

SENATE BILL No. 273

DIGEST OF INTRODUCED BILL

Citations Affected: IC 12-7-2-34; IC 12-21-7.

Synopsis: Indiana behavioral health commission. Establishes the Indiana behavioral health commission (commission). Specifies the membership of the commission. Requires the commission to prepare: (1) an interim report not later than October 1, 2020; and (2) a final report not later than October 1, 2022. Specifies the issues and topics to be discussed in the commission reports. Requires commission reports to be issued to the following parties: (1) The governor. (2) The legislative council. (3) Any other party specified by the commission chairperson. Requires commission reports to be issued in an electronic format. Abolishes the commission on December 31, 2022. Defines certain terms. Makes conforming amendments.

Effective: Upon passage.

Crider

January 9, 2020, read first time and referred to Committee on Health and Provider Services.



Introduced

Second Regular Session of the 121st General Assembly (2020)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2019 Regular Session of the General Assembly.

SENATE BILL No. 273

A BILL FOR AN ACT to amend the Indiana Code concerning human services.

Be it enacted by the General Assembly of the State of Indiana:

1 SECTION 1. IC 12-7-2-34, AS AMENDED BY P.L.116-2019,
2 SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3 UPON PASSAGE]: Sec. 34. "Commission" means the following:
4 (1) For purposes of IC 12-10-2, the meaning set forth in
5 IC 12-10-2-1.
6 (2) For purposes of IC 12-12-2, the meaning set forth in
7 IC 12-12-2-1.
8 (3) For purposes of IC 12-13-14, the meaning set forth in
9 IC 12-13-14-1.
10 (4) For purposes of IC 12-15-30.5, the meaning set forth in
11 IC 12-15-30.5-2.
12 (5) **For purposes of IC 12-21-7, the meaning forth in**
13 **IC 12-21-7-1.**
14 (6) For purposes of IC 12-28-1, the meaning set forth in
15 IC 12-28-1-3.
16 SECTION 2. IC 12-21-7 IS ADDED TO THE INDIANA CODE AS
17 A **NEW CHAPTER** TO READ AS FOLLOWS [EFFECTIVE UPON



1 PASSAGE]:

2 **Chapter 7. Indiana Behavioral Health Commission**

3 **Sec. 1. As used in this chapter, "commission" means the Indiana**
4 **behavioral health commission established by section 2 of this**
5 **chapter.**

6 **Sec. 2. The Indiana behavioral health commission is established.**

7 **Sec. 3. (a) The commission shall consist of the following**
8 **members:**

9 **(1) One (1) legislative member appointed by the speaker of the**
10 **house of representatives.**

11 **(2) One (1) legislative member appointed by the minority**
12 **leader of the house of representatives.**

13 **(3) One (1) legislative member appointed by the president pro**
14 **tempore of the senate.**

15 **(4) One (1) legislative member appointed by the minority**
16 **leader of the senate.**

17 **(5) The director of the division or the director's designee.**

18 **(6) The director of the office of Medicaid policy and planning**
19 **or the director's designee.**

20 **(7) The director of the department of child services or the**
21 **director's designee.**

22 **(8) The director of the department of education or the**
23 **director's designee.**

24 **(9) A representative from the office of the secretary of family**
25 **and social services.**

26 **(10) A representative from the Indiana school resource**
27 **officers association.**

28 **(11) Three (3) representatives from the following divisions of**
29 **a community mental health center:**

30 **(A) The adult division.**

31 **(B) The youth division.**

32 **(C) The addictions services division.**

33 **(12) A school based mental health coordinator.**

34 **(13) A representative from a local law enforcement agency.**

35 **(14) A representative from a mental health advocacy**
36 **association with statewide jurisdiction.**

37 **(15) A parent of a student who:**

38 **(A) is currently using; or**

39 **(B) has used;**

40 **school based mental health services.**

41 **(16) An adult who has received services from or through a**
42 **local community mental health services provider.**



(17) The mayor of an Indiana city with an existing mental health initiative.

(18) A representative from a local public safety agency.

(19) A representative from a state operated mental health facility.

(20) A licensed psychiatrist.

(21) A psychologist licensed under IC 25-33.

(22) An addictionologist.

(23) A representative affiliated with an emergency medical services provider.

(b) The secretary of state shall serve as the commission chairperson and shall appoint the commission members described in subsection (a) for whom an appointing authority has not been designated under subsection (a) or who are not ex officio members.

(c) A person appointed to the commission by the commission chairperson shall serve at the pleasure of the commission chairperson.

(d) Each member of the commission who is not a state employee is not entitled to the minimum salary per diem provided under IC 4-10-11-2.1(b). The member is, however, entitled to reimbursement for traveling expenses as provided under IC 4-13-1-4 and other expenses actually incurred in connection with the member's duties, as provided in the state policies and procedures established by the state department of administration and approved by the budget agency.

(e) Each member of the commission who is a state employee but who is not a member of the general assembly is entitled to reimbursement for traveling expenses as provided under IC 4-13-1-4 and other expenses actually incurred in connection with the member's duties, as provided in the state policies and procedures established by the Indiana department of administration and approved by the budget agency.

(f) Each member of the commission who is a member of the general assembly is entitled to receive the same per diem, mileage, and travel allowances paid to legislative members of interim study committees established by the legislative council. Per diem, mileage, and travel allowances paid under this subsection shall be paid from appropriations made to the division.

Sec. 4. (a) The commission shall prepare the following reports:

(1) An interim report due not later than October 1, 2020.

(2) A final report due not later than October 1, 2022.

(b) The reports described in subsection (a) must address issues



1 in the following four (4) areas:

2 (1) Assessment and inventory.

3 (2) Funding and data.

4 (3) Youth and families.

5 (4) System design and access.

6 (c) The respective assessment and inventory portions of the

7 reports described in subsection (a) must do the following:

8 (1) Conduct an assessment of behavioral health in Indiana. An

9 assessment performed under this subdivision must include an

10 evaluation of the following mental health issues in Indiana:

11 (A) Suicide.

12 (B) Mental health conditions and disorders.

13 (C) Substance use disorders.

14 (D) Childhood trauma.

15 (2) Evaluate barriers to mental health and substance use

16 disorder treatment in Indiana. An assessment performed

17 under this subdivision must include an evaluation of the

18 following:

19 (A) Mental health systems.

20 (B) Access to mental health systems.

21 (C) Mental health providers.

22 (D) Funding for mental health systems and providers.

23 (3) Evaluate other state and national mental health programs.

24 An evaluation performed under this subdivision must

25 consider best practices for the following issues:

26 (A) Suicide prevention.

27 (B) Early intervention for mental health related issues.

28 (C) Treatment for substance use disorder.

29 (4) Conduct an inventory and assessment of Indiana's

30 integrated, school based mental health service programs.

31 (d) The respective funding and data portions of the reports

32 described in subsection (a) must do the following:

33 (1) Review mental health and substance abuse funding

34 sources. A review conducted under this subdivision must

35 include a review of the following:

36 (A) Medicaid.

37 (B) Recovery works.

38 (C) Local tax revenue.

39 (D) Block grants.

40 (2) Make recommendations concerning funding priorities and

41 funding levels for mental health programs and services in

42 Indiana.



(3) Establish the cost of untreated mental illness.

(4) Evaluate the efficacy of the Data Assessment Registry Mental Health and Addiction (DARMHA) system and make recommendations for improving Indiana's current assessment and data system.

(e) The respective youth and families portions of the reports described in subsection (a) must do the following:

(1) Assess the impact of mental health and substance abuse issues on schools and the Indiana workforce. An assessment performed under this subdivision must include an evaluation of programs designed to improve transferrable skills.

(2) Prepare implementation recommendations from the 2018 Indiana School Safety Recommendations report that pertain to mental health and behavioral initiatives. A recommendation issued under this subdivision must provide additional steps designed to increase access to mental health and behavioral health services for students in kindergarten through grade 12 students in need.

(f) The respective system design and access portions of the reports described in subsection (a) must do the following:

(1) Recommend ways to improve access to a continuum of behavioral health services across Indiana. A recommendation issued under this subdivision must include a review of 440 IAC 4.1.

(2) Recommend options to develop, improve, and implement crisis response protocols for behavioral health emergencies.

(3) Review the implementation of:

(A) whole health model; and

(B) integrated care;

paradigms.

(4) Assess value based system design with safety net characteristics.

(5) Develop recommendations and strategies designed to encourage collaboration, transparency, and innovation in mental health care delivery.

(6) Assess how age, race, and geographic location affect access to behavioral and mental health treatment.

(g) The commission may, in addition to the topics described in subsections (c) through (f), discuss any other topic or issue related to the overall improvement of the behavioral and mental health of Indiana residents.

(h) The reports described under subsection (a) shall be issued to



1 **the following parties:**

2 **(1) The governor.**

3 **(2) The legislative council.**

4 **(3) Any other party specified by the commission chairperson.**

5 **(i) A commission report prepared under this section must be, as appropriate, submitted to the parties designated under subsection**

6 **(h) in an electronic format under IC 5-14-6.**

7

8 **Sec. 5. This chapter expires December 31, 2022.**

9 **SECTION 3. An emergency is declared for this act.**

