

By: Nelson, et al.

S.B. No. 10

A BILL TO BE ENTITLED

AN ACT

relating to the creation of the Texas Mental Health Care Consortium.

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

SECTION 1. Subtitle E, Title 2, Health and Safety Code, is amended by adding Chapter 113 to read as follows:

CHAPTER 113. TEXAS MENTAL HEALTH CARE CONSORTIUM

SUBCHAPTER A. GENERAL PROVISIONS

Sec. 113.0001. DEFINITIONS. In this chapter:

(1) "Community mental health provider" means an entity that provides mental health care services at a local level. The term includes community centers established under Subchapter A, Chapter 534.

(2) "Consortium" means the Texas Mental Health Care Consortium.

(3) "Executive committee" means the executive committee of the consortium.

SUBCHAPTER B. CONSORTIUM

Sec. 113.0051. ESTABLISHMENT; PURPOSE. The Texas Mental Health Care Consortium is established to:

(1) leverage the expertise and capacity in the health-related institutions of higher education listed in Section 113.0052 to address urgent mental health challenges and improve the mental health care system in this state;

1 (2) enhance the state's ability to address mental
2 health care needs through stronger collaboration and institutional
3 alignment of the health-related institutions of higher education
4 listed in Section 113.0052;

5 (3) improve the effectiveness and efficiency of mental
6 health care services delivered in this state;

7 (4) facilitate access to mental health care services
8 through telemedicine, telehealth, and other cost-effective,
9 evidence-based programs;

10 (5) improve mental health and substance use disorder
11 research efforts conducted by health-related institutions of
12 higher education; and

13 (6) improve and expand the psychiatric workforce
14 through training and development opportunities between the
15 health-related institutions of higher education listed in Section
16 113.0052 and community mental health providers.

17 Sec. 113.0052. COMPOSITION. The consortium is composed of:

18 (1) the following health-related institutions of
19 higher education:

20 (A) Baylor College of Medicine;

21 (B) The Texas A&M University System Health
22 Science Center;

23 (C) Texas Tech University Health Sciences
24 Center;

25 (D) Texas Tech University Health Sciences Center
26 at El Paso;

27 (E) University of North Texas Health Science

1 Center at Fort Worth;
2 (F) Dell Medical School at The University of
3 Texas at Austin;
4 (G) The University of Texas Medical Branch at
5 Galveston;
6 (H) The University of Texas Health Science Center
7 at Houston;
8 (I) The University of Texas Health Science Center
9 at San Antonio;
10 (J) The University of Texas Rio Grande Valley
11 School of Medicine;
12 (K) The University of Texas Health Science Center
13 at Tyler; and
14 (L) The University of Texas Southwestern Medical
15 Center;
16 (2) the commission;
17 (3) three nonprofit organizations that focus on mental
18 health care, designated by a majority of the members described by
19 Subdivision (1); and
20 (4) any other entity that the executive committee
21 considers necessary.
22 Sec. 113.0053. ADMINISTRATIVE ATTACHMENT. (a) The
23 consortium is administratively attached to the Texas Higher
24 Education Coordinating Board for the purpose of receiving and
25 administering appropriations and other funds under this chapter.
26 The board is not responsible for providing to the consortium staff
27 human resources, contract monitoring, purchasing, or any other

1 administrative support services.

2 (b) The Texas Higher Education Coordinating Board may not
3 use funds intended to carry out the purposes of this chapter for any
4 costs incurred by the board under this chapter.

5 SUBCHAPTER C. EXECUTIVE COMMITTEE

6 Sec. 113.0101. EXECUTIVE COMMITTEE COMPOSITION. The
7 consortium is governed by an executive committee composed of the
8 following members:

9 (1) the chair of the academic department of psychiatry
10 of each of the health-related institutions of higher education
11 listed in Section 113.0052;

12 (2) a representative of the commission with expertise
13 in the delivery of mental health care services, appointed by the
14 executive commissioner;

15 (3) a representative of the commission with expertise
16 in mental health facilities, appointed by the executive
17 commissioner;

18 (4) a representative of an organization that
19 represents the interests of community centers established under
20 Subchapter A, Chapter 534, designated by a majority of the members
21 described by Subdivision (1);

22 (5) a representative of each nonprofit organization
23 described by Section 113.0052 that is part of the consortium,
24 designated by a majority of the members described by Subdivision
25 (1); and

26 (6) any other representative designated by a majority
27 of the members described by Subdivision (1) at the request of the

1 executive committee.

2 Sec. 113.0102. PRESIDING OFFICER. The executive committee
3 shall elect a presiding officer from among the membership of the
4 executive committee.

5 Sec. 113.0103. MEETINGS. The executive committee shall
6 meet at the call of the presiding officer.

7 Sec. 113.0104. VACANCY. A vacancy on the executive
8 committee shall be filled in the same manner as the original
9 appointment.

10 SUBCHAPTER D. POWERS AND DUTIES

11 Sec. 113.0151. GENERAL DUTIES. (a) The executive
12 committee shall:

13 (1) coordinate the provision of funding to the
14 health-related institutions of higher education listed in Section
15 113.0052 to carry out the purposes of this chapter;

16 (2) establish procedures and policies for the
17 administration of funds under this chapter;

18 (3) monitor funding and agreements entered into under
19 this chapter to ensure recipients of funding comply with the terms
20 and conditions of the funding and agreements; and

21 (4) establish procedures to document compliance by
22 executive committee members and staff with applicable laws
23 governing conflicts of interest.

24 (b) In carrying out the duties under Subsection (a), the
25 consortium shall ensure that evidence-based tools, including
26 telemedicine and telehealth, are used to help expand the delivery
27 of mental health care services.

1 (c) The consortium shall designate a member of the executive
2 committee to represent the consortium on the statewide behavioral
3 health coordinating council.

4 Sec. 113.0152. ACCESS TO CARE; CHILD PSYCHIATRY ACCESS
5 NETWORK AND TELEMEDICINE AND TELEHEALTH PROGRAMS. (a) The
6 consortium shall establish a statewide network of comprehensive
7 child psychiatry access centers at the health-related institutions
8 of higher education listed in Section 113.0052. A center
9 established under this section shall collaborate with community
10 mental health providers to better care for children and youth with
11 behavioral health needs by providing consultation services and
12 training opportunities for pediatricians and primary care
13 providers operating in the center's geographic region.

14 (b) The consortium shall establish or expand telemedicine
15 or telehealth programs at health-related institutions of higher
16 education listed in Section 113.0052 for identifying and assessing
17 behavioral health needs and providing access to mental health care
18 services. The consortium shall develop a statewide plan to
19 implement this subsection that makes the behavioral health needs of
20 at-risk children and adolescents a priority.

21 (c) A health-related institution of higher education listed
22 in Section 113.0052 may enter into a memorandum of understanding
23 with a community mental health provider to carry out Subsection (a)
24 or (b).

25 (d) The consortium shall leverage the resources of a
26 hospital system to carry out Subsection (a) or (b) if the hospital
27 system:

1 (1) provides consultation services and training
2 opportunities for pediatricians and primary care providers that are
3 consistent with those described by Subsection (a); and

4 (2) has an existing telemedicine or telehealth program
5 for identifying and assessing the behavioral health needs of and
6 providing access to mental health care services for children and
7 adolescents.

8 Sec. 113.0153. MENTAL HEALTH RESEARCH PLAN. (a) The
9 consortium shall:

10 (1) develop and implement a mental health research
11 plan to advance the research component of the statewide behavioral
12 health strategic plan;

13 (2) create an aggregated inventory of mental health
14 and substance use disorder research completed by institutions of
15 higher education in this state; and

16 (3) coordinate mental health and substance use
17 disorder research efforts by the health-related institutions of
18 higher education listed in Section 113.0052 to ensure those
19 institutions engage in effective and targeted research to leverage
20 additional funding.

21 (b) The executive committee shall establish a process for
22 the selection of research projects to fund under this section. The
23 process must evaluate research projects based on their alignment
24 with the statewide behavioral health strategic plan and
25 multi-institutional collaboration among the health-related
26 institutions of higher education listed in Section 113.0052.

27 (c) Data on or personally identifying information of a

1 person obtained under Section 113.0152 may not be used for a
2 research project funded under this section.

3 Sec. 113.0154. PSYCHIATRY WORKFORCE EXPANSION PROJECT.

4 (a) The consortium shall enhance collaboration between the
5 health-related institutions of higher education listed in Section
6 113.0052 and community mental health providers to increase
7 psychiatric residency training and improve the quality of care for
8 persons receiving mental health care services in this state.

9 (b) The executive committee may provide funding to the
10 academic department of psychiatry at a health-related institution
11 of higher education listed in Section 113.0052 for the purpose of
12 funding:

13 (1) one full-time psychiatrist who treats adults or
14 one full-time psychiatrist who treats children and adolescents to
15 serve as academic medical director for a community mental health
16 provider; and

17 (2) two resident rotation positions.

18 (c) An academic medical director described by Subsection
19 (b) shall collaborate and coordinate with community mental health
20 providers to expand the amount and availability of mental health
21 care resources by:

22 (1) developing training opportunities for residents
23 and medical students; and

24 (2) promoting the use of telemedicine, telehealth, or
25 other evidence-based tools to provide comprehensive mental health
26 care services to a greater population.

27 (d) An institution of higher education that receives

1 funding under Subsection (b) shall require that psychiatric
2 residents participate in rotations through a facility operated by a
3 community mental health provider.

4 Sec. 113.0155. CONSENT REQUIRED FOR SERVICES TO MINOR.

5 (a) A person may provide mental health care services to a child
6 younger than 18 years of age through a program established under
7 this chapter only if the person obtains the written consent of the
8 parent, legal guardian, or caretaker of the child.

9 (b) The consortium shall develop and post on its Internet
10 website a model form for a parent, legal guardian, or caretaker to
11 provide consent under this section.

12 (c) This section does not apply to services provided by a
13 school counselor in accordance with Section 33.005, 33.006, or
14 33.007, Education Code.

15 Sec. 113.0156. REIMBURSEMENT FOR SERVICES. A child
16 psychiatry access center established under Section 113.0152 may not
17 submit an insurance claim or charge a pediatrician or primary care
18 provider a fee for providing consultation services or training
19 opportunities under that section.

20 Sec. 113.0157. ANNUAL REPORT. Not later than November 1 of
21 each year, the consortium shall submit to the governor, the
22 lieutenant governor, the speaker of the house of representatives,
23 and the standing committee of each house of the legislature with
24 primary jurisdiction over behavioral health issues and post on its
25 Internet website a written report that outlines:

- 26 (1) the activities and objectives of the consortium;
27 (2) the health-related institutions of higher

1 education listed in Section 113.0052 that receive funding by the
2 executive committee; and

3 (3) any research accomplishments associated with the
4 consortium.

5 SUBCHAPTER E. MISCELLANEOUS PROVISIONS

6 Sec. 113.0201. JUDICIAL INSTRUCTION REGARDING MENTAL
7 HEALTH CARE RESOURCES. The Supreme Court of Texas and the Texas
8 Court of Criminal Appeals, in consultation with the consortium,
9 shall develop a training program to educate and inform designated
10 judges and their staff on mental health care resources available
11 within the geographic region in which the designated judges
12 preside. The Supreme Court of Texas and the Texas Court of Criminal
13 Appeals may develop and operate the training program in conjunction
14 with any other training programs.

15 SECTION 2. As soon as practicable after the effective date
16 of this Act, the executive commissioner of the Health and Human
17 Services Commission and the members of the executive committee
18 described by Section 113.0101(1), Health and Safety Code, as added
19 by this Act, shall make the appointments and designations required
20 by Section 113.0101, Health and Safety Code, as added by this Act.

21 SECTION 3. This Act takes effect immediately if it receives
22 a vote of two-thirds of all the members elected to each house, as
23 provided by Section 39, Article III, Texas Constitution. If this
24 Act does not receive the vote necessary for immediate effect, this
25 Act takes effect September 1, 2019.