

BILL ANALYSIS

Senate Research Center

S.B. 1182
By: Deuell
Health & Human Services
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Enrolled

DIGEST AND PURPOSE

Texas Community Mental Health and Mental Retardation Centers have become integral parts of their local communities. Through the eyes of their communities, centers have developed a unique view of service needs and service priorities. S.B. 1182 requires local mental health or mental retardation authorities to develop a local service plan to help each center meet the needs of its community.

RULEMAKING AUTHORITY

This bill does not grant any additional rulemaking authority to a state officer, institution, or agency.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Subchapter B, Chapter 533, Health and Safety Code, by adding Section 533.0354, as follows:

Sec. 533.0354. LOCAL AUTHORITY PLANNING FOR LOCAL SERVICE AREA.

(a) Requires each local mental health or mental retardation authority to develop a local service area plan to maximize the authority's services by using the best and most cost-effective means of using federal, state, and local resources to meet the needs of the local community according to the relative priority of those needs. Requires each local mental health or mental retardation authority to undertake to maximize federal funding.

(b) Requires a local service area plan to be consistent with the purposes, goals, and policies stated in Section 531.001 and the Texas Department of Mental Health and Mental Retardation's (MHMR) long-range plan developed under Section 533.032.

(c) Requires MHMR and a local mental health or mental retardation authority to use the local authority's local service plan as the basis for contracts between MHMR and the local authority and for establishing the local authority's responsibility for achieving outcomes related to the needs and characteristics of the authority's local service area.

(d) Requires the local mental health or mental retardation authority, in developing the local service area plan, to perform certain tasks.

(e) Requires MHMR and the local mental health or mental retardation authority by contract to enter into a performance agreement that specifies required standard outcomes for the programs administered by the local authority. Requires performance related to the specified outcomes to be verifiable by MHMR. Requires the performance agreement to include measures related to the outputs, costs, and units of service delivered. Requires information regarding the outputs, costs, and units of service delivered shall be recorded in the local authority's automated data systems, and reports regarding the outputs, costs, and units of service delivered to be submitted to MHMR at least annually as provided by MHMR rule.

(f) Requires MHMR and the local mental health or mental retardation authority to provide an opportunity for community centers and advocacy groups to provide information or assistance in developing the specified performance outcomes under Subsection (e).

SECTION 2. Amends Subchapter B, Chapter 531, Government Code, by adding Section 531.0224, as follows:

Sec. 531.0224. MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES. (a) Requires the Health and Human Services Commission (HHSC), to ensure appropriate delivery of mental health and substance abuse services, to regularly evaluate program contractors and subcontractors that provide or arrange for the services for persons enrolled in the Medicaid managed care program and the state child health plan program.

(b) Requires HHSC to monitor certain issues.

SECTION 3. Amends Chapter 574, Health and Safety Code, by adding Subchapter I, as follows:

SUBCHAPTER I. TESTIMONY BY CLOSED-CIRCUIT VIDEO TELECONFERENCING AT PROCEEDINGS

Sec. 574.201. APPLICATION OF SUBCHAPTER. Provides that this subchapter applies only to a hearing or proceeding related to court-ordered mental health services under this chapter.

Sec. 574.202. CERTAIN TESTIMONY BY CLOSED-CIRCUIT VIDEO TELECONFERENCING PERMITTED. (a) Authorizes a judge or magistrate to permit a physician or a nonphysician mental health professional to testify at a hearing or proceeding by closed-circuit video teleconferencing if under certain circumstances.

(b) Requires the judge or magistrate to provide written notice of the use of closed-circuit video teleconferencing to the proposed patient, the proposed patient's attorney, and the attorney representing the state not later than the third day before the date of the hearing.

(c) Requires the court on motion of the proposed patient or of the attorney representing the state, or authorizes the court on its discretion, to terminate testimony by closed-circuit video teleconferencing under this section at any time during the testimony and require the physician or nonphysician mental health professional to testify in person.

(d) Requires a recording of the testimony under Subsection (a) to be made and preserved with the court's record of the hearing.

SECTION 4. (a) Effective date: upon passage or September 1, 2003.

(b) Makes application of Sections 533.0354(c) and (e) prospective to January 1, 2004.