

Amend printed copy of **HB 513** 

On page 49, between lines 12 and 13, by inserting the following new sections and renumbering subsequent sections accordingly:

"→Section 31. KRS 210.502 is amended to read as follows:

- There is created the Kentucky Commission on Services and Supports for Individuals with Mental Illness, <u>Substance Use</u>[Alcohol and Other Drug Abuse] Disorders, and Dual Diagnoses. The commission shall consist of:
  - (a) The secretary of the Cabinet for Health and Family Services;
  - (b) The secretary of the Justice and Public Safety Cabinet;
  - (c) The commissioner of the Department for Behavioral Health, Developmental and Intellectual Disabilities;
  - (d) The commissioner of the Department for Medicaid Services;
  - (e) The commissioner of the Department of Corrections;
  - (f) The commissioner of the Department of Juvenile Justice;
  - (g) The commissioner of the Department of Education;
  - (h) The executive director of the Office of Vocational Rehabilitation;
  - (i) The director of the Protection and Advocacy Division of the Department of Public Advocacy;
  - (j) The director of the Division of Family Resource and Youth Services Centers;

Amendment No.	Rep. Rep. Mary Lou Marzian
Floor Amendment $\left  \begin{array}{c} 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 \\ 1 $	LRC Drafter: Wenk, DeeAnn
Adopted:	Date:
Rejected:	Doc. ID: XXXX



- (k) The commissioner of the Department for Aging and Independent Living of the Cabinet for Health and Family Services;
- (l) The executive director of the Office of Drug Control Policy;
- (m) The director of the Administrative Office of the Courts;
- (n) The chief executive officer of the Kentucky Housing Corporation;
- (o) The executive director of the Office of Transportation Delivery of the Transportation Cabinet;
- (p) The commissioner of the Department of Public Health;
- (q) Three (3) members of the House of Representatives who are members of the Health and Welfare Committee or the Appropriations and Revenue Committee, appointed by the Speaker of the House;
- (r) Three (3) members of the Senate who are members of the Health and Welfare Committee or the Appropriations and Revenue Committee, appointed by the Senate President;
- (s) A chairperson and one (1) alternate who is a chairperson of a regional planning council appointed by the secretary of the Cabinet for Health and Family Services from a list of five (5) chairpersons submitted by the Kentucky Association of Regional Programs;
- (t) A consumer and one (1) alternate who is a consumer of mental health or substance abuse services, who is over age eighteen (18), appointed by the secretary of the Cabinet for Health and Family Services from a list of up to three (3) consumers submitted by any consumer advocacy organization operating within Kentucky or submitted by any regional planning council established under KRS 210.506; and
- (u) An adult family member and one (1) alternate who is an adult family member of a consumer of mental health or substance <u>use disorder[abuse]</u> services appointed by the



secretary of the Cabinet for Health and Family Services from a list of up to three (3) persons submitted by any family advocacy organization operating within Kentucky or submitted by any regional planning council established under KRS 210.506.

- (2) The secretary of the Cabinet for Health and Family Services and one (1) member of the General Assembly appointed to the commission shall serve as co-chairs of the commission.
- (3) Members designated in subsection (1)(a) to (r) of this section shall serve during their terms of office.
- (4) Members and alternates designated in subsection (1)(s) to (u) of this section shall serve a term of two (2) years and may be reappointed for one (1) additional term. These members may be reimbursed for travel expenses in accordance with administrative regulations governing reimbursement for travel for state employees.

→ Section 32. KRS 210.504 is amended to read as follows:

- (1) The commission created in KRS 210.502 shall meet as often as necessary to accomplish its purpose but shall meet at least quarterly or upon the call of either co-chair, the request of four (4) or more members, or the request of the Governor.
- (2) The commission shall receive, integrate, and report the findings and recommendations of the regional planning councils established under KRS 210.506. The regional planning councils shall provide additional information or study particular issues upon request of the commission.
- (3) The commission:
  - (a) May establish work groups to develop statewide recommendations from information and recommendations received from the regional planning councils;
  - (b) May establish work groups to address issues referred to the commission; and
  - (c) Shall ensure that the regional planning councils have an opportunity to receive, review, and comment on any recommendation or product issued by a work group



established under this subsection before the commission takes any formal action on a recommendation or product of a work group.

- (4) The commission shall serve in an advisory capacity to accomplish the following:
  - (a) Based on information provided under subsection (2) of this section:
    - Assess the needs statewide of individuals with mental illness, <u>substance</u> <u>use[alcohol and other drug abuse]</u> disorders, and dual diagnoses;
    - 2. Assess the capabilities of the existing statewide treatment delivery system including gaps in services and the adequacy of a safety net system; and
    - 3. Assess the coordination and collaboration of efforts between public and private facilities and entities, including but not limited to the Council on Postsecondary Education when assessing workforce issues, and the roles of the Department for Behavioral Health, Developmental and Intellectual Disabilities and the regional community mental health centers, state hospitals, and other providers;
  - (b) Identify funding needs and related fiscal impact, including Medicaid reimbursement, limitations under government programs and private insurance, and adequacy of indigent care;
  - (c) Recommend comprehensive and integrated programs for providing mental health and substance abuse services and preventive education to children and youth, utilizing schools and community resources;
  - (d) Develop recommendations to decrease the incidence of repeated arrests, incarceration, and multiple hospitalizations of individuals with mental illness, <u>substance use[alcohol and other drug abuse]</u> disorders, and dual diagnoses;
  - (e) Recommend an effective quality assurance and consumer satisfaction monitoring program that includes recommendations as to the appropriate role of persons with mental illness, <u>substance use</u>[alcohol and other drug abuse] disorders, and dual



diagnoses, family members, providers, and advocates in quality assurance efforts; and

- (f) Recommend improvements in identifying, treating, housing, and transporting prisoners in jails and juveniles with mental illness who reside in detention centers. Items to be reviewed include but are not limited to:
  - 1. Recommendations for statutory and regulatory changes;
  - 2. Training and treatment funding;
  - 3. Cost-sharing proposals;
  - 4. Housing and transportation costs;
  - 5. Appropriate treatment sites; and
  - Training requirements for local jailers and other officers of the court who may come in contact with persons deemed mentally ill and who are incarcerated or in detention.
- (5) The commission shall develop a comprehensive state plan that provides a template for decision-making regarding program development, funding, and the use of state resources for delivery of the most effective continuum of services in integrated statewide settings appropriate to the needs of the individual with mental illness, <u>substance use</u>[alcohol and other drug abuse] disorders, and dual diagnoses. The state plan shall also include strategies for increasing public awareness and reducing the stigma associated with mental illness and substance abuse disorders.
- (6) The state plan shall advise the Governor and the General Assembly concerning the needs statewide of individuals with mental illness, <u>substance use</u>[alcohol\_and\_other\_drug] disorders, and dual diagnoses and whether the recommendations should be implemented by administrative regulations or proposed legislation for the General Assembly.
- (7) The commission shall develop a two (2) year work plan, beginning in 2003, that specifies goals and strategies relating to services and supports for individuals with mental illness and



<u>substance use</u>[alcohol and other drug] disorders and dual diagnoses and efforts to reduce the stigma associated with mental illness and substance <u>use</u>[abuse] disorders.

(8) The commission shall review the plan and shall submit annual updates no later than October 1 to the Governor and the Legislative Research Commission."; and

On page 49, by deleting lines 17 to 19 in their entirety.