**BILL ANALYSIS**

|  |  |
| --- | --- |
| Senate Research Center | S.B. 633 |
|  | By: Kolkhorst |
|  | Health & Human Services |
|  | 5/31/2019 |
|  | Enrolled |

**AUTHOR'S / SPONSOR'S STATEMENT OF INTENT**

Public mental health services are primarily provided through the Health and Human Services Commission's contracts with local mental health authorities (LMHAs). These entities provide or arrange crisis services, community mental health services, jail assessments, substance use services, and services for individuals with intellectual and developmental disabilities.

LMHAs are required to plan, develop, and coordinate local policy, resources, and services for mental health care; however, with 39 LMHAs, broader regional planning and inter-LMHA collaboration is lacking. Additionally, many LMHAs have had difficulty building capacity and establishing successful contracts for services, especially in rural regions. S.B. 633 seeks to address these challenges by requiring HHSC to group rural LMHAs into regional groups and develop a capacity plan for each region. (Original Author's/Sponsor's Statement of Intent)

S.B. 633 amends current law relating to an initiative to increase the capacity of local mental health authorities to provide access to mental health services in certain counties.

**RULEMAKING AUTHORITY**

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

**SECTION BY SECTION ANALYSIS**

SECTION 1. Amends Subchapter B, Chapter 531, Government Code, by adding Section 531.0221, as follows:

Sec. 531.0221. INITIATIVE TO INCREASE MENTAL HEALTH SERVICES CAPACITY IN RURAL AREAS. (a) Defines "local mental health authority group."

(b) Requires the Health and Human Services Commission (HHSC), not later than January 1, 2020, using existing resources, to:

(1) identify each local mental health authority that is located in a county with a population of 250,000 or less or that HHSC determines provides services predominantly in a county with a population of 250,000 or less;

(2) in a manner that HHSC determines will best achieve the reductions described by Subsection (d), assign the authorities identified under Subdivision (1) to regional groups of at least two authorities; and

(3) notify each authority identified under Subdivision (1):

(A) that HHSC has identified the authority under that subdivision; and

(B) which local mental health authority group HHSC assigned the authority to under Subdivision (2).

(c) Requires HHSC, using existing resources, to develop a mental health services development plan for each local mental health authority group that will increase the capacity of the authorities in the group to provide access to needed services.

(d) Requires HHSC, in developing a plan under Subsection (c), to focus on reducing:

(1) the cost to local governments of providing services to persons experiencing a mental health crisis;

(2) the transportation of persons served by an authority in the local mental health authority group to mental health facilities;

(3) the incarceration of persons with mental illness in county jails that are located in an area served by an authority in the local mental health authority group; and

(4) the number of hospital emergency room visits by persons with mental illness at hospitals located in an area served by an authority in the local mental health authority group.

(e) Requires, in developing the plan under Subsection (c):

(1) HHSC to assess the capacity of the authorities in the local mental health authority group to provide access to needed services; and

(2) HHSC and the local mental health authority group to evaluate certain objectives.

(f) Requires HHSC, in collaboration with the local mental health authority group, in each mental health services development plan produced under this section, to determine a method of increasing the capacity of the authorities in the local mental health authority group to provide access to needed services.

(g) Requires HHSC to compile and evaluate each mental health services development plan produced under this section and determine the cost‑effectiveness of each plan and how each plan would improve the delivery of mental health treatment and care to residents in the service areas of the authorities in the local mental health authority group.

(h) Requires HHSC, using existing resources, to produce and publish on its Internet website a report containing certain information not later than December 1, 2020.

(i) Authorizes HHSC and the authorities in each local mental health authority group to implement a mental health services development plan evaluated by HHSC under this section if HHSC and the local mental health authority group to which the plan applies identify a method of funding that implementation.

(j) Provides that this section expires September 1, 2021.

SECTION 2. Requires HHSC to implement a provision of this Act only if the legislature appropriates money specifically for that purpose. Authorizes, but does not require, HHSC, if the legislature does not appropriate money specifically for that purpose, to implement a provision of this Act using other appropriations available for that purpose.

SECTION 3. Effective date: upon passage or September 1, 2019.