SENATE BILL 54

54TH LEGISLATURE - STATE OF NEW MEXICO - SECOND SESSION, 2020

INTRODUCED BY

Mary Kay Papen

AN ACT

RELATING TO BEHAVIORAL HEALTH; ENACTING THE BEHAVIORAL HEALTH COMMUNITY INTEGRATION ACT; PROVIDING COMMUNITY-BASED SUPPORT SERVICES FOR ADULTS DIAGNOSED WITH SERIOUS MENTAL ILLNESS AND YOUTH DIAGNOSED WITH SERIOUS EMOTIONAL DISTURBANCE; PROVIDING POWERS AND DUTIES; CREATING THE BEHAVIORAL HEALTH COMMUNITY INTEGRATION FUND; MAKING AN APPROPRIATION; DECLARING AN EMERGENCY.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. [NEW MATERIAL] SHORT TITLE.--This act may be cited as the "Behavioral Health Community Integration Act".

- **SECTION 2.** [NEW MATERIAL] DEFINITIONS.--As used in the Behavioral Health Community Integration Act:
- A. "comprehensive community-based mental health system" means a system of care that includes mental and .216303.1

physical health services, rehabilitation services, employment services, housing services, educational services, substance abuse services, medical and dental care and other support services with federal, state and local public and private resources to enable persons to function outside of inpatient or residential institutions to the maximum extent of their capabilities, including services provided by local school systems pursuant to the federal Individuals with Disabilities Education Act:

- B. "department" means the human services department;
- C. "division" means the behavioral health services division of the department;
- D. "fund" means the behavioral health community integration fund;
- E. "psychosocial rehabilitation services" means a set of services designed to help a person in the target population to achieve optimum functioning in the personal and social dimensions of the person's life;
- F. "serious emotional disturbance" means one or more diagnosable behavioral, mental or emotional conditions as defined in the most recent *Diagnostic and Statistical Manual of Mental Disorders*, published by the American psychiatric association, that result in functional impairment that substantially interferes with or limits the role or functioning .216303.1

in family, school or community activities of a youth between the ages of sixteen and twenty-two;

- G. "serious mental illness" means one or more diagnosable behavioral, mental or emotional conditions as defined in the most recent *Diagnostic and Statistical Manual of Mental Disorders*, published by the American psychiatric association, which condition substantially interferes with or limits one or more major life activities of an adult;
- H. "support services" means a component of a comprehensive community-based mental health system that consists of outcome-focused services tailored to the needs of a person in the target population;
- I. "target population" means adults who have been diagnosed with serious mental illness or youths between the ages of sixteen and twenty-two who have been diagnosed within the last year with serious emotional disturbance and includes adults or youths who live in rural areas or are homeless;
- J. "targeted case management" means a service that assists a person to gain access to needed medical, social, educational and other services and that ensures that services are coordinated among all providers of such services;
- K. "transitional housing" means up to eighteen months of housing;
- L. "urgent need" means circumstances of sufficient concern that if not addressed within twenty-four hours could .216303.1

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reasonably result in hospitalization, detention or incarceration; and

- M. "value-added service" means a service that is not a medicaid-funded service that a medicaid managed care organization or contractor may offer to a medicaid recipient.
- SECTION 3. [NEW MATERIAL] DIVISION DUTIES--COMPREHENSIVE SYSTEM--SUPPORT SERVICES.--The division shall design and implement a comprehensive community-based mental health system in communities throughout the state that provides support services to achieve one or more of the following:
- A. to prevent or reduce the likelihood of relapse following discharge from inpatient care or recidivism following release from detention or incarceration;
- B. to correct, reduce or ameliorate the physical, mental, cognitive or developmental effects of serious mental illness or serious emotional disturbance;
- C. to reduce or ameliorate the pain or suffering caused by serious mental illness or serious emotional disturbance;
- D. to assist the person to achieve or maintain maximum functional capacity in performing the activities of daily living; or
- E. to assist the person with life skills needed to live independently in the community.
- SECTION 4. [NEW MATERIAL] BEHAVIORAL HEALTH COMMUNITY
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INTEGRATION FUND CREATED--USES AND ADMINISTRATION OF FUND.--

- A. The "behavioral health community integration fund" is created as a nonreverting fund in the state treasury. The fund consists of appropriations, value-added services payments, gifts, grants, donations and any other money deposited in the fund. Money in the fund shall be expended only for the purposes specified in the Behavioral Health Community Integration Act and as limited by the appropriation. Expenditures from the fund shall be by warrant of the secretary of finance and administration on vouchers signed by the division director or the director's authorized representative.
- B. Money in the fund shall be used to provide, arrange for or assist with:
 - (1) targeted case management;
- (2) transitional and long-term housing for the target population; and
- (3) psychosocial rehabilitation and support services for the target population.
- C. Money in the fund shall not be used to pay for goods or services covered by medicaid or to match federal funding for medicaid.
- D. Expenses of administering the fund shall be paid by the department.

SECTION 5. [NEW MATERIAL] CONTRACT REQUIREMENTS.--

A. Contracts awarded from the fund shall:

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- (1) be for a period of at least four years;
- (2) be awarded to contractors that demonstrate the ability to achieve outcomes specified by the division;
- (3) give preference to proposals for communities that have few or no behavioral health providers or support services; and
- (4) allow innovative, flexible and creative uses of local resources other than traditional providers of behavioral health services.
- B. The division may require contractors to demonstrate in-kind or other support from the local community where the contracted services will be provided or from behavioral health providers or support services located anywhere in the state.
- C. The department shall enter into a contract for procurement after evaluating competitive proposals and shall not design requests for proposals to provide for only sole source contracts. The department shall conduct its own procurement, but shall conduct all procurement in accordance with the Procurement Code; provided that Section 13-1-98.1 NMSA 1978 shall not apply to procurement pursuant to the Behavioral Health Community Integration Act.
- SECTION 6. [NEW MATERIAL] STANDARDS AND PERFORMANCE
 MEASURES FOR CONTRACTS.--
- A. The department shall promulgate standards and .216303.1

1	performance measures for contracts awarded pursuant to the
2	Behavioral Health Community Integration Act that, at a minimum,
3	require:
4	(1) identification and tracking of each person
5	served;
6	(2) acceptance of referrals from all sources
7	for persons in the target population;
8	(3) an assessment performed and support
9	services plan developed within no more than:
10	(a) twenty-four hours of referral for
11	persons in crisis;
12	(b) forty-eight hours prior to a
13	person's discharge from inpatient care or release from
14	detention or incarceration;
15	(c) five business days before a youth
16	leaves foster care; or
17	(d) two business days following referral
18	for all other persons served;
19	(4) the assignment of a community support
20	worker to be responsible for assisting in the assessment of the
21	person and in the development of the support services plan;
22	(5) the initiation of support services within
23	one calendar day of the assessment for persons with urgent
24	needs and within five calendar days for persons with non-urgent
25	needs;

- (6) immediate access to crisis stabilization services, with twenty-four-hour telephone response and next calendar day appointments; and
 - (7) continuing support for persons served.
- B. Standards and performance measures for contracts awarded pursuant to the Behavioral Health Community Integration Act shall not be so stringent that only traditional providers of behavioral health services can meet them.
- C. Contractors shall be required to report outcomes as determined by the department.

SECTION 7. [NEW MATERIAL] VALUE-ADDED SERVICES PAYMENT.--

- A. The department shall require a medicaid managed care organization or medicaid fee-for-service contractor to pay three percent of the annual amount spent by the organization or contractor for value-added behavioral health services into the fund in quarterly installments.
- B. Medicaid funds shall not be used to make the quarterly payment to the fund required in this section.
- SECTION 8. APPROPRIATION.--Seven million dollars (\$7,000,000) is appropriated from the general fund to the behavioral health community integration fund for expenditure in fiscal year 2020 and subsequent fiscal years to contract for support services as provided in the Behavioral Health Community Integration Act. Any unexpended or unencumbered balance remaining at the end of a fiscal year shall not revert to the .216303.1

general fund.

SECTION 9. EMERGENCY.--It is necessary for the public peace, health and safety that this act take effect immediately.

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