

Amend **HB 1218** by adding the following appropriately numbered SECTION to the bill and renumbering subsequent SECTIONS of the bill accordingly:

SECTION \_\_\_\_\_. (a) Title 12, Health and Safety Code, is amended by designating Chapter 1001, Health and Safety Code, as Subtitle A and adding a heading for Subtitle A to read as follows:

SUBTITLE A. ADMINISTRATION BY DEPARTMENT

(b) Title 12, Health and Safety Code, is amended by adding Subtitle B to read as follows:

SUBTITLE B. DEPARTMENT OF STATE HEALTH SERVICES PROGRAMS

CHAPTER 1022. SERVICES FOR SERVICEMEMBERS

SUBCHAPTER A. GENERAL PROVISIONS

Sec. 1022.001. DEFINITIONS. In this chapter:

(1) "Department" means the Department of State Health Services.

(2) "Post-traumatic stress disorder" means a psychiatric disorder that can occur in people who have experienced or witnessed life-threatening events, including natural disasters, serious accidents, terrorist incidents, war, or violent personal assaults.

(3) "Program" means the program established under this chapter.

(4) "Servicemember" has the meaning assigned by Section 161.551.

(5) "Traumatic brain injury" means an acquired injury to the brain, including brain injuries caused by anoxia due to near drowning. The term does not include brain dysfunction caused by congenital or degenerative disorders or birth trauma.

Sec. 1022.002. RULES. The executive commissioner of the Health and Human Services Commission shall adopt rules to implement this chapter.

Sec. 1022.003. CREATION AND PURPOSE. The department shall establish a program under this chapter to promote the wellness of servicemembers and their families through the development, maintenance, and dissemination of clinical practice guidelines and other information for the effective treatment of psychological trauma and the reintegration of servicemembers into their

communities, families, and workplaces, with emphasis on the trauma of war, including post-traumatic stress disorder, traumatic brain injury, and sexual trauma that occurs in military settings.

[Sections 1022.004-1022.050 reserved for expansion]

SUBCHAPTER B. CLINICAL PRACTICE GUIDELINES FOR TRAUMA

Sec. 1022.051. CLINICAL GUIDELINES. (a) The department shall develop evidence-based clinical practice guidelines containing recommendations to clinicians and other providers of mental health services for the management of trauma, including post-traumatic stress disorder, traumatic brain injury, and other trauma impacting behavioral health.

(b) In developing clinical practice guidelines, the department shall consider the recommendations and research of the National Center for Posttraumatic Stress Disorder of the federal Veterans Health Administration, the trauma registry and research database of the United States Army Institute of Surgical Research, and other appropriate and reputable sources of clinical research and information as determined by the department.

(c) The department shall provide for the ongoing maintenance and updating of the clinical practice guidelines in a manner that reflects current diagnostic and treatment best practices.

(d) Clinical practice guidelines established under this subchapter do not constitute the sole source of guidance in the management of trauma. Guidelines are intended to assist clinicians by providing a framework for clinical decision making. These guidelines do not provide the only appropriate approach to the management of trauma or replace other clinical judgment.

Sec. 1022.052. DISSEMINATION OF GUIDELINES. (a) The department shall make the clinical practice guidelines and other information developed under this subchapter available to providers of physical and behavioral health services.

(b) The department shall provide the clinical practice guidelines and information to the appropriate professional associations to be used in continuing education and shall, to the extent feasible, enter into agreements or take other action to promote the use of the materials for continuing education purposes.

(c) The department or its designees shall provide training and continuing education to clinicians and shall recognize through certificates or other means the health care providers that have demonstrated knowledge and mastery of the clinical practice guidelines and other materials developed by the department for the program.

Sec. 1022.053. TRAINING AND EDUCATIONAL MATERIALS. In addition to clinical practice guidelines, the department shall develop, with the advice of and in consultation with the Texas Veterans Commission, training and educational materials for the use of the Texas Veterans Commission, veterans county service officers, and other service providers. The materials must promote the understanding and effective treatment of trauma affecting behavioral health and other health-related information pertaining to the reintegration of servicemembers into their communities, families, and workplaces.

[Sections 1022.054-1022.100 reserved for expansion]

SUBCHAPTER C. SERVICE COORDINATION FOR BEHAVIORAL  
HEALTH SERVICES

Sec. 1022.101. SERVICE COORDINATION. (a) The department, in consultation with the United States Department of Veterans Affairs, the Texas military forces, the Texas Information and Referral Network, the Texas Veterans Commission, and the General Land Office, shall provide service coordination for servicemembers and their families in all geographic regions of the state to connect them to behavioral health services that may be available through the United States Department of Veterans Affairs or available under this chapter.

(b) In geographic areas in this state in which services are not yet available or accessible through the United States Department of Veterans Affairs, the department shall negotiate contracts with the United States Department of Veterans Affairs for behavioral health services provided through community mental health centers or other community resources with which the department contracts until federal services are available.

(c) The department shall provide servicemembers and their families current, accurate, and complete information about

behavioral health services and resources through existing Internet-based resource programs and through:

(1) the directory of services for military personnel and their families disseminated through the Texas Information and Referral Network under Subchapter U, Chapter 161; and

(2) the service referral program under Section 431.0291, Government Code, as added by Chapter 1381 (S.B. 1058), Acts of the 80th Legislature, Regular Session, 2007.

(d) The department shall seek reimbursement for the costs of services provided under this section from the United States Department of Veterans Affairs and from other governmental agencies that may provide behavioral health services or payments for such services to servicemembers and their families.

(e) In order to enhance service coordination and assess the needs of servicemembers and their families, the department shall provide an opportunity for servicemembers to disclose military status when accessing local behavioral health services that receive funding from the department.

[Sections 1022.102-1022.150 reserved for expansion]

SUBCHAPTER D. BEHAVIORAL HEALTH SERVICES PILOT PROGRAMS

Sec. 1022.151. ESTABLISHMENT OF PILOT PROGRAMS. (a) The department shall establish pilot programs in El Paso and Bexar Counties to evaluate the effectiveness of a program to provide behavioral health services to eligible servicemembers.

(b) The department shall contract with the local mental health authorities in El Paso and Bexar Counties to administer the pilot programs.

Sec. 1022.152. ELIGIBILITY. (a) To qualify for behavioral health services under Section 1022.153, a servicemember must:

- (1) reside in El Paso or Bexar County;
- (2) be younger than 65 years of age;
- (3) have served for at least 180 days of duty after the servicemember's initial training;
- (4) not be an inmate of a public institution;
- (5) not be a resident of a nursing facility;
- (6) not have health care coverage that provides diagnostic review and treatment for post-traumatic stress

disorder, traumatic brain injury, or other trauma occurring in a military setting that impacts behavioral health; and

(7) be ineligible for services from the United States Department of Veterans Affairs or be unable to access those services because:

(A) the servicemember does not have transportation to a service provider; or

(B) the servicemember must wait more than 30 days for an appointment with a service provider.

(b) A servicemember who does not meet the eligibility requirements for services under this section shall be referred to an appropriate service provider for follow-up care.

(c) To receive behavioral health services under Section 1022.153, an eligible servicemember must enroll with the local mental health authority in the pilot program. Following expiration of the term of a servicemember's enrollment in the pilot program, the servicemember may reenroll for services under the pilot program if the local mental health authority determines that the servicemember continues to qualify for treatment for post-traumatic stress disorder, traumatic brain injury, or other trauma occurring in a military setting that impacts behavioral health.

(d) A family member of an enrolled servicemember may receive behavioral health services under the pilot program as described by Section 1022.153.

Sec. 1022.153. BEHAVIORAL HEALTH SERVICES PILOT PROGRAMS.

(a) The department through contracts with the local mental health authorities in El Paso and Bexar Counties shall establish pilot programs to provide behavioral health services in accordance with this section for eligible servicemembers under Section 1022.152. The behavioral health services provided under this section may include:

(1) crisis services; and

(2) behavioral health services.

(b) The behavioral health services provided under Subsection (a)(2) must to the greatest extent possible be provided in a peer-based treatment environment and may include:

- (1) screening assessments;
- (2) individual, family, and group therapy;
- (3) substance abuse early intervention and detoxification services; and
- (4) substance abuse medication-assisted treatment.

(c) The provision of services by the local mental health authority under this section must be based on medical necessity criteria established by department rule.

(d) The department shall seek reimbursement for the costs of services provided under this section from the United States Department of Veterans Affairs and from other governmental agencies that may provide behavioral health services or payments for such services to servicemembers and their families.

Sec. 1022.154. REPORT. Not later than December 1, 2010, the department shall submit a report to the governor, lieutenant governor, and speaker of the house of representatives that includes:

- (1) an analysis of the effectiveness of the pilot program under this subchapter; and
- (2) recommendations regarding continuation or expansion of the pilot program.

Sec. 1022.155. EXPIRATION. This subchapter expires September 1, 2011.

[Sections 1022.156-1022.200 reserved for expansion]

#### SUBCHAPTER E. BEHAVIORAL HEALTH OUTREACH

Sec. 1022.201. OUTREACH ACTIVITIES. (a) Through a public outreach program, the department shall provide to servicemembers and their families information on accessing services through the Texas Information and Referral Network and through other organizations participating in memoranda of understanding maintained by the Texas military forces.

(b) The department's outreach activities must describe programs administered by health and human services agencies that could be of interest to servicemembers and their families, including early childhood intervention services, state vocational rehabilitation services, and higher education benefits and support services.

(c) The department's outreach efforts must be:

(1) conducted on a statewide basis;

(2) conducted through a contract or contracts with statewide or local community-based organizations with experience in statewide outreach to the military; and

(3) staffed by individuals with demonstrated experience in working with the military and military service organizations.

(d) Outreach methods must include direct personal contacts with servicemembers and outreach using communications media and printed materials. As a component of the department's outreach activities, the department shall maintain or support an existing interactive Internet-based resource program that:

(1) allows individuals to access comprehensive information, advocacy resources, and other resources regarding public and private behavioral health services, crisis and emergency services, and early intervention and prevention programs; and

(2) enables the public and private health care communities to work together to address the problems related to obtaining access to behavioral health services and other reintegration services for servicemembers and their families.

(e) The interactive Internet-based program established under Subsection (d) shall be developed or maintained by the department with the advice of and in consultation with the Texas military forces. The department shall collaborate with state agencies and the Texas military forces to develop strategies to use existing interactive Internet-based resources that serve servicemembers and their families.

(c) Subchapter A, Chapter 431, Government Code, is amended by adding Section 431.0186 to read as follows:

Sec. 431.0186. SCREENING FOR TRAUMATIC BRAIN INJURY.

(a) The adjutant general shall require each member of the Texas National Guard who served during Operation Enduring Freedom or Operation Iraqi Freedom to be screened for traumatic brain injury.

(b) The adjutant general shall assist a member of the Texas National Guard who tests positive for traumatic brain injury in obtaining appropriate medical care.

(d) Section 434.007, Government Code, is amended to read as follows:

Sec. 434.007. DUTIES. (a) The commission shall:

(1) compile federal, state, and local laws enacted to benefit members of the armed forces, veterans, and their families and dependents;

(2) collect information relating to services and facilities available to veterans;

(3) cooperate with veterans service agencies in the state;

(4) inform members and veterans of the armed forces, their families and dependents, and military and civilian authorities about the existence or availability of:

(A) educational training and retraining facilities;

(B) health, medical, rehabilitation, and housing services and facilities;

(C) employment and reemployment services;

(D) provisions of federal, state, and local law affording rights, privileges, and benefits to members and veterans of the armed forces and their families and dependents; and

(E) other similar, related, or appropriate matters;

(5) assist veterans and their families and dependents in presenting, proving, and establishing claims, privileges, rights, and benefits they may have under federal, state, or local law, including establishing eligibility for health care services and treatments from the federal Veterans Health Administration and for services provided through the Department of State Health Services;

(6) cooperate with all government and private agencies securing services or benefits to veterans and their families and dependents;

(7) investigate, and if possible correct, abuses or exploitation of veterans or their families or dependents, and recommend necessary legislation for full correction;

(8) coordinate the services and activities of state

departments and divisions having services and resources affecting veterans or their families or dependents;

(9) provide training and certification of veterans county service officers and assistant veterans county service officers in accordance with Section 434.038; and

(10) through surveys or other reasonable and accurate methods of estimation, collect and maintain for each county in the state the number of servicemembers and veterans residing in the county and annually update and publish the information on the commission's website.

(b) The commission shall enter into a memorandum of understanding with the Department of State Health Services to develop training materials for veterans county service officers and veterans service organizations that promote the understanding and effective treatment of trauma affecting behavioral health and other health-related information that promotes the reintegration of members and veterans of the armed forces into their communities, families, and workplaces. The commission shall:

(1) disseminate training and educational materials for the development of clinical practice guidelines and other training and educational materials that it receives from the department;

(2) enter into a contract or other agreement for the development of the training and educational materials with the department;

(3) reimburse the department for costs of preparing the materials from appropriations or other amounts available to the commission; and

(4) enter into relationships with established training programs for the purpose of providing peer support training and certification for veterans county service officers.

(e) Subsection (a), Section 434.0078, Government Code, is amended to read as follows:

(a) The commission shall adopt procedures for administering claims assistance services under Section 434.007(5). Claims assistance services shall be provided for establishing eligibility for health care services and treatments from the federal Veterans

Health Administration. The procedures shall include:

(1) criteria for determining when a veteran's initial claim is substantially complete and basic eligibility requirements are met as provided by federal law;

(2) a process for expediting a claim based on hardship, including whether the veteran:

(A) is in immediate need;

(B) is terminally ill;

(C) has a verifiable financial hardship; or

(D) has a disability that presents an undue burden;

(3) a procedure for counseling veterans on the potential merits or drawbacks of pursuing a claim;

(4) a process to ensure adequate documentation and development of a claim or appeal, including early client involvement, collection of needed evidence and records, and analysis of actions necessary to pursue and support a claim or appeal;

(5) criteria for evaluating whether a decision of the United States Department of Veterans Affairs contains sufficient cause for filing an appeal;

(6) a requirement that a claims counselor report to the United States Department of Veterans Affairs if the counselor has direct knowledge that a claim contains false or deceptive information; and

(7) a procedure for prioritizing a claim, when appropriate, or providing an alternative source for obtaining claims assistance services when it is not appropriate to prioritize.

(f) The Department of State Health Services shall conduct an immediate analysis of the behavioral health needs of servicemembers and their families and submit a preliminary report of its findings and recommendations to the legislature and the governor on or before December 1, 2009, and a final report of its findings and recommendations on or before December 1, 2010. The report shall:

(1) identify the gaps in behavioral health services available to servicemembers and their families;

(2) identify impediments to the ability of servicemembers and their families to access the behavioral health services that are available, particularly in the state's rural areas;

(3) evaluate collaboration among organizations and entities that provide behavioral health services to servicemembers and their families;

(4) make recommendations with respect to improving outreach to servicemembers and their families in need of behavioral health services;

(5) include a specific plan of action to promote federal and state collaboration to maximize funding and access to resources for the behavioral health needs of servicemembers and their families;

(6) make recommendations with respect to building provider capacity and increasing provider training to meet the behavioral health needs of servicemembers and their families through peer support treatment methodologies; and

(7) make recommendations with respect to improving the coordination of behavioral health services for servicemembers and their families.

(g) Not later than January 1, 2010, the executive commissioner of the Health and Human Services Commission shall adopt rules as necessary to administer Chapter 1022, Health and Safety Code, as added by this section.

(h) This section does not make an appropriation. This section takes effect only if a specific appropriation for the implementation of the section is provided in a general appropriations act of the 81st Legislature.