

# MENTAL HEALTH STUDIES

## BILL DRAFT REVISIONS/DECISION POINTS

### BACKGROUND

The Children, Families, Health, and Human Services Interim Committee reviewed several bill drafts in May for its studies of the children's mental health system, the adult mental health system, and the involuntary commitment of individuals with dementia. For each of those bill drafts, this briefing paper outlines the key elements of the initial draft, the committee decisions made in May, changes made to the bill drafts for the June meeting, and remaining decision points for the committee.

### HJR 35 STUDY: CHILDREN'S MENTAL HEALTH

#### HJR 35-1: ENHANCE RATES FOR INCREASED IN-STATE ACCESS

- **Initial Draft:** Increase Medicaid reimbursement rates for psychiatric residential treatment facilities (PRTFs) to 133% of the standard Medicaid rate and increase rates for therapeutic group homes (TGHs) to 160% of the standard rate if they serve additional Medicaid-eligible children during the 2025 biennium and if they serve specific populations identified by the Department of Public Health and Human Services (DPHHS) during the 2027 biennium.
- **Committee Decisions in May:** Pay an enhanced rate only when a facility serves children meeting age or acuity criteria established by and review the proposed rate for TGHs.
- **Key Changes:**
  - Providers will receive a higher rate only when serving children who meet age or acuity levels established by DPHHS. *[Section 1(1)]*
  - The enhanced rate is the higher of the FY 2023 in-state rate for the service or the in-state rate DPHHS sets for the service for FY 2024. *[Section 1(2)]*
- **Remaining Decision Points:**
  1. Should the enhanced reimbursement be set at a different level? If so, at what level?
  2. Does the committee want to include an appropriation to cover the estimated costs or have the costs reflected in a fiscal note? If an appropriation is included, should it be:
    - a. an annual amount or a biennial amount?
    - b. lower for the first year of the biennium and higher for the second, in anticipation of a gradual increase in the number of children served?
    - c. built into the base for the 2027 biennium?
  3. Are any other changes needed?
  4. Should the bill be introduced as a committee bill in the 2023 legislative session?

## HJR 35-2: STRENGTHEN QUALIFIED PROVIDER POOL STATUTE

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- **Initial Draft:** PRTFs and TGHs that receive an enhanced Medicaid reimbursement rate must provide a plan of care for any child at risk of being placed out of state for treatment, except under certain circumstances.
- **Committee Decisions in May:** The committee did not make specific requests for changes during the meeting but did receive public comment on the lack of a timeframe for providers to submit a plan of care.
- **Key Changes:**
  - Providers must submit a plan of care within 2 working days. *[New subsection (1)(d)(a)]*
- **Remaining Decision Points:**
  1. Should the 2-day timeframe for submitting a plan of care be revised or removed?
  2. Are any other changes needed?
  3. Should the bill be introduced as a committee bill in the 2023 legislative session?

## HJR 35-3: IMPLEMENT A PROVIDER ASSESSMENT

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- **Initial Draft:** Create a daily utilization fee on each occupied PRTF and TGH bed, use 90% of the new state and federal revenue for children's mental health services, and deposit 10% of the funds in the general fund.
- **Committee Decisions in May:** The committee did not move this bill draft forward.

## SJR 14 STUDY: ADULT MENTAL HEALTH SYSTEM

### SJR 14-1: RECIPROCAL LICENSING REVISIONS

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- **Initial Bill Draft:** Revise licensing reciprocity for Board of Behavioral Health licensees so new residents may be licensed if they have held a license in another state for at least 1 year and the license is in good standing.
- **Committee Decisions in May:** Move the bill forward for continued consideration.
- **Key Changes:** None
- **Remaining Decision Points:**
  1. Are any changes needed to the bill?
  2. Should the bill be introduced as a committee bill in the 2023 legislative session?

### SJR 14-2: ESTABLISH CCBHC MODEL IN MONTANA

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The committee learned during the interim about a federal demonstration project for Certified Community Behavioral Health Clinics (CCBHCs.) The model establishes a new way of providing and paying for behavioral health care services. Committee members asked in May for a bill, modeled on legislation in Illinois, to require implementation of the CCBHC model in Montana.

- **Initial Bill Draft:** Requires DPHHS to – subject to available funding – implement the CCBHC model by January 1, 2024, and requires Medicaid reimbursement for CCBHC services.
- **Questions for Consideration:**
  1. Should the deadline for implementing the CCBHC model be changed?
  2. Are any other changes needed?
  3. Should the bill be introduced as a committee bill in the 2023 Legislature?

# HJR 39 STUDY: COMMITMENT OF INDIVIDUALS WITH DEMENTIA

## HJR 39-1: TRANSITION PATIENTS WITH DEMENTIA TO THE COMMUNITY

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- **Initial Bill Draft:** End involuntary commitment of people with a primary diagnosis of Alzheimer's disease, dementia, or traumatic brain injury on July 1, 2025; transition Montana State Hospital patients with those diagnoses into community-based services; and create a legislatively staffed committee to monitor the progress of the transition and make recommendations for any action needed.
- **Committee Decisions in May:** Revise the bill to address concerns raised by people who offered public comment.
- **Key Changes:**
  - Effective July 1, 2025, people with a primary diagnosis of Alzheimer's disease, dementia, or traumatic brain injury:
    - may not be involuntarily committed if they meet only the commitment criteria related to an inability to provide for their basic needs of food, clothing, shelter, health, or safety. *[Section 1(7)]*; and
    - may be committed if they have caused or may imminently cause injury to self or others. *[Section 1 and Section 2(1)(c)]*
  - The membership of the Transition Review Committee has been increased to include a physician with experience in geriatric psychiatry. *[Section 6(2)(b)(v)]*
  - The appropriation has been increased slightly to cover the mileage, meals, and lodging of the extra member. *[Section 10]*
- **Remaining Decision Points:**
  1. Should DPHHS be allowed to spend more than \$9 million of the Montana State Hospital appropriation each year to place Montana State Hospital patients in community services?
  2. Should the Transition Review Committee appropriation be revised to include research staff time?
  3. Are any other changes needed?
  4. Should the bill be introduced as a committee bill in the 2023 Legislature?

## HJR 39-2: SHARE ABUSE AND NEGLECT REPORTS

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- **Initial Bill Draft:** Require the Montana State Hospital to share information about reports of abuse and neglect with the designated state protection and advocacy organization.
- **Committee Decisions in May:** Include an immediate effective date.
- **Key Changes:**
  - Bill will be effective on passage and approval. *[Section 4]*
- **Remaining Decision Points:**
  1. Should the bill be introduced as a committee bill in the 2023 legislative session?