

By: Senator(s) Parker, Boyd, Williams

To: Education

SENATE BILL NO. 2597

1 AN ACT TITLED THE "MISSISSIPPI K-12 AND POSTSECONDARY MENTAL
2 HEALTH ACT OF 2025"; TO ESTABLISH AN EXECUTIVE COMMITTEE OF THE
3 INTERAGENCY COORDINATING COUNCIL FOR CHILDREN AND YOUTH (ICCCY);
4 TO PROVIDE FOR THE COMPOSITION OF THE EXECUTIVE COMMITTEE; TO
5 SPECIFY THE EXECUTIVE COMMITTEE'S COORDINATING RESPONSIBILITIES
6 RELATED TO THE GENERAL MENTAL HEALTH AND WELL-BEING OF CHILDREN
7 AND ADOLESCENTS; TO PROVIDE FOR THE DISSEMINATION OF
8 RECOMMENDATIONS AND INFORMATION COMPILED BY THE EXECUTIVE
9 COMMITTEE; TO AMEND SECTION 43-13-1, MISSISSIPPI CODE OF 1972, TO
10 CONFORM; TO BRING FORWARD SECTIONS 43-14-3 AND 43-14-5,
11 MISSISSIPPI CODE OF 1972, FOR THE PURPOSE OF POSSIBLE AMENDMENT;
12 AND FOR RELATED PURPOSES.

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

14 **SECTION 1.** (1) This section shall be known and may be cited
15 as the "Mississippi K-12 and Postsecondary Mental Health Act of
16 2025."

17 (2) There is hereby established an Executive Committee of
18 the Interagency Coordinating Council for Children and Youth
19 (ICCCY), which shall include the following executive directors or
20 administrators, or their designees, with experience in mental
21 health, student performance or other relevant areas, from the
22 ICCCY as provided in Section 43-14-1:

23 (a) The State Superintendent of Public Education;



(b) The Commissioner of the State Institutions of Higher Learning;

(c) The Executive Director of the Mississippi Community College Board;

(d) The Executive Director of the Mississippi Department of Mental Health; and

(e) An employee of the Mississippi Department of Health, appointed by the State Health Officer, with relevant mental health experience.

(3) The ICCCY Executive Committee shall have the following coordinating responsibilities related to the general mental health and well-being of children and adolescents:

(a) Evaluating relevant personnel, including, but not limited to, school nurses, counselors and school psychologists, and examining the school's or district's relationship with its community mental health center or other private providers to recommend best practices for mental health resources and infrastructure for underperforming public schools or districts, as identified by the State Superintendent of Public Education;

(b) Identifying key public school and district personnel and community college and university personnel, including, but not limited to, teachers, healthcare providers, counselors and resident assistants, to receive mental health first aid training that is evidence-based and approved by the Department of Mental Health;



49 (c) Identifying and developing age-appropriate
50 information and materials to distribute information regarding
51 mental health and well-being at student orientations at public
52 schools, universities and community colleges, or assemblies for
53 parents and caretakers of students and other relevant members of
54 the community who may interact with students;

55 (d) Developing guidance for public schools and
56 districts, universities and community colleges regarding
57 age-appropriate mental health screening resources and other
58 information for students, including 988 suicide and crisis hotline
59 information;

60 (e) Developing guidelines to help public schools and
61 districts, universities and community colleges partner with
62 community mental health centers, including crisis intervention
63 teams, or private providers to provide services to students;

64 (f) Compiling a master report by October 1, 2025, of
65 all partially or fully state-funded programs related to improving
66 the mental health and well-being of children and adolescents. The
67 ICCCY Executive Committee, working together with other relevant
68 agencies and organizations, shall be responsible for updating the
69 report annually by October 1 of each year. The report shall be
70 transmitted to the Lieutenant Governor, the Speaker of the House,
71 the Chair of the Senate Public Health and Welfare Committee, the
72 Chair of the House Public Health and Human Services Committee, the



Chair of the Senate Appropriations Committee, and the Chair of the House Appropriations "A" Committee by November 1 each year;

(g) Developing an internet-based mental health resource guide for public schools by August 1, 2025. Beginning in the 2025-2026 school year, public school districts shall include a visible mental health resource navigation link on the home page of their website to include the resource guide developed by the ICCCY Executive Committee; and

(h) Engaging in other coordinated efforts from time to time in an effort to update resources and information related to mental health and well-being for students at public schools, universities and community colleges.

(4) (a) All recommendations and information compiled by the executive committee shall be provided to the State Board of Education, State Institutions of Higher Learning and Mississippi Community College Board, as appropriate, which shall disseminate such information to relevant employees in public school districts, universities and community colleges.

(b) All recommendations and information compiled by the executive committee shall also be provided to the ICCCY, Mississippi State Early Childhood Advisory Council, and any other agency, board, commission or council created by statute which the ICCCY Executive Committee identifies as relevant.

SECTION 2. Section 43-14-1, Mississippi Code of 1972, is amended as follows:



43-14-1. (1) The purpose of this chapter is to provide for the development, implementation and oversight of a coordinated interagency system of necessary services and care for children and youth, called the Mississippi Statewide System of Care, up to age twenty-one (21) with serious emotional/behavioral disorders including, but not limited to, conduct disorders, or mental illness who require services from a multiple services and multiple programs system, and who can be successfully diverted from inappropriate institutional placement. The Mississippi Statewide System of Care is to be conducted in the most fiscally responsible (cost-efficient) manner possible, based on an individualized plan of care which takes into account other available interagency programs, including, but not limited to, Early Intervention Act of Infants and Toddlers, Section 41-87-1 et seq., Early Periodic Screening Diagnosis and Treatment, Section 43-13-117(A) (5), waived program for home- and community-based services for developmentally disabled people, Section 43-13-117(A) (29), and waived program for targeted case management services for children with special needs, Section 43-13-117(A) (31), those children identified through the federal Individuals with Disabilities Education Act of 1997 as having a serious emotional disorder (EMD), the Mississippi Children's Health Insurance Program and waived programs for children with serious emotional disturbances, Section 43-13-117(A) (46), and is tied to clinically and functionally appropriate outcomes. Some of the outcomes are



to reduce the number of inappropriate out-of-home placements inclusive of those out-of-state and to reduce the number of inappropriate school suspensions and expulsions for this population of children. This coordinated interagency system of necessary services and care shall be named the Mississippi Statewide System of Care. Children to be served by this chapter who are eligible for Medicaid shall be screened through the Medicaid Early Periodic Screening Diagnosis and Treatment (EPSDT) and their needs for medically necessary services shall be certified through the EPSDT process. For purposes of this chapter, the Mississippi Statewide System of Care is defined as a coordinated network of agencies and providers working as a team to make a full range of mental health and other necessary services available as needed by children with mental health problems and their families. The Mississippi Statewide System of Care shall be:

(a) Child centered, family focused, family driven and youth guided;

(b) Community based;

(c) Culturally competent and responsive; and shall provide for:

(i) Service coordination or case management;

(ii) Prevention and early identification and intervention;



(iii) Smooth transitions among agencies and providers, and to the transition-age and adult service systems;

(iv) Human rights protection and advocacy;

(v) Nondiscrimination in access to services;

(vi) A comprehensive array of services composed of treatment and informal supports that are identified as best practices and/or evidence-based practices;

(vii) Individualized service planning that uses a strengths-based, wraparound process;

(viii) Services in the least restrictive environment;

(ix) Family participation in all aspects of planning, service delivery and evaluation; and

(x) Integrated services with coordinated planning across child-serving agencies.

Mississippi Statewide System of Care services shall be timely, intensive, coordinated and delivered in the community. Mississippi Statewide System of Care services shall include, but not be limited to, the following:

(a) Comprehensive crisis and emergency response services;

(b) Intensive case management;

(c) Day treatment;

(d) Alcohol and drug abuse group services for youth;

(e) Individual, group and family therapy;



(f) Respite services;

(g) Supported employment services for youth;

(h) Family education and support and family partners;

(i) Youth development and support and youth partners;

(j) Positive behavioral supports (PBIS) in schools;

(k) Transition-age supported and independent living services; and

(l) Vocational/technical education services for youth.

(2) There is established the Interagency Coordinating Council for Children and Youth (hereinafter referred to as the "ICCCY"). The ICCCY shall consist of the following membership:

(a) The State Superintendent of Public Education;

(b) The Executive Director of the Mississippi Department of Mental Health;

(c) The Executive Director of the State Department of Health;

(d) The Executive Director of the Department of Human Services;

(e) The Executive Director of the Division of Medicaid, Office of the Governor;

(f) The Executive Director of the State Department of Rehabilitation Services;

(g) The Executive Director of Mississippi Families as Allies for Children's Mental Health, Inc.;

(h) The Commissioner of Child Protection Services;



197 (i) The Attorney General;

198 (j) A family member of a child or youth in the
199 population named in this chapter designated by Mississippi
200 Families as Allies;

201 (k) A youth or young adult in the population named in
202 this chapter designated by Mississippi Families as Allies;

203 (l) A local MAP team coordinator designated by the
204 Department of Mental Health;

205 (m) A child psychiatrist experienced in the public
206 mental health system designated by the Mississippi Psychiatric
207 Association;

208 (n) An individual with expertise and experience in
209 early childhood education designated jointly by the Department of
210 Mental Health and Mississippi Families as Allies;

211 (o) A representative of an organization that advocates
212 on behalf of disabled citizens in Mississippi designated by the
213 Department of Mental Health; * * *

214 (p) A faculty member or dean from a Mississippi
215 university specializing in training professionals who work in the
216 Mississippi Statewide System of Care designated by the Board of
217 Trustees of State Institutions of Higher Learning * * *;

218 (q) The Commissioner of the State Institutions of
219 Higher Learning;

220 (r) The Executive Director of the Mississippi Community
221 College Board; and



222 (s) An employee of the Mississippi Department of
223 Health, appointed by the State Health Officer, with relevant
224 mental health experience.

225 If a member of the council designates a representative to
226 attend council meetings, the designee shall bring full
227 decision-making authority of the member to the meeting. The
228 council shall select a chairman, who shall serve for a one-year
229 term and may not serve consecutive terms. The council shall adopt
230 internal organizational procedures necessary for efficient
231 operation of the council. Each member of the council shall
232 designate necessary staff of their departments to assist the ICCCY
233 in performing its duties and responsibilities. The ICCCY shall
234 meet and conduct business at least twice annually. The chairman
235 of the ICCCY shall notify all ICCCY members and all other persons
236 who request such notice as to the date, time, place and draft
237 agenda items for each meeting.

238 (3) The Interagency System of Care Council (ISCC) is created
239 to serve as the state management team for the ICCCY, with the
240 responsibility of collecting and analyzing data and funding
241 strategies necessary to improve the operation of the Mississippi
242 Statewide System of Care, and to make recommendations to the ICCCY
243 and to the Legislature concerning such strategies on, at a
244 minimum, an annual basis. The System of Care Council also has the
245 responsibility of coordinating the local Multidisciplinary
246 Assessment and Planning (MAP) teams and "A" teams and may apply



247 for grants from public and private sources necessary to carry out
248 its responsibilities. The Interagency System of Care Council
249 shall be comprised of one (1) member from each of the appropriate
250 child-serving divisions or sections of the State Department of
251 Health, the Department of Human Services (Division of Youth
252 Services), the Department of Child Protection Services, the State
253 Department of Mental Health (Division of Children and Youth,
254 Bureau of Alcohol and Drug Abuse, and Bureau of Intellectual and
255 Developmental Disabilities), the State Department of Education
256 (Office of Special Education and Office of Healthy Schools), the
257 Division of Medicaid of the Governor's Office, the Department of
258 Rehabilitation Services, and the Attorney General's office.
259 Additional members shall include a family member of a child, youth
260 or transition-age youth representing a family education and
261 support 501(c)(3) organization, working with the population named
262 in this chapter designated by Mississippi Families as Allies, an
263 individual with expertise and experience in early childhood
264 education designated jointly by the Department of Mental Health
265 and Mississippi Families as Allies, a local MAP team
266 representative and a local "A" team representative designated by
267 the Department of Mental Health, a probation officer designated by
268 the Department of Corrections, a family member and youth or young
269 adult designated by Mississippi Families as Allies for Children's
270 Mental Health, Inc., (MSFAA), and a family member other than a
271 MSFAA representative to be designated by the Department of Mental



Health and the Director of the Compulsory School Attendance Enforcement of the State Department of Education. Appointments to the Interagency System of Care Council shall be made within sixty (60) days after June 30, 2010. The council shall organize by selecting a chairman from its membership to serve on an annual basis, and the chairman may not serve consecutive terms.

(4) (a) As part of the Mississippi Statewide System of Care, there is established a statewide system of local Multidisciplinary Assessment, Planning and Resource (MAP) teams. The MAP teams shall be comprised of one (1) representative each at the county level from the major child-serving public agencies for education, human services, health, mental health and rehabilitative services approved by respective state agencies of the Department of Education, the Department of Human Services, the Department of Child Protection Services, the Department of Health, the Department of Mental Health and the Department of Rehabilitation Services. These agencies shall, by policy, contract or regulation require participation on MAP teams and "A" teams at the county level by the appropriate staff. Three (3) additional members may be added to each team, one (1) of which may be a representative of a family education/support 501(c)(3) organization with statewide recognition and specifically established for the population of children defined in Section 43-14-1. The remaining members will be representatives of significant community-level stakeholders with resources that can



benefit the population of children defined in Section 43-14-1.
The Department of Education shall assist in recruiting and
identifying parents to participate on MAP teams and "A" teams.

(b) For each local existing MAP team that is
established pursuant to paragraph (a) of this subsection, there
shall also be established an "A" (Adolescent) team which shall
work with a MAP team. The "A" teams shall provide System of Care
services for youthful offenders who have serious behavioral or
emotional disorders. Each "A" team shall be comprised of, at a
minimum, the following five (5) members:

(i) A school counselor, mental health therapist or
social worker;
(ii) A community mental health professional;
(iii) A social services/child welfare
professional;
(iv) A youth court counselor; and
(v) A parent who had a child in the juvenile
justice system.

(c) The Interagency Coordinating Council for Children
and Youth and the Interagency System of Care Council shall work to
develop MAP teams statewide that will serve to become the single
point of entry for children and youth about to be placed in
out-of-home care for reasons other than parental abuse/neglect.

(5) The Interagency Coordinating Council for Children and
Youth may provide input to one another and to the ISCC relative to



322 how each agency utilizes its federal and state statutes, policy
323 requirements and funding streams to identify and/or serve children
324 and youth in the population defined in this section. The ICCCY
325 shall support the implementation of the plans of the respective
326 state agencies for comprehensive, community-based,
327 multidisciplinary care, treatment and placement of these children.

328 (6) The ICCCY shall oversee a pool of state funds that may
329 be contributed by each participating state agency and additional
330 funds from the Mississippi Tobacco Health Care Expenditure Fund,
331 subject to specific appropriation therefor by the Legislature.
332 Part of this pool of funds shall be available for increasing the
333 present funding levels by matching Medicaid funds in order to
334 increase the existing resources available for necessary
335 community-based services for Medicaid beneficiaries.

336 (7) The local interagency coordinating care MAP team or "A"
337 team will facilitate the development of the individualized System
338 of Care programs for the population targeted in this section.

339 (8) Each local MAP team and "A" team shall serve as the
340 single point of entry and re-entry to ensure that comprehensive
341 diagnosis and assessment occur and shall coordinate needed
342 services through the local MAP team and "A" team members and local
343 service providers for the children named in subsection (1). Local
344 children in crisis shall have first priority for access to the MAP
345 team and "A" team processes and local System of Care services.



(9) The Interagency Coordinating Council for Children and Youth shall facilitate monitoring of the performance of local MAP teams.

(10) Each ICCCY member named in subsection (2) of this section shall enter into a binding memorandum of understanding to participate in the further development and oversight of the Mississippi Statewide System of Care for the children and youth described in this section. The agreement shall outline the system responsibilities in all operational areas, including ensuring representation on MAP teams, funding, data collection, referral of children to MAP teams and "A" teams, and training. The agreement shall be signed and in effect by July 1 of each year.

SECTION 3. Section 43-14-3, Mississippi Code of 1972, is brought forward as follows:

43-14-3. In addition to the specific authority provided in Section 43-14-1, the powers and responsibilities of the Interagency Coordinating Council for Children and Youth shall be as follows:

(a) To serve in an advisory capacity and to provide state level leadership and oversight to the development of the Mississippi Statewide System of Care; and

(b) To insure the creation and availability of an annual pool of funds from each participating agency member of the ICCCY that includes the amount to be contributed by each agency and a process for utilization of those funds.



SECTION 4. Section 43-14-5, Mississippi Code of 1972, is brought forward as follows:

43-14-5. There is created in the State Treasury a special fund into which shall be deposited all funds contributed by the Department of Human Services, Department of Child Protection Services, State Department of Health, Department of Mental Health and State Department of Rehabilitation Services insofar as recipients are otherwise eligible under the Rehabilitation Act of 1973, as amended, and State Department of Education for the operation of a statewide System of Care by MAP teams and "A" teams utilizing such funds as may be made available to those MAP teams through a Request for Proposal (RFP) approved by the ICCCY.

SECTION 5. Section 1 of this act shall be codified in Chapter 14, Title 43, Mississippi Code of 1972.

SECTION 6. This act shall take effect and be in force from and after July 1, 2025.

