

1-1 By: Nelson, et al. S.B. No. 10
 1-2 (In the Senate - Filed February 5, 2019; February 7, 2019,
 1-3 read first time and referred to Committee on Health & Human
 1-4 Services; February 19, 2019, reported adversely, with favorable
 1-5 Committee Substitute by the following vote: Yeas 8, Nays 0;
 1-6 February 19, 2019, sent to printer.)

1-7 COMMITTEE VOTE

	Yea	Nay	Absent	PNV
1-8				
1-9	X			
1-10	X			
1-11	X			
1-12	X			
1-13			X	
1-14	X			
1-15	X			
1-16	X			
1-17	X			

1-18 COMMITTEE SUBSTITUTE FOR S.B. No. 10 By: Campbell

1-19 A BILL TO BE ENTITLED
 1-20 AN ACT

1-21 relating to the creation of the Texas Mental Health Care
 1-22 Consortium.

1-23 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

1-24 SECTION 1. Subtitle E, Title 2, Health and Safety Code, is
 1-25 amended by adding Chapter 113 to read as follows:

1-26 CHAPTER 113. TEXAS MENTAL HEALTH CARE CONSORTIUM

1-27 SUBCHAPTER A. GENERAL PROVISIONS

1-28 Sec. 113.0001. DEFINITIONS. In this chapter:

1-29 (1) "Community mental health provider" means an entity
 1-30 that provides mental health care services at a local level. The
 1-31 term includes community centers established under Subchapter A,
 1-32 Chapter 534.

1-33 (2) "Consortium" means the Texas Mental Health Care
 1-34 Consortium.

1-35 (3) "Executive committee" means the executive
 1-36 committee of the consortium.

1-37 SUBCHAPTER B. CONSORTIUM

1-38 Sec. 113.0051. ESTABLISHMENT; PURPOSE. The Texas Mental
 1-39 Health Care Consortium is established to:

1-40 (1) leverage the expertise and capacity in the
 1-41 health-related institutions of higher education listed in Section
 1-42 113.0052 to address urgent mental health challenges and improve the
 1-43 mental health care system in this state;

1-44 (2) enhance the state's ability to address mental
 1-45 health care needs through stronger collaboration and institutional
 1-46 alignment of the health-related institutions of higher education
 1-47 listed in Section 113.0052;

1-48 (3) improve the effectiveness and efficiency of mental
 1-49 health care services delivered in this state;

1-50 (4) facilitate access to mental health care services
 1-51 through telemedicine, telehealth, and other cost-effective,
 1-52 evidence-based programs;

1-53 (5) improve mental health and substance use disorder
 1-54 research efforts conducted by health-related institutions of
 1-55 higher education; and

1-56 (6) improve and expand the psychiatric workforce
 1-57 through training and development opportunities between the
 1-58 health-related institutions of higher education listed in Section
 1-59 113.0052 and community mental health providers.

1-60 Sec. 113.0052. COMPOSITION. The consortium is composed of:

2-1 (1) the following health-related institutions of
 2-2 higher education:
 2-3 (A) Baylor College of Medicine;
 2-4 (B) The Texas A&M University System Health
 2-5 Science Center;
 2-6 (C) Texas Tech University Health Sciences
 2-7 Center;
 2-8 (D) Texas Tech University Health Sciences Center
 2-9 at El Paso;
 2-10 (E) University of North Texas Health Science
 2-11 Center at Fort Worth;
 2-12 (F) Dell Medical School at The University of
 2-13 Texas at Austin;
 2-14 (G) The University of Texas Medical Branch at
 2-15 Galveston;
 2-16 (H) The University of Texas Health Science Center
 2-17 at Houston;
 2-18 (I) The University of Texas Health Science Center
 2-19 at San Antonio;
 2-20 (J) The University of Texas Rio Grande Valley
 2-21 School of Medicine;
 2-22 (K) The University of Texas Health Science Center
 2-23 at Tyler; and
 2-24 (L) The University of Texas Southwestern Medical
 2-25 Center;

2-26 (2) the commission;
 2-27 (3) three nonprofit organizations that focus on mental
 2-28 health care, designated by a majority of the members described by
 2-29 Subdivision (1); and
 2-30 (4) any other entity that the executive committee
 2-31 considers necessary.

2-32 Sec. 113.0053. ADMINISTRATIVE ATTACHMENT. (a) The
 2-33 consortium is administratively attached to the Texas Higher
 2-34 Education Coordinating Board for the purpose of receiving and
 2-35 administering appropriations and other funds under this chapter.
 2-36 The board is not responsible for providing to the consortium staff
 2-37 human resources, contract monitoring, purchasing, or any other
 2-38 administrative support services.

2-39 (b) The Texas Higher Education Coordinating Board may not
 2-40 use funds intended to carry out the purposes of this chapter for any
 2-41 costs incurred by the board under this chapter.

2-42 SUBCHAPTER C. EXECUTIVE COMMITTEE

2-43 Sec. 113.0101. EXECUTIVE COMMITTEE COMPOSITION. The
 2-44 consortium is governed by an executive committee composed of the
 2-45 following members:

2-46 (1) the chair of the academic department of psychiatry
 2-47 of each of the health-related institutions of higher education
 2-48 listed in Section 113.0052;

2-49 (2) a representative of the commission with expertise
 2-50 in the delivery of mental health care services, appointed by the
 2-51 executive commissioner;

2-52 (3) a representative of the commission with expertise
 2-53 in mental health facilities, appointed by the executive
 2-54 commissioner;

2-55 (4) a representative of an organization that
 2-56 represents the interests of community centers established under
 2-57 Subchapter A, Chapter 534, designated by a majority of the members
 2-58 described by Subdivision (1);

2-59 (5) a representative of each nonprofit organization
 2-60 described by Section 113.0052 that is part of the consortium,
 2-61 designated by a majority of the members described by Subdivision
 2-62 (1); and

2-63 (6) any other representative designated by a majority
 2-64 of the members described by Subdivision (1) at the request of the
 2-65 executive committee.

2-66 Sec. 113.0102. PRESIDING OFFICER. The executive committee
 2-67 shall elect a presiding officer from among the membership of the
 2-68 executive committee.

2-69 Sec. 113.0103. MEETINGS. The executive committee shall

3-1 meet at the call of the presiding officer.

3-2 Sec. 113.0104. VACANCY. A vacancy on the executive
3-3 committee shall be filled in the same manner as the original
3-4 appointment.

3-5 Sec. 113.0105. GIFTS, GRANTS, AND DONATIONS. The executive
3-6 committee may accept on behalf of the consortium gifts, grants, or
3-7 donations from any public or private source for the purpose of
3-8 carrying out this chapter.

3-9 SUBCHAPTER D. POWERS AND DUTIES

3-10 Sec. 113.0151. GENERAL DUTIES. (a) The executive
3-11 committee shall:

3-12 (1) coordinate the provision of funding to the
3-13 health-related institutions of higher education listed in Section
3-14 113.0052 to carry out the purposes of this chapter;

3-15 (2) establish procedures and policies for the
3-16 administration of funds under this chapter;

3-17 (3) monitor funding and agreements entered into under
3-18 this chapter to ensure recipients of funding comply with the terms
3-19 and conditions of the funding and agreements; and

3-20 (4) establish procedures to document compliance by
3-21 executive committee members and staff with applicable laws
3-22 governing conflicts of interest.

3-23 (b) In carrying out the duties under Subsection (a), the
3-24 consortium shall ensure that evidence-based tools, including
3-25 telemedicine and telehealth, are used to help expand the delivery
3-26 of mental health care services.

3-27 (c) The consortium shall designate a member of the executive
3-28 committee to represent the consortium on the statewide behavioral
3-29 health coordinating council.

3-30 Sec. 113.0152. ACCESS TO CARE; CHILD PSYCHIATRY ACCESS
3-31 NETWORK AND TELEMEDICINE AND TELEHEALTH PROGRAMS. (a) The
3-32 consortium shall establish a statewide network of comprehensive
3-33 child psychiatry access centers at the health-related institutions
3-34 of higher education listed in Section 113.0052. A center
3-35 established under this section shall collaborate with community
3-36 mental health providers to better care for children and youth with
3-37 behavioral health needs by providing consultation services and
3-38 training opportunities for pediatricians and primary care
3-39 providers operating in the center's geographic region.

3-40 (b) The consortium shall establish or expand telemedicine
3-41 or telehealth programs at health-related institutions of higher
3-42 education listed in Section 113.0052 for identifying and assessing
3-43 behavioral health needs and providing access to mental health care
3-44 services. The consortium shall develop a statewide plan to
3-45 implement this subsection that makes the behavioral health needs of
3-46 at-risk children and adolescents a priority.

3-47 (c) A health-related institution of higher education listed
3-48 in Section 113.0052 may enter into a memorandum of understanding
3-49 with a community mental health provider to carry out Subsection (a)
3-50 or (b).

3-51 (d) The consortium shall leverage the resources of a
3-52 hospital system to carry out Subsection (a) or (b) if the hospital
3-53 system:

3-54 (1) provides consultation services and training
3-55 opportunities for pediatricians and primary care providers that are
3-56 consistent with those described by Subsection (a); and

3-57 (2) has an existing telemedicine or telehealth program
3-58 for identifying and assessing the behavioral health needs of and
3-59 providing access to mental health care services for children and
3-60 adolescents.

3-61 Sec. 113.0153. MENTAL HEALTH RESEARCH PLAN. (a) The
3-62 consortium shall:

3-63 (1) develop and implement a mental health research
3-64 plan to advance the research component of the statewide behavioral
3-65 health strategic plan;

3-66 (2) create an aggregated inventory of mental health
3-67 and substance use disorder research completed by institutions of
3-68 higher education in this state; and

3-69 (3) coordinate mental health and substance use

4-1 disorder research efforts by the health-related institutions of
 4-2 higher education listed in Section 113.0052 to ensure those
 4-3 institutions engage in effective and targeted research to leverage
 4-4 additional funding.

4-5 (b) The executive committee shall establish a process for
 4-6 the selection of research projects to fund under this section. The
 4-7 process must evaluate research projects based on their alignment
 4-8 with the statewide behavioral health strategic plan and
 4-9 multi-institutional collaboration among the health-related
 4-10 institutions of higher education listed in Section 113.0052.

4-11 Sec. 113.0154. PSYCHIATRY WORKFORCE EXPANSION PROJECT.

4-12 (a) The consortium shall enhance collaboration between the
 4-13 health-related institutions of higher education listed in Section
 4-14 113.0052 and community mental health providers to increase
 4-15 psychiatric residency training and improve the quality of care for
 4-16 persons receiving mental health care services in this state.

4-17 (b) The executive committee may provide funding to the
 4-18 academic department of psychiatry at a health-related institution
 4-19 of higher education listed in Section 113.0052 for the purpose of
 4-20 funding:

4-21 (1) one full-time psychiatrist who treats adults or
 4-22 one full-time psychiatrist who treats children and adolescents to
 4-23 serve as academic medical director for a community mental health
 4-24 provider; and

4-25 (2) two resident rotation positions.

4-26 (c) An academic medical director described by Subsection
 4-27 (b) shall collaborate and coordinate with community mental health
 4-28 providers to expand the amount and availability of mental health
 4-29 care resources by:

4-30 (1) developing training opportunities for residents
 4-31 and medical students; and

4-32 (2) promoting the use of telemedicine, telehealth, or
 4-33 other evidence-based tools to provide comprehensive mental health
 4-34 care services to a greater population.

4-35 (d) An institution of higher education that receives
 4-36 funding under Subsection (b) shall require that psychiatric
 4-37 residents participate in rotations through a facility operated by a
 4-38 community mental health provider.

4-39 Sec. 113.0155. REIMBURSEMENT FOR SERVICES. A child
 4-40 psychiatry access center established under Section 113.0152 may not
 4-41 submit an insurance claim or charge a pediatrician or primary care
 4-42 provider a fee for providing consultation services or training
 4-43 opportunities under that section.

4-44 Sec. 113.0156. ANNUAL REPORT. Not later than November 1 of
 4-45 each year, the consortium shall submit to the governor, the
 4-46 lieutenant governor, the speaker of the house of representatives,
 4-47 and the standing committee of each house of the legislature with
 4-48 primary jurisdiction over behavioral health issues and post on its
 4-49 Internet website a written report that outlines:

4-50 (1) the activities and objectives of the consortium;

4-51 (2) the health-related institutions of higher
 4-52 education listed in Section 113.0052 that receive funding by the
 4-53 executive committee;

4-54 (3) any prospective gifts, grants, or donations the
 4-55 consortium expects to receive; and

4-56 (4) any research accomplishments associated with the
 4-57 consortium.

4-58 SUBCHAPTER E. MISCELLANEOUS PROVISIONS

4-59 Sec. 113.0201. JUDICIAL INSTRUCTION REGARDING MENTAL
 4-60 HEALTH CARE RESOURCES. The Supreme Court of Texas and the Texas
 4-61 Court of Criminal Appeals, in consultation with the consortium,
 4-62 shall develop a training program to educate and inform designated
 4-63 judges and their staff on mental health care resources available
 4-64 within the geographic region in which the designated judges
 4-65 preside. The Supreme Court of Texas and the Texas Court of Criminal
 4-66 Appeals may develop and operate the training program in conjunction
 4-67 with any other training programs.

4-68 SECTION 2. As soon as practicable after the effective date
 4-69 of this Act, the executive commissioner of the Health and Human

5-1 Services Commission and the members of the executive committee
5-2 described by Section 113.0101(1), Health and Safety Code, as added
5-3 by this Act, shall make the appointments and designations required
5-4 by Section 113.0101, Health and Safety Code, as added by this Act.

5-5 SECTION 3. This Act takes effect immediately if it receives
5-6 a vote of two-thirds of all the members elected to each house, as
5-7 provided by Section 39, Article III, Texas Constitution. If this
5-8 Act does not receive the vote necessary for immediate effect, this
5-9 Act takes effect September 1, 2019.

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