

MAINE STATE LEGISLATURE

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119th MAINE LEGISLATURE

FIRST REGULAR SESSION-1999

Legislative Document

No. 1838

H.P. 1277

House of Representatives, March 11, 1999

An Act to Include Mental Retardation, Developmental Disability and Substance Abuse Services in the Community Service System of the Department of Mental Health, Mental Retardation and Substance Abuse Services and to Consolidate Those Advisory Bodies to the Department.

Submitted by the Department of Mental Health, Mental Retardation and Substance Abuse Services pursuant to Joint Rule 204.

Reference to the Committee on Health and Human Services suggested and ordered printed.

A handwritten signature in cursive script that reads "Joseph W. Mayo".

JOSEPH W. MAYO, Clerk

Presented by Representative KANE of Saco.
Cosponsored by Senator PARADIS of Aroostook and
Representatives: BRAGDON of Bangor, BROOKS of Winterport, FULLER of Manchester,
POWERS of Rockport, SNOWE-MELLO of Poland, Senators: MacKINNON of York,
MITCHELL of Penobscot.

Be it enacted by the People of the State of Maine as follows:

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Sec. 1. 5 MRSA §12004-I, sub-§59, as enacted by PL 1987, c. 786, §5, is repealed.

Sec. 2. 5 MRSA §12004-I, sub-§61, as amended by PL 1989, c. 73, §1, is repealed.

Sec. 3. 5 MRSA §12004-I, sub-§63, as enacted by PL 1987, c. 786, §5, is repealed.

Sec. 4. 34-B MRSA §1209-A, as amended by PL 1989, c. 503, Pt. B, §161, is repealed.

Sec. 5. 34-B MRSA §1210, as amended by PL 1993, c. 410, Pt. CCC, §13, is repealed.

Sec. 6. 34-B MRSA §3604, sub-§5, as enacted by PL 1995, c. 691, §6, is repealed.

Sec. 7. 34-B MRSA §3604, sub-§5-A is enacted to read:

5-A. Exclusion. Beginning October 1, 1999, an organization that receives a grant from or enters into a contract with the department for the provision of services under the authority of the department must be a participating member of the local service network, as described in section 3608, for the region of the State subject to that grant or contract.

Sec. 8. 34-B MRSA §3607, as amended by PL 1997, c. 683, Pt. B, §22, is further amended by repealing and replacing the headnote to read:

§3607. Quality councils

Sec. 9. 34-B MRSA §3607, first ¶, as repealed and replaced by PL 1997, c. 683, Pt. B, §22, is amended to read:

The department shall establish 7 local quality improvement councils, called area network quality councils, to evaluate the delivery of ~~mental-health~~ services to children and adults under the authority of the department ~~or who have a major mental illness,~~ and to advise the department regarding quality assurance, systems development and the delivery of mental health, mental retardation, developmental disability and substance abuse services to children and adults under the authority of the department. The department shall also establish 2 institute councils to evaluate the delivery of mental health services at the 2 state mental health institutes and advise the department regarding quality assurance, operations and functions of the mental health institutes.

2 **Sec. 10. 34-B MRSA §3607, sub-§1, ¶¶A-1 and A-2** are enacted to
read:

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6 A-1. "Center council" consists of representatives elected
7 from each of the 4 population-specific committees of the
8 network quality council that is responsible for decisions or
9 recommendations that pertain to the network quality council
10 as a whole or 2 or more of its committees.

12 A-2. "Committee" or "population-specific committee" is a
13 group of members who have responsibility for decisions or
14 recommendations that pertain to the specific population to
15 which the work of the committee is dedicated.

16 **Sec. 11. 34-B MRSA §3607, sub-§1, ¶B,** as amended by PL 1997,
c. 371, §2, is further amended to read:

18 B. "Consumer" means a an adult or child recipient or former
20 recipient of publicly funded mental health, mental
21 retardation, developmental disability or substance abuse
22 services ~~or-an-adult-who-has-or-had-a-major-mental-illness.~~

24 **Sec. 12. 34-B MRSA §3607, sub-§1, ¶¶C and H,** as enacted by PL
1995, c. 691, §7, are amended to read:

26 C. "Council" means a network quality improvement council or
28 an institute council approved by the commissioner pursuant
to subsection 2, paragraph D. A local council consists of
30 the center council plus its 4 population-specific committees.

32 H. "Service provider" or "provider" means a person or
organization providing publicly funded mental---health
34 services to consumers or family members under the authority
35 of the department.

36 **Sec. 13. 34-B MRSA §3607, sub-§1, ¶I** is enacted to read:

38 I. "Stakeholders" collectively refers to those people
40 identified in paragraphs A, B, D, F and H.

42 **Sec. 14. 34-B MRSA §3607, sub-§2,** as enacted by PL 1995, c.
691, §7, is repealed and the following enacted in its place:

44 **2. Councils established.** There is established an approved
46 network quality council for each area designated in subsection 3,
47 referred to in this section as "local council," and for the
48 Augusta Mental Health Institute and the Bangor Mental Health
49 Institute, referred to in this section as "institute council."
50 The councils operate under the authority of the department. Each
council consists of members chosen pursuant to paragraphs B and C.

2 A. The councils shall assist the department and providers
4 with systems planning and needs assessment at the local
6 level and community education and quality improvement
 activities that must be implemented at the local level. The
 councils shall perform program assessment through service
 evaluation teams, as described in paragraph E.

8
 B. Each network quality council consists of the following 4
10 population-specific committees of 8 members each, whose
 membership takes into consideration local geographic factors.

12 (1) A mental health committee, which advises the
14 department regarding issues germane to adult mental
16 health services, consists of 3 adult mental health
18 consumers, 2 family members of adult mental health
 consumers, one community member and 2 mental health
 service providers.

20 (2) A mental retardation and developmental
22 disabilities committee, which advises the department
24 regarding issues germane to adult mental retardation
26 services and developmental disability services,
28 consists of 3 consumers of mental retardation or
 developmental disabilities services, 2 family members
 of persons with mental retardation or developmental
 disabilities, or both, 2 mental retardation or
 developmental disabilities service providers and one
 member of the community.

30 (3) A children's services committee, which advises the
32 department regarding issues germane to mental health
34 services, mental retardation services and developmental
36 disability services and substance abuse services to
38 persons under 18 years of age, consists of 2 adolescent
40 consumers of mental health services, mental retardation
 services, substance abuse services or developmental
 disability services, 3 parents of consumers of such
 services, 2 providers of such services and one member
 of the community.

42 (4) A substance abuse committee, which advises the
44 department regarding issues germane to adult substance
46 abuse services, consists of 3 consumers of substance
48 abuse services, 2 family members of consumers of
 substance abuse services, 2 substance abuse service
 providers and one member of the community.

The department shall adopt rules for committee membership.
50 Rules adopted pursuant to this paragraph are routine

2 technical rules as defined in Title 5, chapter 375,
3 subchapter II-A.

4 C. Each institute council consists of 16 members whose
5 membership takes into consideration local geographic
6 factors. The membership on each council consists of 4
7 consumers of mental health services, 4 family members of
8 such consumers, 4 community members and 4 mental health
9 service providers.

10 D. The councils shall adopt bylaws that establish the terms
11 and qualifications of membership, the selection of members
12 succeeding the initial members and the internal governance
13 and rules. The commissioner shall approve the bylaws of
14 each council, prior to designating it as an approved network
15 quality council.

16 E. Under the supervision of each council, a service
17 evaluation team of nonprovider members shall periodically
18 review programs funded with public money. The results of
19 the review must be reported to the council, the local
20 service network and the regional director for the department
21 and must be considered in funding decisions by the
22 department. To the extent possible, there must be one
23 service evaluation team per population-specific committee.

24 F. Each network quality council must have a center council,
25 consisting of a maximum of 12 members. Each of the 4
26 population-specific committees shall select 3 persons from
27 its membership to be members of the center council. The
28 center council shall meet as frequently as the needs of the
29 network quality council dictate.

30 **Sec. 15. 34-B MRSA §3607, sub-§§3 and 4, as enacted by PL 1995,**
31 **c. 691, §7, are amended to read:**

32 **3. Areas.** An-area A local council shall operate in each of
33 the following geographic areas:

34 **A. Aroostook County;**

35 **B. Hancock County, Washington County, Penobscot County and**
36 **Piscataquis County;**

37 **C. Kennebec County and Somerset County;**

38 **D. Knox County, Lincoln County, Sagadahoc County and Waldo**
39 **County;**

40 **E. Androscoggin County, Franklin County and Oxford County;**

2 F. Cumberland County; and

4 G. York County.

6 **4. Accountability.** Each area local council is accountable
to the regional director. The institute councils are accountable
8 to the director of facility management within the department.

10 **Sec. 16. 34-B MRSA §3607, sub-§5,** as amended by PL 1997, c.
371, §4, is further amended to read:

12 **5. Duties.** By ~~October 1, 1996~~ March 1st of each year, each
14 network quality council shall submit to the department a plan for
the development, coordination and implementation of a local
16 mental-health system for the delivery of services to of services
for children and adults under the authority of the department and
18 to for their families. ~~This plan must be updated every 2 years.~~
~~By October 1, 1998, the updated plan of each council must include~~
20 ~~provisions for the development, coordination and implementation~~
~~of a local mental health system for the delivery of services to~~
22 ~~children and adults who have a major mental illness.~~ The
department shall determine required elements of the plan,
24 including but not limited to the following core services within
each network.

26 ~~A. Case management, including advocacy activities and~~
28 ~~techniques for identifying and providing services to~~
~~consumers at risk. Case management services must be~~
30 ~~independent of providers whenever possible;~~

32 ~~B. Medication management, outpatient therapy, substance~~
abuse treatment and other outpatient services;

34 ~~C. In-home flexible supports, home based crisis assistance,~~
36 ~~mobile outreach, respite and inpatient capacity and other~~
crisis prevention and resolution services;

38 ~~D. Housing, in-home support services, tenant training and~~
40 ~~support services, home ownership options and supported~~
housing, and

42 ~~E. Rehabilitation and vocational services, including~~
44 ~~transitional employment, supported education and job finding~~
and coaching.

46 **Sec. 17. 34-B MRSA §3607, sub-§6,** as enacted by PL 1995, c.
48 691, §7, is amended to read:

2 D. In conjunction with the regional director and the area
local council, conduct planning activities; and

4 E. Develop techniques for identifying and providing
services to consumers at risk.

6
8 **2. Accountability.** Each network is accountable to the area
local council and the regional director.

10 **3. Public outreach.** Each network shall solicit the
12 participation of interested providers to serve on the area local
council, the network or advisory committees.

14 **4. Participation.** State-operated direct service programs
shall participate in the activities of the networks.

16
18 **5. Data collection.** The department shall collect data to
assess the capacity of the local service networks, including, but
20 not limited to, analyses of utilization of mental-health services
and the unmet needs of persons receiving publicly funded mental
health services.

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24 **Sec. 19. 34-B MRSA §3609**, as enacted by PL 1995, c. 691, §7,
is amended to read:

26 **§3609. Statewide quality improvement council**

28 Each network quality council and institute council shall
designate a member and an alternate to serve on a statewide
30 quality improvement council to advise the commissioner on issues
of system implementation that have statewide impact. The
32 commissioner shall appoint other members to serve on the
council. The council shall review plans submitted to the council
34 by the department pursuant to federal and state mandates and
shall submit to the department any comments or recommendations
36 regarding these plans.

38 **Sec. 20. 34-B MRSA §6241**, as amended by PL 1995, c. 560, Pt.
K, §§73 and 74, is repealed.

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42 **Sec. 21. Repeal.** That section of this Act that repeals the
Maine Revised Statutes, Title 34-B, section 3604, subsection 5
takes effect October 1, 1999.

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SUMMARY

50 The purpose of this bill is to further the restructuring of
the Department of Mental Health, Mental Retardation and Substance

2 Abuse Services to eliminate artificial barriers to services by an
unnecessarily strict separation of adult and children's mental
4 health, mental retardation and substance abuse systems. This
bill gives statutory authority for stakeholders of all department
6 services to participate in their local quality councils and
includes providers of services to persons with mental retardation
8 or developmental disabilities, or both, and persons receiving
substance abuse services in the local service networks. This
10 bill eliminates population-specific committees that exist to
advise the Commissioner of Mental Health, Mental Retardation and
12 Substance Abuse Services on implementation of statewide
planning. The functions of these groups will be assumed by the
14 statewide quality improvement council whose membership will be
reflective of all constituencies served by the department.