

MAINE STATE LEGISLATURE

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DATE: 5/24/05

L.D. 1515
(Filing No. H- 479)

HEALTH AND HUMAN SERVICES

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**STATE OF MAINE
HOUSE OF REPRESENTATIVES
122ND LEGISLATURE
FIRST SPECIAL SESSION**

COMMITTEE AMENDMENT "A" to H.P. 1060, L.D. 1515, "Resolve, To Establish a Responsive, Community-based, Cost-effective and Comprehensive Adult Mental Health System"

Amend the resolve by striking out everything after the title and before the summary and inserting in its place the following:

Sec. 1. AMHI Consent Decree Plan and system transformation plan. Resolved: That the Department of Health and Human Services shall ensure that the plan presented for court approval to achieve compliance with the Augusta Mental Health Institute Consent Decree Plan and that the system transformation plan as referenced in Public Law 2005, chapter 12, Part XXX are consumer-directed, community-based and comprehensive. Any plan development must be done in collaboration with a working group inclusive of consumers, families, providers and advocates. The plan must address, at a minimum, service delivery structures, service options, financing of those services, quality assurance and quality improvement strategies to be reflected as part of the management of the system. The plan must also address the development of a local system to ensure continuity of care and to identify utilization management strategies for all components of the mental health system as referenced in section 3; and be it further

Sec. 2. System values and standards. Resolved: That the system for adult mental health services must be based on those values and standards already adopted by this State so that:

COMMITTEE AMENDMENT

1. All services and support promote recovery and resiliency;

2
4 Planning and services are consumer-driven, holistic, flexible and strength-based;

6 3. The system is stigma-reducing and promotes a positive image of mental health care and treatment and consumers of mental health care;

10 4. Services are based in research or evaluation of efficacy;

12 5. Performance improvement decisions are based on data;

14 6. The system works in collaboration with public and private partners;

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18 7. The system is culturally and linguistically competent and includes respect and inclusion for all consumers regardless of race, ethnicity, disability, sexual orientation or economic challenges;

22 8. The system is outcome-based and demands cost effectiveness, accountability, standards and best practices;

24
26 9. Grievance procedures are readily accessible and transparent;

28 10. Services are locally responsive and promote an individual's integration into community life;

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32 11. System care is integrated with primary health care; and

34 12. Consumers have a choice of providers and services; and be it further

36 **Sec. 3. Service reform and improvement. Resolved:** That the mental health system must reflect at a minimum the following components:

40 1. Urgent care, including crisis services;

42 2. Inpatient services;

44 3. Outpatient clinical and medication management services;

46 4. Community support services;

48 5. Housing;

50 6. Residential support services;

2 7. Evidence-based practices, including, but not limited to,
4 those currently identified by the federal Substance Abuse and
Mental Health Services Administration;

6 8. Peer counseling and peer support services;

8 9. Vocational supports;

10 10. Transportation services;

12 11. Socialization supports; and

14 12. Family support services; and be it further

16 **Sec. 4. Diverse populations. Resolved:** That the mental health
18 system must define and be responsive to the needs of diverse
populations including:

20 1. Persons with serious mental illness;

22 2. Persons with co-occurring substance abuse disorders;

24 3. Persons who are older;

26 4. Persons in the criminal justice system;

28 5. Persons who have trauma and abuse histories; and

30 6. Persons with co-occurring serious physical illnesses or
32 conditions; and be it further

34 **Sec. 5. System readiness. Resolved:** That service reform must be
undertaken within the following parameters:

36 1. Significant changes in reimbursement methodology must
38 include actuarial analysis;

40 2. Administrative burdens must be managed, consistent with
Public Law 2003, chapter 673, Part 000, section 2;

42 3. Federal and state reporting data requirements must be
44 met. Information technology systems must be in place to support
data collection and quality management systems that drive reform;

46 4. The system must use consistent tools for measurement of
48 outcomes, including, but not limited to, individual benefits that
are grounded in the values in section 2; and

5. Required MaineCare waivers must be approved, when needed, prior to changes being implemented; and be it further

Sec. 6. Implementation. Resolved: That any substantive changes in financing and service delivery of adult mental health services must be phased in with an evaluation process for each phase, with adjustments being made accordingly; and be it further

Sec. 7. Report. Resolved: That the Department of Health and Human Services shall provide a report and recommendations, including any recommendations of the working group required under section 1, to the Joint Standing Committee on Health and Human Services no later than January 15, 2006.'

SUMMARY

This amendment replaces the resolve. It requires that the Department of Health and Human Services ensure that the plan presented to the court to achieve compliance with the Augusta Mental Health Institute Consent Decree Plan and the system transformation plan required in Public Law 2005, chapter 12, Part XXX are consumer-directed, community-based and comprehensive.

The amendment also specifies the values and standards, service reform and improvement components and readiness parameters to be used in the transformation of the adult mental health services system.

The amendment also requires the Department of Health and Human Services to provide a report and recommendations, including any recommendations of the working group required under section 1 of this resolve, to the Joint Standing Committee on Health and Human Services no later than January 15, 2006.

FISCAL NOTE REQUIRED
(See attached)



122nd MAINE LEGISLATURE

LD 1515

LR 1402(02)

**Resolve, To Establish a Responsive, Community-based, Cost-effective and Comprehensive Adult
Mental Health System**

Fiscal Note for Bill as Amended by Committee Amendment "A"

Committee: Health and Human Services

Fiscal Note Required: Yes

Fiscal Note

Minor cost increase - General Fund

Fiscal Detail and Notes

Any additional costs to the Department of Health and Human Services can be absorbed by the department utilizing existing budgetary resources.