

By: Senator(s) Boyd, England, DeLano,  
Wiggins

To: Judiciary, Division A

SENATE BILL NO. 2744  
(As Passed the Senate)

1 AN ACT TO AMEND SECTION 41-4-7, MISSISSIPPI CODE OF 1972, TO  
2 PROVIDE THAT THE STATE DEPARTMENT OF MENTAL HEALTH SHALL  
3 PROMULGATE A RATING SCALE WITH PERFORMANCE INDICATORS FOR  
4 COMMUNITY MENTAL HEALTH AUTHORITIES; TO REQUIRE THE DEPARTMENT TO  
5 PERFORM A PERFORMANCE REVIEW AUDIT AT LEAST ONCE EVERY TWO YEARS;  
6 TO PROVIDE THAT THE DEPARTMENT MAY PLACE REGIONAL COMMISSIONS OR  
7 COMMUNITY MENTAL HEALTH CENTERS ON PROBATIONARY STATUS; TO PROVIDE  
8 THAT IF THE COMMUNITY MENTAL HEALTH CENTER DOES NOT ACHIEVE A  
9 PASSING SCORE ON THE PERFORMANCE AUDIT AFTER THE PROBATIONARY  
10 PERIOD, THE REGIONAL COMMISSION SHALL REPLACE THE COMMUNITY MENTAL  
11 HEALTH CENTER'S EXECUTIVE DIRECTOR AND ANY OTHER OFFICERS  
12 IDENTIFIED BY THE DEPARTMENT WITH CONTRACTORS; TO PROVIDE THAT THE  
13 CONTRACTOR SHALL REMAIN IN PLACE UNTIL THE DEPARTMENT DETERMINES  
14 THAT THE COMMUNITY MENTAL HEALTH CENTER HAS ATTAINED SUSTAINED  
15 COMPLIANCE WITH THE PERFORMANCE STANDARD; TO PROVIDE THAT NO  
16 RULES, REGULATIONS, OPERATIONAL STANDARDS, PERFORMANCE STANDARDS,  
17 OR OTHER STANDARDS PROMULGATED BY THE STATE BOARD OF MENTAL HEALTH  
18 OR THE STATE DEPARTMENT OF MENTAL HEALTH SHALL BE CONSTRUED TO  
19 CREATE A CAUSE OF ACTION; TO AMEND SECTION 41-19-33, MISSISSIPPI  
20 CODE OF 1972, TO SET CERTAIN REQUIREMENTS OF REGIONAL COMMISSIONS  
21 ESTABLISHING COMMUNITY MENTAL HEALTH CENTERS; TO REQUIRE COMMUNITY  
22 MENTAL HEALTH CENTERS TO PROVIDE A REPORT TO THE BOARD OF  
23 SUPERVISORS OF EACH COUNTY IN ITS REGION; TO REQUIRE COMMUNITY  
24 MENTAL HEALTH CENTERS TO PROVIDE CERTAIN MENTAL HEALTH SERVICES;  
25 TO ESTABLISH PROCEDURES RELATED TO PRE-AFFIDAVIT SCREENINGS FOR  
26 CIVIL COMMITMENTS; TO SET CERTAIN REPORTING REQUIREMENTS OF  
27 COMMUNITY MENTAL HEALTH CENTERS TO THE DEPARTMENT OF MENTAL  
28 HEALTH, INCLUDING SALARY DATA AND CASH BALANCES; TO PROVIDE THAT  
29 THE DEPARTMENT MAY DIRECT CONTROL OF THE COMMUNITY MENTAL HEALTH  
30 CENTER'S EXCESS CASH BALANCE IN CERTAIN CIRCUMSTANCES WHERE THE  
31 AUTHORITY IS NOT IN COMPLIANCE; TO AMEND SECTION 41-19-35,  
32 MISSISSIPPI CODE OF 1972, TO AUTHORIZE MENTAL HEALTH REGIONAL  
33 COMMISSIONS TO BE ESTABLISHED WITH A SET COMPOSITION OF MEMBERS IF  
34 EACH BOARD OF SUPERVISORS OF THE COUNTIES PARTICIPATING IN A



35 PARTICULAR REGIONAL COMMISSION AGREES TO SUCH COMPOSITION AS  
36 EVIDENCED BY RESOLUTIONS ADOPTED BY EACH BOARD; TO AMEND SECTION  
37 41-21-65, MISSISSIPPI CODE OF 1972, TO PROVIDE THAT AN INTERESTED  
38 PERSON SHALL BE DIRECTED TO THE COMMUNITY MENTAL HEALTH CENTER FOR  
39 A PRE-AFFIDAVIT SCREENING PRIOR TO FILING AN AFFIDAVIT FOR  
40 COMMITMENT OF AN INDIVIDUAL; TO REQUIRE AN AFFIDAVIT FOR  
41 COMMITMENT OF AN INDIVIDUAL TO STATE THAT LESS RESTRICTIVE  
42 ALTERNATIVE TREATMENT WAS CONSIDERED AND SPECIFY WHY TREATMENT  
43 LESS RESTRICTIVE THAN INVOLUNTARY COMMITMENT IS NOT APPROPRIATE;  
44 TO AMEND SECTION 41-21-67, MISSISSIPPI CODE OF 1972, TO ESTABLISH  
45 A REQUIRED PRE-AFFIDAVIT SCREENING TO BE CONDUCTED BY THE  
46 COMMUNITY MENTAL HEALTH CENTER IN THE COUNTY OF FINANCIAL  
47 RESPONSIBILITY; TO REQUIRE THE INVESTIGATION TO INCLUDE CERTAIN  
48 COMPONENTS; TO PROVIDE THAT THE SCREENING TEAM SHALL HAVE ACCESS  
49 TO ALL RELEVANT MEDICAL RECORDS OF THE PROPOSED PATIENT; TO  
50 REQUIRE THE PRE-AFFIDAVIT SCREENER TO PROVIDE WRITTEN NOTICE TO  
51 CERTAIN ENTITIES; TO AUTHORIZE AN INTERESTED PERSON TO MAKE DIRECT  
52 PETITION TO A CHANCELLOR WHERE THE PRE-AFFIDAVIT SCREENER DOES NOT  
53 RECOMMEND COMMITMENT; TO PROVIDE THAT A JAIL OR OTHER DETENTION  
54 CENTER MAY NOT BE USED FOR CUSTODY UNLESS CERTAIN CONDITIONS ARE  
55 MET; TO PROHIBIT LAW ENFORCEMENT OR ANY OTHER PERSON FROM BRINGING  
56 CRIMINAL CHARGES AGAINST A PERSON WHO IS MENTALLY ILL AND IN NEED  
57 OF TREATMENT PURSUANT TO THIS CHAPTER SOLELY OR PRIMARILY BECAUSE  
58 THE PERSON IS MENTALLY ILL OR BECAUSE OF THE UNAVAILABILITY OF A  
59 STATE HOSPITAL BED; TO AMEND SECTION 41-21-73, MISSISSIPPI CODE OF  
60 1972, TO LIMIT COMMITMENT IN A STATE-OPERATED FACILITY; TO PROVIDE  
61 THAT IF A PERSON IS RECEIVING TREATMENT FOR A MENTAL ILLNESS OR AN  
62 INTELLECTUAL DISABILITY IN A TREATMENT FACILITY AT THE TIME OF THE  
63 HEARING, THE PERSON MAY NOT BE COMMITTED TO A STATE-OPERATED  
64 FACILITY UNLESS CERTAIN FACTS ARE ESTABLISHED BY CLEAR AND  
65 CONVINCING EVIDENCE; TO PROHIBIT A PERSON WHO HAS BEEN JUDICIALLY  
66 COMMITTED UNDER THIS SECTION FROM BEING HELD IN A JAIL OR OTHER  
67 DETENTION FACILITY WHILE AWAITING ADMISSION TO A STATE-OPERATED  
68 FACILITY; TO PROVIDE THAT THE COUNTY OF RESIDENCE OF ANY SUCH  
69 PERSON SHALL PAY THE COST OF INTERIM TREATMENT; TO AMEND SECTION  
70 41-21-68, MISSISSIPPI CODE OF 1972, TO CONFORM TO THE PROVISIONS  
71 OF THE ACT; TO AMEND SECTION 41-21-77, MISSISSIPPI CODE OF 1972,  
72 TO PROVIDE THAT A JAIL OR DETENTION CENTER MAY NOT BE USED FOR  
73 PERSONS WHO ARE AWAITING ADMISSION UNLESS THE COMMUNITY MENTAL  
74 HEALTH CENTER HAS EXHAUSTED THE AVAILABILITY OF OTHER APPROPRIATE  
75 FACILITIES, THE CHANCELLOR SPECIFICALLY AUTHORIZES IT, AND THE  
76 RESPONDENT IS ACTIVELY VIOLENT; TO AMEND SECTION 27-104-7,  
77 MISSISSIPPI CODE OF 1972, TO SECTION 41-21-68, MISSISSIPPI CODE OF  
78 1972, WHICH ALLOWS REGIONAL MENTAL HEALTH COMMISSIONS TO ESTABLISH  
79 REGIONAL HOLDING FACILITIES FOR THOSE HELD BY CIVIL COMMITMENT; TO  
80 AMEND SECTION 27-104-7, MISSISSIPPI CODE OF 1972, TO EXEMPT FROM  
81 THE PUBLIC PROCUREMENT REVIEW BOARD ANY PERSONAL OR PROFESSIONAL  
82 SERVICES CONTRACT ENTERED INTO BY THE MISSISSIPPI DEPARTMENT OF  
83 MENTAL HEALTH IN CONTRACTING FOR STAFF OF COMMUNITY MENTAL HEALTH  
84 CENTERS THAT IT IS REPLACING IN ACCORDANCE WITH THIS ACT; TO  
85 REQUIRE PEER AND THE DEPARTMENT OF MENTAL HEALTH TO REPORT CERTAIN



86 INFORMATION TO THE LEGISLATURE EACH YEAR; AND FOR RELATED  
87 PURPOSES.

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

89 **SECTION 1.** Section 41-4-7, Mississippi Code of 1972, is  
90 amended as follows:

91 41-4-7. The State Board of Mental Health shall have the  
92 following powers and duties:

93 (a) To appoint a full-time Executive Director of the  
94 Department of Mental Health, who shall be employed by the board  
95 and shall serve as executive secretary to the board. The first  
96 director shall be a duly licensed physician with special interest  
97 and competence in psychiatry, and shall possess a minimum of three  
98 (3) years' experience in clinical and administrative psychiatry.  
99 Subsequent directors shall possess at least a master's degree or  
100 its equivalent, and shall possess at least ten (10) years'  
101 administrative experience in the field of mental health. The  
102 salary of the executive director shall be determined by the board;

103 (b) To appoint a Medical Director for the Department of  
104 Mental Health. The medical director shall provide clinical  
105 oversight in the implementation of evidence-based and best  
106 practices; provide clinical leadership in the integration of  
107 mental health, intellectual disability and addiction services with  
108 community partners in the public and private sectors; and provide  
109 oversight regarding standards of care. The medical director shall  
110 serve at the will and pleasure of the board, and will undergo an



111 annual review of job performance and future service to the  
112 department;

113 (c) To establish and implement its state strategic  
114 plan;

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

122 (i) Establish measures for determining the  
123 efficiency and effectiveness of the services specified in Section  
124 41-4-1(2);

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

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

132 (iv) Recommending to the Legislature by January 1,  
133 2014, any necessary additions, deletions or other changes  
134 necessary to the services specified in Section 41-4-1(2);



135 (v) Implementing by July 1, 2012, a system of  
136 performance measures for the services specified in Section  
137 41-4-1(2);

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

141 (vii) Conducting any other activities necessary to  
142 the evaluation and study of the services specified in Section  
143 41-4-1(2);

144 (viii) Assisting in conducting all necessary  
145 strategic planning for the delivery of all other services of the  
146 department. Such planning shall be conducted so as to produce a  
147 single strategic plan for the services delivered by the public  
148 mental health system and shall establish appropriate mission  
149 statements, goals, objectives and performance indicators for all  
150 programs and services of the public mental health system. For  
151 services other than those specified in Section 41-4-1(2), the  
152 committee shall recommend to the State Board of Mental Health a  
153 strategic plan that the board may adopt or modify;

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

157 (f) [Repealed]

158 (g) To enter into contracts with any other state or  
159 federal agency, or with any private person, organization or group



160 capable of contracting, if it finds such action to be in the  
161 public interest;

162 (h) To collect reasonable fees for its services;  
163 however, if it is determined that a person receiving services is  
164 unable to pay the total fee, the department shall collect no more  
165 than the amount such person is able to pay;

166 (i) To certify, coordinate and establish minimum  
167 standards and establish minimum required services, as specified in  
168 Section 41-4-1(2), for regional mental health and intellectual  
169 disability commissions and other community service providers for  
170 community or regional programs and services in adult mental  
171 health, children and youth mental health, intellectual  
172 disabilities, alcoholism, drug misuse, developmental disabilities,  
173 compulsive gambling, addictive disorders and related programs  
174 throughout the state. Such regional mental health and  
175 intellectual disability commissions and other community service  
176 providers shall, on or before July 1 of each year, submit an  
177 annual operational plan to the State Department of Mental Health  
178 for approval or disapproval based on the minimum standards and  
179 minimum required services established by the department for  
180 certification and itemize the services specified in Section  
181 41-4-1(2), including financial statements. As part of the annual  
182 operation plan required by this paragraph (i) submitted by any  
183 regional community mental health center or by any other reasonable  
184 certification deemed acceptable by the department, the community



185 mental health center shall state those services specified in  
186 Section 41-4-1(2) that it will provide and also those services  
187 that it will not provide. If the department finds deficiencies in  
188 the plan of any regional commission or community service provider  
189 based on the minimum standards and minimum required services  
190 established for certification, the department shall give the  
191 regional commission or community service provider a six-month  
192 probationary period to bring its standards and services up to the  
193 established minimum standards and minimum required services. The  
194 regional commission or community service provider shall develop a  
195 sustainability business plan within thirty (30) days of being  
196 placed on probation, which shall be signed by all commissioners  
197 and shall include policies to address one or more of the  
198 following: the deficiencies in programmatic services, clinical  
199 service staff expectations, timely and appropriate billing,  
200 processes to obtain credentialing for staff, monthly reporting  
201 processes, third-party financial reporting and any other required  
202 documentation as determined by the department. After the  
203 six-month probationary period, if the department determines that  
204 the regional commission or community service provider still does  
205 not meet the minimum standards and minimum required services  
206 established for certification, the department may remove the  
207 certification of the commission or provider and from and after  
208 July 1, 2011, the commission or provider shall be ineligible for  
209 state funds from Medicaid reimbursement or other funding sources



210 for those services. However, the department shall not mandate a  
211 standard or service, or decertify a regional commission or  
212 community service provider for not meeting a standard or service,  
213 if the standard or service does not have funding appropriated by  
214 the Legislature or have a state, federal or local funding source  
215 identified by the department. No county shall be required to levy  
216 millage to provide a mandated standard or service above the  
217 minimum rate required by Section 41-19-39. After the six-month  
218 probationary period, the department may identify an appropriate  
219 community service provider to provide any core services in that  
220 county that are not provided by a community mental health center.  
221 However, the department shall not offer reimbursement or other  
222 accommodations to a community service provider of core services  
223 that were not offered to the decertified community mental health  
224 center for the same or similar services. The State Board of  
225 Mental Health shall promulgate rules and regulations necessary to  
226 implement the provisions of this paragraph (i), in accordance with  
227 the Administrative Procedures Law (Section 25-43-1.101 et seq.);

228 (j) To establish and promulgate reasonable minimum  
229 standards for the construction and operation of state and all  
230 Department of Mental Health certified facilities, including  
231 reasonable minimum standards for the admission, diagnosis, care,  
232 treatment, transfer of patients and their records, and also  
233 including reasonable minimum standards for providing day care,  
234 outpatient care, emergency care, inpatient care and follow-up





235 care, when such care is provided for persons with mental or  
236 emotional illness, an intellectual disability, alcoholism, drug  
237 misuse and developmental disabilities;

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

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

255 (m) To establish and collect reasonable fees for  
256 necessary inspection services incidental to certification or  
257 compliance;

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



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

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

270 (q) To establish mental health holding centers for the  
271 purpose of providing short-term emergency mental health treatment,  
272 places for holding persons awaiting commitment proceedings or  
273 awaiting placement in a state mental health facility following  
274 commitment, and for diverting placement in a state mental health  
275 facility. These mental health holding facilities shall be readily  
276 accessible, available statewide, and be in compliance with  
277 emergency services' minimum standards. They shall be  
278 comprehensive and available to triage and make appropriate  
279 clinical disposition, including the capability to access inpatient  
280 services or less restrictive alternatives, as needed, as  
281 determined by medical staff. Such facility shall have medical,  
282 nursing and behavioral services available on a  
283 twenty-four-hour-a-day basis. The board may provide for all or  
284 part of the costs of establishing and operating the holding



285 centers in each district from such funds as may be appropriated to  
286 the board for such use, and may participate in any plan or  
287 agreement with any public or private entity under which the entity  
288 will provide all or part of the costs of establishing and  
289 operating a holding center in any district;

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

306 (s) To develop formal mental health worker  
307 qualifications for regional mental health and intellectual  
308 disability commissions and other community service providers. The  
309 State Personnel Board shall develop and promulgate a recommended



310 salary scale and career ladder for all regional mental  
311 health/intellectual disability center therapists and case managers  
312 who work directly with clients. The State Personnel Board shall  
313 also develop and promulgate a career ladder for all direct care  
314 workers employed by the State Department of Mental Health;

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

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

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

324 (w) To survey statutory designations, building markers  
325 and the names given to mental health/intellectual disability  
326 facilities and proceedings in order to recommend deletion of  
327 obsolete and offensive terminology relative to the mental  
328 health/intellectual disability system. Based upon a  
329 recommendation of the executive director, the board shall have the  
330 authority to name/rename any facility operated under the auspices  
331 of the Department of Mental Health for the sole purpose of  
332 deleting such terminology;

333 (x) To ensure an effective case management system  
334 directed at persons who have been discharged from state and



335 private psychiatric hospitals to ensure their continued well-being  
336 in the community;

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

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

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

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



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

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

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

380           (ff) Working with the advice and consent of the  
381 administration of Ellisville State School, to enter into  
382 negotiations with the Economic Development Authority of Jones  
383 County for the purpose of negotiating the possible exchange, lease



384 or sale of lands owned by Ellisville State School to the Economic  
385 Development Authority of Jones County. It is the intent of the  
386 Mississippi Legislature that such negotiations shall ensure that  
387 the financial interest of the persons with an intellectual  
388 disability served by Ellisville State School will be held  
389 paramount in the course of these negotiations. The Legislature  
390 also recognizes the importance of economic development to the  
391 citizens of the State of Mississippi and Jones County, and  
392 encourages fairness to the Economic Development Authority of Jones  
393 County. Any negotiations proposed which would result in the  
394 recommendation for exchange, lease or sale of lands owned by  
395 Ellisville State School must have the approval of the State Board  
396 of Mental Health. The State Board of Mental Health may and has  
397 the final authority as to whether or not these negotiations result  
398 in the exchange, lease or sale of the properties it currently  
399 holds in trust for persons with an intellectual disability served  
400 at Ellisville State School.

401 If the State Board of Mental Health authorizes the sale of  
402 lands owned by Ellisville State School, as provided for under this  
403 paragraph (ff), the monies derived from the sale shall be placed  
404 into a special fund that is created in the State Treasury to be  
405 known as the "Ellisville State School Client's Trust Fund." The  
406 principal of the trust fund shall remain inviolate and shall never  
407 be expended. Any interest earned on the principal may be expended  
408 solely for the benefits of clients served at Ellisville State



409 School. The State Treasurer shall invest the monies of the trust  
410 fund in any of the investments authorized for the Mississippi  
411 Prepaid Affordable College Tuition Program under Section 37-155-9,  
412 and those investments shall be subject to the limitations  
413 prescribed by Section 37-155-9. Unexpended amounts remaining in  
414 the trust fund at the end of a fiscal year shall not lapse into  
415 the State General Fund, and any interest earned on amounts in the  
416 trust fund shall be deposited to the credit of the trust fund.  
417 The administration of Ellisville State School may use any interest  
418 earned on the principal of the trust fund, upon appropriation by  
419 the Legislature, as needed for services or facilities by the  
420 clients of Ellisville State School. Ellisville State School shall  
421 make known to the Legislature, through the Legislative Budget  
422 Committee and the respective Appropriations Committees of the  
423 House and Senate, its proposed use of interest earned on the  
424 principal of the trust fund for any fiscal year in which it  
425 proposes to make expenditures thereof. The State Treasurer shall  
426 provide Ellisville State School with an annual report on the  
427 Ellisville State School Client's Trust Fund to indicate the total  
428 monies in the trust fund, interest earned during the year,  
429 expenses paid from the trust fund and such other related  
430 information.

431 Nothing in this section shall be construed as applying to or  
432 affecting mental health/intellectual disability services provided  
433 by hospitals as defined in Section 41-9-3(a), and/or their





434 subsidiaries and divisions, which hospitals, subsidiaries and  
435 divisions are licensed and regulated by the Mississippi State  
436 Department of Health unless such hospitals, subsidiaries or  
437 divisions voluntarily request certification by the Mississippi  
438 State Department of Mental Health.

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

442 (gg) Working with the advice and consent of the  
443 administration of Boswell Regional Center, to enter into  
444 negotiations with the Economic Development Authority of Simpson  
445 County for the purpose of negotiating the possible exchange, lease  
446 or sale of lands owned by Boswell Regional Center to the Economic  
447 Development Authority of Simpson County. It is the intent of the  
448 Mississippi Legislature that such negotiations shall ensure that  
449 the financial interest of the persons with an intellectual  
450 disability served by Boswell Regional Center will be held  
451 paramount in the course of these negotiations. The Legislature  
452 also recognizes the importance of economic development to the  
453 citizens of the State of Mississippi and Simpson County, and  
454 encourages fairness to the Economic Development Authority of  
455 Simpson County. Any negotiations proposed which would result in  
456 the recommendation for exchange, lease or sale of lands owned by  
457 Boswell Regional Center must have the approval of the State Board  
458 of Mental Health. The State Board of Mental Health may and has



459 the final authority as to whether or not these negotiations result  
460 in the exchange, lease or sale of the properties it currently  
461 holds in trust for persons with an intellectual disability served  
462 at Boswell Regional Center. In any such exchange, lease or sale  
463 of such lands owned by Boswell Regional Center, title to all  
464 minerals, oil and gas on such lands shall be reserved, together  
465 with the right of ingress and egress to remove same, whether such  
466 provisions be included in the terms of any such exchange, lease or  
467 sale or not.

468 If the State Board of Mental Health authorizes the sale of  
469 lands owned by Boswell Regional Center, as provided for under this  
470 paragraph (gg), the monies derived from the sale shall be placed  
471 into a special fund that is created in the State Treasury to be  
472 known as the "Boswell Regional Center Client's Trust Fund." The  
473 principal of the trust fund shall remain inviolate and shall never  
474 be expended. Any earnings on the principal may be expended solely  
475 for the benefits of clients served at Boswell Regional Center.  
476 The State Treasurer shall invest the monies of the trust fund in  
477 any of the investments authorized for the Mississippi Prepaid  
478 Affordable College Tuition Program under Section 37-155-9, and  
479 those investments shall be subject to the limitations prescribed  
480 by Section 37-155-9. Unexpended amounts remaining in the trust  
481 fund at the end of a fiscal year shall not lapse into the State  
482 General Fund, and any earnings on amounts in the trust fund shall  
483 be deposited to the credit of the trust fund. The administration



484 of Boswell Regional Center may use any earnings on the principal  
485 of the trust fund, upon appropriation by the Legislature, as  
486 needed for services or facilities by the clients of Boswell  
487 Regional Center. Boswell Regional Center shall make known to the  
488 Legislature, through the Legislative Budget Committee and the  
489 respective Appropriations Committees of the House and Senate, its  
490 proposed use of the earnings on the principal of the trust fund  
491 for any fiscal year in which it proposes to make expenditures  
492 thereof. The State Treasurer shall provide Boswell Regional  
493 Center with an annual report on the Boswell Regional Center  
494 Client's Trust Fund to indicate the total monies in the trust  
495 fund, interest and other income earned during the year, expenses  
496 paid from the trust fund and such other related information.

497 Nothing in this section shall be construed as applying to or  
498 affecting mental health/intellectual disability services provided  
499 by hospitals as defined in Section 41-9-3(a), and/or their  
500 subsidiaries and divisions, which hospitals, subsidiaries and  
501 divisions are licensed and regulated by the Mississippi State  
502 Department of Health unless such hospitals, subsidiaries or  
503 divisions voluntarily request certification by the Mississippi  
504 State Department of Mental Health.

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



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

517           (ii) The Department of Mental Health shall have the  
518 authority for the development of a consumer friendly single point  
519 of intake and referral system within its service areas for persons  
520 with mental illness, an intellectual disability, developmental  
521 disabilities or alcohol or substance abuse who need assistance  
522 identifying or accessing appropriate services. The department  
523 will develop and implement a comprehensive evaluation procedure  
524 ensuring that, where appropriate, the affected person or their  
525 parent or legal guardian will be involved in the assessment and  
526 planning process. The department, as the point of intake and as  
527 service provider, shall have the authority to determine the  
528 appropriate institutional, hospital or community care setting for  
529 persons who have been diagnosed with mental illness, an  
530 intellectual disability, developmental disabilities and/or alcohol  
531 or substance abuse, and may provide for the least restrictive  
532 placement if the treating professional believes such a setting is



533 appropriate, if the person affected or their parent or legal  
534 guardian wants such services, and if the department can do so with  
535 a reasonable modification of the program without creating a  
536 fundamental alteration of the program. The least restrictive  
537 setting could be an institution, hospital or community setting,  
538 based upon the needs of the affected person or their parent or  
539 legal guardian;

540           (jj) To have the sole power and discretion to enter  
541 into, sign, execute and deliver long-term or multiyear leases of  
542 real and personal property owned by the Department of Mental  
543 Health to and from other state and federal agencies and private  
544 entities deemed to be in the public's best interest. Any monies  
545 derived from such leases shall be deposited into the funds of the  
546 Department of Mental Health for its exclusive use. Leases to  
547 private entities shall be approved by the Department of Finance  
548 and Administration and all leases shall be filed with the  
549 Secretary of State;

550           (kk) To certify and establish minimum standards and  
551 minimum required services for county facilities used for housing,  
552 feeding and providing medical treatment for any person who has  
553 been involuntarily ordered admitted to a treatment center by a  
554 court of competent jurisdiction. The minimum standard for the  
555 initial assessment of those persons being housed in county  
556 facilities is for the assessment to be performed by a physician,  
557 preferably a psychiatrist, or by a nurse practitioner, preferably



558 a psychiatric nurse practitioner. If the department finds  
559 deficiencies in any such county facility or its provider based on  
560 the minimum standards and minimum required services established  
561 for certification, the department shall give the county or its  
562 provider a six-month probationary period to bring its standards  
563 and services up to the established minimum standards and minimum  
564 required services. After the six-month probationary period, if  
565 the department determines that the county or its provider still  
566 does not meet the minimum standards and minimum required services,  
567 the department may remove the certification of the county or  
568 provider and require the county to contract with another county  
569 having a certified facility to hold those persons for that period  
570 of time pending transportation and admission to a state treatment  
571 facility. Any cost incurred by a county receiving an  
572 involuntarily committed person from a county with a decertified  
573 holding facility shall be reimbursed by the home county to the  
574 receiving county; \* \* \*

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



582            (mm) To assess the performance of the community mental  
583 health centers, the State Department of Mental Health shall  
584 promulgate a rating scale with performance indicators and a  
585 scorecard. The performance standards shall identify the data that  
586 the community mental health centers must provide to the department  
587 to enable the department to assess their performance. The  
588 department shall conduct a performance review audit of each  
589 community mental health center at least once every two (2) years.  
590 If the community mental health center does not achieve a passing  
591 score on a performance audit, the department shall give the  
592 regional commission or community mental health center a nine-month  
593 probationary period to achieve a passing score. If the community  
594 mental health center does not achieve a passing score on the  
595 performance audit after the nine-month probationary period, the  
596 regional commission shall replace the community mental health  
597 center's executive director and any other officers identified by  
598 the department with contractors selected by the department to  
599 operate the community mental health center. The department shall  
600 be the party that contracts with the contractors, and the  
601 contractors shall report to the department. The department has  
602 the authority to override a regional commission, community mental  
603 health center, or both, concerning the management and operation of  
604 such community mental health center or initiate and make decisions  
605 concerning the management and operation of the community mental  
606 health center.



607       The contractor(s) selected by the department shall have the  
608 full powers and authority possessed by the officer he or she  
609 replaces. The contractor(s) shall remain in place until the  
610 department determines in its reasonable judgment that the  
611 community mental health center has attained sustained compliance  
612 with the performance standards; and

613               (nn) No rules, regulations, operational standards,  
614 performance standards, or other standards promulgated by the State  
615 Board of Mental Health or the State Department of Mental Health  
616 shall be construed to create a cause of action.

617       **SECTION 2.** Section 41-19-33, Mississippi Code of 1972, is  
618 amended as follows:

619       41-19-33. (1) Each region so designated or established  
620 under Section 41-19-31 shall establish a regional commission to be  
621 composed of members appointed by the boards of supervisors of the  
622 various counties in the region. Each regional commission shall  
623 employ or contract with an accountant for the purpose of managing  
624 the finances of the commission. The accountant shall provide an  
625 annual audit to the commission in addition to his or her other  
626 duties. It shall be the duty of such regional commission to  
627 administer mental health/intellectual disability programs  
628 certified and required by the State Board of Mental Health and as  
629 specified in Section 41-4-1(2). In addition, once designated and  
630 established as provided hereinabove, a regional commission shall





631 have the following authority and shall pursue and promote the  
632 following general purposes:

633 (a) To establish, own, lease, acquire, construct,  
634 build, operate and maintain mental illness, mental health,  
635 intellectual disability, alcoholism and general rehabilitative  
636 facilities and services designed to serve the needs of the people  
637 of the region so designated, provided that the services supplied  
638 by the regional commissions shall include those services  
639 determined by the Department of Mental Health to be necessary and  
640 may include, in addition to the above, services for persons with  
641 developmental and learning disabilities; for persons suffering  
642 from narcotic addiction and problems of drug abuse and drug  
643 dependence; and for the aging as designated and certified by the  
644 Department of Mental Health. \* \* \*

645 (b) (i) To establish a community mental health center  
646 to provide mental health services in its region. From and after  
647 the effective date of this act, the community mental health center  
648 established by each regional commission before July 1, 2024, shall  
649 be a community mental health center. The regional commissions may  
650 establish a community mental health center that did not exist as  
651 of July 1, 2024, only with the express written permission of the  
652 State Board of Mental Health or the Department of Mental Health.

653 (ii) At a meeting of the board of supervisors each  
654 quarter, the community mental health center shall provide a report  
655 to the board of supervisors, sheriff and Chancery Court judges of



656 each county in its region. The report shall include the following  
657 information for the prior month:

658 1. The occupancy percentage reported by the  
659 crisis stabilization unit in the region;

660 2. The number of individuals held in jail  
661 after the commitment process has been initiated and the number of  
662 individuals who the community mental health center provided  
663 treatment to while they were in jail, as required by Section  
664 41-21-67(5);

665 3. The number of pre-affidavit screenings  
666 conducted;

667 4. The number of individuals diverted to a  
668 lesser restrictive alternative from commitment;

669 5. The number of crisis stabilization unit  
670 denials and the reason for denial;

671 6. Medicaid billing statement; and

672 7. Cash balance as of the date of the report.

673 (iii) The board of supervisors shall provide the  
674 Department of Mental Health with a summary of the community mental  
675 health center's monthly report each quarter.

676 (c) If the Department of Mental Health finds  
677 deficiencies in the \* \* \* performance audit of the regional  
678 commissions required by Section 41-19-33 based on the minimum  
679 standards and minimum required services established for  
680 certification, the department shall give the regional commission,



681 community mental health center or community service provider  
682 a \* \* \* nine-month probationary period to bring its standards and  
683 services up to the established minimum standards and minimum  
684 required services. The regional commission or community service  
685 provider shall develop a sustainability business plan within  
686 thirty (30) days of being placed on probation, which shall be  
687 signed by all commissioners and shall include policies to address  
688 one or more of the following: the deficiencies in programmatic  
689 services, clinical service staff expectations, timely and  
690 appropriate billing, processes to obtain credentialing for staff,  
691 monthly reporting processes, third-party financial reporting and  
692 any other required documentation as determined by the department.  
693 After the \* \* \* nine-month probationary period, if the department  
694 determines that the regional commission or community service  
695 provider still does not meet the minimum standards and minimum  
696 required services established for certification, the department  
697 may remove the certification of the commission or provider, and  
698 from and after July 1, 2011, the commission or provider shall be  
699 ineligible for state funds from Medicaid reimbursement or other  
700 funding sources for those services. After the \* \* \* nine-month  
701 probationary period, the Department of Mental Health may identify  
702 an appropriate community service provider to provide any \* \* \*  
703 mental health services in \* \* \* the region or county that are not  
704 provided by a community mental health center. However, the  
705 department shall not offer reimbursement or other accommodations



706 to a community service provider of \* \* \* mental health services  
707 that were not offered to the decertified community mental health  
708 center for the same or similar services.

709 ( \* \* \* d) To provide facilities and services for the  
710 prevention of mental illness, mental disorders, developmental and  
711 learning disabilities, alcoholism, narcotic addiction, drug abuse,  
712 drug dependence and other related handicaps or problems (including  
713 the problems of the aging) among the people of the region so  
714 designated, and for the rehabilitation of persons suffering from  
715 such illnesses, disorders, handicaps or problems as designated and  
716 certified by the Department of Mental Health.

717 ( \* \* \* e) To promote increased understanding of the  
718 problems of mental illness, intellectual disabilities, alcoholism,  
719 developmental and learning disabilities, narcotic addiction, drug  
720 abuse and drug dependence and other related problems (including  
721 the problems of the aging) by the people of the region, and also  
722 to promote increased understanding of the purposes and methods of  
723 the rehabilitation of persons suffering from such illnesses,  
724 disorders, handicaps or problems as designated and certified by  
725 the Department of Mental Health.

726 ( \* \* \* f) To enter into contracts and to make such  
727 other arrangements as may be necessary, from time to time, with  
728 the United States government, the government of the State of  
729 Mississippi and such other agencies or governmental bodies as may  
730 be approved by and acceptable to the regional commission for the



731 purpose of establishing, funding, constructing, operating and  
732 maintaining facilities and services for the care, treatment and  
733 rehabilitation of persons suffering from mental illness, an  
734 intellectual disability, alcoholism, developmental and learning  
735 disabilities, narcotic addiction, drug abuse, drug dependence and  
736 other illnesses, disorders, handicaps and problems (including the  
737 problems of the aging) as designated and certified by the  
738 Department of Mental Health.

739 ( \* \* \*g) To enter into contracts and make such other  
740 arrangements as may be necessary with any and all private  
741 businesses, corporations, partnerships, proprietorships or other  
742 private agencies, whether organized for profit or otherwise, as  
743 may be approved by and acceptable to the regional commission for  
744 the purpose of establishing, funding, constructing, operating and  
745 maintaining facilities and services for the care, treatment and  
746 rehabilitation of persons suffering from mental illness, an  
747 intellectual disability, alcoholism, developmental and learning  
748 disabilities, narcotic addiction, drug abuse, drug dependence and  
749 other illnesses, disorders, handicaps and problems (including the  
750 problems of the aging) relating to minimum services established by  
751 the Department of Mental Health.

752 ( \* \* \*h) To promote the general mental health of the  
753 people of the region.

754 ( \* \* \*i) To pay the administrative costs of the  
755 operation of the regional commissions, including per diem for the



756 members of the commission and its employees, attorney's fees, if  
757 and when such are required in the opinion of the commission, and  
758 such other expenses of the commission as may be necessary. The  
759 Department of Mental Health standards and audit rules shall  
760 determine what administrative cost figures shall consist of for  
761 the purposes of this paragraph. Each regional commission shall  
762 submit a cost report annually to the Department of Mental Health  
763 in accordance with guidelines promulgated by the department.

764 ( \* \* \*j) To employ and compensate any personnel that  
765 may be necessary to effectively carry out the programs and  
766 services established under the provisions of the aforesaid act,  
767 provided such person meets the standards established by the State  
768 Board of Mental Health or the Department of Mental Health.

769 ( \* \* \*k) To acquire whatever hazard, casualty or  
770 workers' compensation insurance that may be necessary for any  
771 property, real or personal, owned, leased or rented by the  
772 commissions, or any employees or personnel hired by the  
773 commissions.

774 ( \* \* \*l) To acquire professional liability insurance  
775 on all employees as may be deemed necessary and proper by the  
776 commission, and to pay, out of the funds of the commission, all  
777 premiums due and payable on account thereof.

778 ( \* \* \*m) To provide and finance within their own  
779 facilities, or through agreements or contracts with other local,  
780 state or federal agencies or institutions, nonprofit corporations,



781 or political subdivisions or representatives thereof, programs and  
782 services for persons with mental illness, including treatment for  
783 alcoholics, and promulgating and administering of programs to  
784 combat drug abuse and programs for services for persons with an  
785 intellectual disability.

786 ( \* \* \*n) To borrow money from private lending  
787 institutions in order to promote any of the foregoing purposes. A  
788 commission may pledge collateral, including real estate, to secure  
789 the repayment of money borrowed under the authority of this  
790 paragraph. Any such borrowing undertaken by a commission shall be  
791 on terms and conditions that are prudent in the sound judgment of  
792 the members of the commission, and the interest on any such loan  
793 shall not exceed the amount specified in Section 75-17-105. Any  
794 money borrowed, debts incurred or other obligations undertaken by  
795 a commission, regardless of whether borrowed, incurred or  
796 undertaken before or after March 15, 1995, shall be valid, binding  
797 and enforceable if it or they are borrowed, incurred or undertaken  
798 for any purpose specified in this section and otherwise conform to  
799 the requirements of this paragraph.

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



806 ( \* \* \*p) To enter into managed care contracts and make  
807 such other arrangements as may be deemed necessary or appropriate  
808 by the regional commission in order to participate in any managed  
809 care program. Any such contract or arrangement affecting more  
810 than one (1) region must have prior written approval of the  
811 Department of Mental Health before being initiated and annually  
812 thereafter.

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

818 ( \* \* \*r) To enter into contracts, agreements or other  
819 arrangements with any person, payor, provider or other entity,  
820 under which the regional commission assumes financial risk for the  
821 provision or delivery of any services, when deemed to be necessary  
822 or appropriate by the regional commission. Any action under this  
823 paragraph affecting more than one (1) region must have prior  
824 written approval of the Department of Mental Health before being  
825 initiated and annually thereafter.

826 ( \* \* \*s) To provide direct or indirect funding,  
827 grants, financial support and assistance for any health  
828 maintenance organization, preferred provider organization or other  
829 managed care entity or contractor, where such organization, entity  
830 or contractor is operated on a nonprofit basis. Any action under





831 this paragraph affecting more than one (1) region must have prior  
832 written approval of the Department of Mental Health before being  
833 initiated and annually thereafter.

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

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

848 ( \* \* \*y) To provide alternative living arrangements  
849 for persons with serious mental illness, including, but not  
850 limited to, group homes for persons with chronic mental illness.

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



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

875 ( \* \* \*y) Notwithstanding any other provision of law,  
876 to fingerprint and perform a criminal history record check on  
877 every employee or volunteer. Every employee or volunteer shall  
878 provide a valid current social security number and/or driver's  
879 license number that will be furnished to conduct the criminal



880 history record check. If no disqualifying record is identified at  
881 the state level, fingerprints shall be forwarded to the Federal  
882 Bureau of Investigation for a national criminal history record  
883 check.

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

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

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

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

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



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

907 (vi) The regional commission must provide a  
908 semiannual report to the Chairmen of the Public Health Committees  
909 in both the House of Representatives and Senate. At a minimum,  
910 for each reporting period, these reports shall describe the number  
911 of patients provided primary care services, the types of services  
912 provided, and the payer source for the patients. Except for  
913 patient information and any other information that may be exempt  
914 from disclosure under the Health Information Portability and  
915 Accountability Act (HIPAA) and the Mississippi Public Records Act,  
916 the reports shall be considered public records.

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

920 (viii) The regional commission must ensure  
921 that its physician as described in subparagraph (ii) of this  
922 paragraph ( \* \* \* z) has admitting privileges at one or more local  
923 hospitals or has an agreement with a physician who has admitting  
924 privileges at one or more local hospitals to ensure continuity of  
925 care.

926 (ix) The regional commission must provide an  
927 independent financial audit report to the State Department of  
928 Mental Health and, except for patient information and any other



929 information that may be exempt from disclosure under HIPAA and the  
930 Mississippi Public Records Act, the audit report shall be  
931 considered a public record.

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

936 ( \* \* \*aa) In general to take any action which will  
937 promote, either directly or indirectly, any and all of the  
938 foregoing purposes.

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

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



953 (3) Each regional commission shall compile quarterly  
954 financial statements and status reports from each individual  
955 community health center. The compiled reports shall be submitted  
956 to the coordinator quarterly. The reports shall contain a:

957 (a) Balance sheet;

958 (b) Statement of operations;

959 (c) Statement of cash flows; and

960 (d) Description of the status of individual community  
961 health center's actions taken to increase access to and  
962 availability of community mental health services.

963 (4) Each community mental health center shall be the entity  
964 in its region responsible for delivering mental health services.  
965 Each community mental health center shall deliver mental health  
966 services in accordance with the rules, regulations, operational  
967 standards, performance standards and other standards promulgated  
968 by the State Board of Mental Health or the Department of Mental  
969 Health.

970 (a) During the pre-affidavit screening process of  
971 persons in its region, the community mental health center shall  
972 determine, in accordance with the standards promulgated by the  
973 State Board of Mental Health or the State Department of Mental  
974 Health, whether the person meets the criteria for the intensive  
975 community services available in its region and shall make those  
976 services available to the persons as appropriate under the  
977 standards promulgated by the department. During the pre-affidavit



978 screening process, the community mental health center shall  
979 consider all persons who are civilly committed in its region for  
980 treatment in a crisis stabilization unit to attempt to divert the  
981 person from placement in a state hospital. The community mental  
982 health center shall provide temporary care and maintenance, as  
983 specified in Section 19-5-43, to persons during the civil  
984 commitment process.

985 (b) Prior to a person's discharge from a state  
986 hospital, staff of the community mental health center that will be  
987 servicing the person upon discharge shall meet with the person,  
988 either in person or via videoconference, to conduct assertive  
989 engagement and enroll the person in appropriate services.

990 (5) On or before July 1 of each year, each community mental  
991 health center shall report the annual salary and fringe benefits  
992 of its executive director and any other officer with an annual  
993 salary of more than One Hundred Thousand Dollars (\$100,000.00) to  
994 the State Department of Mental Health. As of July 1, 2024, no  
995 community mental health center's executive director shall be paid  
996 an annual salary greater than one hundred twenty percent (120%) of  
997 the salary received by the Executive Director of the Department of  
998 Mental Health.

999 (6) On or before August 1 of each year, each community  
1000 mental health center shall report its cash balance as of the  
1001 preceding June 30 to the State Department of Mental Health and  
1002 shall include in its annual operational plan a detailed proposal



1003 for how it intends to utilize its excess cash balance in the  
1004 fiscal year commencing on the applicable July 1 of each year. The  
1005 proposal shall describe how the community mental health center  
1006 will utilize its cash balance to provide treatment to individuals  
1007 with a serious mental illness, a serious emotional disturbance, a  
1008 substance-use disorder or an intellectual or developmental  
1009 disability. If after six (6) months, the community mental health  
1010 center is not on course to meet its expenditure goal, the  
1011 department shall give the regional commission or community mental  
1012 health center a six-week probationary period to come into  
1013 compliance with its expenditure goal. If the community mental  
1014 health center does not come into compliance with its expenditure  
1015 proposal after the six-week probationary period, the department  
1016 may direct control of the community mental health center's excess  
1017 cash balance to implement the expenditures toward providing  
1018 community mental health services. The department shall remain in  
1019 control of the community mental health center's cash balance until  
1020 it determines in reasonable judgement that the community mental  
1021 health center has attained sustained compliance with its  
1022 expenditure plan. For the purposes of this subsection, the term  
1023 "cash balance" means the amount of cash or cash equivalents that a  
1024 community mental health center has in its account(s) in any bank  
1025 or other financial institution of any kind or on hand as of June  
1026 30 of the applicable year. For the purpose of this subsection,  
1027 the term "excess cash" means the cash balance exceeding fifty





1028 percent (50%) of operating revenue for the related year cash is  
1029 being reported. No community mental health center shall expend  
1030 more than fifty percent (50%) of its excess cash balance in any  
1031 fiscal year without the express written permission of the  
1032 department. To the fullest extent reasonably feasible, each  
1033 community mental health center shall utilize its cash balance to  
1034 provide community mental health services.

1035 **SECTION 3.** Section 41-19-35, Mississippi Code of 1972, is  
1036 amended as follows:

1037 41-19-35. (1) Except as otherwise provided in subsection  
1038 (2) of this section, the board of supervisors of each  
1039 participating county in the program shall appoint one (1) member  
1040 to represent its county on the regional commission in its  
1041 respective region for a term of four (4) years who shall serve at  
1042 the will and pleasure of the appointing board of supervisors, who  
1043 may be a clerk, sheriff or deputy.

1044 (2) (a) A regional commission may have a different  
1045 composition than provided in subsection (1) of this section if  
1046 each board of supervisors of the county or counties participating  
1047 in such regional commission agrees to such composition as  
1048 evidenced by resolutions adopted by the board or boards of  
1049 supervisors.

1050 (b) Each member shall represent his or her county on  
1051 the regional commission in its respective region for a term of



1052 four (4) years and shall serve at the will and pleasure of their  
1053 appointing board of supervisors.

1054 (3) In addition, the chancery clerks of the counties in each  
1055 region shall select a chancery clerk or a deputy clerk to serve as  
1056 a nonvoting liaison to the commission, and the sheriffs of the  
1057 counties in each region shall select a sheriff or a deputy sheriff  
1058 to serve as a nonvoting liaison to the commission. Any  
1059 compensation of such members shall be paid by the regional  
1060 commission, in its discretion, from any funds available. Each  
1061 member of the commission shall attend the orientation training for  
1062 new commissioners and the annual training for all commissioners  
1063 held by the Department of Mental Health. The Department of Mental  
1064 Health shall notify the board of supervisors when a commissioner  
1065 does not attend either the orientation training or annual  
1066 training. Upon notice from the Department of Mental Health that a  
1067 commissioner has failed to attend the required meetings, the  
1068 appointing board of supervisors shall remove the commissioner,  
1069 unless the department and the commission agree to an alternate  
1070 arrangement to allow the commissioner to continue to serve until  
1071 the next opportunity to attend the orientation meeting and/or the  
1072 annual training.

1073 **SECTION 4.** Section 41-21-65, Mississippi Code of 1972, is  
1074 amended as follows:

1075 41-21-65. (1) It is the intention of the Legislature that  
1076 the filing of an affidavit under this section be a simple,



1077 inexpensive, uniform, and streamlined process for the purpose of  
1078 facilitating and expediting the care of individuals in need of  
1079 treatment.

1080 (2) The Uniform Civil Commitment Affidavit developed by the  
1081 Department of Mental Health under this section must be provided by  
1082 the clerk of the chancery court to any party or affiant seeking a  
1083 civil commitment under this section, and must be utilized in all  
1084 counties to commence civil commitment proceedings under this  
1085 section. The affidavit must be made available to the public on  
1086 the website of the Mississippi Department of Mental Health.

1087 (3) The Department of Mental Health, in consultation with  
1088 the Mississippi Chancery Clerks Association, the Mississippi  
1089 Conference of Chancery Court Judges and the Mississippi  
1090 Association of Community Mental Health Centers, must develop a  
1091 written guide setting out the steps in the commitment process no  
1092 later than January 1, 2020. The guide shall be designated as the  
1093 "Uniform Civil Commitment Guide" and must include, but not be  
1094 limited to, the following:

1095 (a) Steps in the civil commitment process from  
1096 affidavit to commitment, written in easily understandable layman's  
1097 terms;

1098 (b) A schedule of fees and assessments that will be  
1099 charged to commence a commitment proceeding under this section;

1100 (c) Eligibility requirements and instructions for  
1101 filing a pauper's affidavit; and



1102 (d) A statement on the front cover of the guide  
1103 advising that persons wishing to pursue a civil commitment under  
1104 this section are not required to retain an attorney for any  
1105 portion of the commitment process.

1106 (4) Immediately upon availability, but no later than January  
1107 1, 2020, the Uniform Civil Commitment Guide must be provided by  
1108 the clerk of the chancery court to any party or affiant seeking a  
1109 civil commitment under this section and also must be made  
1110 available to the public on the website of the Mississippi  
1111 Department of Mental Health.

1112 (5) If any person is alleged to be in need of treatment, any  
1113 relative of the person, or any interested person, may make  
1114 affidavit of that fact and shall file the Uniform Civil Commitment  
1115 Affidavit with the clerk of the chancery court of the county in  
1116 which the person alleged to be in need of treatment resides, but  
1117 the chancellor or duly appointed special master may, in his or her  
1118 discretion, hear the matter in the county in which the person may  
1119 be found. Prior to filing an affidavit for commitment of an  
1120 individual, the relative or interested person shall be directed to  
1121 the community mental health center for a pre-affidavit screening  
1122 as set forth in Section 41-21-67. Pre-affidavit screening is  
1123 mandatory and must be completed before any affidavit for  
1124 commencement is filed. The affidavit shall set forth the name and  
1125 address of the proposed patient's nearest relatives and whether  
1126 the proposed patient resides or has visitation rights with any



1127 minor children, if known, and the reasons for the affidavit. The  
1128 affidavit must contain factual descriptions of the proposed  
1129 patient's recent behavior, including a description of the  
1130 behavior, where it occurred, and over what period of time it  
1131 occurred, if known. The affidavit shall state specifically that a  
1132 less restrictive alternative treatment was considered and specify  
1133 why treatment less restrictive than involuntary commitment is not  
1134 appropriate. Each factual allegation may be supported by  
1135 observations of witnesses and the pre-affidavit certified screener  
1136 named in the affidavit. The Department of Mental Health, in  
1137 consultation with the Mississippi Chancery Clerks' Association,  
1138 shall develop a simple, one-page affidavit form for the use of  
1139 affiants as provided in this section. The affidavit also must  
1140 state whether the affiant has \* \* \* received notice of the  
1141 pre-affidavit screening from the community mental health center  
1142 determining whether the alleged acts by the proposed respondent  
1143 warrant civil commitment in lieu of other less-restrictive  
1144 treatment options. No chancery clerk shall require an affiant to  
1145 retain an attorney for the filing of an affidavit under this  
1146 section.

1147 (6) The chancery clerk may charge a total filing fee for all  
1148 services equal to the amount set out in Section 25-7-9(o), and the  
1149 appropriate state and county assessments as required by law which  
1150 include, but are not limited to, assessments for the Judicial  
1151 Operation Fund (Section 25-7-9(3)(b)); the Electronic Court System



1152 Fund (Section 25-7-9(3)(a)); the Civil Legal Assistance Fund  
1153 (Section 25-7-9(1)(k)); the Court Education and Training Fund  
1154 (Section 37-26-3); State Court Constituent's Fund (Section  
1155 37-26-9(4)); and reasonable court reporter's fee. Costs  
1156 incidental to the court proceedings as set forth in Section  
1157 41-21-79 may not be included in the assessments permitted by this  
1158 subsection. The total of the fees and assessments permitted by  
1159 this subsection may not exceed One Hundred Fifty Dollars  
1160 (\$150.00).

1161 (7) The prohibition against charging the affiant other fees,  
1162 expenses, or costs shall not preclude the imposition of monetary  
1163 criminal penalties under Section 41-21-107 or any other criminal  
1164 statute, or the imposition by the chancellor or duly appointed  
1165 special master of monetary penalties for contempt if the affiant  
1166 is found to have filed an intentionally false affidavit or filed  
1167 the affidavit in bad faith for a malicious purpose.

1168 (8) Nothing in this section shall be construed so as to  
1169 conflict with Section 41-21-63.

1170 **SECTION 5.** Section 41-21-67, Mississippi Code of 1972, is  
1171 amended as follows:

1172 41-21-67. (1) (a) Prior to filing an affidavit for  
1173 commitment of an individual, the relative or interested person  
1174 shall be directed to the community mental health center in the  
1175 county of financial responsibility or the county where the  
1176 proposed patient is present for the conduct of a preliminary



1177 investigation to determine the need to file an affidavit of  
1178 involuntary commitment. The pre-affidavit screening must be  
1179 completed within twenty-four (24) hours of the community mental  
1180 health center being notified. Any physician, psychologist, nurse  
1181 practitioner or physician assistant conducting a screening or  
1182 examination shall immediately report back to the community mental  
1183 health center. Once a community mental health center receives  
1184 such report, it is responsible for further action.

1185 If the community mental health center is unavailable, any  
1186 reputable licensed physician, psychologist, nurse practitioner or  
1187 physician assistant, as allowed in the discretion of the court,  
1188 may conduct the pre-affidavit screening and examination as set  
1189 forth in Section 41-21-69. The community mental health center  
1190 shall appoint a pre-affidavit certified screener to conduct an  
1191 investigation. The prospective petitioner may not also serve as  
1192 the screener. The investigation must include:

1193 (i) An interview with the proposed patient and  
1194 other individuals who appear to have knowledge of the condition of  
1195 the proposed patient, if practicable. In-person interviews with  
1196 the proposed patient are preferred and shall be attempted. If the  
1197 proposed patient is not interviewed, specific reasons why the  
1198 patient was not interviewed must be documented;

1199 (ii) Identification and investigation of specific  
1200 alleged conduct that is the basis for application;



1201                   (iii) Identification, exploration, and listing of  
1202 the specific reasons for rejecting or recommending alternatives to  
1203 involuntary commitment; and

1204                   (iv) In the case of a commitment based on mental  
1205 illness, information listed in paragraph (d) of this subsection  
1206 for other purposes relevant to treatment.

1207                   (b) In conducting the investigation required by this  
1208 subsection, the screener shall have access to all relevant medical  
1209 records of proposed patients currently in treatment facilities,  
1210 state-operated treatment programs, or community-based treatment  
1211 programs. Data collected pursuant to this paragraph shall be  
1212 considered private data on individuals. The pre-affidavit  
1213 screening report is not admissible as evidence in court except by  
1214 agreement of counsel or as permitted by the rules of court and is  
1215 not admissible in any court proceedings unrelated to the  
1216 commitment proceedings.

1217                   (c) The pre-affidavit certified screener shall provide  
1218 a notice, written in easily understood language, to the  
1219 prospective petitioner, the court, and, with the proposed  
1220 patient's consent, other interested parties. The notice must  
1221 contain information regarding the process, purpose, and legal  
1222 effects of civil commitment.

1223                   (d) When the pre-affidavit certified screener  
1224 recommends commitment, a written report shall be sent to the  
1225 chancery clerk for the county in which the petition is to be





1226 filed. The statement of facts contained in the written report  
1227 must meet the requirements of Section 41-21-65(5), including a  
1228 certification that a less restrictive alternative treatment was  
1229 considered and specific enumerated reasons why treatment less  
1230 restrictive than involuntary commitment is not appropriate.

1231 (e) The pre-affidavit certified screener shall refuse  
1232 to support the filing of an affidavit if the investigation does  
1233 not disclose evidence sufficient to support commitment. Notice of  
1234 the pre-affidavit certified screener's decision shall be provided  
1235 to the prospective petitioner, the court, any specific individuals  
1236 identified in the examiner's statement, and to the proposed  
1237 patient.

1238 (f) If the interested person wishes to proceed with a  
1239 petition contrary to the recommendation of the pre-affidavit  
1240 certified screener, application may be made directly to the  
1241 chancellor or duly appointed special master, who shall determine  
1242 whether or not to proceed with the petition. Notice of the  
1243 chancellor's, or duly appointed special master's determination  
1244 shall be provided to the interested party.

1245 ( \* \* \*2) \* \* \* The authority of the chancellor may be  
1246 exercised by a duly appointed special master within the chancery  
1247 district. After a pre-affidavit screener has attempted to  
1248 complete an in-person screening, if the person is actively violent  
1249 or refuses to participate in the pre-affidavit screening and the  
1250 screening cannot be completed, then upon recommendation of the



1251 community mental health center, the affidavit may be filed and a  
1252 writ issued for a sheriff to intervene. After completing the  
1253 pre-affidavit screening required by subsection (1) of this  
1254 section, receiving the written report from the pre-affidavit  
1255 certified screener, and upon filing of the affidavit provided for  
1256 in Section 41-21-65 \* \* \*, the chancery clerk, upon direction of  
1257 the chancellor or duly appointed special master of the court,  
1258 shall issue a writ directed to the sheriff of the proper county to  
1259 take into custody the person alleged to be in need of treatment  
1260 and to take the person for \* \* \* physical and mental health  
1261 examination and treatment by the appropriate community mental  
1262 health center established under Section 41-19-31. The community  
1263 mental health center will be designated as the first point of  
1264 entry for \* \* \* pre-affidavit screening and treatment. \* \* \*  
1265 The \* \* \* writ may provide where the person shall be held before  
1266 being taken for \* \* \* evaluation and treatment, which shall  
1267 include any licensed medical facility or crisis stabilization  
1268 unit. \* \* \* Reapplication may be made to the chancellor or duly  
1269 appointed special master. If a pauper's affidavit is filed by an  
1270 affiant who is a guardian or conservator of a person in need of  
1271 treatment, the court shall determine if either the affiant or the  
1272 person in need of treatment is a pauper and if \* \* \* the affiant  
1273 or the person in need of treatment is determined to be a pauper,  
1274 the county of the residence of the respondent shall bear the costs



1275 of commitment, unless funds for those purposes are made available  
1276 by the state.

1277 \* \* \*

1278 ( \* \* \*3) Upon \* \* \* receiving the written report from the  
1279 pre-affidavit screening and a filed affidavit of commitment, the  
1280 chancellor or duly appointed special master shall immediately  
1281 appoint and summon two (2) reputable, licensed physicians or one  
1282 (1) reputable, licensed physician and either one (1) psychologist,  
1283 nurse practitioner or physician assistant to conduct a physical  
1284 and mental examination of the person at a place to be designated  
1285 by the clerk \* \* \*, chancellor or duly appointed special master  
1286 and to report their findings to the clerk \* \* \*, chancellor or  
1287 duly appointed special master. However, if the pre-affidavit  
1288 screening recommends against commitment, the chancellor or duly  
1289 appointed special master may refuse to appoint two (2) physicians  
1290 to conduct a physical and mental examination. However, any nurse  
1291 practitioner or physician assistant conducting the examination  
1292 shall be independent from, and not under the supervision of, the  
1293 other physician conducting the examination. A nurse practitioner  
1294 or psychiatric nurse practitioner conducting an examination under  
1295 this chapter must be functioning within a collaborative or  
1296 consultative relationship with a physician as required under  
1297 Section 73-15-20(3). In all counties in which there is a county  
1298 health officer, the county health officer, if available, may be  
1299 one (1) of the physicians so appointed. If a licensed physician



1300 is not available to conduct the physical and mental examination  
1301 within forty-eight (48) hours of the \* \* \* pre-affidavit  
1302 screening, the court, in its discretion and upon good cause shown,  
1303 may permit the examination to be conducted by the following: (a)  
1304 two (2) nurse practitioners, one (1) of whom must be a psychiatric  
1305 nurse practitioner; or (b) one (1) psychiatric nurse practitioner  
1306 and one (1) psychologist or physician assistant. Neither of the  
1307 physicians nor the psychologist, nurse practitioner or physician  
1308 assistant selected shall be related to that person in any way, nor  
1309 have any direct or indirect interest in the estate of that person  
1310 nor shall any full-time staff of residential treatment facilities  
1311 operated directly by the State Department of Mental Health serve  
1312 as examiner.

1313 ( \* \* \* 4) The clerk shall ascertain whether the respondent  
1314 is represented by an attorney, and if it is determined that the  
1315 respondent does not have an attorney, the clerk shall immediately  
1316 notify the chancellor or duly appointed special master of that  
1317 fact. If the chancellor or duly appointed special master  
1318 determines that the respondent for any reason does not have the  
1319 services of an attorney, the chancellor or duly appointed special  
1320 master shall immediately appoint an attorney for the respondent at  
1321 the time the examiners are appointed.

1322 ( \* \* \* 5) (a) If the chancellor or duly appointed special  
1323 master determines that there is probable cause to believe that the  
1324 respondent \* \* \* has mental illness and that there is no



1325 reasonable alternative to detention, the chancellor or duly  
1326 appointed special master may order that the respondent be retained  
1327 as an emergency patient at any licensed medical facility, crisis  
1328 stabilization unit or any other available suitable location for  
1329 evaluation by a physician, nurse practitioner or physician  
1330 assistant and that a peace officer transport the respondent to the  
1331 specified facility, unit, or location. If the community mental  
1332 health center serving the county has partnered with Crisis  
1333 Intervention Teams under the provisions of Sections 41-21-131  
1334 through 41-21-143, the order may specify that the licensed medical  
1335 facility be a designated single point of entry within the county  
1336 or within an adjacent county served by the community mental health  
1337 center. If the person evaluating the respondent finds that the  
1338 respondent \* \* \* has a mental illness and in need of treatment,  
1339 the chancellor or duly appointed special master may order that the  
1340 respondent be retained at the licensed medical facility, crisis  
1341 stabilization unit or any other available suitable location as the  
1342 court may so designate pending an admission hearing. If  
1343 necessary, the chancellor or duly appointed special master may  
1344 order a peace officer or other person to transport the respondent  
1345 to that facility or suitable location. Any respondent so retained  
1346 may be given such treatment as is indicated by standard medical  
1347 practice. However, the respondent shall not be held in a hospital  
1348 operated directly by the State Department of Mental Health \* \* \*.



1349           (b) A jail or other detention center may not be used  
1350 for custody unless:

1351           (i) The community mental health center has  
1352 explored and exhausted the availability of other appropriate  
1353 facilities, including local crisis stabilization units and  
1354 hospitals, and any Department of Mental Health certified location;

1355           (ii) The chancellor or properly-appointed family  
1356 master specifically authorizes it; and

1357           (iii) The respondent is actively violent.

1358           (c) The community mental health center shall provide  
1359 documentation of the person's violent behavior and that no other  
1360 appropriate facilities are available to the chancellor or duly  
1361 appointed special master. The county of residence of any such  
1362 person shall pay the cost of such interim treatment. No person  
1363 may remain in a jail for longer than twenty-four (24) hours under  
1364 the authority of this paragraph unless the community mental health  
1365 center requests an additional twenty-four-hour period from the  
1366 chancellor. The community mental health center shall provide  
1367 treatment during this timeframe pending placement at an  
1368 appropriate facility. No peace officer or any other person shall  
1369 place criminal charges against a person who has a mental illness  
1370 and in need of treatment pursuant to this chapter solely or  
1371 primarily because the person has a mental illness or because of  
1372 the unavailability of a state hospital bed.



1373       For the purposes of this subsection (5), "actively violent"  
1374 means that the behavior presents an immediate and serious danger  
1375 to the safety of the individual or another, the individual has  
1376 inflicted or attempted to inflict serious bodily harm on another,  
1377 or has acted in such a way as to create a substantial risk of  
1378 serious bodily harm to another, or has engaged in extreme  
1379 destruction of property; and that there is a reasonable  
1380 probability that this conduct will be repeated.

1381       The provisions of this paragraph (b) shall not be construed  
1382 to include jails that are designated as holding facilities under  
1383 the requirement provided by Section 41-21-77.

1384       ( \* \* \*6) (a) Whenever a licensed psychologist, nurse  
1385 practitioner or physician assistant who is certified to complete  
1386 examinations for the purpose of commitment or a licensed physician  
1387 has reason to believe that a person poses an immediate substantial  
1388 likelihood of physical harm to himself or others or is gravely  
1389 disabled and unable to care for himself by virtue of mental  
1390 illness, as defined in Section 41-21-61(e), then the physician,  
1391 psychologist, nurse practitioner or physician assistant may hold  
1392 the person or may admit the person to and treat the person in a  
1393 licensed medical facility, without a civil order or warrant for a  
1394 period not to exceed seventy-two (72) hours. However, if the  
1395 seventy-two-hour period begins or ends when the chancery clerk's  
1396 office is closed, or within three (3) hours of closing, and the  
1397 chancery clerk's office will be continuously closed for a time



1398 that exceeds seventy-two (72) hours, then the seventy-two-hour  
1399 period is extended until the end of the next business day that the  
1400 chancery clerk's office is open. The person may be held and  
1401 treated as an emergency patient at any licensed medical facility,  
1402 available regional mental health facility, or crisis \* \* \*  
1403 stabilization unit. The physician or psychologist, nurse  
1404 practitioner or physician assistant who holds the person shall  
1405 certify in writing the reasons for the need for holding.

1406 If a person is being held and treated in a licensed medical  
1407 facility, and that person decides to continue treatment by  
1408 voluntarily signing consent for admission and treatment, the  
1409 seventy-two-hour hold may be discontinued without filing an  
1410 affidavit for commitment. Any respondent so held may be given  
1411 such treatment as indicated by standard medical practice. Persons  
1412 acting in good faith in connection with the detention and  
1413 reporting of a person believed to \* \* \* have a mental illness  
1414 shall incur no liability, civil or criminal, for those acts.

1415 (b) Whenever an individual is held for purposes of  
1416 receiving treatment as prescribed under paragraph (a) of this  
1417 subsection, and it is communicated to the mental health  
1418 professional holding the individual that the individual resides or  
1419 has visitation rights with a minor child, and if the individual is  
1420 considered to be a danger to the minor child, the mental health  
1421 professional shall notify the Department of Child Protection





1422 Services prior to discharge if the threat of harm continues to  
1423 exist, as is required under Section 43-21-353.

1424 This paragraph (b) shall be known and may be cited as the  
1425 "Andrew Lloyd Law."

1426 (7) The Department of Mental Health shall develop annual  
1427 training for chancery clerks as well as orientation training for  
1428 new chancery clerks regarding civil commitment laws. The  
1429 Department of Mental Health shall ensure a virtual option is made  
1430 available to chancery clerks. The training shall be provided at  
1431 the expense of the department with travel expenses to be paid by  
1432 the county.

1433 **SECTION 6.** Section 41-21-68, Mississippi Code of 1972, is  
1434 amended as follows:

1435 41-21-68. (1) Regional commissions established under  
1436 Section 41-19-31 et seq. are authorized to establish regional  
1437 holding facilities for the treatment and holding of any person  
1438 eighteen (18) years of age or older being held for the purpose of  
1439 civil commitment. If a regional commission has not established a  
1440 regional holding facility in accordance with this section, the  
1441 regional commission shall otherwise comply with the provisions of  
1442 this chapter regarding treatment facilities.

1443 (2) For the purpose of establishing regional holding  
1444 facilities, each regional commission is authorized to create a  
1445 holding facility fund and enter into holding facility cooperative  
1446 agreements with counties both inside and outside the regional



1447 commission's designated region. Each county electing to use a  
1448 regional holding facility may contribute to the regional  
1449 commission's holding facility fund. The State of Mississippi may  
1450 match the county's contribution by paying not more than Two  
1451 Dollars (\$2.00) into the holding facility fund for each One Dollar  
1452 (\$1.00) received from the counties, if sufficient funds are  
1453 available.

1454 (3) Crisis stabilization units operating and receiving state  
1455 funds from the Department of Mental Health as of January 1, 2015,  
1456 shall not be eligible for the holding facility state matching  
1457 contributions provided for in this section. The matching funds  
1458 provided for in this section shall only be allocated to holding  
1459 facilities established under this section. Regional commissions  
1460 requesting decertification of any such crisis stabilization unit  
1461 to reestablish the unit as a regional holding facility under this  
1462 section in order to be eligible for state matching contributions  
1463 may do so only with the approval of the Department of Mental  
1464 Health.

1465 (4) Counties not contributing to a regional commission  
1466 holding facility fund shall not be entitled to use of a holding  
1467 facility. No patient shall be ordered by any court to a holding  
1468 facility established under this section if the county in which the  
1469 commitment action is pending has not entered into a cooperative  
1470 agreement with a regional commission and has not made a  
1471 contribution to a regional commission holding facility fund.



1472 (5) Holding facilities established under this section shall  
1473 at a minimum comply with the operational standards for holding  
1474 facilities established by the Department of Mental Health.  
1475 Holding facilities may also seek designation and certification as  
1476 a crisis stabilization unit, single point of entry, and other type  
1477 of treatment facility so that they may receive reimbursement from  
1478 the Division of Medicaid for eligible patients.

1479 (6) Holding facilities and committing courts shall not  
1480 remove persons from the holding facility unless the removal is for  
1481 clinical purposes. Persons taken to a holding facility  
1482 established under this section and any treatment professionals  
1483 called as witnesses shall not be required to appear at the court's  
1484 location for commitment proceedings, except when extraordinary  
1485 circumstances are found and determined as reflected by a written  
1486 order of the chancellor or duly appointed special master. For the  
1487 purpose of civil commitment hearings, persons being committed and  
1488 treatment professionals may participate through videoconferencing.  
1489 Holding facilities established under this section shall have the  
1490 capacity and ability to provide videoconferencing between the  
1491 person being held, the committing court, and treatment  
1492 professionals. Any attorney for the person being held shall be  
1493 present at the location of the person during videoconferenced  
1494 hearings and shall have the ability to consult in private with the  
1495 person.



1496 (7) Holding facilities are authorized to provide any  
1497 necessary treatment in person or through the use of  
1498 videoconferencing between the person and the treatment  
1499 professional.

1500 (8) For purposes of public participation, jurisdiction and  
1501 venue, the location of the commitment actions for persons being  
1502 held at holding facilities established under this section shall be  
1503 deemed to be the county of the committing court, even though the  
1504 individual being committed and treatment professionals may be  
1505 physically located in other jurisdictions when participating in  
1506 any hearing through videoconference. The jurisdiction of the  
1507 committing court and law enforcement officials transporting  
1508 persons to holding facilities shall extend to other jurisdictions  
1509 for the purpose of conducting hearings held by videoconferencing,  
1510 and for the purpose of holding and transporting individuals to  
1511 holding facilities established under this section.

1512 (9) Persons being held or detained for the purpose of civil  
1513 commitment shall not have a jail photograph or "mug shot"  
1514 published, except as permitted under Section 41-21-97. Persons  
1515 and businesses who publish those photographs shall immediately  
1516 remove the photographs from publication, and destroy any and all  
1517 copies of those photographs in their possession.

1518 **SECTION 7.** Section 41-21-73, Mississippi Code of 1972, is  
1519 amended as follows:



1520 41-21-73. (1) The hearing shall be conducted before the  
1521 chancellor or duly appointed special master. However, the hearing  
1522 may be held at the location where the respondent is being held.  
1523 Within a reasonable period of time before the hearing, notice of  
1524 same shall be provided the respondent and his attorney, which  
1525 shall include: (a) notice of the date, time and place of the  
1526 hearing; (b) a clear statement of the purpose of the hearing; (c)  
1527 the possible consequences or outcome of the hearing; (d) the facts  
1528 that have been alleged in support of the need for commitment; (e)  
1529 the names, addresses and telephone numbers of the examiner(s); and  
1530 (f) other witnesses expected to testify.

1531 (2) The respondent must be present at the hearing unless the  
1532 chancellor or duly appointed special master determines that the  
1533 respondent is unable to attend and makes that determination and  
1534 the reasons therefor part of the record. At the time of the  
1535 hearing, the respondent shall not be so under the influence or  
1536 suffering from the effects of drugs, medication or other treatment  
1537 so as to be hampered in participating in the proceedings. The  
1538 court, at the time of the hearing, shall be presented a record of  
1539 all drugs, medication or other treatment that the respondent has  
1540 received pending the hearing, unless the court determines that  
1541 such a record would be impractical and documents the reasons for  
1542 that determination.

1543 (3) The respondent shall have the right to offer evidence,  
1544 to be confronted with the witnesses against him and to



1545 cross-examine them and shall have the privilege against  
1546 self-incrimination. The rules of evidence applicable in other  
1547 judicial proceedings in this state shall be followed.

1548 (4) If the court finds by clear and convincing evidence that  
1549 the proposed patient is a person with mental illness or a person  
1550 with an intellectual disability and, if after careful  
1551 consideration of reasonable alternative dispositions, including,  
1552 but not limited to, dismissal of the proceedings, the court finds  
1553 that there is no suitable alternative to judicial commitment, the  
1554 court shall commit the patient for treatment in the least  
1555 restrictive treatment facility that can meet the patient's  
1556 treatment needs. However, if the person is receiving acute  
1557 psychiatric treatment for a mental illness or an intellectual  
1558 disability in a treatment facility at the time of the hearing, the  
1559 person may not be committed to a state-operated facility unless,  
1560 in addition to all other requirements of this subsection (4), the  
1561 affiant for commitment shows by clear and convincing evidence that  
1562 the treatment the person requires is not available in the facility  
1563 the person is being treated in at the time of the hearing, and  
1564 that the treatment the person requires is available only in the  
1565 state-operated facility whose catchment area includes the person's  
1566 county of residence. If treatment is only available at a  
1567 state-operated facility, the patient shall be discharged from the  
1568 treating facility. For the purposes of this subsection (4),  
1569 transfers of inpatients from any treatment facility are considered



1570 discharges for documentation and statistical purposes. Treatment  
1571 before admission to a state-operated facility shall be located as  
1572 closely as possible to the patient's county of residence and the  
1573 county of residence shall be responsible for that cost.

1574 Admissions to state-operated facilities shall be in compliance  
1575 with the catchment areas established by the State Department of  
1576 Mental Health. A nonresident of the state may be committed for  
1577 treatment or confinement in the county where the person was found.

1578 A person who has been judicially committed under this section  
1579 shall not be held in a jail or other detention facility while that  
1580 person is awaiting admission to a state-operated facility. In all  
1581 instances where admission to a state-operated facility is not  
1582 available at the time a person is judicially committed under this  
1583 section, the community mental health center whose catchment area  
1584 includes the county from which the commitment order was issued  
1585 must place the person in a treatment facility to receive interim  
1586 treatment until admission to a state-operated facility is  
1587 available. The county of residence of any such person shall pay  
1588 the cost of such interim treatment. Such interim treatment shall  
1589 not exceed the daily rate allowable by the Division of Medicaid.

1590 Alternatives to commitment to inpatient care may include, but  
1591 shall not be limited to: voluntary or court-ordered outpatient  
1592 commitment for treatment with specific reference to a treatment  
1593 regimen, day treatment in a hospital, night treatment in a



1594 hospital, placement in the custody of a friend or relative, or the  
1595 provision of home health services.

1596 For persons committed as having mental illness or having an  
1597 intellectual disability, the initial commitment shall not exceed  
1598 three (3) months.

1599 (5) No person shall be committed to a treatment facility  
1600 whose primary problems are the physical disabilities associated  
1601 with old age or birth defects of infancy.

1602 (6) The court shall state the findings of fact and  
1603 conclusions of law that constitute the basis for the order of  
1604 commitment. The findings shall include a listing of less  
1605 restrictive alternatives considered by the court and the reasons  
1606 that each was found not suitable.

1607 (7) A stenographic transcription shall be recorded by a  
1608 stenographer or electronic recording device and retained by the  
1609 court.

1610 (8) Notwithstanding any other provision of law to the  
1611 contrary, neither the State Board of Mental Health or its members,  
1612 nor the State Department of Mental Health or its related  
1613 facilities, nor any employee of the State Department of Mental  
1614 Health or its related facilities, unless related to the respondent  
1615 by blood or marriage, shall be assigned or adjudicated custody,  
1616 guardianship, or conservatorship of the respondent.

1617 (9) The county where a person in need of treatment is found  
1618 is authorized to charge the county of the person's residence for





1619 the costs incurred while the person is confined in the county  
1620 where such person was found.

1621 **SECTION 8.** Section 41-21-77, Mississippi Code of 1972, is  
1622 amended as follows:

1623 41-21-77. (1) If admission is ordered at a treatment  
1624 facility, the sheriff, his or her deputy or any other person  
1625 appointed or authorized by the court shall immediately deliver the  
1626 respondent to the director of the appropriate facility. Neither  
1627 the Board of Mental Health or its members, nor the Department of  
1628 Mental Health or its related facilities, nor any employee of the  
1629 Department of Mental Health or its related facilities, shall be  
1630 appointed, authorized or ordered to deliver the respondent for  
1631 treatment, and no person shall be so delivered or admitted until  
1632 the director of the admitting institution determines that  
1633 facilities and services are available. Persons who have been  
1634 ordered committed and are awaiting admission may be given any such  
1635 treatment in the facility by a licensed physician as is indicated  
1636 by standard medical practice. \* \* \* However, a jail or detention  
1637 center may not be used for persons who are awaiting admission  
1638 unless the community mental health center has explored and  
1639 exhausted the availability of other appropriate facilities, such  
1640 as the crisis stabilization unit and the local hospital; the  
1641 chancellor or duly appointed special master specifically  
1642 authorizes it; and the respondent is actively violent. The  
1643 community mental health center shall provide documentation of the



1644 person's violent behavior and that no other appropriate facilities  
1645 are available to the chancellor or duly appointed special master.  
1646 Under these circumstances, no person may remain in a jail for  
1647 longer than twenty-four (24) hours, and the community mental  
1648 health center shall provide treatment during this timeframe  
1649 pending placement at an appropriate facility. No peace officer or  
1650 any other person shall place criminal charges against a person who  
1651 is mentally ill and in need of treatment pursuant to this chapter  
1652 solely or primarily because the person is mentally ill or because  
1653 of the unavailability of a state hospital bed. For the purposes  
1654 of this subsection, "actively violent" means that the behavior  
1655 presents an immediate and serious danger to the safety of the  
1656 individual or another, the individual has inflicted or attempted  
1657 to inflict serious bodily harm on another, or has acted in such a  
1658 way as to create a substantial risk of serious bodily harm to  
1659 another, or has engaged in extreme destruction of property; and  
1660 there is a reasonable probability that this conduct will be  
1661 repeated. No person shall be delivered or admitted to any  
1662 non-Department of Mental Health treatment facility unless the  
1663 treatment facility is licensed and/or certified to provide the  
1664 appropriate level of psychiatric care for persons with mental  
1665 illness. It is the intent of this Legislature that county-owned  
1666 hospitals work with regional community mental health/intellectual  
1667 disability centers in providing care to local patients. The clerk  
1668 shall provide the director of the admitting institution with a



1669 certified copy of the court order, a certified copy of the  
1670 appointed examiners' certificates, a certified copy of the  
1671 affidavit, and any other information available concerning the  
1672 physical and mental condition of the respondent. Upon  
1673 notification from the United States Veterans Administration or  
1674 other agency of the United States government, that facilities are  
1675 available and the respondent is eligible for care and treatment in  
1676 those facilities, the court may enter an order for delivery of the  
1677 respondent to or retention by the Veterans Administration or other  
1678 agency of the United States government, and, in those cases the  
1679 chief officer to whom the respondent is so delivered or by whom he  
1680 is retained shall, with respect to the respondent, be vested with  
1681 the same powers as the director of the Mississippi State Hospital  
1682 at Whitfield, or the East Mississippi State Hospital at Meridian,  
1683 with respect to retention and discharge of the respondent.

1684 (2) (a) When admission to a treatment facility is ordered  
1685 by the court, the chancery clerk shall make record of the  
1686 admission. Each chancery clerk shall maintain a record of the  
1687 number of persons ordered by the court to be admitted to a  
1688 treatment facility, the number of hearings held by the court to  
1689 determine whether a person should be admitted to a treatment  
1690 facility and the number of affidavits filed to admit a person to a  
1691 treatment facility under Section 41-21-61 \* \* \* et seq.

1692 (b) The chancery clerk shall maintain a record each  
1693 time such clerk receives a denial for admission to a community



1694 mental health center crisis stabilization bed, the reason provided  
1695 to the clerk for such denial, and the subsequent action taken by  
1696 the clerk upon receiving the denial.

1697 (c) Each chancery clerk shall provide the records  
1698 required by paragraphs (a) and (b) of this subsection (2) to the  
1699 Department of Mental Health within thirty (30) days of the end of  
1700 each calendar quarter. Within sixty (60) days of receipt of the  
1701 chancery clerk records, the Department of Mental Health shall  
1702 provide a summary to the Chairpersons of the Appropriations,  
1703 Public Health and Judiciary A and B Committees for the Mississippi  
1704 House of Representatives and the Mississippi Senate, the  
1705 Coordinator of Mental Health and the President of the Mississippi  
1706 Association of Community Mental Health Centers.

1707 **SECTION 9.** Section 27-104-7, Mississippi Code of 1972, is  
1708 amended as follows:

1709 27-104-7. (1) (a) There is created the Public Procurement  
1710 Review Board, which shall be reconstituted on January 1, 2018, and  
1711 shall be composed of the following members:

1712 (i) Three (3) individuals appointed by the  
1713 Governor with the advice and consent of the Senate;

1714 (ii) Two (2) individuals appointed by the  
1715 Lieutenant Governor with the advice and consent of the Senate; and

1716 (iii) The Executive Director of the Department of  
1717 Finance and Administration, serving as an ex officio and nonvoting  
1718 member.



1719 (b) The initial terms of each appointee shall be as  
1720 follows:

1721 (i) One (1) member appointed by the Governor to  
1722 serve for a term ending on June 30, 2019;

1723 (ii) One (1) member appointed by the Governor to  
1724 serve for a term ending on June 30, 2020;

1725 (iii) One (1) member appointed by the Governor to  
1726 serve for a term ending on June 30, 2021;

1727 (iv) One (1) member appointed by the Lieutenant  
1728 Governor to serve for a term ending on June 30, 2019; and

1729 (v) One (1) member appointed by the Lieutenant  
1730 Governor to serve for a term ending on June 30, 2020.

1731 After the expiration of the initial terms, all appointed  
1732 members' terms shall be for a period of four (4) years from the  
1733 expiration date of the previous term, and until such time as the  
1734 member's successor is duly appointed and qualified.

1735 (c) When appointing members to the Public Procurement  
1736 Review Board, the Governor and Lieutenant Governor shall take into  
1737 consideration persons who possess at least five (5) years of  
1738 management experience in general business, health care or finance  
1739 for an organization, corporation or other public or private  
1740 entity. Any person, or any employee or owner of a company, who  
1741 receives any grants, procurements or contracts that are subject to  
1742 approval under this section shall not be appointed to the Public  
1743 Procurement Review Board. Any person, or any employee or owner of



1744 a company, who is a principal of the source providing a personal  
1745 or professional service shall not be appointed to the Public  
1746 Procurement Review Board if the principal owns or controls a  
1747 greater than five percent (5%) interest or has an ownership value  
1748 of One Million Dollars (\$1,000,000.00) in the source's business,  
1749 whichever is smaller. No member shall be an officer or employee  
1750 of the State of Mississippi while serving as a voting member on  
1751 the Public Procurement Review Board.

1752 (d) Members of the Public Procurement Review Board  
1753 shall be entitled to per diem as authorized by Section 25-3-69 and  
1754 travel reimbursement as authorized by Section 25-3-41.

1755 (e) The members of the Public Procurement Review Board  
1756 shall elect a chair from among the membership, and he or she shall  
1757 preside over the meetings of the board. The board shall annually  
1758 elect a vice chair, who shall serve in the absence of the chair.  
1759 No business shall be transacted, including adoption of rules of  
1760 procedure, without the presence of a quorum of the board. Three  
1761 (3) members shall be a quorum. No action shall be valid unless  
1762 approved by a majority of the members present and voting, entered  
1763 upon the minutes of the board and signed by the chair. Necessary  
1764 clerical and administrative support for the board shall be  
1765 provided by the Department of Finance and Administration. Minutes  
1766 shall be kept of the proceedings of each meeting, copies of which  
1767 shall be filed on a monthly basis with the chairs of the  
1768 Accountability, Efficiency and Transparency Committees of the



1769 Senate and House of Representatives and the chairs of the  
1770 Appropriations Committees of the Senate and House of  
1771 Representatives.

1772 (2) The Public Procurement Review Board shall have the  
1773 following powers and responsibilities:

1774 (a) Approve all purchasing regulations governing the  
1775 purchase or lease by any agency, as defined in Section 31-7-1, of  
1776 commodities and equipment, except computer equipment acquired  
1777 pursuant to Sections 25-53-1 through 25-53-29;

1778 (b) Adopt regulations governing the approval of  
1779 contracts let for the construction and maintenance of state  
1780 buildings and other state facilities as well as related contracts  
1781 for architectural and engineering services.

1782 The provisions of this paragraph (b) shall not apply to such  
1783 contracts involving buildings and other facilities of state  
1784 institutions of higher learning which are self-administered as  
1785 provided under this paragraph (b) or Section 37-101-15(m);

1786 (c) Adopt regulations governing any lease or rental  
1787 agreement by any state agency or department, including any state  
1788 agency financed entirely by federal funds, for space outside the  
1789 buildings under the jurisdiction of the Department of Finance and  
1790 Administration. These regulations shall require each agency  
1791 requesting to lease such space to provide the following  
1792 information that shall be published by the Department of Finance  
1793 and Administration on its website: the agency to lease the space;



1794 the terms of the lease; the approximate square feet to be leased;  
1795 the use for the space; a description of a suitable space; the  
1796 general location desired for the leased space; the contact  
1797 information for a person from the agency; the deadline date for  
1798 the agency to have received a lease proposal; any other specific  
1799 terms or conditions of the agency; and any other information  
1800 deemed appropriate by the Division of Real Property Management of  
1801 the Department of Finance and Administration or the Public  
1802 Procurement Review Board. The information shall be provided  
1803 sufficiently in advance of the time the space is needed to allow  
1804 the Division of Real Property Management of the Department of  
1805 Finance and Administration to review and preapprove the lease  
1806 before the time for advertisement begins;

1807 (d) Adopt, in its discretion, regulations to set aside  
1808 at least five percent (5%) of anticipated annual expenditures for  
1809 the purchase of commodities from minority businesses; however, all  
1810 such set-aside purchases shall comply with all purchasing  
1811 regulations promulgated by the department and shall be subject to  
1812 all bid requirements. Set-aside purchases for which competitive  
1813 bids are required shall be made from the lowest and best minority  
1814 business bidder; however, if no minority bid is available or if  
1815 the minority bid is more than two percent (2%) higher than the  
1816 lowest bid, then bids shall be accepted and awarded to the lowest  
1817 and best bidder. However, the provisions in this paragraph shall  
1818 not be construed to prohibit the rejection of a bid when only one





1819 (1) bid is received. Such rejection shall be placed in the  
1820 minutes. For the purposes of this paragraph, the term "minority  
1821 business" means a business which is owned by a person who is a  
1822 citizen or lawful permanent resident of the United States and who  
1823 is:

1824 (i) Black: having origins in any of the black  
1825 racial groups of Africa;

1826 (ii) Hispanic: of Mexican, Puerto Rican, Cuban,  
1827 Central or South American, or other Spanish or Portuguese culture  
1828 or origin regardless of race;

1829 (iii) Asian-American: having origins in any of  
1830 the original people of the Far East, Southeast Asia, the Indian  
1831 subcontinent, or the Pacific Islands;

1832 (iv) American Indian or Alaskan Native: having  
1833 origins in any of the original people of North America; or

1834 (v) Female;

1835 (e) In consultation with and approval by the Chairs of  
1836 the Senate and House Public Property Committees, approve leases,  
1837 for a term not to exceed eighteen (18) months, entered into by  
1838 state agencies for the purpose of providing parking arrangements  
1839 for state employees who work in the Woolfolk Building, the Carroll  
1840 Gartin Justice Building or the Walter Sillers Office Building;

1841 (f) (i) Except as otherwise provided in subparagraph  
1842 (ii) of this paragraph, promulgate rules and regulations governing  
1843 the solicitation and selection of contractual services personnel,



1844 including personal and professional services contracts for any  
1845 form of consulting, policy analysis, public relations, marketing,  
1846 public affairs, legislative advocacy services or any other  
1847 contract that the board deems appropriate for oversight, with the  
1848 exception of:

1849                   1. Any personal service contracts entered  
1850 into by any agency that employs only nonstate service employees as  
1851 defined in Section 25-9-107(c);

1852                   2. Any personal service contracts entered  
1853 into for computer or information technology-related services  
1854 governed by the Mississippi Department of Information Technology  
1855 Services;

1856                   3. Any personal service contracts entered  
1857 into by the individual state institutions of higher learning;

1858                   4. Any personal service contracts entered  
1859 into by the Mississippi Department of Transportation;

1860                   5. Any personal service contracts entered  
1861 into by the Department of Human Services through June 30, 2019,  
1862 which the Executive Director of the Department of Human Services  
1863 determines would be useful in establishing and operating the  
1864 Department of Child Protection Services;

1865                   6. Any personal service contracts entered  
1866 into by the Department of Child Protection Services through June  
1867 30, 2019;



1868                   7. Any contracts for entertainers and/or  
1869 performers at the Mississippi State Fairgrounds entered into by  
1870 the Mississippi Fair Commission;

1871                   8. Any contracts entered into by the  
1872 Department of Finance and Administration when procuring aircraft  
1873 maintenance, parts, equipment and/or services;

1874                   9. Any contract entered into by the  
1875 Department of Public Safety for service on specialized equipment  
1876 and/or software required for the operation of such specialized  
1877 equipment for use by the Office of Forensics Laboratories;

1878                   10. Any personal or professional service  
1879 contract entered into by the Mississippi Department of Health or  
1880 the Department of Revenue solely in connection with their  
1881 respective responsibilities under the Mississippi Medical Cannabis  
1882 Act from February 2, 2022, through June 30, 2026;

1883                   11. Any contract for attorney, accountant,  
1884 actuary auditor, architect, engineer, anatomical pathologist, or  
1885 utility rate expert services;

1886                   12. Any personal service contracts approved  
1887 by the Executive Director of the Department of Finance and  
1888 Administration and entered into by the Coordinator of Mental  
1889 Health Accessibility through June 30, 2022;

1890                   13. Any personal or professional services  
1891 contract entered into by the State Department of Health in



1892 carrying out its responsibilities under the ARPA Rural Water  
1893 Associations Infrastructure Grant Program through June 30, 2026;

1894 14. \* \* \* Any personal or professional  
1895 services contract entered into by the Mississippi Department of  
1896 Environmental Quality in carrying out its responsibilities under  
1897 the Mississippi Municipality and County Water Infrastructure Grant  
1898 Program Act of 2022, through June 30, 2026 \* \* \*; and

1899 15. Any personal or professional services  
1900 contract entered into by the Mississippi Department of Mental  
1901 Health in carrying out its responsibilities under Section  
1902 41-4-7(11).

1903 Any such rules and regulations shall provide for maintaining  
1904 continuous internal audit covering the activities of such agency  
1905 affecting its revenue and expenditures as required under Section  
1906 7-7-3(6)(d). Any rules and regulation changes related to personal  
1907 and professional services contracts that the Public Procurement  
1908 Review Board may propose shall be submitted to the Chairs of the  
1909 Accountability, Efficiency and Transparency Committees of the  
1910 Senate and House of Representatives and the Chairs of the  
1911 Appropriation Committees of the Senate and House of  
1912 Representatives at least fifteen (15) days before the board votes  
1913 on the proposed changes, and those rules and regulation changes,  
1914 if adopted, shall be promulgated in accordance with the  
1915 Mississippi Administrative Procedures Act.



1916 (ii) From and after July 1, 2024, the Public  
1917 Procurement Review Board shall promulgate rules and regulations  
1918 that require the Department of Finance and Administration to  
1919 conduct personal and professional services solicitations as  
1920 provided in subparagraph (i) of this paragraph for those services  
1921 in excess of Seventy-five Thousand Dollars (\$75,000.00) for the  
1922 Department of Marine Resources, the Department of Wildlife,  
1923 Fisheries and Parks, the Mississippi Emergency Management Agency  
1924 and the Mississippi Development Authority, with assistance to be  
1925 provided from these entities. Any powers that have been conferred  
1926 upon agencies in order to comply with the provisions of this  
1927 section for personal and professional services solicitations shall  
1928 be conferred upon the Department of Finance and Administration to  
1929 conduct personal and professional services solicitations for the  
1930 Department of Marine Resources, the Department of Wildlife,  
1931 Fisheries and Parks, the Mississippi Emergency Management Agency  
1932 and the Mississippi Development Authority for those services in  
1933 excess of Seventy-five Thousand Dollars (\$75,000.00). The  
1934 Department of Finance and Administration shall make any  
1935 submissions that are required to be made by other agencies to the  
1936 Public Procurement Review Board for the Department of Marine  
1937 Resources, the Department of Wildlife, Fisheries and Parks, the  
1938 Mississippi Emergency Management Agency and the Mississippi  
1939 Development Authority.



1940           The provisions of this subparagraph (ii) shall stand repealed  
1941 on June 30, 2027;

1942           (g) Approve all personal and professional services  
1943 contracts involving the expenditures of funds in excess of  
1944 Seventy-five Thousand Dollars (\$75,000.00), except as provided in  
1945 paragraph (f) of this subsection (2) and in subsection (8);

1946           (h) Develop mandatory standards with respect to  
1947 contractual services personnel that require invitations for public  
1948 bid, requests for proposals, record keeping and financial  
1949 responsibility of contractors. The Public Procurement Review  
1950 Board shall, unless exempted under this paragraph (h) or under  
1951 paragraph (i) or (o) of this subsection (2), require the agency  
1952 involved to submit the procurement to a competitive procurement  
1953 process, and may reserve the right to reject any or all resulting  
1954 procurements;

1955           (i) Prescribe certain circumstances by which agency  
1956 heads may enter into contracts for personal and professional  
1957 services without receiving prior approval from the Public  
1958 Procurement Review Board. The Public Procurement Review Board may  
1959 establish a preapproved list of providers of various personal and  
1960 professional services for set prices with which state agencies may  
1961 contract without bidding or prior approval from the board;

1962           (i) Agency requirements may be fulfilled by  
1963 procuring services performed incident to the state's own programs.  
1964 The agency head shall determine in writing whether the price



1965 represents a fair market value for the services. When the  
1966 procurements are made from other governmental entities, the  
1967 private sector need not be solicited; however, these contracts  
1968 shall still be submitted for approval to the Public Procurement  
1969 Review Board.

1970 (ii) Contracts between two (2) state agencies,  
1971 both under Public Procurement Review Board purview, shall not  
1972 require Public Procurement Review Board approval. However, the  
1973 contracts shall still be entered into the enterprise resource  
1974 planning system;

1975 (j) Provide standards for the issuance of requests for  
1976 proposals, the evaluation of proposals received, consideration of  
1977 costs and quality of services proposed, contract negotiations, the  
1978 administrative monitoring of contract performance by the agency  
1979 and successful steps in terminating a contract;

1980 (k) Present recommendations for governmental  
1981 privatization and to evaluate privatization proposals submitted by  
1982 any state agency;

1983 (l) Authorize personal and professional service  
1984 contracts to be effective for more than one (1) year provided a  
1985 funding condition is included in any such multiple year contract,  
1986 except the State Board of Education, which shall have the  
1987 authority to enter into contractual agreements for student  
1988 assessment for a period up to ten (10) years. The State Board of



1989 Education shall procure these services in accordance with the  
1990 Public Procurement Review Board procurement regulations;

1991 (m) Request the State Auditor to conduct a performance  
1992 audit on any personal or professional service contract;

1993 (n) Prepare an annual report to the Legislature  
1994 concerning the issuance of personal and professional services  
1995 contracts during the previous year, collecting any necessary  
1996 information from state agencies in making such report;

1997 (o) Develop and implement the following standards and  
1998 procedures for the approval of any sole source contract for  
1999 personal and professional services regardless of the value of the  
2000 procurement:

2001 (i) For the purposes of this paragraph (o), the  
2002 term "sole source" means only one (1) source is available that can  
2003 provide the required personal or professional service.

2004 (ii) An agency that has been issued a binding,  
2005 valid court order mandating that a particular source or provider  
2006 must be used for the required service must include a copy of the  
2007 applicable court order in all future sole source contract reviews  
2008 for the particular personal or professional service referenced in  
2009 the court order.

2010 (iii) Any agency alleging to have a sole source  
2011 for any personal or professional service, other than those  
2012 exempted under paragraph (f) of this subsection (2) and subsection  
2013 (8), shall publish on the procurement portal website established





2014 by Sections 25-53-151 and 27-104-165, for at least fourteen (14)  
2015 days, the terms of the proposed contract for those services. In  
2016 addition, the publication shall include, but is not limited to,  
2017 the following information:

2018                   1. The personal or professional service  
2019 offered in the contract;

2020                   2. An explanation of why the personal or  
2021 professional service is the only one that can meet the needs of  
2022 the agency;

2023                   3. An explanation of why the source is the  
2024 only person or entity that can provide the required personal or  
2025 professional service;

2026                   4. An explanation of why the amount to be  
2027 expended for the personal or professional service is reasonable;  
2028 and

2029                   5. The efforts that the agency went through  
2030 to obtain the best possible price for the personal or professional  
2031 service.

2032                   (iv) If any person or entity objects and proposes  
2033 that the personal or professional service published under  
2034 subparagraph (iii) of this paragraph (o) is not a sole source  
2035 service and can be provided by another person or entity, then the  
2036 objecting person or entity shall notify the Public Procurement  
2037 Review Board and the agency that published the proposed sole



2038 source contract with a detailed explanation of why the personal or  
2039 professional service is not a sole source service.

2040 (v) 1. If the agency determines after review that  
2041 the personal or professional service in the proposed sole source  
2042 contract can be provided by another person or entity, then the  
2043 agency must withdraw the sole source contract publication from the  
2044 procurement portal website and submit the procurement of the  
2045 personal or professional service to an advertised competitive bid  
2046 or selection process.

2047 2. If the agency determines after review that  
2048 there is only one (1) source for the required personal or  
2049 professional service, then the agency may appeal to the Public  
2050 Procurement Review Board. The agency has the burden of proving  
2051 that the personal or professional service is only provided by one  
2052 (1) source.

2053 3. If the Public Procurement Review Board has  
2054 any reasonable doubt as to whether the personal or professional  
2055 service can only be provided by one (1) source, then the agency  
2056 must submit the procurement of the personal or professional  
2057 service to an advertised competitive bid or selection process. No  
2058 action taken by the Public Procurement Review Board in this appeal  
2059 process shall be valid unless approved by a majority of the  
2060 members of the Public Procurement Review Board present and voting.

2061 (vi) The Public Procurement Review Board shall  
2062 prepare and submit a quarterly report to the House of



2063 Representatives and Senate Accountability, Efficiency and  
2064 Transparency Committees that details the sole source contracts  
2065 presented to the Public Procurement Review Board and the reasons  
2066 that the Public Procurement Review Board approved or rejected each  
2067 contract. These quarterly reports shall also include the  
2068 documentation and memoranda required in subsection (4) of this  
2069 section. An agency that submitted a sole source contract shall be  
2070 prepared to explain the sole source contract to each committee by  
2071 December 15 of each year upon request by the committee;

2072 (p) Assess any fines and administrative penalties  
2073 provided for in Sections 31-7-401 through 31-7-423.

2074 (3) All submissions shall be made sufficiently in advance of  
2075 each monthly meeting of the Public Procurement Review Board as  
2076 prescribed by the Public Procurement Review Board. If the Public  
2077 Procurement Review Board rejects any contract submitted for review  
2078 or approval, the Public Procurement Review Board shall clearly set  
2079 out the reasons for its action, including, but not limited to, the  
2080 policy that the agency has violated in its submitted contract and  
2081 any corrective actions that the agency may take to amend the  
2082 contract to comply with the rules and regulations of the Public  
2083 Procurement Review Board.

2084 (4) All sole source contracts for personal and professional  
2085 services awarded by state agencies, other than those exempted  
2086 under Section 27-104-7(2)(f) and (8), whether approved by an  
2087 agency head or the Public Procurement Review Board, shall contain



2088 in the procurement file a written determination for the approval,  
2089 using a request form furnished by the Public Procurement Review  
2090 Board. The written determination shall document the basis for the  
2091 determination, including any market analysis conducted in order to  
2092 ensure that the service required was practicably available from  
2093 only one (1) source. A memorandum shall accompany the request  
2094 form and address the following four (4) points:

2095 (a) Explanation of why this service is the only service  
2096 that can meet the needs of the purchasing agency;

2097 (b) Explanation of why this vendor is the only  
2098 practicably available source from which to obtain this service;

2099 (c) Explanation of why the price is considered  
2100 reasonable; and

2101 (d) Description of the efforts that were made to  
2102 conduct a noncompetitive negotiation to get the best possible  
2103 price for the taxpayers.

2104 (5) In conjunction with the State Personnel Board, the  
2105 Public Procurement Review Board shall develop and promulgate rules  
2106 and regulations to define the allowable legal relationship between  
2107 contract employees and the contracting departments, agencies and  
2108 institutions of state government under the jurisdiction of the  
2109 State Personnel Board, in compliance with the applicable rules and  
2110 regulations of the federal Internal Revenue Service (IRS) for  
2111 federal employment tax purposes. Under these regulations, the  
2112 usual common law rules are applicable to determine and require



2113 that such worker is an independent contractor and not an employee,  
2114 requiring evidence of lawful behavioral control, lawful financial  
2115 control and lawful relationship of the parties. Any state  
2116 department, agency or institution shall only be authorized to  
2117 contract for personnel services in compliance with those  
2118 regulations.

2119 (6) No member of the Public Procurement Review Board shall  
2120 use his or her official authority or influence to coerce, by  
2121 threat of discharge from employment, or otherwise, the purchase of  
2122 commodities, the contracting for personal or professional  
2123 services, or the contracting for public construction under this  
2124 chapter.

2125 (7) Notwithstanding any other laws or rules to the contrary,  
2126 the provisions of subsection (2) of this section shall not be  
2127 applicable to the Mississippi State Port Authority at Gulfport.

2128 (8) Nothing in this section shall impair or limit the  
2129 authority of the Board of Trustees of the Public Employees'  
2130 Retirement System to enter into any personal or professional  
2131 services contracts directly related to their constitutional  
2132 obligation to manage the trust funds, including, but not limited  
2133 to, actuarial, custodial banks, cash management, investment  
2134 consultant and investment management contracts. Nothing in this  
2135 section shall impair or limit the authority of the State Treasurer  
2136 to enter into any personal or professional services contracts  
2137 involving the management of trust funds, including, but not



2138 limited to, actuarial, custodial banks, cash management,  
2139 investment consultant and investment management contracts.

2140 (9) Through December 31, 2024, the provisions of this  
2141 section related to rental agreements or leasing of real property  
2142 for the purpose of conducting agency business shall not apply to  
2143 the Office of Workforce Development created in Section 37-153-7.

2144 **SECTION 10.** By December 2024 and every year thereafter, PEER  
2145 and the Department of Mental Health shall provide a report to the  
2146 House and Senate Public Health Committees on information related  
2147 to this act.

2148 **SECTION 11.** This act shall take effect and be in force from  
2149 and after July 1, 2024, and shall stand repealed on June 30, 2024.

