

Summary of Health and Human Services Legislation 2015 Legislative Session

Prepared for the Children, Families, Health, and Human Services Interim Committee
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The 2015 Legislature acted on a number of bills involving health care, health insurance, children's issues, and human services. This summary provides an overview of major legislation – excluding the budget provisions of House Bill 2 – in the following areas:

Children's Issues	Mental Health
Developmental Disabilities	Public Health
Health Care/Health Insurance	Senior Citizens
Medicaid	CFHHS Interim Committee

The summary focuses primarily on legislation that was approved by the Legislature. However, it also includes bills that were proposed by the 2013-2014 Children, Families, Health, and Human Services Interim Committee but that failed during the legislative process.

CHILDREN'S ISSUES: ABUSE/NEGLECT/FOSTER CARE

HB 165 Revises laws related to contact between a grandparent and grandchild when the child is involved in an abuse, neglect, or custody case to allow a court to appoint a guardian ad litem to represent the best interests of the child.

HB 472 Reauthorizes the Office of the Child and Family Ombudsman within the Department of Justice to review and investigate complaints involving the handling by Department of Public Health and Human Services of child abuse and neglect cases and to help interested parties gain access to information about the procedures used by DPHHS to investigate a complaint. Revises the selection process for the ombudsman, some of the ombudsman duties, and some of the reporting requirements for DPHHS.

HB 612 Creates a pilot project in three judicial districts to informally resolve abuse and neglect cases when DPHHS has removed a child from a home on an emergency basis. Under the pilot project, a child could be placed outside the home for up to 6 months while the custodial parent agrees to terms imposed by the court. If the parent fails to successfully complete the agreement, DPHHS must terminate the agreement and file an abuse or neglect petition against the parent.

DEVELOPMENTAL DISABILITIES

HB 468 Reduces from 1 year to 90 days the amount of time for which a seriously developmentally disabled person may be committed to a residential facility; currently, the Montana Developmental Center is the only residential facility in the state.

SB 233 Requires DPHHS to maintain a developmentally disabled child's eligibility for services and place on the waiting list for community services if the child's parent is in the military and the family must leave the state for military service.

SB 411 Requires DPHHS to close the Montana Developmental Center by July 2017 and to move most of the residents out of the facility by Dec. 31, 2016. Also establishes a transition planning committee to make recommendations for carrying out the closure,

including recommendations on the community services needed for individuals who would otherwise be placed at MDC.

HEALTH CARE/HEALTH INSURANCE

Health Care

- HB 147** Adopts the Nurse Licensure Compact, allowing nurses who are licensed in a state that is part of the compact to practice in any of the other party states without obtaining licensure from those states.
- HB 429** Adopts the Interstate Medical Licensure Compact, allowing physicians who are licensed in a state that is part of the compact to practice in any of the other party states without obtaining licensure from those states.
- SB 7** Increases and extends until June 30, 2017, the fee on health care providers who are licensed to prescribe controlled substances, to help fund the Montana Prescription Drug Registry. The bill was proposed by the Children, Families, Health, and Human Services Interim Committee as part of its Senate Joint Resolution 20 study of prescription drug abuse.
- SB 8** Allows for the electronic prescribing of controlled substances. The bill was proposed by the Children, Families, Health, and Human Services Interim Committee as part of its Senate Joint Resolution 20 study of prescription drug abuse.
- SB 142** Authorizes access to and use of experimental treatments for individuals who have been diagnosed with a terminal illness and prohibits the sanctioning of health care providers for recommending that a patient obtain or use an experimental drug or product.

Health Insurance

- HB 318** Requires private, state, and local government insurance plans to cover the diagnosis and treatment of Down syndrome for children up to 18 years of age, including specified amounts of speech therapy, physical therapy, and occupational therapy.
- SB 83** Establishes requirements that health insurers must meet in overseeing utilization review activities carried out on the insurer's behalf, creates a process for handling grievances filed by an insured person, and establishes uniform procedures for external review of denial of benefits to an insured person.

MEDICAID

- HB 337** Increases the amount of assets that disabled individuals may have and still be eligible for the Medicaid program for workers with disabilities. The asset level is increased from \$8,000 to \$15,000 for an individual and from \$12,000 to \$30,000 for a couple.
- SB 216** Requires providers of Medicaid personal assistance services to provide annual training on Medicaid fraud and abuse to employees and consumers of Medicaid-funded services provided in the home to senior citizens and individuals with physical disabilities. The providers also must submit annual reports to DPHHS on the costs of providing services.

SB 405 Expands the state Medicaid program to cover nondisabled, childless adults under the age of 65 who have incomes of up to 138% of the federal poverty level, as allowed under the Patient Protection and Affordable Care Act. Requires a premium payment of 2% of a person's income and requires payment of a fee for individuals with assets over specified levels. Allows an option for a Medicaid participant to take part in work-training programs offered by the Department of Labor and Industry.

MENTAL HEALTH

HB 33 Appropriates \$2 million in the 2017 biennium for grants to counties to establish, in the following order: new mental health crisis intervention and jail diversion services in counties that have not previously received grants; new services in counties that have received crisis diversion grants for other purposes; and increased demand or use of existing crisis diversion services that have received funding in the past. The bill was proposed by the Children, Families, Health, and Human Services Interim Committee as part of its House Joint Resolution 16 study of state-operated institutions.

HB 34 Appropriates \$600,000 in each year of the 2017 biennium to contract for psychiatric treatment beds that may be used for secure detention and inpatient crisis intervention services for an individual facing an involuntary commitment procedure. The bill was proposed by the Children, Families, Health, and Human Services Interim Committee as part of its House Joint Resolution 16 study of state-operated institutions.

HB 35 Appropriates \$1 million in the 2017 biennium to pay for short-term mental health treatment for an individual who has agreed to undergo inpatient treatment in the community while an involuntary commitment proceeding is suspended. The bill was proposed by the Children, Families, Health, and Human Services Interim Committee as part of its House Joint Resolution 16 study of state-operated institutions.

HB 47 Appropriates \$1.2 million in the 2017 biennium for up to six pilot projects to provide community-based services in an effort to divert youth in a mental health crisis from more restrictive placements. The bill was proposed by the Children, Families, Health, and Human Services Interim Committee as part of its DPHHS monitoring duties.

HB 374 Requires the Office of Public Instruction to provide assistance to Montana schools on youth suicide awareness and prevention training materials and recommends training standards for certain school employees.

PUBLIC HEALTH

HB 158 Revises immunization laws to require chickenpox and pertussis vaccinations for school attendance.

HB 285 Increases the number of lodging establishments that will be required to follow state laws and regulations by removing the minimum number of guests that such establishments must serve to come under state regulation.

HB 478 Revises food safety laws to allow for the registration of so-called "cottage food" operations, exempt cottage food operations from wholesale food licensing and inspection laws, establish limits on where cottage foods may be sold, and revise licensing requirements for various food establishments, including temporary and mobile food establishments.

- SB 66** Defines alternative nicotine and vapor products, commonly referred to as “e-cigarettes,” requires retailers selling the products to be licensed by the state, and prohibits sale of the products to minors.

SENIOR CITIZENS

HB 517 Allows the guardian of an incapacitated person who suffers from a major neurocognitive disorder, such as Alzheimer’s disease, to seek admission of the person to a hospital or other appropriate treatment facility rather than commit the person to the Montana State Hospital. If the individual is admitted to the Montana Mental Health Nursing Care Center, the court must review the placement every 90 days.

SB 216 Requires providers of Medicaid personal assistance services to provide annual training on Medicaid fraud and abuse to employees and consumers of Medicaid-funded services provided in the home to senior citizens and individuals with physical disabilities. The providers also must submit annual reports to DPHHS on the costs of providing services.

CHILDREN, FAMILIES, HEALTH, AND HUMAN SERVICES INTERIM COMMITTEE

During the 2013-2014 interim, the Children, Families, Health, and Human Services Interim Committee approved the drafting of 10 pieces of legislation. The 2015 Legislature approved six of the bills as noted above – House Bills 33, 34, 35, and 47, related to mental health, and Senate Bills 7 and 8, related to prescription drug abuse.

The Legislature did not pass the following four bills proposed by the committee as a result of its assigned studies:

HJR 16: State-Operated Institutions

HB 22 Would have appropriated \$345,000 in both Fiscal Year 2016 and Fiscal Year 2017 for five crisis and transition technicians to work with intellectually disabled individuals who are in community placements and who are approaching a mental health crisis that could lead to a more restrictive placement or commitment to the Montana Developmental Center.

HB 23 Would have appropriated \$3 million in the 2017 biennium for the Department of Corrections to contract for a forensic community corrections facility for people found to be guilty of a crime but mentally ill at the time the crime was committed.

HB 24 Would have appropriated \$3 million in the 2017 biennium for the Department of Public Health and Human Services to operate or contract for transitional mental health group homes for people found to be guilty but mentally ill or not guilty by reason of mental illness.

SJR 20: Prescription Drug Abuse

SB 9 Would have allowed health care providers to share information with law enforcement if they thought a person had violated the law or posed a threat to public safety and would have provided immunity from suit for health care providers who shared that information.