MISSISSIPPI LEGISLATURE

By: Representatives Creekmore IV, Lancaster, Miles, Felsher, McCarty

To: Judiciary B; Ways and Means

HOUSE BILL NO. 1222
(As Sent to Governor)

1 AN ACT TO CREATE "THE MISSISSIPPI COLLABORATIVE RESPONSE TO
2 MENTAL HEALTH ACT"; TO REQUIRE EACH MUNICIPAL AND COUNTY LAW
3 ENFORCEMENT AGENCY TO PROVIDE MENTAL HEALTH FIRST-AID TRAINING
4 THAT IS EVIDENCE-BASED AND APPROVED BY THE DEPARTMENT OF MENTAL
5 HEALTH; TO REQUIRE EACH MUNICIPAL AND COUNTY LAW ENFORCEMENT
6 AGENCY TO HAVE AT LEAST ONE CRISIS INTERVENTION TRAINED OFFICER BY
7 A CERTAIN DATE; TO PROVIDE THAT AN AGENCY WHICH EMPLOYS LESS THAN
8 FIVE LAW ENFORCEMENT OFFICERS MAY EXECUTE AN AGREEMENT WITH ONE OR
9 MORE LAW ENFORCEMENT AGENCIES TO HAVE A CRISIS INTERVENTION TEAM
10 OFFICER SERVE AS THE OFFICER FOR THAT AGENCY; TO CREATE NEW
11 SECTION 41-21-77.1, MISSISSIPPI CODE OF 1972, TO REQUIRE COURT
12 LIAISONS FOR CERTAIN COUNTIES; TO AMEND SECTION 41-4-3,
13 MISSISSIPPI CODE OF 1972, TO REVISE THE TERMS OF THE MEMBERS OF
14 THE STATE BOARD OF MENTAL HEALTH; TO AMEND SECTION 41-19-31,
15 MISSISSIPPI CODE OF 1972, TO CONFORM TO THE PROVISION WHICH
16 REGULATED REGIONAL COMMISSIONS TO THIS ACT; TO AMEND SECTION
17 41-19-33, MISSISSIPPI CODE OF 1972, TO REQUIRE EACH REGIONAL
18 COMMISSION TO EMPLOY OR CONTRACT WITH AN ACCOUNTANT TO MANAGE ITS
19 FINANCES; TO REQUIRE THE ACCOUNTANT TO PROVIDE AN ANNUAL AUDIT IN
20 ADDITION TO OTHER DUTIES; TO PROVIDE QUALIFICATIONS FOR MEMBERS OF
21 THE BOARD; TO AMEND SECTION 41-19-35, MISSISSIPPI CODE OF 1972, TO
22 PROVIDE THAT MEMBERS OF THE REGIONAL COMMISSION SHALL SERVE AT THE
23 WILL AND PLEASURE OF THE APPOINTING BOARD OF SUPERVISORS; TO
24 REQUIRE THE COMMISSIONERS TO ATTEND CERTAIN TRAININGS AS A
25 CONDITION TO REMAINING A COMMISSIONER; TO REQUIRE REMOVAL OF ANY
26 COMMISSIONER WHO FAILS TO ATTEND CERTAIN TRAININGS PROVIDED BY THE
27 DEPARTMENT OF MENTAL HEALTH UNLESS ALTERNATE ARRANGEMENTS ARE
28 MADE; TO AMEND SECTION 41-21-77, MISSISSIPPI CODE OF 1972, TO
29 REQUIRE THE CHANCERY CLERK TO MAINTAIN A RECORD FOR THE NUMBER OF
30 PERSONS ORDERED FOR ADMISSION TO A TREATMENT FACILITY, THE NUMBER
31 OF HEARINGS TO DETERMINE WHETHER A PERSON SHOULD BE ADMITTED AND
32 THE NUMBER OF AFFIDAVITS FILED FOR PURPOSES OF ADMITTING A PERSON
33 TO A TREATMENT FACILITY; TO AMEND SECTION 41-4-7, MISSISSIPPI CODE
34 OF 1972, TO REVISE THE POWERS AND DUTIES OF THE STATE BOARD OF

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MENTAL HEALTH; TO REQUIRE LAW ENFORCEMENT OFFICERS TO TRANSPORT
PERSONS IN CRISIS TO THE APPROPRIATE HEALTHCARE FACILITY AT THE
REQUEST OF THE CRISIS INTERVENTION TEAM; TO PROVIDE THAT ON OR
BEFORE DECEMBER 1, 2023, EACH COUNTY SHALL REPORT TO THE
DEPARTMENT OF MENTAL HEALTH DATA RELATING TO THE PLACEMENT OF
INDIVIDUALS BOTH BEFORE AN INVOLUNTARY CIVIL COMMITMENT
PROCEEDING, AND AFTER A HEARING WHERE AN INVOLUNTARY COMMITMENT
ORDER HAS BEEN ENTERED; TO PROVIDE THAT AFTER MAKING EXPENDITURES
OF AT LEAST $2,500,000.00 EACH YEAR TO PROVIDE FUNDING FOR COUNTY
AND MUNICIPAL LAW ENFORCEMENT TRAINING AND COURT LIAISONS, THE
DEPARTMENT OF MENTAL HEALTH MAY EXPEND ANY ADDITIONAL FUNDS TO
PROVIDE GRANTS TO COMMUNITY MENTAL HEALTH CENTERS FOR THE PURPOSE
OF INCREASING HOUSING FOR PATIENTS; TO PROVIDE THAT THE DEPARTMENT
OF MENTAL HEALTH SHALL HAVE ALL POWERS NECESSARY TO IMPLEMENT AND
ADMINISTER THE PROGRAM, AND THE DEPARTMENT SHALL PROMULGATE RULES
AND REGULATIONS NECESSARY FOR THE IMPLEMENTATION OF THE ACT; AND
FOR RELATED PURPOSES.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

SECTION 1. This act shall be known and may be cited as "The
Mississippi Collaborative Response to Mental Health Act."

SECTION 2. (1) Each county and municipal law enforcement
agency shall provide Mental Health First Aid training that is
evidence-based and approved by the Department of Mental Health to
all law enforcement officers who are employed or contracted by the
agency by July 1, 2031.

(2) On or before July 1, 2025, each county and municipal law
enforcement agency shall employ at least one (1) law enforcement
officer who is a Crisis Intervention Team Officer, as defined in
Section 41-21-131. An agency which employs fewer than five (5)
law enforcement officers may execute an agreement with one or more
other law enforcement agencies to have a Crisis Intervention Team
officer to serve as the officer for that agency.

SECTION 3. The following shall be codified as Section
41-21-77.1, Mississippi Code of 1972:

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41-21-77.1. Subject to appropriation by the Legislature, the Department of Mental Health shall provide funding to each community mental health center to allow the center to designate court liaisons for the counties in its service area.

SECTION 4. Section 41-4-3, Mississippi Code of 1972, is amended as follows:

41-4-3. (1) There is created a State Board of Mental Health, referred to in this chapter as "board," consisting of nine (9) members, to be appointed by the Governor, with the advice and consent of the Senate, each of whom shall be a qualified elector. One (1) member shall be appointed from each congressional district as presently constituted; and four (4) members shall be appointed from the state at large, one (1) of whom shall be a licensed medical doctor who is a psychiatrist, one (1) of whom shall hold a Ph.D. degree and be a licensed clinical psychologist, one (1) of whom shall be a licensed medical doctor, and one (1) of whom shall be a social worker with experience in the mental health field.

No more than two (2) members of the board shall be appointed from any one (1) congressional district as presently constituted.

Each member of the initial board shall serve for a term of years represented by the number of his congressional district; two (2) state at large members shall serve for a term of six (6) years; two (2) state at large members shall serve for a term of seven (7) years; subsequent appointments shall be for seven-year
terms and the Governor shall fill any vacancy for the unexpired term.

The board shall elect a chairman whose term of office shall be one (1) year and until his successor shall be elected.

(2) Each board member shall be entitled to a per diem as is authorized by law and all actual and necessary expenses, including mileage as provided by law, incurred in the discharge of official duties.

(3) The board shall hold regular meetings quarterly and such special meetings deemed necessary, except that no action shall be taken unless there is present a quorum of at least five (5) members.

(4) No board member may be appointed for more than two (2) consecutive terms. For purposes of counting terms of any board member, when the term ends for any board member who is a member of the board as of the effective date of this act, the end of such term shall be considered the person's first term. If any person who is a member of the board as of the effective date of this act is re-appointed after the expiration of his or her term, such succeeding term shall be considered the second term and such person shall not be re-appointed to the board without a break in service.

SECTION 5. Section 41-19-31, Mississippi Code of 1972, is amended as follows:
41-19-31. For the purpose of authorizing the establishment of mental illness and intellectual disability facilities and services in the State of Mississippi, the boards of supervisors of one or more counties are authorized to act singularly or as a group in the selection of a regional district by spreading upon their minutes by resolution such designation in conformity with this act.

SECTION 6. Section 41-19-33, Mississippi Code of 1972, is amended as follows:

41-19-33. (1) Each region so designated or established under Section 41-19-31 shall establish a regional commission to be composed of members appointed by the boards of supervisors of the various counties in the region. Each regional commission shall employ or contract with an accountant for the purpose of managing the finances of the commission. The accountant shall provide an annual audit to the commission in addition to his or her other duties. It shall be the duty of such regional commission to administer mental health/intellectual disability programs certified and required by the State Board of Mental Health and as specified in Section 41-4-1(2). In addition, once designated and established as provided hereinabove, a regional commission shall have the following authority and shall 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
determined by the Department of Mental Health to be necessary and
may include, in addition to the above, services for persons with
developmental and learning disabilities; for persons suffering
from narcotic addiction and problems of drug abuse and drug
dependence; and for the aging as designated and certified by the
Department of Mental Health. Such regional mental health and
intellectual disability commissions and other community service
providers shall, on or before July 1 of each year, submit an
annual operational plan to the Department of Mental Health for
approval or disapproval based on the minimum standards and minimum
required services established by the department for certification
and itemize the services as specified in Section 41-4-1(2),
including financial statements. As part of the annual operation
plan required by Section 41-4-7(h) submitted by any regional
community mental health center or by any other reasonable
certification deemed acceptable by the department, the community
mental health center shall state those services specified in
Section 41-4-1(2) that it will provide and also those services
that it will not provide. If the department finds deficiencies in
the plan of any regional commission or community service provider
based on the minimum standards and minimum required services
established for certification, the department shall give the regional commission or community service provider a six-month probationary period to bring its standards and services up to the established minimum standards and minimum required services. The regional commission or community service provider shall develop a sustainability business plan within thirty (30) days of being placed on probation, which shall be signed by all commissioners and shall include policies to address one or more of the following: the deficiencies in programmatic services, clinical service staff expectations, timely and appropriate billing, processes to obtain credentialing for staff, monthly reporting processes, third-party financial reporting and any other required documentation as determined by the department. After the six-month probationary period, if the department determines that the regional commission or community service provider still does not meet the minimum standards and minimum required services established for certification, the department may remove the certification of the commission or provider, and from and after July 1, 2011, the commission or provider shall be ineligible for state funds from Medicaid reimbursement or other funding sources for those services. After the six-month probationary period, the Department of Mental Health may identify an appropriate community service provider to provide any core services in that county that are not provided by a community mental health center. However, the department shall not offer reimbursement or other
accommodations to a community service provider of core services that were not offered to the decertified community mental health center for the same or similar services.

(b) To provide facilities and services for the prevention of mental illness, mental disorders, developmental and learning disabilities, alcoholism, narcotic addiction, drug abuse, drug dependence and other related handicaps or problems (including 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.

(c) To promote increased understanding of the problems of mental illness, intellectual disabilities, alcoholism, 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.

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

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

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

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

(1) To borrow money from private lending institutions in order to promote any of the foregoing purposes. A commission may pledge collateral, including real estate, to secure the repayment of money borrowed under the authority of this paragraph. Any such borrowing undertaken by a commission shall be on terms and conditions that are prudent in the sound judgment of the members of the commission, and the interest on any such loan shall not exceed the amount specified in Section 75-17-105. Any money borrowed, debts incurred or other obligations undertaken by a commission, regardless of whether borrowed, incurred or undertaken before or after March 15, 1995, shall be valid, binding and enforceable if it or they are borrowed, incurred or undertaken for any purpose specified in this section and otherwise 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 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 provision or delivery of any services, when deemed to be necessary or appropriate by the regional commission. 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.

(q) To provide direct or indirect funding, grants, financial support and assistance for any health maintenance organization, preferred provider organization or other managed care entity or contractor, where such organization, entity or contractor is operated on a nonprofit basis. 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.

(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.

(s) To meet at least annually with the board of
supervisors of each county in its region for the purpose of
presenting its total annual budget and total mental
health/intellectual disability services system. The commission
shall submit an annual report on the adult mental health services,
children mental health services and intellectual disability
services required by the State Board of Mental Health.

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

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

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

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

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

(i) The regional commission may employ and compensate any personnel necessary and must satisfy applicable state and federal laws and regulations regarding the administration and operation of a primary care health clinic.

(ii) A Mississippi licensed physician must be employed or under agreement with the regional commission to provide medical direction and/or to carry out the physician responsibilities as described under applicable state and/or federal law and regulations.

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

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

(v) The regional commission must ensure services will be available and accessible promptly and in a manner that preserves human dignity and assures continuity of care.
(vi) The regional commission must provide a semianual report to the Chairmen of the Public Health Committees in both the House of Representatives and Senate. At a minimum, for each reporting period, these reports shall describe the number of patients provided primary care services, the types of services provided, and the payer source for the patients. Except for patient information and any other information that may be exempt from disclosure under the Health Information Portability and Accountability Act (HIPAA) and the Mississippi Public Records Act, the reports shall be considered public records.

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

(viii) The regional commission must ensure that its physician as described in subparagraph (ii) of this paragraph (x) has admitting privileges at one or more local hospitals or has an agreement with a physician who has admitting privileges at one or more local hospitals to ensure continuity of care.

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

(z) All regional commissioners shall receive new orientation training and annual training with continuing education regarding the Mississippi mental health system and services as developed by the State Department of Mental Health. Training shall be provided at the expense of the department except for travel expenses which shall be paid by the regional commission.

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

(3) Each regional commission shall compile quarterly financial statements and status reports from each individual community health center. The compiled reports shall be submitted to the coordinator quarterly. The reports shall contain a:
(a) Balance sheet;
(b) Statement of operations;
(c) Statement of cash flows; and
(d) Description of the status of individual community health center's actions taken to increase access to and availability of community mental health services.

SECTION 7. Section 41-19-35, Mississippi Code of 1972, is amended as follows:

41-19-35. Except as otherwise provided in this section, the board of supervisors of each participating county in the program shall appoint one (1) member to represent its county on the regional commission in its respective region for a term of four (4) years who shall serve at the will and pleasure of the appointing board of supervisors, who may be a clerk, sheriff or deputy. In addition, the chancery clerks of the counties in each region shall select a chancery clerk or a deputy clerk to serve as a nonvoting liaison to the commission, and the sheriffs of the counties in each region shall select a sheriff or a deputy sheriff to serve as a nonvoting liaison to the commission. Any compensation of such members shall be paid by the regional commission, in its discretion, from any funds available. Each member of the commission shall attend the orientation training for new commissioners and the annual training for all commissioners held by the Department of Mental Health. The Department of Mental Health shall notify the board of supervisors when a commissioner does not
attend either the orientation training or annual training. Upon notice from the Department of Mental Health that a commissioner has failed to attend the required meetings, the appointing board of supervisors shall remove the commissioner, unless the department and the commission agree to an alternate arrangement to allow the commissioner to continue to serve until the next opportunity to attend the orientation meeting and/or the annual training.

SECTION 8. On or before December 1, 2023, each county shall report to the Department of Mental Health data relating to the placement of individuals both before an involuntary civil commitment proceeding, and after a hearing where an involuntary commitment order has been entered. The data shall include information concerning individuals held in jails and the cost of holding such individuals. The Department of Mental Health is authorized to determine the specific data to be submitted.

SECTION 9. Section 41-21-77, Mississippi Code of 1972, is amended as follows:

41-21-77. (1) If admission is ordered at a treatment facility, the sheriff, his or her deputy or any other person appointed or authorized by the court shall immediately deliver the respondent to the director of the appropriate facility. Neither the Board of Mental Health or its members, nor the Department of Mental Health or its related facilities, nor any employee of the Department of Mental Health or its related facilities, shall be appointed, authorized or ordered to deliver the respondent for
treatment, and no person shall be so delivered or admitted until
the director of the admitting institution determines that
facilities and services are available. Persons who have been
ordered committed and are awaiting admission may be given any such
treatment in the facility by a licensed physician as is indicated
by standard medical practice. Any county facility used for
providing housing, maintenance and medical treatment for
involuntarily committed persons pending their transportation and
admission to a state treatment facility shall be certified by the
State Department of Mental Health under the provisions of Section
41-4-7(kk). No person shall be delivered or admitted to any
non-Department of Mental Health treatment facility unless the
treatment facility is licensed and/or certified to provide the
appropriate level of psychiatric care for persons with mental
illness. It is the intent of this Legislature that county-owned
hospitals work with regional community mental health/intellectual
disability centers in providing care to local patients. The clerk
shall provide the director of the admitting institution with a
certified copy of the court order, a certified copy of the
appointed examiners' certificates, a certified copy of the
affidavit, and any other information available concerning the
physical and mental condition of the respondent. Upon
notification from the United States Veterans Administration or
other agency of the United States government, that facilities are
available and the respondent is eligible for care and treatment in
those facilities, the court may enter an order for delivery of the
respondent to or retention by the Veterans Administration or other
agency of the United States government, and, in those cases the
chief officer to whom the respondent is so delivered or by whom he
is retained shall, with respect to the respondent, be vested with
the same powers as the director of the Mississippi State Hospital
at Whitfield, or the East Mississippi State Hospital at Meridian,
with respect to retention and discharge of the respondent.

(2) (a) When admission to a treatment facility is ordered
by the court, the chancery clerk shall make record of the
admission. Each chancery clerk shall maintain a record of the
number of persons ordered by the court to be admitted to a
treatment facility, the number of hearings held by the court to
determine whether a person should be admitted to a treatment
facility and the number of affidavits filed to admit a person to a
treatment facility under Section 41-21-61 etc.

(b) The chancery clerk shall maintain a record each
time such clerk receives a denial for admission to a community
mental health center crisis stabilization bed, the reason provided
to the clerk for such denial, and the subsequent action taken by
the clerk upon receiving the denial.

(c) Each chancery clerk shall provide the records
required by paragraphs (a) and (b) of this subsection (2) to the
Department of Mental Health within thirty (30) days of the end of
each calendar quarter. Within sixty (60) days of receipt of the
chancery clerk records, the Department of Mental Health shall provide a summary to the Chairpersons of the Appropriations, Public Health and Judiciary A and B Committees for the Mississippi House of Representatives and the Mississippi Senate, the Coordinator of Mental Health and the President of the Mississippi Association of Community Mental Health Centers.

SECTION 10. Section 41-4-7, Mississippi Code of 1972, is amended as follows:

41-4-7. The State Board of Mental Health shall have the 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. Subsequent directors shall possess at least a master's degree or its equivalent, and shall possess at least ten (10) years' administrative experience in the field of mental health. The salary of the executive director shall be determined by the board;

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

(c) To establish and implement 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:

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

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

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

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

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

To set up state plans for the purpose of controlling and treating any and all forms of mental and emotional illness, alcoholism, drug misuse and developmental disabilities;
(f) [Repealed]

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

(h) To collect reasonable fees for its services; however, if it is determined that a person receiving services is unable to pay the total fee, the department shall collect no more than the 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 disabilities, alcoholism, drug misuse, developmental disabilities, compulsive gambling, addictive disorders and related programs throughout the state. Such regional mental health and intellectual disability commissions and other community service providers shall, on or before July 1 of each year, submit an annual operational plan to the State Department of Mental Health for approval or disapproval based on the minimum standards and minimum required services established by the department for certification and itemize the services specified in Section 41-4-1(2), including financial statements. As part of the annual
operation plan required by this paragraph (i) submitted by any
regional community mental health center or by any other reasonable
certification deemed acceptable by the department, the community
mental health center shall state those services specified in
Section 41-4-1(2) that it will provide and also those services
that it will not provide. If the department finds deficiencies in
the plan of any regional commission or community service provider
based on the minimum standards and minimum required services
established for certification, the department shall give the
regional commission or community service provider a six-month
probationary period to bring its standards and services up to the
established minimum standards and minimum required services. The
regional commission or community service provider shall develop a
sustainability business plan within thirty (30) days of being
placed on probation, which shall be signed by all commissioners
and shall include policies to address one or more of the
following: the deficiencies in programmatic services, clinical
service staff expectations, timely and appropriate billing,
processes to obtain credentialing for staff, monthly reporting
processes, third-party financial reporting and any other required
documentation as determined by the department. After the
six-month probationary period, if the department determines that
the regional commission or community service provider still does
not meet the minimum standards and minimum required services
established for certification, the department may remove the
certification of the commission or provider and from and after
July 1, 2011, the commission or provider shall be ineligible for
state funds from Medicaid reimbursement or other funding sources
for those services. However, the department shall not mandate a
standard or service, or decertify a regional commission or
community service provider for not meeting a standard or service,
if the standard or service does not have funding appropriated by
the Legislature or have a state, federal or local funding source
identified by the department. No county shall be required to levy
millage to provide a mandated standard or service above the
minimum rate required by Section 41-19-39. After the six-month
probationary period, the department may identify an appropriate
community service provider to provide any core services in that
county that are not provided by a community mental health center.
However, the department shall not offer reimbursement or other
accommodations to a community service provider of core services
that were not offered to the decertified community mental health
center for the same or similar services. The State Board of
Mental Health shall promulgate rules and regulations necessary to
implement the provisions of this paragraph (i), in accordance with
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
reasonable minimum standards for the admission, diagnosis, care,
treatment, transfer of patients and their records, and also
including reasonable minimum standards for providing day care,
outpatient care, emergency care, inpatient care and follow-up
care, when such care is provided for persons with mental or
emotional illness, an intellectual disability, alcoholism, drug
misuse and developmental disabilities;

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

(l) To assist community or regional programs consistent
with the purposes of this chapter by making grants and contracts
from available funds;
(m) To establish and collect reasonable fees for necessary inspection services incidental to certification or compliance;

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

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

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

(q) To establish mental health holding centers for the purpose of providing short-term emergency mental health treatment, places for holding persons awaiting commitment proceedings or awaiting placement in a state mental health facility following commitment, and for diverting placement in a state mental health facility. These mental health holding facilities shall be readily accessible, available statewide, and be in compliance with emergency services' minimum standards. They shall be comprehensive and available to triage and make appropriate clinical disposition, including the capability to access inpatient
services or less restrictive alternatives, as needed, as
determined by medical staff. Such facility shall have medical,
nursing and behavioral services available on a
twenty-four-hour-a-day basis. The board may provide for all or
part of the costs of establishing and operating the holding
centers in each district from such funds as may be appropriated to
the board for such use, and may participate in any plan or
agreement with any public or private entity under which the entity
will provide all or part of the costs of establishing and
operating a holding center in any district;

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

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

(t) The employees of the department shall be governed by personnel merit system rules and regulations, the same as other 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;

(v) To grant easements for roads, utilities and any 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
recommendation of the executive director, the board shall have the authority to name/rename any facility operated under the auspices of the Department of Mental Health for the sole purpose of deleting such terminology;

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

(cc) To establish and maintain a toll-free grievance reporting telephone system for the receipt and referral for investigation of all complaints by clients of state and community 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;

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

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

If the State Board of Mental Health authorizes the sale of lands owned by Ellisville State School, as provided for under this
paragraph (ff), 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 "Ellisville State School Client's Trust Fund." The principal of the trust fund shall remain inviolate and shall never be expended. Any interest earned on the principal may be expended solely for the benefits of clients served at Ellisville State School. The State Treasurer shall invest the monies of the trust fund in any of the investments authorized for the Mississippi Prepaid Affordable College Tuition Program under Section 37-155-9, and those investments shall be subject to the limitations prescribed by Section 37-155-9. Unexpended amounts remaining in the trust fund at the end of a fiscal year shall not lapse into the State General Fund, and any interest earned on amounts in the trust fund shall be deposited to the credit of the trust fund. The administration of Ellisville State School may use any interest earned on the principal of the trust fund, upon appropriation by the Legislature, as needed for services or facilities by the clients of Ellisville State School. Ellisville State School shall make known to the Legislature, through the Legislative Budget Committee and the respective Appropriations Committees of the House and Senate, its proposed use of interest earned on the principal of the trust fund for any fiscal year in which it proposes to make expenditures thereof. The State Treasurer shall provide Ellisville State School with an annual report on the Ellisville State School Client's Trust Fund to indicate the total
monies in the trust fund, interest earned during the year, expenses paid from the trust fund and such other related information.

Nothing in this section shall be construed as applying to or 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;

(gg) Working with the advice and consent of the administration of Boswell Regional Center, to enter into negotiations with the Economic Development Authority of Simpson County for the purpose of negotiating the possible exchange, lease or sale of lands owned by Boswell Regional Center to the Economic Development Authority of Simpson County. It is the intent of the Mississippi Legislature that such negotiations shall ensure that the financial interest of the persons with an intellectual disability served by Boswell Regional Center will be held paramount in the course of these negotiations. The Legislature also recognizes the importance of economic development to the
citizens of the State of Mississippi and Simpson County, and encourages fairness to the Economic Development Authority of Simpson County. Any negotiations proposed which would result in the recommendation for exchange, lease or sale of lands owned by Boswell Regional Center must have the approval of the State Board of Mental Health. The State Board of Mental Health may and has the final authority as to whether or not these negotiations result in the exchange, lease or sale of the properties it currently holds in trust for persons with an intellectual disability served at Boswell Regional Center. In any such exchange, lease or sale of such lands owned by Boswell Regional Center, title to all minerals, oil and gas on such lands shall be reserved, together with the right of ingress and egress to remove same, whether such provisions be included in the terms of any such exchange, lease or 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 be expended. Any earnings on the principal may be expended solely for the benefits of clients served at Boswell Regional Center. The State Treasurer shall invest the monies of the trust fund in any of the investments authorized for the Mississippi Prepaid
Affordable College Tuition Program under Section 37-155-9, and those investments shall be subject to the limitations prescribed by Section 37-155-9. Unexpended amounts remaining in the trust fund at the end of a fiscal year shall not lapse into the State General Fund, and any earnings on amounts in the trust fund shall be deposited to the credit of the trust fund. The administration of Boswell Regional Center may use any earnings on the principal of the trust fund, upon appropriation by the Legislature, as needed for services or facilities by the clients of Boswell Regional Center. Boswell Regional Center shall make known to the Legislature, through the Legislative Budget Committee and the respective Appropriations Committees of the House and Senate, its proposed use of the earnings on the principal of the trust fund for any fiscal year in which it proposes to make expenditures thereof. The State Treasurer shall provide Boswell Regional Center with an annual report on the Boswell Regional Center Client's Trust Fund to indicate the total monies in the trust fund, interest and other income earned during the year, expenses paid from the trust fund and such other related information.

Nothing in this section shall be construed as applying to or 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;

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

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

(jj) To have the sole power and discretion to enter into, sign, execute and deliver long-term or multiyear leases of real and personal property owned by the Department of Mental Health to and from other state and federal agencies and private entities deemed to be in the public's best interest. Any monies derived from such leases shall be deposited into the funds of the Department of Mental Health for its exclusive use. Leases to private entities shall be approved by the Department of Finance and Administration and all leases shall be filed with the 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
been involuntarily ordered admitted to a treatment center by a court of competent jurisdiction. The minimum standard for the initial assessment of those persons being housed in county facilities is for the assessment to be performed by a physician, preferably a psychiatrist, or by a nurse practitioner, preferably a psychiatric nurse practitioner. If the department finds deficiencies in any such county facility or its provider based on the minimum standards and minimum required services established for certification, the department shall give the county or its provider a six-month probationary period to bring its standards and services up to the established minimum standards and minimum required services. After the six-month probationary period, if the department determines that the county or its provider still does not meet the minimum standards and minimum required services, the department may remove the certification of the county or provider and require the county to contract with another county having a certified facility to hold those persons for that period of time pending transportation and admission to a state treatment facility. Any cost incurred by a county receiving an involuntarily committed person from a county with a decertified holding facility shall be reimbursed by the home county to the receiving county; and

(11) To provide orientation training to all new commissioners of regional commissions and annual training for all commissioners with continuing education regarding the Mississippi
mental health system and services as developed by the State Department of Mental Health. Training shall be provided at the expense of the department except for travel expenses which shall be paid by the regional commission.

**SECTION 11.** A law enforcement officer shall transport the mental health person who is in crisis to the appropriate health care facility at the request of the crisis intervention team or mobile crisis response team.

**SECTION 12.** (1) After making expenditures of at least Two Million Five Hundred Thousand Dollars ($2,500,000.00) each year to provide funding for county and municipal law enforcement training and court liaisons as authorized by this section, the Department of Mental Health is authorized to expend any additional funds to provide grants to community mental health centers for the purpose of increasing housing for patients. A community mental health center may apply to the Department of Mental Health for a grant to pay for the cost of patient housing. A community mental health center desiring assistance under this section must submit an application to the Department of Mental Health. The application must include any information required by the Department.

(2) The Department of Mental Health shall have all powers necessary to implement and administer the program established under this section, and the department shall promulgate rules and regulations, in accordance with the Mississippi Administrative Procedures Law, necessary for the implementation of this section.
SECTION 13. This act shall take effect and be in force from and after July 1, 2023.