

Reprinted January 22, 2014

SENATE BILL No. 248

DIGEST OF SB 248 (Updated January 21, 2014 2:05 pm - DI 104)

Citations Affected: Noncode.

Synopsis: Psychiatric crisis intervention services study. Requires the office of the secretary of family and social services study. Requires the certain issues concerning psychiatric crisis intervention services. Requires the office to report its findings to the legislative council before September 1, 2015.

Effective: Upon passage.

Crider, Becker

January 9, 2014, read first time and referred to Committee on Health and Provider Services. January 16, 2014, amended, reported favorably — Do Pass. January 21, 2014, read second time, amended, ordered engrossed.



SB 248-LS 6748/DI 77

Reprinted January 22, 2014

Second Regular Session 118th General Assembly (2014)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2013 Regular Session and 2013 First Regular Technical Session of the General Assembly.

SENATE BILL No. 248

A BILL FOR AN ACT concerning human services.

Be it enacted by the General Assembly of the State of Indiana:

1 SECTION 1. [EFFECTIVE UPON PASSAGE] (a) As used in this 2 SECTION, "psychiatric crisis intervention" means services to 3 identify and treat symptoms and conditions of psychiatric 4 emergencies, including attempted suicide, substance dependence, 5 alcohol intoxication, acute depression, presence of delusions, 6 violence, panic attacks, and significant, rapid changes in behavior. 7 The services may include diagnostic assessment, short term 8 treatment, mobilization teams to carry out interventions at 9 patients' residences and other locations, emergency management 10 services to prevent further crisis, inpatient and outpatient 11 psychiatric services, telephone counseling that is provided on a 12 twenty-four (24) hours a day, seven (7) days a week basis, and 13 other related services.

(b) Before September 1, 2015, the office of the secretary of
family and social services shall provide to the legislative council a
report setting forth the following concerning comprehensive
psychiatric crisis intervention services:



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1	(1) The services that are available in Indiana for psychiatric
2	crisis intervention in urban and rural areas of Indiana.
3	(2) To what extent the psychiatric crisis intervention services
4	are coordinated and integrated across health care delivery
5	systems.
6	(3) New services that are needed in Indiana for psychiatric
7	crisis intervention.
8	(4) The cost of the needed new services identified under
9	subdivision (3), including any cost offset for current
10	expenditures that would no longer be needed.
11	(5) The roles of private sector providers and the public sector,
12	including local and state government, for services identified
13	under subdivisions (1) through (4).
14	A report to the legislative council under this subsection must be
15	submitted in an electronic format under IC 5-14-6.
16	(c) The report required in subsection (b) must include
17	recommendations to coordinate and integrate the state's response
18	to psychiatric crisis, including an evaluation of the need for or
19	better use of the following:
20	(1) Prevention services.
21	(2) Assertive community treatment.
22	(3) Telephone crisis and triage intervention.
23	(4) Crisis intervention teams.
24	(5) Mobile crisis outreach teams.
25	(6) Urgent care centers.
26	(7) Crisis residential services.
27	(8) Transportation services.
28	(9) Medically monitored detoxification.
29	(10) Hospitalization.
30	(11) Linkage to community based services.
31	(d) This SECTION expires December 31, 2015.
32	SECTION 2. An emergency is declared for this act.



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COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred Senate Bill No. 248, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:

Page 1, line 14, delete "September 1, 2014," and insert "September 1, 2015,".

Page 2, line 32, delete "December 31, 2014." and insert "**December 31, 2015.**".

and when so amended that said bill do pass.

(Reference is to SB 248 as introduced.)

MILLER PATRICIA, Chairperson

Committee Vote: Yeas 11, Nays 0.

SENATE MOTION

Madam President: I move that Senate Bill 248 be amended to read as follows:

Page 1, line 16, delete "and the commission on mental health and addiction".

(Reference is to SB 248 as printed January 17, 2014.)

MILLER PATRICIA

