Adopted AMENDMENT NO 1 PROPOSED TO

Senate Bill No. 2610

BY: Senator(s) Bryan, McLendon, Jordan, Jackson (11th), Butler, Thomas, Witherspoon

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

41 SECTION 1. This act shall be known and may be cited as the 42 Rose Isabel Williams Mental Health Reform Act of 2020. The goal 43 of the act is to reform the current Mississippi mental health 44 delivery system so that necessary services, supports and operational structures for all its citizens with mental illness 45 and/or alcohol and drug dependence and/or comorbidity, whether 46 47 children, youth or adults, are accessible and delivered preferably 48 in the communities where these citizens live. To accomplish this 49 goal, this act provides for a Coordinator of Mental Health 50 Accessibility with the power and duties set forth in this act.

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51 SECTION 2. As used in this act, the following terms shall 52 have the following meanings, unless the context clearly indicates 53 a different meaning: 54 "Community mental health center" means a facility (a) authorized under Section 41-19-33. 55 56 "Mental health services" shall include all services (b) 57 offered by the mental health system in Mississippi, including, but not limited to, the following: 58 59 (i) Community mental health services, including: 60 1. Programs of assertive community treatment; 61 2. Mobile crisis response services; Crisis stabilization units; 62 3. 63 4. Community support services; 64 5. Peer support services; 65 6. Supported employment; and 66 7. Permanent supported housing; and Institutional mental health services which 67 (ii) are services that encompass civil commitment or hospitalization in 68 69 a psychiatric hospital; 70 (iii) Mental health services provided in 71 facilities authorized in Title 47, Mississippi Code of 1972; 72 (iv) Core adult mental health services; 73 (v) Child mental health services; 74 (vi) Intellectual/developmental disability 75 services;

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76 (vii) Substance abuse prevention and 77 treatment/rehabilitation services; and 78 (viii) Any combination of the services defined in 79 this paragraph (b). 80 "Mental health system" means the facilities, (C) 81 institutions, centers, entities, persons and providers that 82 provide mental health services in Mississippi. "Regional commission" means a commission 83 (d) established in Section 41-19-33. 84 85 **SECTION 3.** (1) (a) There is created within the Department 86 of Finance and Administration a temporary position to be known as 87 the "Coordinator of Mental Health Accessibility." 88 (i) The Governor, with the advice and consent of (b) 89 the Senate, shall appoint the Coordinator of Mental Health 90 Accessibility by April 20, 2020. 91 (ii) In making the appointment, the Governor shall 92 consult with the Department of Mental Health, the Division of Medicaid, the regional commissions and any advocacy groups that he 93 94 determines to be necessary. 95 The temporary position of Coordinator of Mental (C) 96 Health Accessibility shall dissolve on June 30, 2023. 97 The temporary position shall be a subdivision housed (2)within, but independent of, the Department of Finance and 98 99 Administration. The coordinator shall maintain complete and exclusive operational control of the subdivision's functions. 100

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101 (3) The coordinator shall have a master's degree, doctoral 102 degree or juris doctorate from an accredited institution of higher 103 learning and not have less than five (5) years of professional 104 experience.

105 (4) All of the expenses of the coordinator's office,
106 including the coordinator's salary and the salaries of any staff,
107 shall be paid out of funds specifically appropriated for this
108 purpose.

109 (5) The Department of Finance and Administration shall 110 provide certain administrative support of the coordinator such as 111 payroll, purchasing, personnel support and clerical and reception 112 functions.

113 <u>SECTION 4.</u> The coordinator shall have the following powers 114 and duties:

(a) To perform a comprehensive review of Mississippi's mental health system to determine whether the mental health services, including community mental health services, are offered in each county and available to the entire population of each county, especially to those with serious and persistent mental illness.

121 (b) To analyze and review the structure of the mental122 health system.

123 (c) To review the adequacy and quality of the 124 individualized supports and services provided to persons

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125 discharged from the state hospitals or to persons at risk of 126 institutionalization throughout the state.

127 (d) To review the quarterly financial statements and
128 status reports of the individual community mental health centers
129 described in Section 41-19-33(3)(b).

130 (e) To consult with the Special Master appointed in the
131 <u>United States of America v. State of Mississippi</u>, No.

3:16-CV-622-CWR-FKB (S.D. Miss. Feb. 25, 2020) or any monitor or 132 133 other person appointed by the court, the Department of Mental Health, the Division of Medicaid, the Department of Rehabilitation 134 135 Services, the Department of Health, county boards of supervisors, 136 regional commissions, community mental health centers, mental 137 health advocates, community leaders and any other necessary parties or entities, both private and governmental, regarding the 138 139 status of the services offered by Mississippi's mental health 140 system.

(f) To determine where in any county, or geographic area within a county, the delivery or availability of mental health services are inadequate.

(g) To determine whether each community mental health center has sufficient funds to provide the required mental health services.

(h) To report on the status of the mental health system
quarterly to the Governor, the Lieutenant Governor, the Speaker of
the House, the Department of Mental Health, the regional

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150 commissions, the Division of Medicaid, the Department of 151 Rehabilitative Services, the Department of Health, the Department 152 of Finance and Administration, the PEER Committee and the 153 Legislative Budget Office. The coordinator shall deliver the 154 quarterly status report to the Secretary of the Senate and the 155 Clerk of the House who shall disseminate the report to the 156 appropriate members.

157 <u>SECTION 5.</u> In fulfilling the responsibilities of this act,
158 the coordinator may, subject to federal law:

159 Hire the deputies, assistants and staff needed for (a) 160 the performance of his or her duties under this act. The 161 coordinator, in consultation with the State Personnel Board, shall 162 set the compensation of any hired employees from any funds made 163 available for that purpose. The Department of Mental Health, upon request from the coordinator, may supplement the administrative 164 165 and support staff of the subdivision. The coordinator shall have 166 complete and exclusive operational control over any staff provided 167 by the Department of Mental Health under this paragraph (a);

(b) Enter any part of the mental health system,
including any facility or building used to provide mental health
services.

171 (c) Interview, on a confidential basis or otherwise,172 persons and employees in the mental health system.

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(d) Access services, documents, records, programs and materials as necessary to assess the status of the mental health system.

(e) Recommend changes to any portion of the mental health system either in the coordinator's status reports or to the board(s) of supervisors or regional commissions or to the Department of Mental Health or as otherwise determined to be necessary by the coordinator.

(f) Develop and implement a plan to provide access to mental health services in any county, or geographic area within a county, where services are determined to be inadequate, if required by Section 5 of this act.

185 (g) Communicate with any governmental entity as is186 necessary to fulfill the coordinator's duties under this act.

187 (h) Perform any other actions as the coordinator deems188 necessary to fulfill the coordinator's duties under this act.

189 <u>SECTION 6.</u> (1) When the coordinator determines that a 190 county or a geographic area within a county offers inadequate 191 mental health services, the coordinator shall inform the board(s) 192 of supervisors and the regional commission of the geographic areas 193 where the services are inadequate.

194 (2) When the coordinator determines services are inadequate, 195 the coordinator shall determine if there is a plan in place or a 196 plan being developed to increase access to mental health services 197 in that county or the geographic area of the county where mental

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198 health services are inadequate and shall assess the viability of 199 the plan, including its sufficiency to address the inadequacy of 200 the available mental health services.

(3) If there is no plan in place or being developed, the coordinator may allow the county board of supervisors or the regional commission a reasonable time to develop and implement a plan.

(4) If the coordinator determines that the plan is or will be insufficient to provide mental health services to the population of the county or the geographic area within the county, the coordinator shall develop and implement a plan to facilitate an increased access to mental health services by:

(a) Preferably requiring the regional commission to reassign the county that has inadequate mental health services to a different regional commission if that regional commission is willing to accept the county; or

(b) Requiring the regional commission to reassign the county or geographic area that has inadequate mental health services to the Board of Mental Health for the provision of mental health services; or

(c) Arranging for a nonprofit entity to provide sufficient mental health services to individuals in the county or the geographic area that has inadequate mental health services, regardless of the individual's ability to pay.

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222 <u>SECTION 7.</u> The Department of Mental Health, the regional 223 commissions, the Division of Medicaid, the Department of 224 Rehabilitation Services, the Department of Health, the Department 225 of Finance and Administration, the PEER Committee, and the 226 Legislative Budget Office shall cooperate with the coordinator 227 under this act and shall allow the coordinator or his or her staff 228 to, as it relates to the performing of his or her duties:

(a) Enter any part of the mental health system,
including any facility or building used to provide mental health
services;

(b) Interview any person employed by or receivingservices from the respective entity; and

(c) Access services, documents, records, programs and
 materials as necessary to assess the status of the mental health
 system.

237 **SECTION 8.** Section 41-4-7, Mississippi Code of 1972, is 238 amended as follows:

239 41-4-7. The State Board of Mental Health shall have the 240 following powers and duties:

(a) To appoint a full-time Executive Director of the
Department of Mental Health, who shall be employed by the board
and shall serve as executive secretary to the board. The first
director shall be a duly licensed physician with special interest
and competence in psychiatry, and shall possess a minimum of three
(3) years' experience in clinical and administrative psychiatry.

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247 Subsequent directors shall possess at least a master's degree or 248 its equivalent, and shall possess at least ten (10) years' 249 administrative experience in the field of mental health. The 250 salary of the executive director shall be determined by the board;

251 To appoint a Medical Director for the Department of (b) 252 Mental Health. The medical director shall provide clinical 253 oversight in the implementation of evidence-based and best 254 practices; provide clinical leadership in the integration of 255 mental health, intellectual disability and addiction services with 256 community partners in the public and private sectors; and provide 257 oversight regarding standards of care. The medical director shall 258 serve at the will and pleasure of the board, and will undergo an 259 annual review of job performance and future service to the 260 department;

(c) To cooperate with the Strategic Planning and Best Practices Committee created in Section 41-4-10, Mississippi Code of 1972, in establishing and implementing its state strategic plan;

(d) To develop a strategic plan for the development of
services for persons with mental illness, persons with
developmental disabilities and other clients of the public mental
health system. Such strategic planning program shall require that
the board, acting through the Strategic Planning and Best
Practices Committee, perform the following functions respecting
the delivery of services:

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(i) Establish measures for determining the efficiency and effectiveness of the services specified in Section 41-4-1(2);

(ii) Conducting studies of community-based care in other jurisdictions to determine which services offered in these jurisdictions have the potential to provide the citizens of Mississippi with more effective and efficient community-based care;

(iii) Evaluating the efficiency and effectiveness of the services specified in Section 41-4-1(2);

(iv) Recommending to the Legislature by January 1,
283 2014, any necessary additions, deletions or other changes
284 necessary to the services specified in Section 41-4-1(2);

(v) Implementing by July 1, 2012, a system of performance measures for the services specified in Section 287 41-4-1(2);

(vi) Recommending to the Legislature any changes that the department believes are necessary to the current laws addressing civil commitment;

(vii) Conducting any other activities necessary to the evaluation and study of the services specified in Section 41-4-1(2);

(viii) Assisting in conducting all necessary
strategic planning for the delivery of all other services of the
department. Such planning shall be conducted so as to produce a

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297 single strategic plan for the services delivered by the public 298 mental health system and shall establish appropriate mission 299 statements, goals, objectives and performance indicators for all 300 programs and services of the public mental health system. For 301 services other than those specified in Section 41-4-1(2), the 302 committee shall recommend to the State Board of Mental Health a 303 strategic plan that the board may adopt or modify;

304 (e) To set up state plans for the purpose of
305 controlling and treating any and all forms of mental and emotional
306 illness, alcoholism, drug misuse and developmental disabilities;

307

(f) [Repealed]

308 (g) To enter into contracts with any other state or 309 federal agency, or with any private person, organization or group 310 capable of contracting, if it finds such action to be in the 311 public interest;

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

(i) To certify, coordinate and establish minimum
standards and establish minimum required services, as specified in
Section 41-4-1(2), for regional mental health and intellectual
disability commissions and other community service providers for
community or regional programs and services in adult mental
health, children and youth mental health, intellectual

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322 disabilities, alcoholism, drug misuse, developmental disabilities, 323 compulsive gambling, addictive disorders and related programs 324 throughout the state. Such regional mental health and 325 intellectual disability commissions and other community service 326 providers shall, on or before July 1 of each year, submit an 327 annual operational plan to the State Department of Mental Health 328 for approval or disapproval based on the minimum standards and 329 minimum required services established by the department for 330 certification and itemize the services specified in Section 331 41-4-1(2). As part of the annual operation plan required by this 332 paragraph (i) submitted by any regional community mental health 333 center or by any other reasonable certification deemed acceptable 334 by the department, the community mental health center shall state 335 those services specified in Section 41-4-1(2) that it will provide 336 and also those services that it will not provide. If the 337 department finds deficiencies in the plan of any regional 338 commission or community service provider based on the minimum 339 standards and minimum required services established for 340 certification, the department shall give the regional commission 341 or community service provider a six-month probationary period to 342 bring its standards and services up to the established minimum 343 standards and minimum required services. After the six-month 344 probationary period, if the department determines that the 345 regional commission or community service provider still does not 346 meet the minimum standards and minimum required services

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347 established for certification, the department may remove the 348 certification of the commission or provider and from and after July 1, 2011, the commission or provider shall be ineligible for 349 350 state funds from Medicaid reimbursement or other funding sources 351 for those services. However, the department shall not mandate a 352 standard or service, or decertify a regional commission or 353 community service provider for not meeting a standard or service, 354 if the standard or service does not have funding appropriated by 355 the Legislature or have a state, federal or local funding source 356 identified by the department. No county shall be required to levy 357 millage to provide a mandated standard or service above the 358 minimum rate required by Section 41-19-39. After the six-month 359 probationary period, the department may identify an appropriate 360 community service provider to provide any core services in that 361 county that are not provided by a community mental health center. 362 However, the department shall not offer reimbursement or other 363 accommodations to a community service provider of core services 364 that were not offered to the decertified community mental health 365 center for the same or similar services. The State Board of 366 Mental Health shall promulgate rules and regulations necessary to 367 implement the provisions of this paragraph (i), in accordance with 368 the Administrative Procedures Law (Section 25-43-1.101 et seq.);

(j) To establish and promulgate reasonable minimum standards for the construction and operation of state and all Department of Mental Health certified facilities, including

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372 reasonable minimum standards for the admission, diagnosis, care, 373 treatment, transfer of patients and their records, and also 374 including reasonable minimum standards for providing day care, 375 outpatient care, emergency care, inpatient care and follow-up 376 care, when such care is provided for persons with mental or 377 emotional illness, an intellectual disability, alcoholism, drug 378 misuse and developmental disabilities;

379 To implement best practices for all services (k) 380 specified in Section 41-4-1(2), and to establish and implement all 381 other services delivered by the Department of Mental Health. То 382 carry out this responsibility, the board shall require the 383 department to establish a division responsible for developing best 384 practices based on a comprehensive analysis of the mental health 385 environment to determine what the best practices for each service 386 In developing best practices, the board shall consider the are. 387 cost and benefits associated with each practice with a goal of 388 implementing only those practices that are cost-effective 389 practices for service delivery. Such best practices shall be 390 utilized by the board in establishing performance standards and 391 evaluations of the community mental health centers' services 392 required by paragraph (d) of this section;

(1) To assist community or regional programs consistent with the purposes of this chapter by making grants and contracts from available funds;

20/SS26/SB2610A.J PAGE 15 396 (m) To establish and collect reasonable fees for 397 necessary inspection services incidental to certification or 398 compliance;

399 (n) To accept gifts, trusts, bequests, grants,400 endowments or transfers of property of any kind;

401 (o) To receive monies coming to it by way of fees for402 services or by appropriations;

403 To serve as the single state agency in receiving (p) 404 and administering any and all funds available from any source for 405 the purpose of service delivery, training, research and education 406 in regard to all forms of mental illness, intellectual 407 disabilities, alcoholism, drug misuse and developmental 408 disabilities, unless such funds are specifically designated to a 409 particular agency or institution by the federal government, the 410 Mississippi Legislature or any other grantor;

411 (a) To establish mental health holding centers for the 412 purpose of providing short-term emergency mental health treatment, places for holding persons awaiting commitment proceedings or 413 414 awaiting placement in a state mental health facility following 415 commitment, and for diverting placement in a state mental health 416 facility. These mental health holding facilities shall be readily accessible, available statewide, and be in compliance with 417 emergency services' minimum standards. 418 They shall be 419 comprehensive and available to triage and make appropriate 420 clinical disposition, including the capability to access inpatient

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421 services or less restrictive alternatives, as needed, as 422 determined by medical staff. Such facility shall have medical, 423 nursing and behavioral services available on a 424 twenty-four-hour-a-day basis. The board may provide for all or 425 part of the costs of establishing and operating the holding 426 centers in each district from such funds as may be appropriated to 427 the board for such use, and may participate in any plan or agreement with any public or private entity under which the entity 428 429 will provide all or part of the costs of establishing and 430 operating a holding center in any district;

431 (r) To certify/license case managers, mental health 432 therapists, intellectual disability therapists, mental 433 health/intellectual disability program administrators, addiction 434 counselors and others as deemed appropriate by the board. Persons 435 already professionally licensed by another state board or agency 436 are not required to be certified/licensed under this section by 437 the Department of Mental Health. The department shall not use 438 professional titles in its certification/licensure process for 439 which there is an independent licensing procedure. Such 440 certification/licensure shall be valid only in the state mental 441 health system, in programs funded and/or certified by the 442 Department of Mental Health, and/or in programs certified/licensed by the State Department of Health that are operated by the state 443 mental health system serving persons with mental illness, an 444

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445 intellectual disability, a developmental disability or addictions, 446 and shall not be transferable;

447 To develop formal mental health worker (s) qualifications for regional mental health and intellectual 448 449 disability commissions and other community service providers. The 450 State Personnel Board shall develop and promulgate a recommended 451 salary scale and career ladder for all regional mental 452 health/intellectual disability center therapists and case managers 453 who work directly with clients. The State Personnel Board shall 454 also develop and promulgate a career ladder for all direct care 455 workers employed by the State Department of Mental Health;

456 (t) The employees of the department shall be governed
457 by personnel merit system rules and regulations, the same as other
458 employees in state services;

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

463 (v) To grant easements for roads, utilities and any 464 other purpose it finds to be in the public interest;

(w) To survey statutory designations, building markers and the names given to mental health/intellectual disability facilities and proceedings in order to recommend deletion of obsolete and offensive terminology relative to the mental health/intellectual disability system. Based upon a

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470 recommendation of the executive director, the board shall have the 471 authority to name/rename any facility operated under the auspices 472 of the Department of Mental Health for the sole purpose of 473 deleting such terminology;

474 (x) To ensure an effective case management system 475 directed at persons who have been discharged from state and 476 private psychiatric hospitals to ensure their continued well-being 477 in the community;

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

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

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

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

500 (cc) To establish and maintain a toll-free grievance 501 reporting telephone system for the receipt and referral for 502 investigation of all complaints by clients of state and community 503 mental health/intellectual disability facilities;

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

508 To develop and implement state plans for the (ee) 509 purpose of assisting with the care and treatment of persons with 510 Alzheimer's disease and other dementia. This plan shall include 511 education and training of service providers, caregivers in the home setting and others who deal with persons with Alzheimer's 512 513 disease and other dementia, and development of adult day care, 514 family respite care and counseling programs to assist families who 515 maintain persons with Alzheimer's disease and other dementia in 516 the home setting. No agency shall be required to provide any 517 services under this section until such time as sufficient funds 518 have been appropriated or otherwise made available by the

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519 Legislature specifically for the purposes of the treatment of 520 persons with Alzheimer's and other dementia;

521 Working with the advice and consent of the (ff) 522 administration of Ellisville State School, to enter into 523 negotiations with the Economic Development Authority of Jones 524 County for the purpose of negotiating the possible exchange, lease 525 or sale of lands owned by Ellisville State School to the Economic 526 Development Authority of Jones County. It is the intent of the 527 Mississippi Legislature that such negotiations shall ensure that the financial interest of the persons with an intellectual 528 529 disability served by Ellisville State School will be held 530 paramount in the course of these negotiations. The Legislature 531 also recognizes the importance of economic development to the 532 citizens of the State of Mississippi and Jones County, and 533 encourages fairness to the Economic Development Authority of Jones 534 County. Any negotiations proposed which would result in the 535 recommendation for exchange, lease or sale of lands owned by 536 Ellisville State School must have the approval of the State Board 537 of Mental Health. The State Board of Mental Health may and has 538 the final authority as to whether or not these negotiations result 539 in the exchange, lease or sale of the properties it currently 540 holds in trust for persons with an intellectual disability served 541 at Ellisville State School.

542 If the State Board of Mental Health authorizes the sale of 543 lands owned by Ellisville State School, as provided for under this

544 paragraph (ff), the monies derived from the sale shall be placed 545 into a special fund that is created in the State Treasury to be 546 known as the "Ellisville State School Client's Trust Fund." The 547 principal of the trust fund shall remain inviolate and shall never 548 be expended. Any interest earned on the principal may be expended 549 solely for the benefits of clients served at Ellisville State 550 The State Treasurer shall invest the monies of the trust School. 551 fund in any of the investments authorized for the Mississippi 552 Prepaid Affordable College Tuition Program under Section 37-155-9, 553 and those investments shall be subject to the limitations 554 prescribed by Section 37-155-9. Unexpended amounts remaining in 555 the trust fund at the end of a fiscal year shall not lapse into 556 the State General Fund, and any interest earned on amounts in the 557 trust fund shall be deposited to the credit of the trust fund. 558 The administration of Ellisville State School may use any interest 559 earned on the principal of the trust fund, upon appropriation by 560 the Legislature, as needed for services or facilities by the 561 clients of Ellisville State School. Ellisville State School shall 562 make known to the Legislature, through the Legislative Budget 563 Committee and the respective Appropriations Committees of the 564 House and Senate, its proposed use of interest earned on the 565 principal of the trust fund for any fiscal year in which it 566 proposes to make expenditures thereof. The State Treasurer shall 567 provide Ellisville State School with an annual report on the 568 Ellisville State School Client's Trust Fund to indicate the total

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569 monies in the trust fund, interest earned during the year, 570 expenses paid from the trust fund and such other related 571 information.

572 Nothing in this section shall be construed as applying to or 573 affecting mental health/intellectual disability services provided 574 by hospitals as defined in Section 41-9-3(a), and/or their 575 subsidiaries and divisions, which hospitals, subsidiaries and 576 divisions are licensed and regulated by the Mississippi State 577 Department of Health unless such hospitals, subsidiaries or divisions voluntarily request certification by the Mississippi 578 579 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;

583 Working with the advice and consent of the (qq) 584 administration of Boswell Regional Center, to enter into 585 negotiations with the Economic Development Authority of Simpson 586 County for the purpose of negotiating the possible exchange, lease 587 or sale of lands owned by Boswell Regional Center to the Economic 588 Development Authority of Simpson County. It is the intent of the 589 Mississippi Legislature that such negotiations shall ensure that 590 the financial interest of the persons with an intellectual 591 disability served by Boswell Regional Center will be held 592 paramount in the course of these negotiations. The Legislature 593 also recognizes the importance of economic development to the

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594 citizens of the State of Mississippi and Simpson County, and 595 encourages fairness to the Economic Development Authority of 596 Simpson County. Any negotiations proposed which would result in 597 the recommendation for exchange, lease or sale of lands owned by 598 Boswell Regional Center must have the approval of the State Board 599 of Mental Health. The State Board of Mental Health may and has 600 the final authority as to whether or not these negotiations result 601 in the exchange, lease or sale of the properties it currently 602 holds in trust for persons with an intellectual disability served 603 at Boswell Regional Center. In any such exchange, lease or sale 604 of such lands owned by Boswell Regional Center, title to all 605 minerals, oil and gas on such lands shall be reserved, together 606 with the right of ingress and egress to remove same, whether such 607 provisions be included in the terms of any such exchange, lease or 608 sale or not.

609 If the State Board of Mental Health authorizes the sale of 610 lands owned by Boswell Regional Center, as provided for under this paragraph (gg), the monies derived from the sale shall be placed 611 612 into a special fund that is created in the State Treasury to be 613 known as the "Boswell Regional Center Client's Trust Fund." The 614 principal of the trust fund shall remain inviolate and shall never 615 be expended. Any earnings on the principal may be expended solely 616 for the benefits of clients served at Boswell Regional Center. 617 The State Treasurer shall invest the monies of the trust fund in any of the investments authorized for the Mississippi Prepaid 618

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619 Affordable College Tuition Program under Section 37-155-9, and 620 those investments shall be subject to the limitations prescribed 621 by Section 37-155-9. Unexpended amounts remaining in the trust 622 fund at the end of a fiscal year shall not lapse into the State 623 General Fund, and any earnings on amounts in the trust fund shall 624 be deposited to the credit of the trust fund. The administration 625 of Boswell Regional Center may use any earnings on the principal 626 of the trust fund, upon appropriation by the Legislature, as 627 needed for services or facilities by the clients of Boswell 628 Regional Center. Boswell Regional Center shall make known to the 629 Legislature, through the Legislative Budget Committee and the 630 respective Appropriations Committees of the House and Senate, its 631 proposed use of the earnings on the principal of the trust fund 632 for any fiscal year in which it proposes to make expenditures 633 The State Treasurer shall provide Boswell Regional thereof. 634 Center with an annual report on the Boswell Regional Center 635 Client's Trust Fund to indicate the total monies in the trust 636 fund, interest and other income earned during the year, expenses 637 paid from the trust fund and such other related information. 638 Nothing in this section shall be construed as applying to or 639 affecting mental health/intellectual disability services provided

641 subsidiaries and divisions, which hospitals, subsidiaries and 642 divisions are licensed and regulated by the Mississippi State 643 Department of Health unless such hospitals, subsidiaries or

by hospitals as defined in Section 41-9-3(a), and/or their

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644 divisions voluntarily request certification by the Mississippi645 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;

649 (hh) Notwithstanding any other section of the code, the 650 Board of Mental Health shall be authorized to fingerprint and 651 perform a criminal history record check on every employee or 652 volunteer. Every employee and volunteer shall provide a valid current social security number and/or driver's license number 653 654 which shall be furnished to conduct the criminal history record 655 If no disqualifying record is identified at the state check. 656 level, fingerprints shall be forwarded to the Federal Bureau of 657 Investigation for a national criminal history record check;

658 The Department of Mental Health shall have the (ii) 659 authority for the development of a consumer friendly single point 660 of intake and referral system within its service areas for persons 661 with mental illness, an intellectual disability, developmental 662 disabilities or alcohol or substance abuse who need assistance 663 identifying or accessing appropriate services. The department 664 will develop and implement a comprehensive evaluation procedure 665 ensuring that, where appropriate, the affected person or their 666 parent or legal guardian will be involved in the assessment and 667 planning process. The department, as the point of intake and as 668 service provider, shall have the authority to determine the

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669 appropriate institutional, hospital or community care setting for 670 persons who have been diagnosed with mental illness, an 671 intellectual disability, developmental disabilities and/or alcohol 672 or substance abuse, and may provide for the least restrictive 673 placement if the treating professional believes such a setting is 674 appropriate, if the person affected or their parent or legal 675 guardian wants such services, and if the department can do so with 676 a reasonable modification of the program without creating a 677 fundamental alteration of the program. The least restrictive 678 setting could be an institution, hospital or community setting, 679 based upon the needs of the affected person or their parent or 680 legal guardian;

681 (jj) To have the sole power and discretion to enter 682 into, sign, execute and deliver long-term or multiyear leases of 683 real and personal property owned by the Department of Mental 684 Health to and from other state and federal agencies and private 685 entities deemed to be in the public's best interest. Any monies 686 derived from such leases shall be deposited into the funds of the 687 Department of Mental Health for its exclusive use. Leases to 688 private entities shall be approved by the Department of Finance 689 and Administration and all leases shall be filed with the 690 Secretary of State;

(kk) To certify and establish minimum standards and
minimum required services for county facilities used for housing,
feeding and providing medical treatment for any person who has

694 been involuntarily ordered admitted to a treatment center by a 695 court of competent jurisdiction. The minimum standard for the 696 initial assessment of those persons being housed in county 697 facilities is for the assessment to be performed by a physician, 698 preferably a psychiatrist, or by a nurse practitioner, preferably 699 a psychiatric nurse practitioner. If the department finds 700 deficiencies in any such county facility or its provider based on 701 the minimum standards and minimum required services established 702 for certification, the department shall give the county or its 703 provider a six-month probationary period to bring its standards 704 and services up to the established minimum standards and minimum 705 required services. After the six-month probationary period, if 706 the department determines that the county or its provider still 707 does not meet the minimum standards and minimum required services, 708 the department may remove the certification of the county or 709 provider and require the county to contract with another county 710 having a certified facility to hold those persons for that period 711 of time pending transportation and admission to a state treatment 712 facility. Any cost incurred by a county receiving an 713 involuntarily committed person from a county with a decertified holding facility shall be reimbursed by the home county to the 714 715 receiving county * * *; and

716 (11) To provide mental health services to persons
717 within the counties and geographic areas assigned to the
718 department by the coordinator under Section 6(4) of this act. The

719 State Board of Mental Health shall promulgate any rules and

720 regulations:

721 (i) Necessary to implement this paragraph (ll); 722 and

723 (ii) Requested by the coordinator in the 724 fulfillment of his or her duties under Sections 1 through 7 of 725 this act.

726 **SECTION 9.** Section 41-19-33, Mississippi Code of 1972, is 727 amended as follows:

728 41-19-33. (1) Each region so designated or established 729 under Section 41-19-31 shall establish a regional commission to be 730 composed of members appointed by the boards of supervisors of the 731 various counties in the region. It shall be the duty of such 732 regional commission to administer mental health/intellectual 733 disability programs certified and required by the State Board of 734 Mental Health and as specified in Section 41-4-1(2). In addition, 735 once designated and established as provided hereinabove, a 736 regional commission shall have the following authority and shall 737 pursue and promote the following general purposes:

(a) To establish, own, lease, acquire, construct,
build, operate and maintain mental illness, mental health,
intellectual disability, alcoholism and general rehabilitative
facilities and services designed to serve the needs of the people
of the region so designated, provided that the services supplied
by the regional commissions shall include those services

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744 determined by the Department of Mental Health to be necessary and 745 may include, in addition to the above, services for persons with 746 developmental and learning disabilities; for persons suffering 747 from narcotic addiction and problems of drug abuse and drug dependence; and for the aging as designated and certified by the 748 749 Department of Mental Health. Such regional mental health and 750 intellectual disability commissions and other community service 751 providers shall, on or before July 1 of each year, submit an 752 annual operational plan to the Department of Mental Health for 753 approval or disapproval based on the minimum standards and minimum 754 required services established by the department for certification 755 and itemize the services as specified in Section 41-4-1(2). As 756 part of the annual operation plan required by Section 41-4-7(h) 757 submitted by any regional community mental health center or by any 758 other reasonable certification deemed acceptable by the 759 department, the community mental health center shall state those 760 services specified in Section 41-4-1(2) that it will provide and 761 also those services that it will not provide. If the department 762 finds deficiencies in the plan of any regional commission or 763 community service provider based on the minimum standards and 764 minimum required services established for certification, the 765 department shall give the regional commission or community service 766 provider a six-month probationary period to bring its standards 767 and services up to the established minimum standards and minimum 768 required services. After the six-month probationary period, if

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769 the department determines that the regional commission or 770 community service provider still does not meet the minimum 771 standards and minimum required services established for 772 certification, the department may remove the certification of the 773 commission or provider, and from and after July 1, 2011, the 774 commission or provider shall be ineligible for state funds from 775 Medicaid reimbursement or other funding sources for those 776 services. After the six-month probationary period, the Department 777 of Mental Health may identify an appropriate community service provider to provide any core services in that county that are not 778 779 provided by a community mental health center. However, the 780 department shall not offer reimbursement or other accommodations 781 to a community service provider of core services that were not 782 offered to the decertified community mental health center for the same or similar services. 783

784 (b) To provide facilities and services for the 785 prevention of mental illness, mental disorders, developmental and 786 learning disabilities, alcoholism, narcotic addiction, drug abuse, 787 drug dependence and other related handicaps or problems (including the problems of the aging) among the people of the region so 788 789 designated, and for the rehabilitation of persons suffering from 790 such illnesses, disorders, handicaps or problems as designated and certified by the Department of Mental Health. 791

792 (c) To promote increased understanding of the problems793 of mental illness, intellectual disabilities, alcoholism,

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developmental and learning disabilities, narcotic addiction, drug abuse and drug dependence and other related problems (including the problems of the aging) by the people of the region, and also to promote increased understanding of the purposes and methods of the rehabilitation of persons suffering from such illnesses, disorders, handicaps or problems as designated and certified by the Department of Mental Health.

801 (d) To enter into contracts and to make such other 802 arrangements as may be necessary, from time to time, with the 803 United States government, the government of the State of 804 Mississippi and such other agencies or governmental bodies as may 805 be approved by and acceptable to the regional commission for the 806 purpose of establishing, funding, constructing, operating and 807 maintaining facilities and services for the care, treatment and 808 rehabilitation of persons suffering from mental illness, an 809 intellectual disability, alcoholism, developmental and learning 810 disabilities, narcotic addiction, drug abuse, drug dependence and 811 other illnesses, disorders, handicaps and problems (including the 812 problems of the aging) as designated and certified by the 813 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

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819 the purpose of establishing, funding, constructing, operating and 820 maintaining facilities and services for the care, treatment and 821 rehabilitation of persons suffering from mental illness, an 822 intellectual disability, alcoholism, developmental and learning disabilities, narcotic addiction, drug abuse, drug dependence and 823 824 other illnesses, disorders, handicaps and problems (including the 825 problems of the aging) relating to minimum services established by 826 the Department of Mental Health.

827 (f) To promote the general mental health of the people 828 of the region.

829 (q) To pay the administrative costs of the operation of 830 the regional commissions, including per diem for the members of the commission and its employees, attorney's fees, if and when 831 832 such are required in the opinion of the commission, and such other 833 expenses of the commission as may be necessary. The Department of 834 Mental Health standards and audit rules shall determine what 835 administrative cost figures shall consist of for the purposes of 836 this paragraph. Each regional commission shall submit a cost 837 report annually to the Department of Mental Health in accordance 838 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.

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844 (i) To acquire whatever hazard, casualty or workers'
845 compensation insurance that may be necessary for any property,
846 real or personal, owned, leased or rented by the commissions, or
847 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.

852 To provide and finance within their own facilities, (k) 853 or through agreements or contracts with other local, state or 854 federal agencies or institutions, nonprofit corporations, or 855 political subdivisions or representatives thereof, programs and 856 services for persons with mental illness, including treatment for 857 alcoholics, and promulgating and administering of programs to 858 combat drug abuse and programs for services for persons with an 859 intellectual disability.

860 To borrow money from private lending institutions (1) in order to promote any of the foregoing purposes. A commission 861 862 may pledge collateral, including real estate, to secure the 863 repayment of money borrowed under the authority of this paragraph. 864 Any such borrowing undertaken by a commission shall be on terms 865 and conditions that are prudent in the sound judgment of the 866 members of the commission, and the interest on any such loan shall 867 not exceed the amount specified in Section 75-17-105. Any money 868 borrowed, debts incurred or other obligations undertaken by a

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869 commission, regardless of whether borrowed, incurred or undertaken 870 before or after March 15, 1995, shall be valid, binding and 871 enforceable if it or they are borrowed, incurred or undertaken for 872 any purpose specified in this section and otherwise conform to the 873 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 than one (1) region must have prior written approval of the Department of Mental Health before being initiated and annually 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.

(p) To enter into contracts, agreements or other
arrangements with any person, payor, provider or other entity,
under which the regional commission assumes financial risk for the

894 provision or delivery of any services, when deemed to be necessary 895 or appropriate by the regional commission. Any action under this 896 paragraph affecting more than one (1) region must have prior 897 written approval of the Department of Mental Health before being 898 initiated and annually thereafter.

899 (a) To provide direct or indirect funding, grants, 900 financial support and assistance for any health maintenance 901 organization, preferred provider organization or other managed 902 care entity or contractor, where such organization, entity or 903 contractor is operated on a nonprofit basis. Any action under 904 this paragraph affecting more than one (1) region must have prior 905 written approval of the Department of Mental Health before being 906 initiated and annually thereafter.

907 (r) To form, establish, operate, and/or be a member of 908 or participant in, either individually or with one or more other 909 regional commissions, any managed care entity as defined in 910 Section 83-41-403(c). Any action under this paragraph affecting 911 more than one (1) region must have prior written approval of the 912 Department of Mental Health before being initiated and annually 913 thereafter.

914 (s) To meet at least annually with the board of 915 supervisors of each county in its region for the purpose of 916 presenting its total annual budget and total mental 917 health/intellectual disability services system. The commission 918 shall submit an annual report on the adult mental health services,

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919 children mental health services and intellectual disability 920 services required by the State Board of Mental Health.

921 (t) To provide alternative living arrangements for 922 persons with serious mental illness, including, but not limited 923 to, group homes for persons with chronic mental illness.

924 (u) To make purchases and enter into contracts for
925 purchasing in compliance with the public purchasing law, Sections
926 31-7-12 and 31-7-13, with compliance with the public purchasing
927 law subject to audit by the State Department of Audit.

928 To *** * *** ensure that all available funds are used (V) 929 for the benefit of persons with mental illness, persons with an 930 intellectual disability, substance abusers and persons with 931 developmental disabilities with maximum efficiency and minimum 932 administrative cost. At any time a regional commission, and/or other related organization whatever it may be, accumulates surplus 933 934 funds in excess of one-half (1/2) of its annual operating budget, 935 the entity must submit a plan to the Department of Mental Health 936 stating the capital improvements or other projects that require 937 such surplus accumulation. If the required plan is not submitted 938 within forty-five (45) days of the end of the applicable fiscal 939 year, the Department of Mental Health shall withhold all state 940 appropriated funds from such regional commission until such time as the capital improvement plan is submitted. If the submitted 941 942 capital improvement plan is not accepted by the department, the surplus funds shall be expended by the regional commission in the 943

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944 local mental health region on group homes for persons with mental 945 illness, persons with an intellectual disability, substance 946 abusers, children or other mental health/intellectual disability 947 services approved by the Department of Mental Health.

948 Notwithstanding any other provision of law, to (w) 949 fingerprint and perform a criminal history record check on every 950 employee or volunteer. Every employee or volunteer shall provide 951 a valid current social security number and/or driver's license 952 number that will be furnished to conduct the criminal history 953 record check. If no disqualifying record is identified at the 954 state level, fingerprints shall be forwarded to the Federal Bureau 955 of Investigation for a national criminal history record check.

956 (x) Notwithstanding any other provisions of law, each 957 regional commission shall have the authority to create and operate 958 a primary care health clinic to treat (i) its patients; and (ii) 959 its patients' family members related within the third degree; and 960 (iii) its patients' household members or caregivers, subject to 961 the following requirements:

962 (i) The regional commission may employ and
963 compensate any personnel necessary and must satisfy applicable
964 state and federal laws and regulations regarding the
965 administration and operation of a primary care health clinic.
966 (ii) A Mississippi licensed physician must be
967 employed or under agreement with the regional commission to
968 provide medical direction and/or to carry out the physician

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969 responsibilities as described under applicable state and/or 970 federal law and regulations.

971 (iii) The physician providing medical direction
972 for the primary care clinic shall not be certified solely in
973 psychiatry.

974 (iv) A sliding fee scale may be used by the 975 regional commission when no other payer source is identified.

976 (v) The regional commission must ensure services 977 will be available and accessible promptly and in a manner that 978 preserves human dignity and assures continuity of care.

979 (vi) The regional commission must provide a 980 semiannual report to the Chairmen of the Public Health Committees 981 in both the House of Representatives and Senate. At a minimum, 982 for each reporting period, these reports shall describe the number of patients provided primary care services, the types of services 983 984 provided, and the payer source for the patients. Except for 985 patient information and any other information that may be exempt 986 from disclosure under the Health Information Portability and 987 Accountability Act (HIPAA) and the Mississippi Public Records Act, 988 the reports shall be considered public records.

989 (vii) The regional commission must employ or 990 contract with a core clinical staff that is multidisciplinary and 991 culturally and linguistically competent.

992 (viii) The regional commission must ensure that 993 its physician as described in subparagraph (ii) of this paragraph

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994 (x) has admitting privileges at one or more local hospitals or has 995 an agreement with a physician who has admitting privileges at one 996 or more local hospitals to ensure continuity of care.

997 (ix) The regional commission must provide an 998 independent financial audit report to the State Department of 999 Mental Health and, except for patient information and any other 1000 information that may be exempt from disclosure under HIPAA and the 1001 Mississippi Public Records Act, the audit report shall be 1002 considered a public record.

For the purposes of this paragraph (x), the term "caregiver" means an individual who has the principal and primary responsibility for caring for a child or dependent adult, especially in the home setting.

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

1010 The types of services established by the State (2)1011 Department of Mental Health that must be provided by the regional 1012 mental health/intellectual disability centers for certification by 1013 the department, and the minimum levels and standards for those 1014 services established by the department, shall be provided by the 1015 regional mental health/intellectual disability centers to children when such services are appropriate for children, in the 1016 1017 determination of the department.

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1018 (3) (a) Upon an instruction from the coordinator pursuant 1019 to Section 6(4) of this act, a regional commission shall reassign 1020 any of its regions to another regional commission, to the Department of Mental Health, or to a nonprofit entity for the 1021 1022 provision of mental health services. 1023 (b) Each regional commission shall compile quarterly 1024 financial statements and status reports from each individual 1025 community health center. The compiled reports shall be submitted 1026 to the coordinator quarterly. The reports shall contain a: 1027 (i) Balance sheet; 1028 (ii) Statement of operations; 1029 (iii) Statement of cash flows; and 1030 (iv) Description of the status of individual 1031 community health center's actions taken to increase access to and 1032 availability of community mental health services. 1033 SECTION 10. This act shall take effect and be in force from

1034 and after its passage.

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

1 AN ACT TO ENACT THE ROSE ISABEL WILLIAMS MENTAL HEALTH REFORM 2 ACT OF 2020; TO CREATE THE TEMPORARY POSITION OF THE COORDINATOR 3 OF MENTAL HEALTH ACCESSIBILITY AS A SUBDIVISION WITHIN, BUT 4 INDEPENDENT OF, THE DEPARTMENT OF FINANCE AND ADMINISTRATION; TO 5 DEFINE TERMS; TO AUTHORIZE THE GOVERNOR TO APPOINT A COORDINATOR 6 OF MENTAL HEALTH ACCESSIBILITY; TO REQUIRE THE COORDINATOR TO 7 PERFORM A COMPREHENSIVE REVIEW OF THE MENTAL HEALTH SYSTEM, TO 8 CONSULT WITH CERTAIN DEPARTMENTS AND ENTITIES, AND TO REVIEW THE 9 QUARTERLY FINANCIAL STATEMENTS AND STATUS REPORTS OF THE 10 INDIVIDUAL COMMUNITY MENTAL HEALTH CENTERS; TO REQUIRE THE

11 COORDINATOR TO DETERMINE WHERE IN ANY COUNTY, OR GEOGRAPHIC AREA WITHIN A COUNTY, THE DELIVERY OR AVAILABILITY OF MENTAL HEALTH 12 SERVICES ARE INADEQUATE AND TO REPORT ON THE STATUS OF THE MENTAL 13 14 HEALTH SYSTEM TO CERTAIN GOVERNMENTAL AUTHORITIES; TO AUTHORIZE 15 THE COORDINATOR TO HIRE STAFF; TO AUTHORIZE THE COORDINATOR TO 16 INSPECT FACILITIES WITHIN THE MENTAL HEALTH SYSTEM, TO INTERVIEW 17 CERTAIN PERSONS, AND TO ACCESS CERTAIN PROGRAMS, SERVICES, 18 DOCUMENTS AND MATERIALS; TO AUTHORIZE THE COORDINATOR TO APPOINT A 19 COMMITTEE; TO REQUIRE THE COORDINATOR TO COMMUNICATE WITH THE 20 COUNTY BOARD OF SUPERVISORS AND THE REGIONAL COMMISSION FOR THE 21 COUNTY OR GEOGRAPHIC AREA WHERE MENTAL HEALTH SERVICES ARE 22 INADEQUATE TO DETERMINE IF A PLAN IS BEING EXECUTED OR DEVELOPED 23 TO INCREASE ACCESS TO MENTAL HEALTH SERVICES; TO HAVE THE 24 COORDINATOR ASSESS THE VIABILITY OF ANY PLAN; TO REQUIRE THE 25 COORDINATOR, WHEN A PLAN IS DETERMINED TO BE INSUFFICIENT, TO 26 DEVELOP AND IMPLEMENT HIS OR HER OWN PLAN TO PROVIDE MENTAL HEALTH SERVICES TO THE COUNTY OR GEOGRAPHIC AREA WHERE MENTAL HEALTH 27 28 SERVICES ARE INADEQUATE; TO AUTHORIZE THE COORDINATOR TO REASSIGN 29 THE COUNTY OR GEOGRAPHIC AREA WHERE MENTAL HEALTH SERVICES ARE INADEQUATE TO ANOTHER REGIONAL COMMISSION, THE DEPARTMENT OF 30 MENTAL HEALTH, OR A NONPROFIT ENTITY FOR THE PROVISION OF MENTAL 31 32 HEALTH SERVICES; TO REQUIRE CERTAIN AGENCIES AND THE REGIONAL 33 COMMISSIONS TO COOPERATE WITH THE COORDINATOR; TO AMEND SECTION 41-4-7, MISSISSIPPI CODE OF 1972, TO AUTHORIZE THE DEPARTMENT OF 34 35 MENTAL HEALTH TO PROVIDE MENTAL HEALTH SERVICES TO ANY COUNTY OR 36 GEOGRAPHIC AREA REASSIGNED TO THE DEPARTMENT BY THE COORDINATOR 37 AND TO PROMULGATE ANY RULES AND REGULATIONS REQUESTED BY THE 38 COORDINATOR; TO AMEND SECTION 41-19-33, MISSISSIPPI CODE OF 1972, 39 TO CONFORM; AND FOR RELATED PURPOSES.