with special mental health needs for whom the necessary

248 array of specialized services and supports is not available in the state, in the most fiscally responsible (cost efficient) manner 249 250 possible, based on an individualized plan of care which takes into 251 account other available interagency programs, including, but not 252 limited to, Early Intervention Act of Infants and Toddlers, Section 41-87-1 et seq., Early Periodic Screening Diagnosis and 253 254 Treatment, Section 43-13-117(5), and waivered program for targeted 255 case management services for children with special needs, Section 256 43-13-117(31), and is tied to clinically appropriate outcomes. 257 Some of the outcomes are to reduce the number of inappropriate out-of-home placements inclusive of those out-of-state and to 258 259 reduce the number of inappropriate school suspensions and 260 expulsions for this population of children.

The joint committee may establish any subcommittees that it deems desirable to study and report to the committee with respect to any matter that is within the scope of this resolution.

The joint committee shall make a written report of its findings and recommendations, and shall mail copies of the report to each member of the Legislature not later than December 1, 2000.

267 In carrying out the provisions of this resolution, the joint 268 committee may utilize the services, facilities and personnel of 269 all departments, agencies, offices and institutions of the state, 270 including the state universities and the community and junior 271 colleges. In particular, the joint committee shall consult with the Mississippi Department of Mental Health, the Children's 272 273 Advisory Council, the Juvenile Health Recovery Board, the Division 274 of Medicaid, and each agency shall cooperate with the joint 275 committee and provide the committee with any information and other 276 assistance requested by the committee. The joint committee may consult and seek advice from various groups in the state in order 277 278 to understand the effect of any existing laws or any changes in law being considered by the committee. 279

For attending meetings of the joint committee, each member shall be paid per diem compensation in the amount authorized by Section 25-3-69 and a mileage allowance and an expense allowance

283 in the amount authorized by Section 5-1-47. Legislative members 284 shall be paid from the contingent expense fund of the member's 285 respective house, and nonlegislative members shall be paid from 286 funds made available by appropriation of the Legislature for the 287 purpose of this resolution. However, no per diem compensation, 288 mileage allowance or expense allowance shall be paid for attending 289 meetings of the joint committee while the Legislature is in 290 session, and no per diem compensation, mileage allowance or 291 expense allowance shall be paid without prior approval of the 292 proper committee in the member's respective house. SECTION 8. This act shall take effect and be in force from 293

294 and after July 1, 2000.

Further, amend by striking the title in its entirety and inserting in lieu thereof the following:

1 AN ACT TO REENACT SECTIONS 43-14-1 THROUGH 43-14-7, 2MISSISSIPPI CODE OF 1972, WHICH ESTABLISH THE CHILDREN'S ADVISORY 3COUNCIL AND PROVIDE FOR A PILOT PROGRAM OF SERVICES AND CARE FOR 4CERTAIN CHILDREN; TO AMEND REENACTED SECTION 43-14-1, MISSISSIPPI 5CODE OF 1972, TO REVISE CERTAIN DATES RELATING TO THE PILOT 6PROGRAM; TO AMEND SECTION 43-14-9, MISSISSIPPI CODE OF 1972, TO 7EXTEND THE DATE OF THE REPEALER; TO AMEND SECTION 43-27-307, 8MISSISSIPPI CODE OF 1972, TO REVISE THE DATE FOR THE SUBMISSION OF 9THE PLAN FOR COMPREHENSIVE CARE AND PLACEMENT OF CHILDREN TO BE 10SUBMITTED BY THE JUVENILE HEALTH RECOVERY PROGRAM; TO ESTABLISH A 11JOINT COMMITTEE TO STUDY AND MAKE RECOMMENDATIONS CONCERNING THE 12COORDINATION OF NECESSARY MULTIPLE SERVICES TO CHILDREN AND YOUTH; 13AND FOR RELATED PURPOSES.