

BILL ANALYSIS

C.S.S.B. 421
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Public Health
Committee Report (Substituted)

BACKGROUND AND PURPOSE

The Texas Integrated Funding Initiative pilot project consortium, comprised of state child-serving agencies, community representatives, families, and advocates, was established to assist the Health and Human Services Commission to provide communities with training, technical assistance, and minimal funding to develop local systems of care for children and youth with serious emotional disturbances. According to interested parties, the system of care approach is widely recommended to better plan for and serve children and youth with serious emotional disturbances, helping to keep them in their homes, with their families, and out of more restrictive placements such as hospitalization, foster care, or juvenile justice. A recently developed strategic plan recommends that the pilot project consortium, set to dissolve soon, evolve into the Texas System of Care Consortium, retaining the locus of authority, responsibility, and oversight for the system of care in Texas. C.S.S.B. 421 seeks to codify this recommendation.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

C.S.S.B. 421 amends the Government Code to remove provisions relating to the formation of a consortium to develop and implement the expansion of the Texas Integrated Funding Initiative pilot project for minors who are receiving residential mental health services or who are at risk of residential placement to receive such services and repeals provisions relating to initiative expansion program participant proposals, selection, system development, evaluation, and implementation. The bill instead requires the Health and Human Services Commission (HHSC) to form a consortium with responsibility for and oversight over a state system of care to develop local mental health systems of care in communities for minors who are receiving residential mental health services or inpatient mental health hospitalization or who are at risk for removal from the minor's home and placement in a more restrictive environment to receive mental health services, including an inpatient mental health hospital, a residential treatment facility, or a facility or program operated by the Department of Family and Protective Services (DFPS) or an agency that is part of the juvenile justice system.

C.S.S.B. 421 revises provisions relating to the composition of the consortium to require it to include representatives of the Department of State Health Services (DSHS), DFPS, HHSC's Medicaid program, the Texas Education Agency, the Texas Juvenile Justice Department, and the Texas Correctional Office on Offenders with Medical or Mental Impairments; one youth or young adult who has a serious emotional disturbance and has received mental health services and supports; or a family member of such a youth or young adult. The bill authorizes the consortium to coordinate with the Children's Policy Council for purposes of including the youth or young adult representative, or the family member representative. The bill revises provisions relating to the duties of HHSC and the consortium to require them to maintain a comprehensive plan for the delivery of mental health services and supports to a minor and a minor's family using a system of

care framework, including best practices in the financing, administration, governance, and delivery of those services; to implement strategies to expand the use of system of care practices in the planning and delivery of services throughout the state; to identify appropriate local, state, and federal funding sources to finance infrastructure and mental health services needed to support state and local system of care efforts; and to develop an evaluation system to measure outcomes of state and local system of care efforts.

C.S.S.B. 421 requires the consortium, not later than November 1 of each even-numbered year, to submit a report to the legislature and the Council on Children and Families that contains an evaluation of the outcomes of the Texas System of Care and recommendations on strengthening state policies and practices that support local systems of care, including recommendations relating to methods to increase access to effective and coordinated services and supports; methods to increase community capacity to implement local systems of care through training and technical assistance; use of cross-system performance and outcome data to make informed decisions at individual and system levels; and strategies to maximize public and private funding at the local, state, and federal levels. The bill specifies that HHSC and DSHS, in jointly monitoring the progress of communities that implement a local system of care, must monitor cost avoidance and the net savings that result from implementing a local system of care.

C.S.S.B. 421 repeals the following provisions of the Government Code:

- Section 531.252
- Section 531.253
- Section 531.254
- Sections 531.255(b), (c), and (d)
- Section 531.256
- Section 531.258

EFFECTIVE DATE

September 1, 2013.

COMPARISON OF ORIGINAL AND SUBSTITUTE

While C.S.S.B. 421 may differ from the engrossed version in minor or nonsubstantive ways, the following comparison is organized and highlighted in a manner that indicates the substantial differences between the engrossed and committee substitute versions of the bill.

SENATE ENGROSSED	HOUSE COMMITTEE SUBSTITUTE
SECTION 1. The heading to Subchapter G-1, Chapter 531, Government Code, is amended.	SECTION 1. Same as engrossed version.
SECTION 2. Section 531.251, Government Code, is amended.	SECTION 2. Substantially the same as engrossed version.
SECTION 3. Section 531.255, Government Code, is amended to read as follows: Sec. 531.255. EVALUATION. [(a)] The commission and the [Texas] Department of State [Mental] Health Services [and Mental]	SECTION 3. Section 531.255(a), Government Code, is amended to read as follows: (a) The commission and the [Texas] Department of State [Mental] Health Services [and Mental Retardation] jointly shall monitor

~~Retardation]~~ jointly shall monitor the progress of the grant ~~[expansion]~~ communities, including monitoring cost avoidance and the net savings that result from implementing a local system of care.

~~[(b) The commission, the consortium, and the expansion communities shall collaborate to develop a system to evaluate the success of the expansion communities in achieving outcome goals for the minors the communities serve, including outcome goals developed under Section 531.252. An evaluation under the system must include information on cost avoidance and net savings that result from participation in the initiative.~~

~~[(c) Each expansion community shall identify the baseline information to compare with the information on outcomes in evaluating the achievements of the community. A community is responsible for collecting and reporting outcome information to the commission in accordance with the requirements of the evaluation system developed under Subsection (b).~~

~~[(d) To the extent practicable, an expansion community shall use instruments to measure outcomes that have known reliability and validity and that allow comparisons with similar projects in other states and with national evaluation efforts.]~~

SECTION 4. Section 531.257, Government Code, is amended to read as follows:
Sec. 531.257. TECHNICAL ASSISTANCE FOR GRANT PROJECTS. The commission may provide technical assistance to a community that receives a grant under Section 531.252 ~~[531.256]~~.

SECTION 5. Sections 531.253, 531.254, 531.256, and 531.258, Government Code, are repealed.

(Sections 531.255(b), (c), and (d) removed in SECTION 3, above.)

SECTION 6. This Act takes effect September 1, 2013.

the progress of the ~~[expansion]~~ communities that implement a local system of care, including monitoring cost avoidance and the net savings that result from implementing a local system of care.

(Subsections (b), (c), and (d) repealed in SECTION 5, below.)

SECTION 4. Section 531.257, Government Code, is amended to read as follows:
Sec. 531.257. TECHNICAL ASSISTANCE FOR ~~[GRANT]~~ PROJECTS. The commission may provide technical assistance to a community that implements a local system of care ~~[receives a grant under Section 531.256]~~.

SECTION 5. Sections 531.252, 531.253, 531.254, 531.255(b), (c), and (d), 531.256, and 531.258, Government Code, are repealed.

SECTION 6. Same as engrossed version.