

"An Act relating to community mental health services; and providing for an effective date."

COMMITTEE REPORT

5/1/75

HOUSE

Mr. Speaker:

Date 5/18/75

The Committee on FINANCE has had CS 24

under consideration. A Majority of the members of the Committee

() recommends it DO PASS

() recommends it DO NOT PASS

() recommends it DO PASS WITH ATTACHED AMENDMENT(S)

() recommends it BE REPLACED WITH CS FOR CS 24 AND THAT

CS FOR CS 24 DO PASS

() "and" recommends it BE REFERRED TO THE _____

COMMITTEE

() reports it back WITHOUT RECOMMENDATION

() "other"

Members signing the Majority report:

<u>[Signature]</u>	<u>[Signature]</u>	_____
<u>[Signature]</u>	<u>[Signature]</u>	_____
<u>[Signature]</u>	<u>[Signature]</u>	_____
<u>[Signature]</u>	<u>[Signature]</u>	_____

Members NOT concurring in the Majority report:

<u>[Signature]</u>	recommends: <u>no recommendation</u>
<u>[Signature]</u>	recommends: <u>no rec</u>
_____	recommends:
_____	recommends:
_____	recommends:

[Signature] Chairman

HOUSE JOURNAL

HOUSE FINANCE COMMITTEE REPORT
FOR
HOUSE COMMITTEE SUBSTITUTE FOR COMMITTEE SUBSTITUTE
FOR
SENATE BILL NO. 24

The House Finance Committee has examined the role of advisory boards in decision-making processes regarding various programs and finds that the proliferation of such boards results in narrow, rather than comprehensive, perspectives reflecting the particular interest of their respective programs.

Therefore, the functions to be performed by a Mental Health Advisory Council under Sec. 47.30.605 of CSSB 24 have been assigned to the Statewide Health Coordinating Council (SHCC) whose existence is mandated by the National Health Planning and Resources Development Act of 1974, P.L. 93-641. This is done to avoid further duplication of efforts and fragmentation of responsibility for decisions regarding health care. P.L. 93-641 specifically charges the SHCC to "approve or disapprove...any application...(for) the receipt of any funds under...the Community Mental Health Centers Act" (Sec. 1524 (c)(b)).

The addition of Sec. 47.30.615 to HCSCSSB 24 repeals the State law which conformed to the Federal law replaced by P.L. 93-641 and makes temporary provision for the allocation of Hill-Burton funds until the Department of Health and Social Services is able to prepare legislation to place the State in conformance with the requirements of P.L. 93-641.

It is the intent of the Legislature that the Department prepare such legislation to be submitted at the beginning of the Second Session of the Ninth Legislature.

In addition, the Committee recommends that the Legislature give particular study to health care and delivery during the interim before the 1976 regular legislative session.

Respectfully submitted,

Hugh Malone, Chairman

HOUSE JOURNAL

FISCAL NOTE
for
HOUSE COMMITTEE SUBSTITUTE FOR COMMITTEE SUBSTITUTE
for
SENATE BILL NO. 24


The House Finance Committee notes that for Fiscal Year 1976, the costs of HCSCSSB 24 are covered by the appropriation under Community Mental Health Services in CSSHB 70. The amounts contained in that appropriation, in addition to \$145,300 and \$85,800 for existing centers in Ketchikan and Kodiak which will fall under HCSCSSB 24 as well, are

Anchorage	\$177,500
Bethel	79,000
Horton Sound	65,000
Seward	30,000
Kenai	30,000
Kotzebue	30,000
Skagway	13,300
Sitka	30,000
Tanana Chiefs	67,400
Juneau	15,000
Barrow	50,000

This is a total of \$587,200 for new centers under the sharing provisions of this legislation.

For the costs of HCSCSSB 24 after Fiscal Year 1976, reference is made to the fiscal note for HB 311, the companion bill to CSSB 24, since the House Finance Committee did not receive a fiscal note relating to CSSB 24 as such.

Respectfully submitted,


Hugh Malone, Chairman

CS COMMITTEE SUBSTITUTE FOR SENATE CONCURRENT RESOLUTION NO.
 SCR 19 was referred to the Rules Committee for placement on
 19 the calendar.

CSSB The Finance Committee has had COMMITTEE SUBSTITUTE FOR
 24 SENATE BILL NO. 24 (community mental health services;
 effective date) under consideration and a majority of the
 members of the Committee recommends it be replaced with
 HOUSE COMMITTEE SUBSTITUTE FOR COMMITTEE SUBSTITUTE FOR
 SENATE BILL NO. 24 (same title) and that it do pass. The
 report was signed by Mr. Malone, Chairman, and concurred
 in by Malone, Buchholdt, Duncan, Itta, Guy, Gruening and
 Cowper. Not concurring were Naughton and Haugen who have
 no recommendation.

COMMITTEE SUBSTITUTE FOR SENATE BILL NO. 24 was referred
 to the Rules Committee for placement on the calendar.

The Finance Committee's statement of intent on CSSB 24
 appears as follows:

"HOUSE FINANCE COMMITTEE REPORT
 FOR
 HOUSE COMMITTEE SUBSTITUTE FOR COMMITTEE SUBSTITUTE
 FOR
 SENATE BILL NO. 24

The House Finance Committee has examined the role of advisory boards
 in decision-making processes regarding various programs and finds that
 the proliferation of such boards results in narrow, rather than
 comprehensive, perspectives reflecting the particular interest of
 their respective programs.

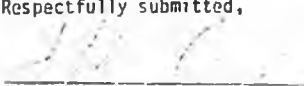
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 efforts and fragmentation of responsibility for decisions regarding
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 or disapprove...any application...(for) the receipt of any funds
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 which conformed to the Federal law replaced by P.L. 93-641 and makes
 temporary provision for the allocation of Hill-Burton funds until the
 Department of Health and Social Services is able to prepare legisla-
 tion to place the State in conformance with the requirements of
 P.L. 93-641.

It is the intent of the Legislature that the Department prepare such
 legislation to be submitted at the beginning of the Second Session of
 the Ninth Legislature.

In addition, the Committee recommends that the Legislature give partic-
 ular study to health care and delivery during the interim before
 the 1976 regular legislative session.

Respectfully submitted,


 Hugh Malone, Chairman "

(b) Class A-2, Class A-3, and Class A-4 licenses are valid for operating Class A-2, A-3 and A-4 vehicles respectively only so long as a currently effective and approved medical certificate as prescribed in (a) of this section, that person may not operate Class A-2, A-3, or A-4 vehicles until a valid medical certificate is filed with the department.

(c) A requirement for a medical examination as a condition precedent to obtaining an operator's license or school bus driver's permit shall be satisfied if the applicant is the holder of a current and valid first - or second-class medical certificate issued under the federal aviation regulations and has passed any requirement of the Department of Education relating to tests for tuberculosis. (eff. / / Reg.)

Authority: AS 28.05.030
AS 28.15.070 "

The Speaker referred the above regulations to the Judiciary Committee.

REPORTS OF STANDING COMMITTEES

The Judiciary Committee has had SENATE CONCURRENT RESOLUTION SCR NO. 15 (assignment of policewomen to reported incidents of rape) under consideration and a majority of the members of the Committee recommends it do pass. The report was signed by Mr. Gardiner, Chairman, and concurred in by Gardiner, Brown, Eliason and Bradley. Not concurring was Speckling who has no recommendation. 15

SENATE CONCURRENT RESOLUTION NO. 15 was referred to the Rules Committee for placement on the calendar.

The Judiciary Committee has had COMMITTEE SUBSTITUTE FOR SENATE CONCURRENT RESOLUTION NO. 17 (peace officer training programs related to treatment of rape victims) under consideration and a majority of the members of the Committee recommends it do pass. The report was signed by Mr. Gardiner, Chairman, and concurred in by Gardiner, Brown, Eliason and Bradley. Not concurring was Speckling who has no recommendation. CS SCR 17

COMMITTEE SUBSTITUTE FOR SENATE CONCURRENT RESOLUTION NO. 17 was referred to the Rules Committee for placement on the calendar.

The Judiciary Committee has had COMMITTEE SUBSTITUTE FOR SENATE CONCURRENT RESOLUTION NO. 19 (special investigative units for cases involving sexual offenses) under consideration and a majority of the members of the Committee recommends it do pass. The report was signed by Mr. Gardiner, Chairman, and concurred in by Gardiner, Brown, Eliason and Bradley. Not concurring was Speckling who has no recommendation. CS SCR 19

Offered: 3/24/75
Referred: Finance

Original sponsor: Chance

1 IN THE SENATE

BY THE HEALTH, EDUCATION AND
SOCIAL SERVICES COMMITTEE

2 CS FOR SENATE BILL NO. 24 am H

3 IN THE LEGISLATURE OF THE STATE OF ALASKA

4 NINTH LEGISLATURE - FIRST SESSION

5 A BILL

6 For an Act entitled: "An Act relating to community mental health services;
7 and providing for an effective date."

8 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

9 * Section 1. AS 47.30 is amended by adding new sections to read:

10 ARTICLE 5. COMMUNITY MENTAL HEALTH SERVICES.

11 Sec. 47.30.520. LEGISLATIVE PURPOSE. It is the purpose of the
12 legislature in enacting the Community Mental Health Services Act to
13 assist local communities in planning, organizing and financing commu-
14 nity mental health services through locally developed, administered and
15 controlled community mental health programs. It is further intended
16 to better utilize existing resources at both state and local levels in
17 order to:

18 (1) develop and implement plans for initiating maximum
19 mental health services based on demonstrated need for services in each
20 geographical planning area, as well as regionalized comprehensive
21 mental health services;

22 (2) improve the effectiveness of existing mental health
23 services;

24 (3) integrate state-operated and community mental health
25 programs into a unified mental health system;

26 (4) provide a means for participation by local communities
27 in the determination of the need for and the allocation of mental
28 health resources;

29 (5) establish a uniform ratio of local and state government

1 responsibility for financing mental health services;

2 (6) provide a means of allocating state mental health funds
3 according to community needs;

4 (7) encourage the full use of all existing public or private
5 agencies, facilities, personnel, and funds to accomplish these objec-
6 tives; and

7 (8) prevent unnecessary duplication and fragmentation of
8 services and expenditures.

9 Sec. 47.30.530. DUTIES OF DEPARTMENT. The department shall
10 administer the provisions of secs. 520 - 620 of this chapter and shall

11 (1) define and develop standards for various levels and
12 qualities of mental health care;

13 (2) provide fiscal and professional technical assistance in
14 planning, organizing, developing, implementing, and administering
15 local mental health services;

16 (3) develop budgets, receive and disburse state appropria-
17 tions and funds in accordance with the provisions of secs. 520 - 620
18 of this chapter;

19 (4) establish standards of education and experience for
20 professional, technical and administrative personnel employed in com-
21 munity mental health services;

22 (5) assist the community in establishing the organization
23 and operation of community mental health services;

24 (6) develop a standardized system for measuring and report-
25 ing to the department the types, quantities and quality of services;
26 and a cost accounting system which will demonstrate the cost of various
27 levels and qualities of care;

28 (7) provide each local community planning and services
29 delivery entity with statistics, reports, and other data relevant to

development of indices indicating the need for mental health services, or relevant to evaluating the effectiveness of existing services;

(8) review each local community plan and require each plan to include

(A) an affirmative showing that the most effective and economic use will be made of all available public and private resources in the community including careful consideration of the most effective and economic alternative forms and patterns of services;

(B) a five-year projection of needs, services and resources; and

(C) adequate provisions for review and evaluation of services provided in the local community;

(9) adopt regulations and establish priorities, after consultation with local communities affected and in conjunction with a state mental health advisory council, which are necessary to carry out the purposes of secs. 520 - 620 of this chapter.

Sec. 47.30.540. ELIGIBLE LOCAL COMMUNITY ENTITIES. (a) A city or borough government or other political subdivision of the state, a nonprofit corporation, or a combination of these, is eligible to receive funds and administer local programs under secs. 520 - 620 of this chapter. In order to insure equitable access to funds and programs through the state, the department shall determine appropriate geographical areas to be served by local programs in consultation with representatives of the geographical areas in question.

(b) The entity designated by the department in the local area as the organizational unit to receive funds under secs. 520 - 620 of this chapter and to administer the program shall insure a broad base of community support as evidenced by a governing board reasonably

1 representative of the professional, civic, and citizen groups in the
2 community. No more than two members, or 40 per cent of the membership,
3 whichever is greater, may be providers of services under the program.
4 In order to receive funds under secs. 520 - 620 of this chapter, a
5 local community entity shall agree to

6 (1) give priority to mental health programs and services
7 that have a maximum impact on other tax funded programs;

8 (2) furnish services through a qualified staff meeting
9 reasonable standards of experience and training;

10 (3) conform to a state cost accounting system showing the
11 true cost of services rendered, collect fees for services according to
12 a schedule based on an analysis of reasonable ability to pay, and pro-
13 vide that no person shall be refused services because of inability to
14 pay for those services;

15 (4) maintain adequate clinical and administrative records
16 and to furnish periodic reports to the department;

17 (5) furnish the department an annual report of the preceding
18 fiscal year, including an evaluation of the effectiveness of the
19 previous year's programs and their costs; and

20 (6) furnish the department each year a satisfactory annual
21 update of a long-range planning and budget statement that describes
22 program goals for the coming year, the steps and resources necessary
23 to implement the goals, the projected means by which these resources
24 will be secured and the procedures necessary to evaluate the program.

25 (c) Members of local governing boards may be reimbursed for
26 necessary travel expenses incurred in the organization and operation
27 of local programs as may be determined by the department.

28 Sec. 47.30.550. COST-SHARING FORMULA; LIMITATIONS. If the
29 department finds that it is necessary for the purposes of secs. 520 -

1 620 of this chapter, the department may enter into a contract with an
2 eligible community entity under which the department purchases commun-
3 ity mental health services from the entity in accordance with the
4 community entity's approved plan and secs. 520 - 620 of this chapter.
5 The department shall purchase the services by participating in 75 per
6 cent of the eligible costs of the services to be furnished under the
7 plan subject to the availability of state funds to the department for
8 implementing secs. 520 - 620 of this chapter. In districts designated
9 by the department as poverty areas, the department shall purchase the
10 services by participating in 90 per cent of the eligible costs.

11 Sec. 47.30.560. FUNDS FOR LOCAL PROGRAMS. The contracts for
12 services provided for in secs. 520 - 620 of this chapter shall be
13 reviewed, revised if necessary, and approved at the expiration of each
14 contract year. A contract shall be approved if the department finds
15 that the community entity has complied with its plan, secs. 520 - 620 of
16 this chapter, and any applicable regulations adopted by the department.
17 Expenditures for the purchase of services shall be made in accordance
18 with the approved contract, budgets and program projections.

19 Sec. 47.30.570. ELIGIBLE COSTS; MAINTENANCE OF LOCAL EFFORT. The
20 department shall adopt regulations specifying the types of services and
21 program costs eligible for state participation. These regulations shall
22 include

23 (1) a provision excluding capital expenditures as eligible
24 costs; and

25 (2) a requirement that the community entity contractor or
26 applicant agrees as a condition of contract approval that it will not
27 supplant existing local fund support of community mental health services
28 with funds received under secs. 520 - 620 of this chapter and that it
29 will continue local funding support of community mental health services,

1 in any year in which it contracts with the department, at a level that
2 is at least equal to the local funding support in the previous year.

3 Sec. 47.30.580. COMPREHENSIVE SERVICES. Plans and regulations
4 adopted under secs. 520 - 620 of this chapter shall allow local programs
5 sufficient administrative and program flexibility so that local com-
6 munity mental health programs may be joined with other programs such as
7 mental retardation programs, drug abuse programs, alcoholism programs
8 and comprehensive mental health services programs.

9 Sec. 47.30.590. PATIENT RIGHTS AND THE CONFIDENTIAL NATURE OF
10 RECORDS AND INFORMATION. The department shall adopt regulations to
11 assure patient rights and to safeguard the confidential nature of records
12 and information about the recipients of services provided under secs.
13 520 - 620 of this chapter. The regulations shall require that local
14 community entities develop and include in any plan submitted for approval
15 adequate provisions for safeguarding confidential information. The
16 department's regulations shall provide for disclosure of confidential
17 information to mental health professionals providing services to a
18 recipient and to other appropriate service agencies when it is in the
19 defined best interests of the patient.

20 Sec. 47.30.600. APPLICABILITY TO EXISTING PROGRAMS. No local
21 community entity existing on January 1, 1974 that received state funds
22 for a community mental health services program in the fiscal year ending
23 June 30, 1974 may receive less state support through the purchase of
24 services under secs. 520 - 620 of this chapter in the fiscal year ending
25 June 30, 1975 than it received in the preceding fiscal year. In order
26 to assure the continuity of state support of existing programs the
27 department may waive requirements of secs. 520 - 620 of this chapter in
28 approving contracts with existing entities for the fiscal year ending
29 June 30, 1975, only.

1 Sec. 47.30.605. MENTAL HEALTH ADVISORY COUNCIL. (a) There shall
2 be a Mental Health Advisory Council appointed by the governor to advise
3 and assist the department in initiating and implementing community
4 mental health services. The council consists of 12 appointed voting
5 members who are interested and knowledgeable in mental health. No more
6 than four members should be providers of direct mental health services.

7 (b) The council shall

8 (1) advise the division on the state mental health plans
9 before implementation of these plans;

10 (2) periodically review all mental health services in the
11 state, reports of which shall be prepared and submitted to the governor,
12 the legislature, the department and the Comprehensive Health Advisory
13 Council;

14 (3) conduct independent investigations and studies as may be
15 necessary;

16 (4) recommend rules, regulations and standards for the admin-
17 istration of community mental health services;

18 (5) encourage coordination on a regional basis, of community
19 mental health services to insure nonduplication and nonfragmentation of
20 services.

21 (c) The council shall meet at the call of the chairman but shall
22 meet at least once quarterly.

23 (d) Members of the council are not entitled to a salary, but are
24 entitled to per diem, reimbursement for travel, and other expenses
25 authorized by law for other boards.

26 Sec. 47.30.610. DEFINITIONS. In secs. 520 - 610 of this chapter

27 (1) "department" means the Department of Health and Social
28 Services;

29 (2) "poverty area" means a district in which 15 per cent or

1 more of the population, based upon 1970 census data, falls under 125
2 per cent of the Office of Economic Opportunity poverty guidelines.

3 Sec. 47.30.620. SHORT TITLE. Sections 520 - 620 of this chapter
4 may be cited as the Community Mental Health Services Act.

5 * Sec. 2. Upon the creation of the Statewide Health Coordinating Council,
6 as required by the National Health Planning and Resource Development Act of
7 1974, H. 93-641, sec. 605(a), (c) and (d) of this Act are repealed and the
8 duties specified under sec. 605(b) of this Act shall be assumed by the
9 Statewide Health Coordinating Council.

10 * Sec. 3. This Act takes effect July 1, 1975.
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Offered: 3/24/75
Referred: Finance

Original sponsor: Chance

*House Committee
Sub. for*

BY THE HEALTH, EDUCATION AND
SOCIAL SERVICES COMMITTEE

1 IN THE SENATE

2 CS FOR SENATE BILL NO. 24

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4 NINTH LEGISLATURE - FIRST SESSION

5 A BILL

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17 order to:

18 (1) develop and implement plans for initiating maximum
19 mental health services based on demonstrated need for services in each
20 geographical planning area, as well as regionalized comprehensive
21 mental health services;

22 (2) improve the effectiveness of existing mental health
23 services;

24 (3) integrate state-operated and community mental health
25 programs into a unified mental health system;

26 (4) provide a means for participation by local communities
27 in the determination of the need for and the allocation of mental
28 health resources;

29 (5) establish a uniform ratio of local and state government

1 responsibility for financing mental health services;

2 (6) provide a means of allocating state mental health funds
3 according to community needs;

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15 local mental health services;

16 (3) develop budgets, receive and disburse state appropria-
17 tions and funds in accordance with the provisions of secs. 520 - 620
18 of this chapter;

19 (4) establish standards of education and experience for
20 professional, technical and administrative personnel employed in com-
21 munity mental health services;

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23 and operation of community mental health services;

24 (6) develop a standardized system for measuring and report-
25 ing to the department the types, quantities and quality of services;
26 and a cost accounting system which will demonstrate the cost of various
27 levels and qualities of care;

28 (7) provide each local community planning and services
29 delivery entity with statistics, reports, and other data relevant to

1 development of indices indicating the need for mental health services,
2 or relevant to evaluating the effectiveness of existing services;

3 (8) review each local community plan and require each plan
4 to include

5 (A) an affirmative showing that the most effective and
6 economic use will be made of all available public and private
7 resources in the community including careful consideration of the
8 most effective and economic alternative forms and patterns of
9 services;

10 (B) a five-year projection of needs, services and
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13 services provided in the local community;

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24 geographical areas to be served by local programs in consultation with
25 representatives of the geographical areas in question.

26 (b) The entity designated by the department in the local area as
27 the organizational unit to receive funds under secs. 520 - 620 of this
28 chapter and to administer the program shall insure a broad base of
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3 whichever is greater, may be providers of services under the program.
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17 (5) furnish the department an annual report of the preceding
18 fiscal year, including an evaluation of the effectiveness of the
19 previous year's programs and their costs; and

20 (6) furnish the department each year a satisfactory annual
21 update of a long-range planning and budget statement that describes
22 program goals for the coming year, the steps and resources necessary
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28 See. 47.30.550. COST-SHARING FORMULA; LIMITATIONS. If the
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5 The department shall purchase the services by participating in 75 per
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15 that the community entity has complied with its plan, secs. 520 - 620 of
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9 Sec. 47.30.590. PATIENT RIGHTS AND THE CONFIDENTIAL NATURE OF
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12 and information about the recipients of services provided under secs.
13 520 - 620 of this chapter. The regulations shall require that local
14 community entities develop and include in any plan submitted for approval
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27 department may waive requirements of secs. 520 - 620 of this chapter in
28 approving contracts with existing entities for the fiscal year ending
29 June 30, 1975, only.

Insert

Sec. 47.30.605. ADVISORY COUNCIL. The Statewide Health Coordinating Council, created by PL 93-641, shall be the statewide organization to advise and assist the department in developing and implementing community mental health services.

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~~Sec. 47.30.605. MENTAL HEALTH ADVISORY COUNCIL. (a) There shall be a Mental Health Advisory Council appointed by the governor to advise and assist the department in initiating and implementing community mental health services. The council consists of 12 appointed voting members who are interested and knowledgeable in mental health. No more than four members should be providers of direct mental health services.~~

~~(b) The council shall~~

~~(1) advise the division on the state mental health plans before implementation of these plans;~~

~~(2) periodically review all mental health services in the state, reports of which shall be prepared and submitted to the governor, the legislature, the department and the Comprehensive Health Advisory Council;~~

~~(3) conduct independent investigations and studies as may be necessary;~~

~~(4) recommend rules, regulations and standards for the administration of community mental health services;~~

~~(5) encourage coordination on a regional basis, of community mental health services to insure nonduplication and nonfragmentation of services.~~

~~(c) The council shall meet at the call of the chairman but shall meet at least once quarterly.~~

~~(d) Members of the council are not entitled to a salary, but are entitled to per diem, reimbursement for travel, and other expenses authorized by law for other boards.~~

Sec. 47.30.610. DEFINITIONS. In secs. 520 - 610 of this chapter

(1) "department" means the Department of Health and Social Services;

(2) "poverty area" means a district in which 15 per cent or

delete

47. 30.615. AS 18.07 is hereby repealed; however, the Comprehensive Health Advisory Council should continue to carry out its functions as a transitional measure until the establishment of a Statewide Health Coordinating Council as provided by PL 93-641.

1 more of the population, based upon 1970 census data, falls under 125
2 per cent of the Office of Economic Opportunity poverty guidelines.

3 *insert*
4 Sec. 47.30.620. SHORT TITLE. Sections 520 - 620 of this chapter

5 may be cited as the Community Mental Health Services Act.

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* Sec. 2. This Act takes effect July 1, 1975.

The Legislature of the State of Alaska
FISCAL NOTE

all

First Session - Ninth Legislature

I. REQUEST *SB24*
 Bill No. *HB-311*
 Title: Community Mental Health Services Act
 Requested by: Representative Hugh Malone Date: _____
 Return Date Requested: _____
 Agency: Health & Social Services Program: Division of Mental Health

II. FISCAL DETAIL
 Budget Request Unit(s) Affected: Community Operated Mental Health Cen
 A. EXPENDITURES: (Thousands of dollars)

OBJECT	FY 75	FY 76	FY 77	FY 78	FY 79	FY 80
100 PERSONAL SERVICES						
200 TRAVEL						
300 CONTRACTUAL	8.4	8.4	11.2	11.2	11.2	11.2
400 COMMODITIES						
500 EQUIPMENT						
600 LAND & STRUCTURES						
700 GRANTS, CLAIMS, ETC.	211.7	582.5	1239.2	2002.6	2782.0	3560.4
		(264.4)	(290.8)	(319.9)	(351.9)	(387.1)
TOTAL	220.1	590.9	1250.4	2013.8	2793.2	3571.6

B. FUNDING: (Thousands of dollars)

GENERAL FUND 90.10	220.1	590.9	1250.4	2013.8	2793.2	3571.6
FEDERAL FUNDS						
OTHER	62.2	166.9	368.7	601.5	834.3	1068.2

C. POSITIONS:

PERMANENT/TEMPORARY	3/	3/	3/	4/	4/	4/
MAN MONTHS (P./T.)	36/	36/	36/	48/	48/	48/

III. ANALYSIS (See Fiscal Note Preparation Instructions, Section III)

IV. ATTACHMENTS

V. DATE: 3-26-75 PREPARED BY: George F. Schneider

Original: Legislative Finance
 cc: Budget and Management
 Prime Sponsor (First Legislator Named)

POSITION PAPER
ON
HB 311

"An Act relating to community mental health services; and providing for an effective date."

This Act enables the State of Alaska to assist its local communities in planning, organizing and financing locally administered mental health services. It provides the Division of Mental Health with the necessary authority to ensure the most effective deployment and efficient utilization of mental health services.

The Department of Health and Social Services enthusiastically supports this Act. It provides the vehicle by which a departure from the utilization of hospitals as the primary treatment resource may be realized. It will bring us into the mainstream of the community mental health movement which began in 1963 and has since established its effectiveness on firm theoretical grounds.

The community mental health movement recognizes that services must be available at the locus of emergence of the problem. It recognizes that when treatment centers are remote from the community, their very remoteness is itself a barrier to their use. It recognizes that hospitalization is not the cure-all for these kinds of problems and that in many cases it is needed only for a very brief period.

This movement was given impetus as a result of the introduction of powerful medicines which enabled severe cases to be treated and stabilized in a matter of days instead of weeks. In most cases this eliminated the need for long term institutionalization. Along with the development of new medications came the development of a crisis intervention theory and a growing understanding of the role of the community and the family in the maintenance of good mental health.

Mental health problems have achieved a greater acceptance by the general public who have begun to take an interest in assuring adequate community mental health services.

In many states, these factors have led to a dramatic decline in the number of long term institutional beds. In some states consideration is being given to completely phasing out state hospitals. Although it is too early to project the long term effect of a community mental health program on Alaska's state hospital needs, it is almost certain to forestall the need for increasing the bed capacity of our two major institutions, Alaska Psychiatric Institute and Harborview Memorial Hospital. It may not lead to a decline in the number of beds at API or HMI, but may allow these institutions the necessary flexibility to shift their resources to programs serving a statewide need. Examples would be the psychiatric security program, an expanded treatment program for adolescents, and a more comprehensive program for children.

The implementation of this major addition to the mental health statutes, the first since 1959, will require funding support. This program will require matching general funds for a proportion of the community efforts. The Central Office of the Division of Mental Health will require additional staff to assist the Director in the management of this program.

We believe that Senate Bill 24, which adds section 47.30.605 providing for a Mental Health Advisory Council to advise and assist the Division of Mental Health in initiating and implementing community mental health services, substantially strengthens the Act. Mental Health programs are dependent upon active citizen participation and support. The Council would assist not only by their advice but could serve in an educational and evaluative capacity as well.

We also support the concept of 90% funding of designated "poverty areas". This provision will substantially increase the ability of remote areas to take advantage of the provisions of this Act.

The Fiscal Year 1974 Free Conference Committee Report stated that the Division of Mental Health should move from State-Operated towards Community-Operated Mental Health Centers through regulations and standards. The present policy for the provision of Community Mental Health services, with the exception of the centers in Ketchikan and Kodiak, has been to provide community services through Regional State-Operated Clinics. Ten communities, Seward, Kenai, Skagway, Sitka, Bethel, Barrow, Nome, The Tanana Chief's, Anchorage, and Juneau have made formal requests for locally controlled Mental Health services to the Division of Mental Health.

We also recommend the following change be made:

Page 7, line 4 - delete the word "nine" and substitute the word "twelve".

The Department of Health and Social Services strongly supports the concept of Community Mental Health and local control with the change recommended above, but believes a Community Mental Health Centers Act is necessary to provide directions and fiscal continuity required to sustain locally controlled Community Mental Health Centers. Thirty-six states now have a similar Act and the Federal Government is considering including as a requirement for funding Community Mental Health Centers, the necessity of such an Act being in force.

Recommended By:

James J. Scheraga
(Division Director)

3-26-75
(Date)

Approved By:

Fredrick McGinnis
Dep. (Commissioner)

4/3/75
(Date)

Comments by Governor's Office:

By: _____

(Date)

1 IN THE SENATE

BY CHANCE

2 SENATE BILL NO. 24

3 IN THE LEGISLATURE OF THE STATE OF ALASKA

4 NINTH LEGISLATURE - FIRST SESSION

5 A BILL

6 For an Act entitled: "An Act relating to community mental health services;
7 and providing for an effective date."

8 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

9 * Section 1. AS 47.30 is amended by adding new sections to read:

10 ARTICLE 5. COMMUNITY MENTAL HEALTH SERVICES.

11 Sec. 47.30.520. LEGISLATIVE PURPOSE. It is the purpose of the
12 legislature in enacting the Community Mental Health Services Act to
13 assist local communities in planning, organizing and financing commun-
14 ity mental health services through locally developed, administered and
15 controlled community mental health programs. It is further intended
16 to better utilize existing resources at both state and local levels in
17 order to:

18 (1) develop and implement plans for initiating maximum
19 mental health services based on demonstrated need for services in each
20 geographical planning area, as well as regionalized comprehensive
21 mental health services;

22 (2) improve the effectiveness of existing mental health
23 services;

24 (3) integrate state-operated and community mental health
25 programs into a unified mental health system;

26 (4) provide a means for participation by local communities
27 in the determination of the need for and the allocation of mental
28 health resources;

29 (5) establish a uniform ratio of local and state government

1 responsibility for financing mental health services;

2 (6) provide a means of allocating state mental health funds
3 according to community needs;

4 (7) encourage the full use of all existing public or private
5 agencies, facilities, personnel, and funds to accomplish these objec-
6 tives; and

7 (8) prevent unnecessary duplication and fragmentation of
8 services and expenditures.

9 Sec. 47.30.530. DUTIES OF DEPARTMENT. The department shall
10 administer the provisions of secs. 520 - 620 of this chapter and shall

11 (1) define and develop standards for various levels and
12 qualities of mental health care;

13 (2) provide fiscal and professional technical assistance in
14 planning, organizing, developing, implementing, and administering
15 local mental health services;

16 (3) develop budgets, receive and disburse state appropria-
17 tions and funds in accordance with the provisions of secs. 520 - 620
18 of this chapter;

19 (4) establish standards of education and experience for
20 professional, technical and administrative personnel employed in com-
21 munity mental health services;

22 (5) assist the community in establishing the organization
23 and operation of community mental health services;

24 (6) develop a standardized system for measuring and report-
25 ing to the department the types, quantities and quality of services;
26 and a cost accounting system which will demonstrate the cost of various
27 levels and qualities of care;

28 (7) provide each local community planning and services
29 delivery entity with statistics, reports, and other data relevant to

1 development of indices indicating the need for mental health services,
2 or relevant to evaluating the effectiveness of existing services;

3 (8) review each local community plan and require each plan
4 to include

5 (A) an affirmative showing that the most effective and
6 economic use will be made of all available public and private
7 resources in the community including careful consideration of the
8 most effective and economic alternative forms and patterns of
9 services;

10 (B) a five-year projection of needs, services and
11 resources; and

12 (C) adequate provisions for review and evaluation of
13 services provided in the local community;

14 (9) adopt regulations and establish priorities, after con-
15 sultation with local communities affected and in conjunction with a
16 state mental health advisory council, which are necessary to carry out
17 the purposes of secs. 520 - 620 of this chapter.

18 Sec. 47.30.540. ELIGIBLE LOCAL COMMUNITY ENTITIES. (a) A city
19 or borough government or other political subdivision of the state, a
20 nonprofit corporation, or a combination of these, is eligible to
21 receive funds and administer local programs under secs. 520 - 620 of
22 this chapter. In order to insure equitable access to funds and pro-
23 grams through the state, the department shall determine appropriate
24 geographical areas to be served by local programs in consultation with
25 representatives of the geographical areas in question.

26 (b) The entity designated by the department in the local area as
27 the organizational unit to receive funds under secs. 520 - 620 of this
28 chapter and to administer the program shall insure a broad base of
29 community support as evidenced by a governing board reasonably

1 representative of the professional, civic, and citizen groups in the
2 community. No more than two members, or 40 per cent of the membership,
3 whichever is greater, may be providers of services under the program.
4 In order to receive funds under secs. 520 - 620 of this chapter, a
5 local community entity shall agree to

6 (1) give priority to mental health programs and services
7 that have a maximum impact on other tax funded programs;

8 (2) furnish services through a qualified staff meeting
9 reasonable standards of experience and training;

10 (3) conform to a state cost accounting system showing the
11 true cost of services rendered, collect fees for services according to
12 a schedule based on an analysis of reasonable ability to pay, and pro-
13 vide that no person shall be refused services because of inability to
14 pay for those services;

15 (4) maintain adequate clinical and administrative records
16 and to furnish periodic reports to the department;

17 (5) furnish the department an annual report of the preceding
18 fiscal year, including an evaluation of the effectiveness of the
19 previous year's programs and their costs; and

20 (6) furnish the department each year a satisfactory annual
21 update of a long-range planning and budget statement that describes
22 program goals for the coming year, the steps and resources necessary
23 to implement the goals, the projected means by which these resources
24 will be secured and the procedures necessary to evaluate the program.

25 (c) Members of local governing boards may be reimbursed for
26 necessary travel expenses incurred in the organization and operation
27 of local programs as may be determined by the department.

28 Sec. 47.30.550. COST-SHARING FORMULA; LIMITATIONS. If the
29 department finds that it is necessary for the purposes of secs. 520 -

1 620 of this chapter, the department may enter into a contract with an
2 eligible community entity under which the department purchases commun-
3 ity mental health services from the entity in accordance with the
4 community entity's approved plan and secs. 520 - 620 of this chapter.
5 The department shall purchase the services by participating in 75 per
6 cent of the eligible costs of the services to be furnished under the
7 plan subject to the availability of state funds to the department for
8 implementing secs. 520 - 620 of this chapter.

9 Sec. 47.30.560. FUNDS FOR LOCAL PROGRAMS. The contracts for
10 services provided for in secs. 520 - 620 of this chapter shall be
11 reviewed, revised if necessary, and approved at the expiration of each
12 contract year. A contract shall be approved if the department finds
13 that the community entity has complied with its plan, secs. 520 - 620
14 of this chapter, and any applicable regulations adopted by the depart-
15 ment. Expenditures for the purchase of services shall be made in
16 accordance with the approved contract, budgets and program projections.

17 Sec. 47.30.570. ELIGIBLE COSTS; MAINTENANCE OF LOCAL EFFORT.
18 The department shall adopt regulations specifying the types of services
19 and program costs eligible for state participation. These regulations
20 shall include

21 (1) a provision excluding capital expenditures as eligible
22 costs; and

23 (2) a requirement that the community entity contractor or
24 applicant agrees as a condition of contract approval that it will not
25 supplant existing local fund support of community mental health ser-
26 vices with funds received under secs. 520 - 620 of this chapter and
27 that it will continue local funding support of community mental health
28 services, in any year in which it contracts with the department, at a
29 level that is at least equal to the local funding support in the

1 previous year.

2 Sec. 47.30.580. COMPREHENSIVE SERVICES. Plans and regulations
3 adopted under secs. 520 - 620 of this chapter shall allow local pro-
4 grams sufficient administrative and program flexibility so that local
5 community mental health programs may be joined with other programs
6 such as mental retardation programs, drug abuse programs, alcoholism
7 programs and comprehensive mental health services programs.

8 Sec. 47.30.590. PATIENT RIGHTS AND THE CONFIDENTIAL NATURE OF
9 RECORDS AND INFORMATION. The department shall adopt regulations to
10 assure patient rights and to safeguard the confidential nature of
11 records and information about the recipients of services provided
12 under secs. 520 - 620 of this chapter. The regulations shall require
13 that local community entities develop and include in any plan submitted
14 for approval adequate provisions for safeguarding confidential infor-
15 mation. The department's regulations shall provide for disclosure of
16 confidential information to mental health professionals providing
17 services to a recipient and to other appropriate service agencies when
18 it is in the defined best interests of the patient.

19 Sec. 47.30.600. APPLICABILITY TO EXISTING PROGRAMS. No local
20 community entity existing on January 1, 1974 that received state funds
21 for a community mental health services program in the fiscal year
22 ending June 30, 1974 may receive less state support through the pur-
23 chase of services under secs. 520 - 620 of this chapter in the fiscal
24 year ending June 30, 1975 than it received in the preceding fiscal
25 year. In order to assure the continuity of state support of existing
26 programs the department may waive requirements of secs. 520 - 620 of
27 this chapter in approving contracts with existing entities for the
28 fiscal year ending June 30, 1975, only.

29 Sec. 47.30.605. MENTAL HEALTH ADVISORY COUNCIL. (a) There shall

1 be a Mental Health Advisory Council appointed by the governor to advise
2 and assist the director of the division of mental health in initiating
3 and implementing community mental health services. The council con-
4 sists of nine appointed voting members who are interested and knowledge-
5 able in mental health. At least one but no more than two of the members
6 shall be members of the Department of Health and Social Services Advisory
7 Board. No more than three members should be providers of direct mental
8 health services.

9 (b) The council shall

10 (1) advise the division on the state mental health plans
11 before implementation of these plans;

12 (2) periodically review all mental health services in the
13 state, reports of which shall be prepared and submitted to the governor,
14 the legislature, the department and the Comprehensive Health Advisory
15 Council;

16 (3) conduct independent investigations and studies as may be
17 necessary;

18 (4) recommend rules, regulations and standards for the
19 administration of community mental health services;

20 (5) encourage coordination on a regional basis, of community
21 mental health services to insure nonduplication and nonfragmentation of
22 services.

23 (c) The council shall meet at the call of the chairman but shall
24 meet at least once quarterly.

25 (d) Members of the council are not entitled to a salary, but are
26 entitled to per diem, reimbursement for travel, and other expenses
27 authorized by law for other boards.

28 Sec. 47.30.610. DEFINITIONS. In secs. 520 - 610 of this chapter
29 "department" means the Department of Health and Social Services.

1 Sec. 47.30.620. SHORT TITLE. Sections 520 - 620 of this chapter
2 may be cited as the Community Mental Health Services Act.

3 * Sec. 2. This Act takes effect July 1, 1975.
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