

By: Huffman, Nelson, Schwertner

S.B. No. 292

A BILL TO BE ENTITLED

AN ACT

relating to the creation of a grant program to reduce recidivism,
arrest, and incarceration of individuals with mental illness.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Subchapter B, Chapter 531, Government Code, is
amended by adding Section 531.0993 to read as follows:

Sec. 531.0993. GRANT PROGRAM TO REDUCE RECIDIVISM, ARREST,
AND INCARCERATION AMONG INDIVIDUALS WITH MENTAL ILLNESS AND TO
REDUCE WAIT TIME FOR FORENSIC COMMITMENT. (a) For purposes of this
section, "low-income household" means a household with a total
income at or below 200 percent of the federal poverty guideline.

(b) Using money appropriated to the commission for that
purpose, the commission shall make grants to county-based community
collaboratives for the purposes of reducing:

(1) recidivism by, the frequency of arrests of, and
incarceration of persons with mental illness; and

(2) the total waiting time for forensic commitment of
persons with mental illness to a state hospital.

(c) A community collaborative is eligible to receive a grant
under this section only if the collaborative includes a county, a
local mental health authority that operates in the county, and each
hospital district, if any, located in the county. A community
collaborative may include other local entities designated by the
collaborative's members.

1 (d) The commission shall condition each grant provided to a
2 community collaborative under this section on the collaborative
3 providing matching funds from non-state sources in a total amount
4 at least equal to the awarded grant amount. To raise matching
5 funds, a collaborative may seek and receive gifts, grants, or
6 donations from any person.

7 (e) The commission shall estimate the number of cases of
8 serious mental illness in low-income households located in each of
9 the 10 most populous counties in this state. For the purposes of
10 distributing grants under this section to community collaboratives
11 established in those 10 counties, for each fiscal year the
12 commission shall determine an amount of grant money available on a
13 per-case basis by dividing the total amount of money appropriated
14 to the commission for the purpose of making grants under this
15 section in that year by the estimated total number of cases of
16 serious mental illness in low-income households located in those 10
17 counties.

18 (f) The commission shall make available to a community
19 collaborative established in each of the 10 most populous counties
20 in this state a grant in an amount equal to the lesser of:

21 (1) an amount determined by multiplying the per-case
22 amount determined under Subsection (e) by the estimated number of
23 cases of serious mental illness in low-income households in that
24 county; and

25 (2) an amount equal to the collaborative's available
26 matching funds.

27 (g) To the extent appropriated money remains available to

1 the commission for that purpose after the commission awards grants
2 under Subsection (f), the commission shall make available to
3 community collaboratives established in other counties in this
4 state grants through a competitive request for proposal process.
5 For purposes of awarding a grant under this subsection, a
6 collaborative may include adjacent counties if, for each member
7 county, the collaborative's members include a local mental health
8 authority that operates in the county and each hospital district,
9 if any, located in the county. A grant awarded under this
10 subsection may not exceed an amount equal to the lesser of:

11 (1) an amount determined by multiplying the per-case
12 amount determined under Subsection (e) by the estimated number of
13 cases of serious mental illness in low-income households in the
14 county or counties; and

15 (2) an amount equal to the collaborative's available
16 matching funds.

17 (h) The community collaboratives established in each of the
18 10 most populous counties in this state shall submit to the
19 commission a plan that:

20 (1) is endorsed by each of the collaborative's member
21 entities;

22 (2) identifies a target population;

23 (3) describes how the grant money and matching funds
24 will be used;

25 (4) includes outcome measures to evaluate the success
26 of the plan; and

27 (5) describes how the success of the plan in

1 accordance with the outcome measures would further the state's
2 interest in the grant program's purposes.

3 (i) A community collaborative that applies for a grant under
4 Subsection (g) must submit to the commission a plan as described by
5 Subsection (h). The commission shall consider the submitted plan
6 together with any other relevant information in awarding a grant
7 under Subsection (g).

8 (j) The commission must review and approve plans submitted
9 under Subsection (h) or (i) before the commission distributes a
10 grant under Subsection (f) or (g). If the commission determines
11 that a plan includes insufficient outcome measures, the commission
12 may make the necessary changes to the plan to establish appropriate
13 outcome measures. The commission may not make other changes to a
14 plan submitted under Subsection (h) or (i).

15 (k) Acceptable uses for the grant money and matching funds
16 include:

17 (1) the continuation of a mental health jail diversion
18 program;

19 (2) the establishment or expansion of a mental health
20 jail diversion program;

21 (3) the establishment of alternatives to competency
22 restoration in a state hospital, including outpatient competency
23 restoration, inpatient competency restoration in a setting other
24 than a state hospital, or jail-based competency restoration;

25 (4) the provision of assertive community treatment or
26 forensic assertive community treatment with an outreach component;

27 (5) the provision of intensive mental health services

1 and substance abuse treatment not readily available in the county;

2 (6) the provision of continuity of care services for
3 an individual being released from a state hospital;

4 (7) the establishment of interdisciplinary rapid
5 response teams to reduce law enforcement's involvement with mental
6 health emergencies; and

7 (8) the provision of local community hospital, crisis,
8 respite, or residential beds.

9 (1) Not later than December 31 of each year for which the
10 commission distributes a grant under this section, each community
11 collaborative that receives a grant shall prepare and submit a
12 report describing the effect of the grant money and matching funds
13 in achieving the standard defined by the outcome measures in the
14 plan submitted under Subsection (h) or (i).

15 (m) The commission may make inspections of the operation and
16 provision of mental health services provided by a community
17 collaborative to ensure state money appropriated for the grant
18 program is used effectively.

19 (n) The commission shall enter into an agreement with a
20 qualified nonprofit or private entity to serve as the administrator
21 of the grant program at no cost to the state. The administrator
22 shall assist, support, and advise the commission in fulfilling the
23 commission's responsibilities with respect to the grant program.

24 The administrator may advise the commission on:

25 (1) design, development, implementation, and
26 management of the program;

27 (2) eligibility requirements for grant recipients;

- 1 (3) design and management of the competitive bidding
2 processes for applications or proposals and the evaluation and
3 selection of grant recipients;
4 (4) grant requirements and mechanisms;
5 (5) roles and responsibilities of grant recipients;
6 (6) reporting requirements for grant recipients;
7 (7) support and technical capabilities;
8 (8) timelines and deadlines for the program;
9 (9) evaluation of the program and grant recipients;
10 (10) requirements for reporting on the program to
11 policy makers; and
12 (11) estimation of the number of cases of serious
13 mental illness in low-income households in each county.

14 SECTION 2. This Act takes effect September 1, 2017.