Amend CSHB 1 in Article II of the bill following the appropriation to the Texas Department of Mental Health and Mental Retardation by adding the following appropriately numbered rider:

- \_\_\_\_\_. PRIVATIZATION OF MENTAL HEALTH FACILITY. (a) Out of the funds appropriated above in Strategy B.1.1, MH State Hospital Services, (page II-71), for the state fiscal year beginning September 1, 2004, the Texas Department of Mental Health and Mental Retardation may allocate funds to contract with a private service provider to operate a mental health facility owned by the department only if the Health and Human Services Commission determines that the private service provider will operate the facility at a cost that is at least 10 percent less than the cost to the department to operate the facility and gives its prior approval of the contract.
- (b) On or before April 1, 2004, the Texas Department of Mental Health and Mental Retardation shall report to the commissioner of health and human services whether the department has received a proposal by a private service provider to operate a facility. The report must include an evaluation of the private service provider's qualifications, experience, and financial strength, a determination of whether the provider can operate the facility under the same standard of care as the department, and an analysis of the projected savings under a proposed contract with the provider. The savings analysis must include all department costs to operate the facility, including costs, such as employee benefits, that are not appropriated to the department.
- (c) If the Texas Department of Mental Health and Mental Retardation contracts with a private service provider to operate a facility, the department, the governor's office of budget and planning, and the Legislative Budget Board shall identify sources of funding that must be transferred to the department to fund the contract.
- (d) It is the intent of the Legislature that a facility operated under a contract be required to treat a population with the same characteristics and acuity levels as that population presently

treated at that facility.