

1 SENATE BILL 54

2 54TH LEGISLATURE - STATE OF NEW MEXICO - SECOND SESSION, 2020

3 INTRODUCED BY

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10 AN ACT

11 RELATING TO BEHAVIORAL HEALTH; ENACTING THE BEHAVIORAL HEALTH
12 COMMUNITY INTEGRATION ACT; PROVIDING COMMUNITY-BASED SUPPORT
13 SERVICES FOR ADULTS DIAGNOSED WITH SERIOUS MENTAL ILLNESS AND
14 YOUTH DIAGNOSED WITH SERIOUS EMOTIONAL DISTURBANCE; PROVIDING
15 POWERS AND DUTIES; CREATING THE BEHAVIORAL HEALTH COMMUNITY
16 INTEGRATION FUND; MAKING AN APPROPRIATION; DECLARING AN
17 EMERGENCY.

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19 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

20 SECTION 1. [NEW MATERIAL] SHORT TITLE.--This act may be
21 cited as the "Behavioral Health Community Integration Act".

22 SECTION 2. [NEW MATERIAL] DEFINITIONS.--As used in the
23 Behavioral Health Community Integration Act:

24 A. "comprehensive community-based mental health
25 system" means a system of care that includes mental and

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1 physical health services, rehabilitation services, employment
2 services, housing services, educational services, substance
3 abuse services, medical and dental care and other support
4 services with federal, state and local public and private
5 resources to enable persons to function outside of inpatient or
6 residential institutions to the maximum extent of their
7 capabilities, including services provided by local school
8 systems pursuant to the federal Individuals with Disabilities
9 Education Act;

10 B. "department" means the human services
11 department;

12 C. "division" means the behavioral health services
13 division of the department;

14 D. "fund" means the behavioral health community
15 integration fund;

16 E. "psychosocial rehabilitation services" means a
17 set of services designed to help a person in the target
18 population to achieve optimum functioning in the personal and
19 social dimensions of the person's life;

20 F. "serious emotional disturbance" means one or
21 more diagnosable behavioral, mental or emotional conditions as
22 defined in the most recent *Diagnostic and Statistical Manual of*
23 *Mental Disorders*, published by the American psychiatric
24 association, that result in functional impairment that
25 substantially interferes with or limits the role or functioning

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1 in family, school or community activities of a youth between
2 the ages of sixteen and twenty-two;

3 G. "serious mental illness" means one or more
4 diagnosable behavioral, mental or emotional conditions as
5 defined in the most recent *Diagnostic and Statistical Manual of*
6 *Mental Disorders*, published by the American psychiatric
7 association, which condition substantially interferes with or
8 limits one or more major life activities of an adult;

9 H. "support services" means a component of a
10 comprehensive community-based mental health system that
11 consists of outcome-focused services tailored to the needs of a
12 person in the target population;

13 I. "target population" means adults who have been
14 diagnosed with serious mental illness or youths between the
15 ages of sixteen and twenty-two who have been diagnosed within
16 the last year with serious emotional disturbance and includes
17 adults or youths who live in rural areas or are homeless;

18 J. "targeted case management" means a service that
19 assists a person to gain access to needed medical, social,
20 educational and other services and that ensures that services
21 are coordinated among all providers of such services;

22 K. "transitional housing" means up to eighteen
23 months of housing;

24 L. "urgent need" means circumstances of sufficient
25 concern that if not addressed within twenty-four hours could

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1 reasonably result in hospitalization, detention or
2 incarceration; and

3 M. "value-added service" means a service that is
4 not a medicaid-funded service that a medicaid managed care
5 organization or contractor may offer to a medicaid recipient.

6 SECTION 3. [NEW MATERIAL] DIVISION DUTIES--COMPREHENSIVE
7 SYSTEM--SUPPORT SERVICES.--The division shall design and
8 implement a comprehensive community-based mental health system
9 in communities throughout the state that provides support
10 services to achieve one or more of the following:

11 A. to prevent or reduce the likelihood of relapse
12 following discharge from inpatient care or recidivism following
13 release from detention or incarceration;

14 B. to correct, reduce or ameliorate the physical,
15 mental, cognitive or developmental effects of serious mental
16 illness or serious emotional disturbance;

17 C. to reduce or ameliorate the pain or suffering
18 caused by serious mental illness or serious emotional
19 disturbance;

20 D. to assist the person to achieve or maintain
21 maximum functional capacity in performing the activities of
22 daily living; or

23 E. to assist the person with life skills needed to
24 live independently in the community.

25 SECTION 4. [NEW MATERIAL] BEHAVIORAL HEALTH COMMUNITY

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1 INTEGRATION FUND CREATED--USES AND ADMINISTRATION OF FUND.--

2 A. The "behavioral health community integration
3 fund" is created as a nonreverting fund in the state treasury.
4 The fund consists of appropriations, value-added services
5 payments, gifts, grants, donations and any other money
6 deposited in the fund. Money in the fund shall be expended
7 only for the purposes specified in the Behavioral Health
8 Community Integration Act and as limited by the appropriation.
9 Expenditures from the fund shall be by warrant of the secretary
10 of finance and administration on vouchers signed by the
11 division director or the director's authorized representative.

12 B. Money in the fund shall be used to provide,
13 arrange for or assist with:

- 14 (1) targeted case management;
- 15 (2) transitional and long-term housing for the
16 target population; and
- 17 (3) psychosocial rehabilitation and support
18 services for the target population.

19 C. Money in the fund shall not be used to pay for
20 goods or services covered by medicaid or to match federal
21 funding for medicaid.

22 D. Expenses of administering the fund shall be paid
23 by the department.

24 SECTION 5. [NEW MATERIAL] CONTRACT REQUIREMENTS.--

25 A. Contracts awarded from the fund shall:

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- 1 (1) be for a period of at least four years;
- 2 (2) be awarded to contractors that demonstrate
- 3 the ability to achieve outcomes specified by the division;
- 4 (3) give preference to proposals for
- 5 communities that have few or no behavioral health providers or
- 6 support services; and
- 7 (4) allow innovative, flexible and creative
- 8 uses of local resources other than traditional providers of
- 9 behavioral health services.

10 B. The division may require contractors to

11 demonstrate in-kind or other support from the local community

12 where the contracted services will be provided or from

13 behavioral health providers or support services located

14 anywhere in the state.

15 C. The department shall enter into a contract for

16 procurement after evaluating competitive proposals and shall

17 not design requests for proposals to provide for only sole

18 source contracts. The department shall conduct its own

19 procurement, but shall conduct all procurement in accordance

20 with the Procurement Code; provided that Section 13-1-98.1 NMSA

21 1978 shall not apply to procurement pursuant to the Behavioral

22 Health Community Integration Act.

23 SECTION 6. [NEW MATERIAL] STANDARDS AND PERFORMANCE

24 MEASURES FOR CONTRACTS.--

25 A. The department shall promulgate standards and

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1 performance measures for contracts awarded pursuant to the
2 Behavioral Health Community Integration Act that, at a minimum,
3 require:

4 (1) identification and tracking of each person
5 served;

6 (2) acceptance of referrals from all sources
7 for persons in the target population;

8 (3) an assessment performed and support
9 services plan developed within no more than:

10 (a) twenty-four hours of referral for
11 persons in crisis;

12 (b) forty-eight hours prior to a
13 person's discharge from inpatient care or release from
14 detention or incarceration;

15 (c) five business days before a youth
16 leaves foster care; or

17 (d) two business days following referral
18 for all other persons served;

19 (4) the assignment of a community support
20 worker to be responsible for assisting in the assessment of the
21 person and in the development of the support services plan;

22 (5) the initiation of support services within
23 one calendar day of the assessment for persons with urgent
24 needs and within five calendar days for persons with non-urgent
25 needs;

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1 (6) immediate access to crisis stabilization
2 services, with twenty-four-hour telephone response and next
3 calendar day appointments; and

4 (7) continuing support for persons served.

5 B. Standards and performance measures for contracts
6 awarded pursuant to the Behavioral Health Community Integration
7 Act shall not be so stringent that only traditional providers
8 of behavioral health services can meet them.

9 C. Contractors shall be required to report outcomes
10 as determined by the department.

11 SECTION 7. [NEW MATERIAL] VALUE-ADDED SERVICES PAYMENT.--

12 A. The department shall require a medicaid managed
13 care organization or medicaid fee-for-service contractor to pay
14 three percent of the annual amount spent by the organization or
15 contractor for value-added behavioral health services into the
16 fund in quarterly installments.

17 B. Medicaid funds shall not be used to make the
18 quarterly payment to the fund required in this section.

19 SECTION 8. APPROPRIATION.--Seven million dollars
20 (\$7,000,000) is appropriated from the general fund to the
21 behavioral health community integration fund for expenditure in
22 fiscal year 2020 and subsequent fiscal years to contract for
23 support services as provided in the Behavioral Health Community
24 Integration Act. Any unexpended or unencumbered balance
25 remaining at the end of a fiscal year shall not revert to the

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1 general fund.

2 SECTION 9. EMERGENCY.--It is necessary for the public
3 peace, health and safety that this act take effect immediately.

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