REPORT OF CONFERENCE COMMITTEE

MR. PRESIDENT AND MR. SPEAKER:

We, the undersigned conferees, have had under consideration the amendments to the following entitled BILL:

S. B. No. 2836: "Mississippi Mental Health Reform Act of 2011"; enact.

We, therefore, respectfully submit the following report and recommendation:

1. That the House recede from its Amendment No. 1.

2. That the Senate and House adopt the following amendment:

Amend by striking all after the enacting clause and inserting in lieu thereof the following:

29	SECTION 1. This act shall be known and may be cited as the		
30	"Rose Isabel Williams Mental Health Reform Act of 2011."		
31	SECTION 2. Section 41-4-1, Mississippi Code of 1972, is		
32	amended as follows:		
33	41-4-1. (1) The goal of the Rose Isabel Williams Mental		
34	Health Reform Act of 2011 is to reform the current Mississippi		
35	mental health delivery system so that necessary services, supports		
36	and operational structures for all its citizens with mental		
37	illness and/or alcohol and drug dependence and/or comorbidity,		
38	whether children, youth or adults, are accessible and delivered		
39	preferably in the communities where these citizens live. To		
40	accomplish this goal, this act provides that initially certain		
41	core services as defined in subsection (2) of this section should		
42	be available to residents of each county in the state. These		
43	services may be provided by community mental health/intellectual		
44	disability centers. In order to determine what services are		
45	available, the State Department of Mental Health is directed to		
46	survey the community mental health/intellectual disability		
47	centers, and the community mental health/intellectual disability		
48	centers are directed to report what services they are currently		
49	providing in each county. This act does not require any community		

50 mental health/intellectual disability center to provide any

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51 service. This act is not independent authority for any program
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52 not otherwise authorized.

- 53 (2) The State Board of Mental Health is authorized and
- 54 empowered to promulgate regulations to ensure that core adult

55 mental health services, child mental health services,

56 intellectual/developmental disability services, and substance

57 abuse prevention and treatment/rehabilitation services are

58 provided throughout the state through the regional mental

59 health/intellectual disability commissions and centers or through

60 other providers. The State Board of Mental Health is directed to

61 give priority to crisis services and crisis stabilization unit

62 services provided twenty-four (24) hours a day, seven (7) days a

63 week, where trained emergency-crisis response staff triage

64 referrals and respond in a timely and adequate manner to diffuse a

65 current personal crisis situation.

66 **SECTION 3.** The following shall be codified as Section 67 41-4-2, Mississippi Code of 1972:

41-4-2. The purpose of this chapter is to coordinate, 68 69 develop, improve, plan for, and provide all services for persons 70 of this state with mental illness, emotional disturbance, alcoholism, drug dependence, and an intellectual disability; to 71 promote, safeguard and protect human dignity, social well-being 72 and general welfare of these persons under the cohesive control of 73 74 one (1) coordinating and responsible agency so that mental health 75 and intellectual disability services and facilities may be 76 uniformly provided more efficiently and economically to any 77 resident of the State of Mississippi; and further to seek means for the prevention of these disabilities. 78

79 SECTION 4. Section 41-4-7, Mississippi Code of 1972, is 80 amended as follows: 81 41-4-7. The State Board of Mental Health shall have the82 following powers and duties:

To appoint a full-time Executive Director of the 83 (a) 84 Department of Mental Health, who shall be employed by the board 85 and shall serve as executive secretary to the board. The first director shall be a duly licensed physician with special interest 86 87 and competence in psychiatry, and shall possess a minimum of three (3) years' experience in clinical and administrative psychiatry. 88 Subsequent directors shall possess at least a master's degree or 89 its equivalent, and shall possess at least ten (10) years' 90 91 administrative experience in the field of mental health. The 92 salary of the executive director shall be determined by the board; 93 (b) To appoint a medical director for the Department of 94 Mental Health. The medical director shall provide clinical oversight in the implementation of evidence based and best 95 practices; provide clinical leadership in the integration of 96 mental health, intellectual disability and addiction services with 97 98 community partners in the public and private sectors; and provide 99 oversight regarding standards of care. The medical director shall 100 serve at the will and pleasure of the board, and will undergo an 101 annual review of job performance and future service to the 102 department; 103 To establish a Strategic Planning and Best (C) Practices Committee (committee), which shall consist of fifteen 104 105 (15) members as follows: 106 (i) Three (3) members of the State Board of Mental 107 Health; 108 (ii) The Chairman of the Department of Psychiatry 109 at the University of Mississippi Medical Center; 110 (iii) The Executive Director of the Division of Medicaid in the Office of the Governor; 111

112	(iv) Five (5) appointees of the Attorney General		
113	as follows:		
114	1. One (1) director of a community mental		
115	health center that is not a member of the Mississippi Association		
116	of Community Mental Health Centers; and		
117	2. Four (4) directors of community mental		
118	health centers that are members of the Mississippi Association of		
119	Community Mental Health Centers.		
120	(v) Five (5) appointees of the Governor as		
121	follows:		
122	1. One (1) representative of a nonprofit		
123	mental health advocacy group;		
124	2. One (1) consumer or family member of a		
125	consumer of mental health services;		
126	3. One (1) representative from a separate,		
127	private, nonprofit provider of a continuum of mental health		
128	services;		
129	4. Two (2) individuals knowledgeable in the		
130	field of mental health and/or with experience in business		
131	management or public administration.		
132	All appointed members of the Strategic Planning and Best Practices		
133	Committee shall be appointed to three-year terms and may be		
134	reappointed.		
135	The Department of Mental Health shall provide professional		
136	and technical support to the committee, including the services of		
137	the department's medical director, and its planning staff.		
138	Additionally, the committee shall be authorized to seek grants		
139	from public and private sources to conduct the necessary studies		
140	and evaluations to support the committee in carrying out its		
141	responsibilities. The committee may also seek the assistance of		
142	the State Institutions of Higher Learning, the State Department of		
143	Health, the Division of Medicaid, the State Department of		

144 Education, any community mental health center, and any other state agency whose expertise may be helpful to the committee. 145 This paragraph (c) shall stand repealed from and after July 146 147 1, 2013; 148 (d) To develop a system of strategic planning for the 149 development of services for persons with mental illness, persons 150 with developmental disabilities and other clients of the public mental health system. Such strategic planning program shall 151 require that the board, acting through the Strategic Planning and 152 Best Practices Committee, perform the following functions 153 154 respecting the delivery of services: 155 (i) Establish measures for determining the 156 efficiency and effectiveness of the services specified in Section 157 41-4-1(2); (ii) Conducting studies of community-based care in 158 159 other jurisdictions to determine which services offered in these jurisdictions have the potential to provide the citizens of 160 161 Mississippi with more effective and efficient community-based 162 care; 163 (iii) Evaluating the efficiency and effectiveness 164 of the services specified in Section 41-4-1(2); 165 (iv) Recommending to the Legislature by January 1, 2014, any necessary additions, deletions or other changes 166 necessary to the services specified in Section 41-4-1(2); 167 (v) Implementing by July 1, 2012, a system of 168 169 performance measures for the services specified in Section 170 41-4-1(2); (vi) Recommending to the Legislature any changes 171 that the department believes are necessary to the current laws 172 173 addressing civil commitment;

(vii) Conducting any other activities necessary to

175 the evaluation and study of the services specified in Section

176 <u>41-4-1(2);</u>

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177 (viii) Assisting in conducting all necessary 178 strategic planning for the delivery of all other services of the 179 department. Such planning shall be conducted so as to produce a 180 single strategic plan for the services delivered by the public 181 mental health system and shall establish appropriate mission 182 statements, goals, objectives and performance indicators for all programs and services of the public mental health system. For 183 184 services other than those specified in Section 41-4-1(2), the committee shall recommend to the State Board of Mental Health a 185 186 strategic plan that the board may adopt or modify;

187 <u>(e)</u> To set up state plans for the purpose of 188 controlling and treating any and all forms of mental and emotional 189 illness, alcoholism, drug misuse and developmental disabilities;

(f) To supervise, coordinate and establish standards 190 191 for all operations and activities of the state related to mental 192 health and providing mental health services. Nothing in this 193 chapter shall preclude the services of a psychiatric/mental health 194 nurse practitioner in accordance with an established nurse 195 practitioner-physician protocol. A physician, clinical 196 psychologist, psychiatric/mental health nurse practitioner in accordance with an established nurse practitioner-physician 197 198 protocol or licensed clinical social worker shall certify each 199 client's record annually after seeing the client in person or by telemedicine, and more often if medically indicated by physically 200 201 visiting the client and certifying same in the record. * * * The 202 board shall have the authority to develop and implement all 203 standards and plans and shall have the authority to establish appropriate actions, including financially punitive actions, to 204 205 ensure enforcement of these established standards, in accordance

11/SS26/SB2836CR.3J PAGE 6 with the Administrative Procedures Law (Section 25-43-1 et seq.). 206 207 The regional community mental health/intellectual disability centers shall comply with all of the board's established standards 208 209 that are applicable to those centers, and the board may withhold 210 any state funds that otherwise would be allocated or paid to any 211 of those centers that does not comply with the board's established 212 standards. This paragraph (f) shall stand repealed on July 1, 213 2013;

214 (g) To enter into contracts with any other state or 215 federal agency, or with any private person, organization or group 216 capable of contracting, if it finds such action to be in the 217 public interest;

218 (h) To collect reasonable fees for its services;
219 however, if it is determined that a person receiving services is
220 unable to pay the total fee, the department shall collect any
221 amount such person is able to pay;

(i) To certify, coordinate and establish minimum 222 223 standards and establish minimum required services, as specified in 224 Section 41-4-1(2), for regional mental health and intellectual 225 disability commissions and other community service providers for 226 community or regional programs and services in adult mental 227 health, children and youth mental health, intellectual 228 disabilities, alcoholism, drug misuse, developmental disabilities, compulsive gambling, addictive disorders and related programs 229 230 throughout the state. Such regional mental health and 231 intellectual disability commissions and other community service 232 providers shall, on or before July 1 of each year, submit an 233 annual operational plan to the State Department of Mental Health 234 for approval or disapproval based on the minimum standards and 235 minimum required services established by the department for certification and itemize the services specified in Section 236 237 41-4-1(2). As part of the annual operation plan required by this

11/SS26/SB2836CR.3J PAGE 7 paragraph (i) submitted by any regional community mental health 238 239 center or by any other reasonable certification deemed acceptable by the department, the community mental health center shall state 240 241 those services specified in Section 41-4-1(2) that it will provide 242 and also those services that it will not provide. If the 243 department finds deficiencies in the plan of any regional 244 commission or community service provider based on the minimum 245 standards and minimum required services established for certification, the department shall give the regional commission 246 or community service provider a six-month probationary period to 247 248 bring its standards and services up to the established minimum 249 standards and minimum required services. After the six-month 250 probationary period, if the department determines that the 251 regional commission or community service provider still does not 252 meet the minimum standards and minimum required services established for certification, the department may remove the 253 254 certification of the commission or provider and from and after 255 July 1, 2011, the commission or provider shall be ineligible for 256 state funds from Medicaid reimbursement or other funding sources 257 for those services. However, the department shall not mandate a 258 standard or service, or decertify a regional commission or 259 community service provider for not meeting a standard or service, 260 if the standard or service does not have funding appropriated by the Legislature or have a state, federal or local funding 261 262 source * * * identified by the department * * *. No county shall 263 be required to levy millage to provide a mandated standard or 264 service above the minimum rate required by Section 41-19-39. 265 After the six-month probationary period, the department may 266 identify an appropriate community service provider to provide any 267 core services in that county that are not provided by a community mental health center. However, the department shall not offer 268 269 reimbursement or other accommodations to a community service

11/SS26/SB2836CR.3J PAGE 8 270 provider of core services that were not offered to the decertified 271 community mental health center for the same or similar services. 272 The State Board of Mental Health shall promulgate rules and 273 regulations necessary to implement the provisions of this 274 paragraph (i), in accordance with the Administrative Procedures 275 Law (Section 25-43-1.101 et seq.);

276 To establish and promulgate reasonable minimum (j) 277 standards for the construction and operation of state and all Department of Mental Health certified facilities, including 278 279 reasonable minimum standards for the admission, diagnosis, care, 280 treatment, transfer of patients and their records, and also 281 including reasonable minimum standards for providing day care, 282 outpatient care, emergency care, inpatient care and follow-up 283 care, when such care is provided for persons with mental or 284 emotional illness, an intellectual disability, alcoholism, drug misuse and developmental disabilities; 285

To implement best practices for all services 286 (k) 287 specified in Section 41-4-1(2), and to establish and implement all 288 other services delivered by the Department of Mental Health. To 289 carry out this responsibility, the board shall require the 290 department to establish a division responsible for developing best 291 practices based on a comprehensive analysis of the mental health environment to determine what the best practices for each service 292 are. In developing best practices, the board shall consider the 293 294 cost and benefits associated with each practice with a goal of 295 implementing only those practices that are cost-effective 296 practices for service delivery. Such best practices shall be 297 utilized by the board in establishing performance standards and evaluations of the community mental health centers' services 298 299 required by paragraph (d) of this section;

300 <u>(1)</u> To assist community or regional programs consistent 301 with the purposes of this chapter by making grants and contracts 302 from available funds;

303 (m) To establish and collect reasonable fees for 304 necessary inspection services incidental to certification or 305 compliance;

306 <u>(n)</u> To accept gifts, trusts, bequests, grants, 307 endowments or transfers of property of any kind;

308 (o) To receive monies coming to it by way of fees for 309 services or by appropriations;

310 (p) To serve as the single state agency in receiving 311 and administering any and all funds available from any source for 312 the purpose of service delivery, training, research and education 313 in regard to all forms of mental illness, intellectual disabilities, alcoholism, drug misuse and developmental 314 disabilities, unless such funds are specifically designated to a 315 particular agency or institution by the federal government, the 316 317 Mississippi Legislature or any other grantor;

318 (q) To establish mental health holding centers for the 319 purpose of providing short-term emergency mental health treatment, 320 places for holding persons awaiting commitment proceedings or 321 awaiting placement in a state mental health facility following commitment, and for diverting placement in a state mental health 322 facility. These mental health holding facilities shall be readily 323 324 accessible, available statewide, and be in compliance with 325 emergency services' minimum standards. They shall be comprehensive and available to triage and make appropriate 326 327 clinical disposition, including the capability to access inpatient 328 services or less restrictive alternatives, as needed, as 329 determined by medical staff. Such facility shall have medical, 330 nursing and behavioral services available on a 331 twenty-four-hour-a-day basis. The board may provide for all or

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332 part of the costs of establishing and operating the holding 333 centers in each district from such funds as may be appropriated to 334 the board for such use, and may participate in any plan or 335 agreement with any public or private entity under which the entity 336 will provide all or part of the costs of establishing and 337 operating a holding center in any district;

338 (r) To certify/license case managers, mental health 339 therapists, intellectual disability therapists, mental 340 health/intellectual disability program administrators, addiction counselors and others as deemed appropriate by the board. Persons 341 342 already professionally licensed by another state board or agency 343 are not required to be certified/licensed under this section by the Department of Mental Health. The department shall not use 344 345 professional titles in its certification/licensure process for 346 which there is an independent licensing procedure. Such certification/licensure shall be valid only in the state mental 347 health system, in programs funded and/or certified by the 348 349 Department of Mental Health, and/or in programs certified/licensed 350 by the State Department of Health that are operated by the state 351 mental health system serving persons with mental illness, an 352 intellectual disability, a developmental disability or addictions, 353 and shall not be transferable;

354 (s) To develop formal mental health worker qualifications for regional mental health and intellectual 355 356 disability commissions and other community service providers. The 357 State Personnel Board shall develop and promulgate a recommended salary scale and career ladder for all regional mental 358 359 health/intellectual disability center therapists and case managers who work directly with clients. The State Personnel Board shall 360 361 also develop and promulgate a career ladder for all direct care workers employed by the State Department of Mental Health; 362

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363 <u>(t)</u> The employees of the department shall be governed 364 by personnel merit system rules and regulations, the same as other 365 employees in state services;

366 <u>(u)</u> To establish such rules and regulations as may be 367 necessary in carrying out the provisions of this chapter, 368 including the establishment of a formal grievance procedure to 369 investigate and attempt to resolve consumer complaints;

370 <u>(v)</u> To grant easements for roads, utilities and any 371 other purpose it finds to be in the public interest;

372 To survey statutory designations, building markers (w) and the names given to mental health/intellectual disability 373 374 facilities and proceedings in order to recommend deletion of obsolete and offensive terminology relative to the mental 375 376 health/intellectual disability system. Based upon a 377 recommendation of the executive director, the board shall have the authority to name/rename any facility operated under the auspices 378 379 of the Department of Mental Health for the sole purpose of 380 deleting such terminology;

381 <u>(x)</u> To ensure an effective case management system 382 directed at persons who have been discharged from state and 383 private psychiatric hospitals to ensure their continued well-being 384 in the community;

385 <u>(y)</u> To develop formal service delivery standards 386 designed to measure the quality of services delivered to community 387 clients, as well as the timeliness of services to community 388 clients provided by regional mental health/intellectual disability 389 commissions and other community services providers;

390 <u>(z)</u> To establish regional state offices to provide 391 mental health crisis intervention centers and services available 392 throughout the state to be utilized on a case-by-case emergency 393 basis. The regional services director, other staff and delivery 394 systems shall meet the minimum standards of the Department of 395 Mental Health;

396 <u>(aa)</u> To require performance contracts with community 397 mental health/intellectual disability service providers to contain 398 performance indicators to measure successful outcomes, including 399 diversion of persons from inpatient psychiatric hospitals, 400 rapid/timely response to emergency cases, client satisfaction with 401 services and other relevant performance measures;

402 (bb) To enter into interagency agreements with other 403 state agencies, school districts and other local entities as 404 determined necessary by the department to ensure that local mental 405 health service entities are fulfilling their responsibilities to 406 the overall state plan for behavioral services;

407 <u>(cc)</u> To establish and maintain a toll-free grievance 408 reporting telephone system for the receipt and referral for 409 investigation of all complaints by clients of state and community 410 mental health/intellectual disability facilities;

411 (dd) To establish a peer review/quality assurance 412 evaluation system that assures that appropriate assessment, 413 diagnosis and treatment is provided according to established 414 professional criteria and guidelines;

415 (ee) To develop and implement state plans for the 416 purpose of assisting with the care and treatment of persons with 417 Alzheimer's disease and other dementia. This plan shall include 418 education and training of service providers, caregivers in the 419 home setting and others who deal with persons with Alzheimer's 420 disease and other dementia, and development of adult day care, 421 family respite care and counseling programs to assist families who maintain persons with Alzheimer's disease and other dementia in 422 the home setting. No agency shall be required to provide any 423 424 services under this section until such time as sufficient funds 425 have been appropriated or otherwise made available by the

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426 Legislature specifically for the purposes of the treatment of 427 persons with Alzheimer's and other dementia;

428 (ff) Working with the advice and consent of the 429 administration of Ellisville State School, to enter into 430 negotiations with the Economic Development Authority of Jones County for the purpose of negotiating the possible exchange, lease 431 432 or sale of lands owned by Ellisville State School to the Economic 433 Development Authority of Jones County. It is the intent of the Mississippi Legislature that such negotiations shall ensure that 434 435 the financial interest of the persons with an intellectual 436 disability served by Ellisville State School will be held 437 paramount in the course of these negotiations. The Legislature also recognizes the importance of economic development to the 438 439 citizens of the State of Mississippi and Jones County, and 440 encourages fairness to the Economic Development Authority of Jones 441 County. Any negotiations proposed which would result in the recommendation for exchange, lease or sale of lands owned by 442 443 Ellisville State School must have the approval of the State Board 444 of Mental Health. The State Board of Mental Health may and has 445 the final authority as to whether or not these negotiations result 446 in the exchange, lease or sale of the properties it currently 447 holds in trust for persons with an intellectual disability served at Ellisville State School. 448

If the State Board of Mental Health authorizes the sale of 449 450 lands owned by Ellisville State School, as provided for under this 451 paragraph (ff), the monies derived from the sale shall be placed into a special fund that is created in the State Treasury to be 452 known as the "Ellisville State School Client's Trust Fund." The 453 principal of the trust fund shall remain inviolate and shall never 454 455 be expended. Any interest earned on the principal may be expended solely for the benefits of clients served at Ellisville State 456 457 School. The State Treasurer shall invest the monies of the trust

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458 fund in any of the investments authorized for the Mississippi 459 Prepaid Affordable College Tuition Program under Section 37-155-9, 460 and those investments shall be subject to the limitations prescribed by Section 37-155-9. Unexpended amounts remaining in 461 462 the trust fund at the end of a fiscal year shall not lapse into 463 the State General Fund, and any interest earned on amounts in the 464 trust fund shall be deposited to the credit of the trust fund. 465 The administration of Ellisville State School may use any interest 466 earned on the principal of the trust fund, upon appropriation by 467 the Legislature, as needed for services or facilities by the 468 clients of Ellisville State School. Ellisville State School shall make known to the Legislature, through the Legislative Budget 469 470 Committee and the respective Appropriations Committees of the 471 House and Senate, its proposed use of interest earned on the 472 principal of the trust fund for any fiscal year in which it proposes to make expenditures thereof. The State Treasurer shall 473 474 provide Ellisville State School with an annual report on the Ellisville State School Client's Trust Fund to indicate the total 475 476 monies in the trust fund, interest earned during the year, 477 expenses paid from the trust fund and such other related 478 information.

479 Nothing in this section shall be construed as applying to or 480 affecting mental health/intellectual disability services provided by hospitals as defined in Section 41-9-3(a), and/or their 481 482 subsidiaries and divisions, which hospitals, subsidiaries and 483 divisions are licensed and regulated by the Mississippi State Department of Health unless such hospitals, subsidiaries or 484 485 divisions voluntarily request certification by the Mississippi State Department of Mental Health. 486

All new programs authorized under this section shall be subject to the availability of funds appropriated therefor by the Legislature;

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490 (gg) Working with the advice and consent of the 491 administration of Boswell Regional Center, to enter into 492 negotiations with the Economic Development Authority of Simpson 493 County for the purpose of negotiating the possible exchange, lease 494 or sale of lands owned by Boswell Regional Center to the Economic 495 Development Authority of Simpson County. It is the intent of the 496 Mississippi Legislature that such negotiations shall ensure that 497 the financial interest of the persons with an intellectual 498 disability served by Boswell Regional Center will be held 499 paramount in the course of these negotiations. The Legislature 500 also recognizes the importance of economic development to the 501 citizens of the State of Mississippi and Simpson County, and 502 encourages fairness to the Economic Development Authority of 503 Simpson County. Any negotiations proposed which would result in 504 the recommendation for exchange, lease or sale of lands owned by 505 Boswell Regional Center must have the approval of the State Board 506 of Mental Health. The State Board of Mental Health may and has 507 the final authority as to whether or not these negotiations result 508 in the exchange, lease or sale of the properties it currently 509 holds in trust for persons with an intellectual disability served 510 at Boswell Regional Center. In any such exchange, lease or sale 511 of such lands owned by Boswell Regional Center, title to all minerals, oil and gas on such lands shall be reserved, together 512 with the right of ingress and egress to remove same, whether such 513 514 provisions be included in the terms of any such exchange, lease or 515 sale or not.

If the State Board of Mental Health authorizes the sale of lands owned by Boswell Regional Center, as provided for under this paragraph (gg), the monies derived from the sale shall be placed into a special fund that is created in the State Treasury to be known as the "Boswell Regional Center Client's Trust Fund." The principal of the trust fund shall remain inviolate and shall never

11/SS26/SB2836CR.3J PAGE 16 522 be expended. Any earnings on the principal may be expended solely 523 for the benefits of clients served at Boswell Regional Center. 524 The State Treasurer shall invest the monies of the trust fund in 525 any of the investments authorized for the Mississippi Prepaid 526 Affordable College Tuition Program under Section 37-155-9, and 527 those investments shall be subject to the limitations prescribed 528 by Section 37-155-9. Unexpended amounts remaining in the trust 529 fund at the end of a fiscal year shall not lapse into the State 530 General Fund, and any earnings on amounts in the trust fund shall be deposited to the credit of the trust fund. The administration 531 532 of Boswell Regional Center may use any earnings on the principal 533 of the trust fund, upon appropriation by the Legislature, as needed for services or facilities by the clients of Boswell 534 535 Regional Center. Boswell Regional Center shall make known to the 536 Legislature, through the Legislative Budget Committee and the respective Appropriations Committees of the House and Senate, its 537 proposed use of the earnings on the principal of the trust fund 538 539 for any fiscal year in which it proposes to make expenditures 540 thereof. The State Treasurer shall provide Boswell Regional 541 Center with an annual report on the Boswell Regional Center 542 Client's Trust Fund to indicate the total monies in the trust 543 fund, interest and other income earned during the year, expenses paid from the trust fund and such other related information. 544 Nothing in this section shall be construed as applying to or 545

affecting mental health/intellectual disability services provided by hospitals as defined in Section 41-9-3(a), and/or their subsidiaries and divisions, which hospitals, subsidiaries and divisions are licensed and regulated by the Mississippi State Department of Health unless such hospitals, subsidiaries or divisions voluntarily request certification by the Mississippi State Department of Mental Health. All new programs authorized under this section shall be subject to the availability of funds appropriated therefor by the Legislature;

556 (hh) Notwithstanding any other section of the code, the 557 Board of Mental Health shall be authorized to fingerprint and perform a criminal history record check on every employee or 558 559 volunteer. Every employee and volunteer shall provide a valid current social security number and/or driver's license number 560 561 which shall be furnished to conduct the criminal history record 562 check. If no disqualifying record is identified at the state 563 level, fingerprints shall be forwarded to the Federal Bureau of 564 Investigation for a national criminal history record check;

(ii) The Department of Mental Health shall have the 565 566 authority for the development of a consumer friendly single point 567 of intake and referral system within its service areas for persons 568 with mental illness, an intellectual disability, developmental 569 disabilities or alcohol or substance abuse who need assistance 570 identifying or accessing appropriate services. The department 571 will develop and implement a comprehensive evaluation procedure 572 ensuring that, where appropriate, the affected person or their 573 parent or legal guardian will be involved in the assessment and 574 planning process. The department, as the point of intake and as service provider, shall have the authority to determine the 575 appropriate institutional, hospital or community care setting for 576 577 persons who have been diagnosed with mental illness, an 578 intellectual disability, developmental disabilities and/or alcohol or substance abuse, and may provide for the least restrictive 579 580 placement if the treating professional believes such a setting is 581 appropriate, if the person affected or their parent or legal guardian wants such services, and if the department can do so with 582 a reasonable modification of the program without creating a 583 584 fundamental alteration of the program. The least restrictive

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588 (jj) To have the sole power and discretion to enter 589 into, sign, execute and deliver long-term or multiyear leases of real and personal property owned by the Department of Mental 590 591 Health to and from other state and federal agencies and private 592 entities deemed to be in the public's best interest. Any monies 593 derived from such leases shall be deposited into the funds of the 594 Department of Mental Health for its exclusive use. Leases to 595 private entities shall be approved by the Department of Finance 596 and Administration and all leases shall be filed with the 597 Secretary of State;

598 (kk) To certify and establish minimum standards and 599 minimum required services for county facilities used for housing, 600 feeding and providing medical treatment for any person who has 601 been involuntarily ordered admitted to a treatment center by a 602 court of competent jurisdiction. If the department finds 603 deficiencies in any such county facility or its provider based on 604 the minimum standards and minimum required services established 605 for certification, the department shall give the county or its 606 provider a six-month probationary period to bring its standards 607 and services up to the established minimum standards and minimum required services. After the six-month probationary period, if 608 609 the department determines that the county or its provider still 610 does not meet the minimum standards and minimum required services, 611 the department may remove the certification of the county or 612 provider and require the county to contract with another county 613 having a certified facility to hold those persons for that period 614 of time pending transportation and admission to a state treatment facility. Any cost incurred by a county receiving an 615 616 involuntarily committed person from a county with a decertified

11/SS26/SB2836CR.3J PAGE 19 617 holding facility shall be reimbursed by the home county to the 618 receiving county.

619 SECTION 5. Section 41-19-33, Mississippi Code of 1972, is 620 amended as follows:

621 41-19-33. (1) Each region so designated or established under Section 41-19-31 shall establish a regional commission to be 622 623 composed of members appointed by the boards of supervisors of the 624 various counties in the region. It shall be the duty of such 625 regional commission to administer mental health/intellectual disability programs certified and required by the State Board of 626 627 Mental Health and as specified in Section 41-4-1(2). In addition, 628 once designated and established as provided hereinabove, a 629 regional commission shall have the following authority and shall 630 pursue and promote the following general purposes:

To establish, own, lease, acquire, construct, 631 (a) build, operate and maintain mental illness, mental health, 632 intellectual disability, alcoholism and general rehabilitative 633 634 facilities and services designed to serve the needs of the people 635 of the region so designated; provided that the services supplied 636 by the regional commissions shall include those services 637 determined by the Department of Mental Health to be necessary and 638 may include, in addition to the above, services for persons with developmental and learning disabilities; for persons suffering 639 from narcotic addiction and problems of drug abuse and drug 640 641 dependence; and for the aging as designated and certified by the 642 Department of Mental Health. Such regional mental health and 643 intellectual disability commissions and other community service 644 providers shall, on or before July 1 of each year, submit an 645 annual operational plan to the Department of Mental Health for 646 approval or disapproval based on the minimum standards and minimum required services established by the department for certification 647 648 and itemize the services as specified in Section 41-4-1(2). As

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part of the annual operation plan required by Section 41-4-7(h) 649 650 submitted by any regional community mental health center or by any other reasonable certification deemed acceptable by the 651 652 department, the community mental health center shall state those 653 services specified in Section 41-4-1(2) that it will provide and 654 also those services that it will not provide. If the department 655 finds deficiencies in the plan of any regional commission or 656 community service provider based on the minimum standards and 657 minimum required services established for certification, the department shall give the regional commission or community service 658 659 provider a six-month probationary period to bring its standards 660 and services up to the established minimum standards and minimum 661 required services. After the six-month probationary period, if 662 the department determines that the regional commission or community service provider still does not meet the minimum 663 664 standards and minimum required services established for certification, the department may remove the certification of the 665 666 commission or provider and from and after July 1, 2011, the 667 commission or provider shall be ineligible for state funds from 668 Medicaid reimbursement or other funding sources for those 669 services. After the six-month probationary period, the Department 670 of Mental Health may identify an appropriate community service 671 provider to provide any core services in that county that are not provided by a community mental health center. However, the 672 673 department shall not offer reimbursement or other accommodations 674 to a community service provider of core services that were not 675 offered to the decertified community mental health center for the 676 same or similar services. 677 To provide facilities and services for the (b)

678 prevention of mental illness, mental disorders, developmental and 679 learning disabilities, alcoholism, narcotic addiction, drug abuse, 680 drug dependence and other related handicaps or problems (including

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the problems of the aging) among the people of the region so designated, and for the rehabilitation of persons suffering from such illnesses, disorders, handicaps or problems as designated and certified by the Department of Mental Health.

685 (C) To promote increased understanding of the problems 686 of mental illness, intellectual disabilities, alcoholism, 687 developmental and learning disabilities, narcotic addiction, drug 688 abuse and drug dependence and other related problems (including 689 the problems of the aging) by the people of the region, and also 690 to promote increased understanding of the purposes and methods of 691 the rehabilitation of persons suffering from such illnesses, 692 disorders, handicaps or problems as designated and certified by 693 the Department of Mental Health.

To enter into contracts and to make such other 694 (d) 695 arrangements as may be necessary, from time to time, with the 696 United States government, the government of the State of Mississippi and such other agencies or governmental bodies as may 697 698 be approved by and acceptable to the regional commission for the 699 purpose of establishing, funding, constructing, operating and maintaining facilities and services for the care, treatment and 700 701 rehabilitation of persons suffering from mental illness, an 702 intellectual disability, alcoholism, developmental and learning disabilities, narcotic addiction, drug abuse, drug dependence and 703 704 other illnesses, disorders, handicaps and problems (including the 705 problems of the aging) as designated and certified by the 706 Department of Mental Health.

(e) To enter into contracts and make such other arrangements as may be necessary with any and all private businesses, corporations, partnerships, proprietorships or other private agencies, whether organized for profit or otherwise, as may be approved by and acceptable to the regional commission for the purpose of establishing, funding, constructing, operating and

11/SS26/SB2836CR.3J PAGE 22 713 maintaining facilities and services for the care, treatment and 714 rehabilitation of persons suffering from mental illness, an 715 intellectual disability, alcoholism, developmental and learning 716 disabilities, narcotic addiction, drug abuse, drug dependence and 717 other illnesses, disorders, handicaps and problems (including the 718 problems of the aging) relating to minimum services established by 719 the Department of Mental Health.

(f) To promote the general mental health of the peopleof the region.

722 To pay the administrative costs of the operation of (q) 723 the regional commissions, including per diem for the members of 724 the commission and its employees, attorney's fees, if and when 725 such are required in the opinion of the commission, and such other 726 expenses of the commission as may be necessary. The Department of 727 Mental Health standards and audit rules shall determine what 728 administrative cost figures shall consist of for the purposes of 729 this paragraph. Each regional commission shall submit a cost 730 report annually to the Department of Mental Health in accordance 731 with guidelines promulgated by the department.

(h) To employ and compensate any personnel that may be necessary to effectively carry out the programs and services established under the provisions of the aforesaid act, provided such person meets the standards established by the Department of Mental Health.

(i) To acquire whatever hazard, casualty or workers'
compensation insurance that may be necessary for any property,
real or personal, owned, leased or rented by the commissions, or
any employees or personnel hired by the commissions.

(j) To acquire professional liability insurance on all employees as may be deemed necessary and proper by the commission, and to pay, out of the funds of the commission, all premiums due and payable on account thereof. 745 To provide and finance within their own facilities, (k) 746 or through agreements or contracts with other local, state or 747 federal agencies or institutions, nonprofit corporations, or 748 political subdivisions or representatives thereof, programs and 749 services for persons with mental illness, including treatment for 750 alcoholics, and promulgating and administering of programs to 751 combat drug abuse and programs for services for persons with an 752 intellectual disability.

753 To borrow money from private lending institutions (1) 754 in order to promote any of the foregoing purposes. A commission may pledge collateral, including real estate, to secure the 755 756 repayment of money borrowed under the authority of this paragraph. 757 Any such borrowing undertaken by a commission shall be on terms 758 and conditions that are prudent in the sound judgment of the 759 members of the commission, and the interest on any such loan shall 760 not exceed the amount specified in Section 75-17-105. Any money 761 borrowed, debts incurred or other obligations undertaken by a commission, regardless of whether borrowed, incurred or undertaken 762 763 before or after the effective date of this act, shall be valid, 764 binding and enforceable if it or they are borrowed, incurred or 765 undertaken for any purpose specified in this section and otherwise 766 conform to the requirements of this paragraph.

(m) To acquire, own and dispose of real and personal property. Any real and personal property paid for with state and/or county appropriated funds must have the written approval of the Department of Mental Health and/or the county board of supervisors, depending on the original source of funding, before being disposed of under this paragraph.

(n) To enter into managed care contracts and make such other arrangements as may be deemed necessary or appropriate by the regional commission in order to participate in any managed care program. Any such contract or arrangement affecting more

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777 than one (1) region must have prior written approval of the 778 Department of Mental Health before being initiated and annually 779 thereafter.

(o) To provide facilities and services on a discounted
or capitated basis. Any such action when affecting more than one
(1) region must have prior written approval of the Department of
Mental Health before being initiated and annually thereafter.

784 To enter into contracts, agreements or other (p) 785 arrangements with any person, payor, provider or other entity, 786 under which the regional commission assumes financial risk for the 787 provision or delivery of any services, when deemed to be necessary 788 or appropriate by the regional commission. Any action under this 789 paragraph affecting more than one (1) region must have prior 790 written approval of the Department of Mental Health before being 791 initiated and annually thereafter.

To provide direct or indirect funding, grants, 792 (q) 793 financial support and assistance for any health maintenance 794 organization, preferred provider organization or other managed 795 care entity or contractor, where such organization, entity or contractor is operated on a nonprofit basis. Any action under 796 797 this paragraph affecting more than one (1) region must have prior written approval of the Department of Mental Health before being 798 799 initiated and annually thereafter.

(r) To form, establish, operate, and/or be a member of or participant in, either individually or with one or more other regional commissions, any managed care entity as defined in Section 83-41-403(c). Any action under this paragraph affecting more than one (1) region must have prior written approval of the Department of Mental Health before being initiated and annually thereafter.

807 (s) To meet at least annually with the board of 808 supervisors of each county in its region for the purpose of

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809 presenting its total annual budget and total mental

810 health/intellectual disability services system. The commission

811 shall submit an annual report on the adult mental health services,

812 children mental health services and intellectual disability

813 services required by the State Board of Mental Health.

814 (t) To provide alternative living arrangements for
815 persons with serious mental illness, including, but not limited
816 to, group homes for persons with chronic mental illness.

817 (u) To make purchases and enter into contracts for
818 purchasing in compliance with the public purchasing law, Sections
819 31-7-12 and 31-7-13, with compliance with the public purchasing
820 law subject to audit by the State Department of Audit.

To insure that all available funds are used for the 821 (V) 822 benefit of persons with mental illness, persons with an intellectual disability, substance abusers and persons with 823 developmental disabilities with maximum efficiency and minimum 824 825 administrative cost. At any time a regional commission, and/or 826 other related organization whatever it may be, accumulates surplus 827 funds in excess of one-half (1/2) of its annual operating budget, 828 the entity must submit a plan to the Department of Mental Health 829 stating the capital improvements or other projects that require 830 such surplus accumulation. If the required plan is not submitted within forty-five (45) days of the end of the applicable fiscal 831 year, the Department of Mental Health shall withhold all state 832 833 appropriated funds from such regional commission until such time 834 as the capital improvement plan is submitted. If the submitted capital improvement plan is not accepted by the department, the 835 836 surplus funds shall be expended by the regional commission in the 837 local mental health region on group homes for persons with mental illness, persons with an intellectual disability, substance 838 abusers, children or other mental health/intellectual disability 839 840 services approved by the Department of Mental Health.

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841 (w) Notwithstanding any other provision of law, to 842 fingerprint and perform a criminal history record check on every employee or volunteer. Every employee or volunteer shall provide 843 a valid current social security number and/or driver's license 844 number that will be furnished to conduct the criminal history 845 record check. If no disqualifying record is identified at the 846 847 state level, fingerprints shall be forwarded to the Federal Bureau of Investigation for a national criminal history record check. 848

(x) In general to take any action which will promote,
either directly or indirectly, any and all of the foregoing
purposes.

852 (2) The types of services established by the State 853 Department of Mental Health that must be provided by the regional 854 mental health/intellectual disability centers for certification by the department, and the minimum levels and standards for those 855 856 services established by the department, shall be provided by the 857 regional mental health/intellectual disability centers to children 858 when such services are appropriate for children, in the 859 determination of the department.

860 **SECTION 6.** Section 41-21-87, Mississippi Code of 1972, is 861 amended as follows:

862 41-21-87. (1) The director of either the treatment facility 863 where the patient is committed or the treatment facility where the 864 patient resides while awaiting admission to any other treatment 865 facility may discharge any civilly committed patient upon filing 866 his certificate of discharge with the clerk of the committing 867 court, certifying that the patient, in his judgment, no longer 868 poses a substantial threat of physical harm to himself or others.

869 (2) A director of a treatment facility specified in
870 subsection (1) above may return any patient to the custody of the
871 committing court upon providing seven (7) days' notice and upon
872 filing his certificate of same as follows:

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(a) When, in the judgment of the director, the patient
may be treated in a less restrictive environment; however,
treatment in such less restrictive environment shall be
implemented within seven (7) days after notification of the court;
or

878 (b) When, in the judgment of the director, adequate 879 facilities or treatment are not available at the treatment 880 facility.

Except as provided in Section 41-21-88, no committing 881 (3) court shall enjoin or restrain any director of a treatment 882 883 facility specified in subsection (1) above from discharging a 884 patient under this section whose treating professionals have determined that the patient meets one (1) of the criteria for 885 886 discharge as outlined in subsection (1) or (2) of this section. 887 The director of the treatment facility where the patient is 888 committed may transfer any civilly committed patient from one (1) 889 facility operated directly by the Department of Mental Health to 890 another as necessary for the welfare of that or other patients. 891 Upon receiving the director's certificate of transfer, the court 892 shall enter an order accordingly.

893 (4) Within twenty-four (24) hours prior to the release or 894 discharge of any civilly committed patient, other than a temporary 895 pass due to sickness or death in the patient's family, the 896 director shall give or cause to be given notice of such release or 897 discharge to one (1) member of the patient's immediate family, 898 provided the member of the patient's immediate family has signed the consent to release form provided under subsection (5) and has 899 900 furnished in writing a current address and telephone number, if 901 applicable, to the director for such purpose. The notice of release shall also be provided to any victim of such person and/or 902 to any person to whom a restraining order has been entered to 903 904 protect from such person. The notice to the family member shall

11/SS26/SB2836CR.3J PAGE 28 905 include the psychiatric diagnosis of any chronic mental disorder 906 incurred by the civilly committed patient and any medications 907 provided or prescribed to the patient for such conditions.

908 (5) All providers of service in a treatment facility, 909 whether in a community mental health/intellectual disability 910 center, region or state psychiatric hospital, are authorized and directed to request a consent to release information from all 911 patients which will allow that entity to involve the family in the 912 913 patient's treatment. Such release form shall be developed by the Department of Mental Health and provided to all treatment 914 915 facilities, community mental health/intellectual disability centers and state facilities. All such facilities shall request 916 917 such a release of information upon the date of admission of the patient to the facility or at least by the time the patient is 918 919 discharged.

920 (6) Each month the Department of Mental Health-operated 921 <u>facilities shall provide the directors of community mental health</u> 922 <u>centers the names of all individuals who were discharged to their</u> 923 <u>catchment area with referral for community-based services. The</u> 924 <u>department shall require community mental health care providers to</u> 925 <u>report monthly the date that service(s) were initiated and type of</u> 926 <u>service(s) initiated.</u>

927 SECTION 7. This act shall take effect and be in force from 928 and after July 1, 2011.

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

AN ACT ENTITLED THE "ROSE ISABEL WILLIAMS MENTAL HEALTH 1 REFORM ACT OF 2011"; TO AMEND SECTION 41-4-1 AND CREATE NEW 2 3 SECTION 41-4-2, MISSISSIPPI CODE OF 1972, TO AUTHORIZE THE STATE 4 BOARD OF MENTAL HEALTH TO ADOPT REGULATIONS TO ENSURE THAT CORE 5 ADULT MENTAL HEALTH SERVICES, CHILD MENTAL HEALTH SERVICES, 6 INTELLECTUAL/DEVELOPMENTAL DISABILITIES SERVICES AND CRISIS 7 SERVICES ARE PROVIDED IN EVERY COUNTY OF THE STATE; TO AMEND SECTION 41-4-7, MISSISSIPPI CODE OF 1972, TO DIRECT THE BOARD TO 8 APPOINT A MEDICAL DIRECTOR FOR THE DEPARTMENT OF MENTAL HEALTH; TO EMPOWER THE BOARD TO ESTABLISH MINIMUM STANDARDS AND CERTIFY THE 9 10 11 REQUIRED SERVICES FOR THE REGIONAL MENTAL HEALTH COMMISSIONS AND

11/SS26/SB2836CR.3J PAGE 29 12 CENTERS AND OTHER COMMUNITY SERVICE PROVIDERS IN ORDER TO RECEIVE STATE FUNDS FOR SUCH SERVICES, AND TO IDENTIFY APPROPRIATE 13 COMMUNITY SERVICE PROVIDERS TO PROVIDE SUCH CORE SERVICES; TO 14 DIRECT THE BOARD TO ESTABLISH A STRATEGIC PLANNING AND BEST 15 16 PRACTICES COMMITTEE FOR MENTAL HEALTH SERVICES; TO AMEND SECTION 41-19-33, MISSISSIPPI CODE OF 1972, TO DIRECT THE REGIONAL MENTAL 17 18 HEALTH/INTELLECTUAL/DEVELOPMENTAL DISABILITY COMMISSIONS AND CENTERS TO ADMINISTER MENTAL HEALTH/INTELLECTUAL DISABILITY 19 PROGRAMS REQUIRED BY THE BOARD IN ORDER TO BE ELIGIBLE FOR STATE 20 FUNDING, TO ANNUALLY SUBMIT AN ITEMIZED SERVICE PLAN TO THE 21 DEPARTMENT FOR CERTIFICATION; TO AMEND SECTION 41-21-87, 22 MISSISSIPPI CODE OF 1972, TO PROVIDE NOTICE FOR THE DISCHARGE OF A CIVILLY COMMITTED PATIENT, AND TO DIRECT THE DEPARTMENT OF MENTAL 23 24 25 HEALTH TO PROVIDE THE DIRECTORS OF COMMUNITY MENTAL HEALTH CENTERS THE NAMES OF INDIVIDUALS DISCHARGED TO THEIR CATCHMENT AREA WITH A 2.6 27 REFERRAL FOR COMMUNITY-BASED SERVICES; AND FOR RELATED PURPOSES.

CONFEREES FOR THE SENATE	CONFEREES FOR THE HOUSE
X (SIGNED)	X (SIGNED)
Bryan	Holland
X (SIGNED)	X (SIGNED)
Davis	Barker
X (SIGNED)	X (SIGNED)
Hopson	Warren