

By: Senator(s) Bryan

To: Public Health and  
WelfareCOMMITTEE SUBSTITUTE  
FOR  
SENATE BILL NO. 2610

1       AN ACT TO ENACT THE ROSE ISABEL WILLIAMS MENTAL HEALTH REFORM  
2 ACT OF 2020; TO CREATE THE TEMPORARY POSITION OF THE COORDINATOR  
3 OF MENTAL HEALTH ACCESSIBILITY AS A SUBDIVISION WITHIN, BUT  
4 INDEPENDENT OF, THE DEPARTMENT OF FINANCE AND ADMINISTRATION; TO  
5 DEFINE TERMS; TO AUTHORIZE THE GOVERNOR TO APPOINT A COORDINATOR  
6 OF MENTAL HEALTH ACCESSIBILITY; TO REQUIRE THE COORDINATOR TO  
7 PERFORM A COMPREHENSIVE REVIEW OF THE MENTAL HEALTH SYSTEM, TO  
8 CONSULT WITH CERTAIN DEPARTMENTS AND ENTITIES, AND TO REVIEW THE  
9 QUARTERLY FINANCIAL REPORTS AND STATUS REPORTS OF THE INDIVIDUAL  
10 COMMUNITY MENTAL HEALTH CENTERS; TO REQUIRE THE COORDINATOR TO  
11 DETERMINE WHERE IN ANY COUNTY, OR GEOGRAPHIC AREA WITHIN A COUNTY,  
12 THE DELIVERY OR AVAILABILITY OF MENTAL HEALTH SERVICES ARE  
13 INADEQUATE AND TO REPORT ON THE STATUS OF THE MENTAL HEALTH SYSTEM  
14 TO CERTAIN GOVERNMENTAL AUTHORITIES; TO AUTHORIZE THE COORDINATOR  
15 TO HIRE STAFF; TO AUTHORIZE THE COORDINATOR TO INSPECT FACILITIES  
16 WITHIN THE MENTAL HEALTH SYSTEM, TO INTERVIEW CERTAIN PERSONS, AND  
17 TO ACCESS CERTAIN PROGRAMS, SERVICES, DOCUMENTS AND MATERIALS; TO  
18 AUTHORIZE THE COORDINATOR TO APPOINT A COMMITTEE; TO REQUIRE THE  
19 COORDINATOR TO COMMUNICATE WITH THE COUNTY BOARD OF SUPERVISORS  
20 AND THE REGIONAL COMMISSION FOR THE COUNTY OR GEOGRAPHIC AREA  
21 WHERE MENTAL HEALTH SERVICES ARE INADEQUATE TO DETERMINE IF A PLAN  
22 IS BEING EXECUTED OR DEVELOPED TO INCREASE ACCESS TO MENTAL HEALTH  
23 SERVICES; TO HAVE THE COORDINATOR ASSESS THE VIABILITY OF ANY  
24 PLAN; TO REQUIRE THE COORDINATOR, WHEN A PLAN IS DETERMINED TO BE  
25 INSUFFICIENT, TO DEVELOP AND IMPLEMENT HIS OR HER OWN PLAN TO  
26 PROVIDE MENTAL HEALTH SERVICES TO THE COUNTY OR GEOGRAPHIC AREA  
27 WHERE MENTAL HEALTH SERVICES ARE INADEQUATE; TO AUTHORIZE THE  
28 COORDINATOR TO REASSIGN THE COUNTY OR GEOGRAPHIC AREA WHERE MENTAL  
29 HEALTH SERVICES ARE INADEQUATE TO ANOTHER REGIONAL COMMISSION, THE  
30 DEPARTMENT OF MENTAL HEALTH, OR A NONPROFIT ENTITY FOR THE  
31 PROVISION OF MENTAL HEALTH SERVICES; TO REQUIRE CERTAIN AGENCIES  
32 AND THE REGIONAL COMMISSIONS TO COOPERATE WITH THE COORDINATOR; TO  
33 AMEND SECTION 41-4-7, MISSISSIPPI CODE OF 1972, TO AUTHORIZE THE  
34 DEPARTMENT OF MENTAL HEALTH TO PROVIDE MENTAL HEALTH SERVICES TO



35 ANY COUNTY OR GEOGRAPHIC AREA REASSIGNED TO THE DEPARTMENT BY THE  
36 COORDINATOR AND TO PROMULGATE ANY RULES AND REGULATIONS REQUESTED  
37 BY THE COORDINATOR; TO AMEND SECTION 41-19-33, MISSISSIPPI CODE OF  
38 1972, TO CONFORM; AND FOR RELATED PURPOSES.

39 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

40 **SECTION 1.** This act shall be known and may be cited as the  
41 Rose Isabel Williams Mental Health Reform Act of 2020. The goal  
42 of the act is to reform the current Mississippi mental health  
43 delivery system so that necessary services, supports and  
44 operational structures for all its citizens with mental illness  
45 and/or alcohol and drug dependence and/or comorbidity, whether  
46 children, youth or adults, are accessible and delivered preferably  
47 in the communities where these citizens live. To accomplish this  
48 goal, this act provides for a Coordinator of Mental Health  
49 Accessibility with the power and duties set forth in this act.

50 **SECTION 2.** As used in this act, the following terms shall  
51 have the following meanings, unless the context clearly indicates  
52 a different meaning:

53 (a) "Community mental health center" means a facility  
54 authorized under Section 41-19-33.

55 (b) "Mental health services" shall include all services  
56 offered by the mental health system in Mississippi, including, but  
57 not limited to, the following:

58 (i) Community mental health services, including:  
59 1. Programs of assertive community treatment;  
60 2. Mobile crisis response services;  
61 3. Crisis stabilization units;





90 (ii) In making the appointment, the Governor shall  
91 consult with the Department of Mental Health, the Division of  
92 Medicaid, the regional commissions and any advocacy groups that he  
93 determines to be necessary.

94 (c) The temporary position of Coordinator of Mental  
95 Health Accessibility shall dissolve on June 30, 2023.

100 (3) The coordinator shall have a master's degree, doctoral  
101 degree or juris doctorate from an accredited institution of higher  
102 learning and not have less than five (5) years of professional  
103 experience.

104        **SECTION 4.** The coordinator shall have the following powers  
105 and duties:

106 (a) To perform a comprehensive review of Mississippi's  
107 mental health system to determine whether the mental health  
108 services, to include community mental health services, are offered  
109 in each county and available to the entire population of each  
110 county, especially to those with serious and persistent mental  
111 illness.

112 (b) To review the adequacy and quality of the  
113 individualized supports and services provided to persons  
114 discharged from the State Hospital or at risk of  
115 institutionalization throughout the state.

116 (c) To review the quarterly financial reports and  
117 status reports of the individual community mental health centers  
118 described in Section 41-19-33(3)(b).

119 (d) To consult with the Special Master appointed in the  
120 United States of America v. State of Mississippi, No.  
121 3:16-CV-622-CWR-FKB (S.D. Miss. Feb. 25, 2020), the Department of  
122 Mental Health, the Division of Medicaid, the Department of  
123 Rehabilitation Services, the Department of Health, county boards  
124 of supervisors, regional commissions, community mental health  
125 centers, mental health advocates, community leaders and any other  
126 necessary parties or entities, both private and governmental,  
127 regarding the status of the services offered by Mississippi's  
128 mental health system.

129 (e) To determine where in any county, or geographic  
130 area within a county, the delivery or availability of mental  
131 health services are inadequate.

132 (f) To determine whether each community mental health  
133 center has sufficient funds to provide the required mental health  
134 services.

135 (g) To report on the status of the mental health system  
136 quarterly to the Governor, the Lieutenant Governor and the Speaker

137 of the House. The coordinator shall deliver the quarterly status  
138 report to the Secretary of the Senate and the Clerk of the House  
139 who shall disseminate the report to the appropriate members.

140       **SECTION 5.** In fulfilling the responsibilities of this act,  
141 the coordinator may, subject to available appropriations:

142           (a) Hire the deputies, assistants and staff needed for  
143 the performance of his or her duties under this act. The  
144 coordinator, in consultation with the State Personnel Board, shall  
145 set the compensation of any hired employees from any funds made  
146 available for that purpose. The Department of Mental Health, upon  
147 request from the coordinator, shall supplement the administrative  
148 and support staff of the subdivision. The coordinator shall have  
149 complete and exclusive operational control over any staff provided  
150 by the Department of Mental Health under this paragraph (a);

151           (b) Enter any part of the mental health system,  
152 including any facility or building used to provide mental health  
153 services.

154           (c) Interview, on a confidential basis or otherwise,  
155 persons and employees in the mental health system.

156           (d) Access services, documents, records, programs and  
157 materials as necessary to assess the status of the mental health  
158 system, subject to the Health Insurance Portability and  
159 Accountability Act, as amended, and related regulations.

160           (e) Recommend changes to any portion of the mental  
161 health system either in the coordinator's status reports or to the



162 board(s) of supervisors or regional commissions or to the  
163 Department of Mental Health or as otherwise determined to be  
164 necessary by the coordinator.

165 (f) Develop and implement a plan to provide access to  
166 mental health services in any county, or geographic area within a  
167 county, where services are determined to be inadequate, if  
168 required by Section 5 of this act.

169 (g) Communicate with any governmental entity as is  
170 necessary to fulfill the coordinator's duties under this act.

171 (h) Perform any other actions as the coordinator deems  
172 necessary to fulfill the coordinator's duties under this act.

173 **SECTION 6.** (1) When the coordinator determines that a  
174 county or a geographic area within a county offers inadequate  
175 mental health services, the coordinator shall inform the board(s)  
176 of supervisors and the regional commission of the geographic areas  
177 where the services are inadequate.

178 (2) When the coordinator determines services are inadequate,  
179 the coordinator shall determine if there is a plan in place or a  
180 plan being developed to increase access to mental health services  
181 in that county or the geographic area of the county where mental  
182 health services are inadequate and shall assess the viability of  
183 the plan, including its sufficiency to address the inadequacy of  
184 the available mental health services.

185 (3) If there is no plan in place or being developed, the  
186 coordinator may allow the county board of supervisors or the

187 regional commission a reasonable time to develop and implement a  
188 plan.

189 (4) If the coordinator determines that the plan is or will  
190 be insufficient to provide mental health services to the  
191 population of the county or the geographic area within the county,  
192 the coordinator shall develop and implement a plan to facilitate  
193 an increased access to mental health services by:

194 (a) Requiring the regional commission to reassign the  
195 county that has inadequate mental health services to a different  
196 regional commission if the regional commission to which the county  
197 will be reassigned is willing to accept the county; or

198 (b) Requiring the regional commission to reassign the  
199 county or geographic area that has inadequate mental health  
200 services to the Board of Mental Health for the provision of mental  
201 health services; or

202 (c) Arranging for a nonprofit entity to provide  
203 sufficient mental health services to the county or the geographic  
204 area that has inadequate mental health services.

205 **SECTION 7.** The Department of Mental Health, the regional  
206 commissions, the Division of Medicaid, the Department of  
207 Rehabilitation Services, the Department of Health, and the PEER  
208 Committee shall cooperate with the coordinator under this act and  
209 shall allow the coordinator or his or her staff to, as it relates  
210 to the provision of mental health services:



211 (i) Enter any part of the mental health system,  
212 including any facility or building used to provide mental health  
213 services;

214 (ii) Interview any person employed by or receiving  
215 services from the respective entity; and

216 (iii) Access services, documents, records,

217 programs and materials as necessary to assess the status of the  
218 mental health system.

219           **SECTION 8.** Section 41-4-7, Mississippi Code of 1972, is  
220       amended as follows:

221 41-4-7. The State Board of Mental Health shall have the  
222 following powers and duties:

223 (a) To appoint a full-time Executive Director of the  
224 Department of Mental Health, who shall be employed by the board  
225 and shall serve as executive secretary to the board. The first  
226 director shall be a duly licensed physician with special interest  
227 and competence in psychiatry, and shall possess a minimum of three  
228 (3) years' experience in clinical and administrative psychiatry.

229 Subsequent directors shall possess at least a master's degree or  
230 its equivalent, and shall possess at least ten (10) years'  
231 administrative experience in the field of mental health. The  
232

233 (b) To appoint a Medical Director for the Department of  
234 Mental Health. The medical director shall provide clinical  
235 oversight in the implementation of evidence-based and best

236 practices; provide clinical leadership in the integration of  
237 mental health, intellectual disability and addiction services with  
238 community partners in the public and private sectors; and provide  
239 oversight regarding standards of care. The medical director shall  
240 serve at the will and pleasure of the board, and will undergo an  
241 annual review of job performance and future service to the  
242 department;

243 (c) To cooperate with the Strategic Planning and Best  
244 Practices Committee created in Section 41-4-10, Mississippi Code  
245 of 1972, in establishing and implementing its state strategic  
246 plan;

247 (d) To develop a strategic plan for the development of  
248 services for persons with mental illness, persons with  
249 developmental disabilities and other clients of the public mental  
250 health system. Such strategic planning program shall require that  
251 the board, acting through the Strategic Planning and Best  
252 Practices Committee, perform the following functions respecting  
253 the delivery of services:

254 (i) Establish measures for determining the  
255 efficiency and effectiveness of the services specified in Section  
256 41-4-1(2);

257 (ii) Conducting studies of community-based care in  
258 other jurisdictions to determine which services offered in these  
259 jurisdictions have the potential to provide the citizens of



260 Mississippi with more effective and efficient community-based  
261 care;

262 (iii) Evaluating the efficiency and effectiveness  
263 of the services specified in Section 41-4-1(2);

264 (iv) Recommending to the Legislature by January 1,  
265 2014, any necessary additions, deletions or other changes  
266 necessary to the services specified in Section 41-4-1(2);

267 (v) Implementing by July 1, 2012, a system of  
268 performance measures for the services specified in Section  
269 41-4-1(2);

270 (vi) Recommending to the Legislature any changes  
271 that the department believes are necessary to the current laws  
272 addressing civil commitment;

273 (vii) Conducting any other activities necessary to  
274 the evaluation and study of the services specified in Section  
275 41-4-1(2);

276 (viii) Assisting in conducting all necessary  
277 strategic planning for the delivery of all other services of the  
278 department. Such planning shall be conducted so as to produce a  
279 single strategic plan for the services delivered by the public  
280 mental health system and shall establish appropriate mission  
281 statements, goals, objectives and performance indicators for all  
282 programs and services of the public mental health system. For  
283 services other than those specified in Section 41-4-1(2), the



284 committee shall recommend to the State Board of Mental Health a  
285 strategic plan that the board may adopt or modify;

286 (e) To set up state plans for the purpose of  
287 controlling and treating any and all forms of mental and emotional  
288 illness, alcoholism, drug misuse and developmental disabilities;

289 (f) [Repealed]

290 (g) To enter into contracts with any other state or  
291 federal agency, or with any private person, organization or group  
292 capable of contracting, if it finds such action to be in the  
293 public interest;

294 (h) To collect reasonable fees for its services;  
295 however, if it is determined that a person receiving services is  
296 unable to pay the total fee, the department shall collect any  
297 amount such person is able to pay;

298 (i) To certify, coordinate and establish minimum  
299 standards and establish minimum required services, as specified in  
300 Section 41-4-1(2), for regional mental health and intellectual  
301 disability commissions and other community service providers for  
302 community or regional programs and services in adult mental  
303 health, children and youth mental health, intellectual  
304 disabilities, alcoholism, drug misuse, developmental disabilities,  
305 compulsive gambling, addictive disorders and related programs  
306 throughout the state. Such regional mental health and  
307 intellectual disability commissions and other community service  
308 providers shall, on or before July 1 of each year, submit an



309 annual operational plan to the State Department of Mental Health  
310 for approval or disapproval based on the minimum standards and  
311 minimum required services established by the department for  
312 certification and itemize the services specified in Section  
313 41-4-1(2). As part of the annual operation plan required by this  
314 paragraph (i) submitted by any regional community mental health  
315 center or by any other reasonable certification deemed acceptable  
316 by the department, the community mental health center shall state  
317 those services specified in Section 41-4-1(2) that it will provide  
318 and also those services that it will not provide. If the  
319 department finds deficiencies in the plan of any regional  
320 commission or community service provider based on the minimum  
321 standards and minimum required services established for  
322 certification, the department shall give the regional commission  
323 or community service provider a six-month probationary period to  
324 bring its standards and services up to the established minimum  
325 standards and minimum required services. After the six-month  
326 probationary period, if the department determines that the  
327 regional commission or community service provider still does not  
328 meet the minimum standards and minimum required services  
329 established for certification, the department may remove the  
330 certification of the commission or provider and from and after  
331 July 1, 2011, the commission or provider shall be ineligible for  
332 state funds from Medicaid reimbursement or other funding sources  
333 for those services. However, the department shall not mandate a



334 standard or service, or decertify a regional commission or  
335 community service provider for not meeting a standard or service,  
336 if the standard or service does not have funding appropriated by  
337 the Legislature or have a state, federal or local funding source  
338 identified by the department. No county shall be required to levy  
339 millage to provide a mandated standard or service above the  
340 minimum rate required by Section 41-19-39. After the six-month  
341 probationary period, the department may identify an appropriate  
342 community service provider to provide any core services in that  
343 county that are not provided by a community mental health center.  
344 However, the department shall not offer reimbursement or other  
345 accommodations to a community service provider of core services  
346 that were not offered to the decertified community mental health  
347 center for the same or similar services. The State Board of  
348 Mental Health shall promulgate rules and regulations necessary to  
349 implement the provisions of this paragraph (i), in accordance with  
350 the Administrative Procedures Law (Section 25-43-1.101 et seq.);

351 (j) To establish and promulgate reasonable minimum  
352 standards for the construction and operation of state and all  
353 Department of Mental Health certified facilities, including  
354 reasonable minimum standards for the admission, diagnosis, care,  
355 treatment, transfer of patients and their records, and also  
356 including reasonable minimum standards for providing day care,  
357 outpatient care, emergency care, inpatient care and follow-up  
358 care, when such care is provided for persons with mental or



359 emotional illness, an intellectual disability, alcoholism, drug  
360 misuse and developmental disabilities;

361 (k) To implement best practices for all services  
362 specified in Section 41-4-1(2), and to establish and implement all  
363 other services delivered by the Department of Mental Health. To  
364 carry out this responsibility, the board shall require the  
365 department to establish a division responsible for developing best  
366 practices based on a comprehensive analysis of the mental health  
367 environment to determine what the best practices for each service  
368 are. In developing best practices, the board shall consider the  
369 cost and benefits associated with each practice with a goal of  
370 implementing only those practices that are cost-effective  
371 practices for service delivery. Such best practices shall be  
372 utilized by the board in establishing performance standards and  
373 evaluations of the community mental health centers' services  
374 required by paragraph (d) of this section;

375 (l) To assist community or regional programs consistent  
376 with the purposes of this chapter by making grants and contracts  
377 from available funds;

378 (m) To establish and collect reasonable fees for  
379 necessary inspection services incidental to certification or  
380 compliance;

381 (n) To accept gifts, trusts, bequests, grants,  
382 endowments or transfers of property of any kind;



383 (o) To receive monies coming to it by way of fees for  
384 services or by appropriations;

385 (p) To serve as the single state agency in receiving  
386 and administering any and all funds available from any source for  
387 the purpose of service delivery, training, research and education  
388 in regard to all forms of mental illness, intellectual  
389 disabilities, alcoholism, drug misuse and developmental  
390 disabilities, unless such funds are specifically designated to a  
391 particular agency or institution by the federal government, the  
392 Mississippi Legislature or any other grantor;

393 (q) To establish mental health holding centers for the  
394 purpose of providing short-term emergency mental health treatment,  
395 places for holding persons awaiting commitment proceedings or  
396 awaiting placement in a state mental health facility following  
397 commitment, and for diverting placement in a state mental health  
398 facility. These mental health holding facilities shall be readily  
399 accessible, available statewide, and be in compliance with  
400 emergency services' minimum standards. They shall be  
401 comprehensive and available to triage and make appropriate  
402 clinical disposition, including the capability to access inpatient  
403 services or less restrictive alternatives, as needed, as  
404 determined by medical staff. Such facility shall have medical,  
405 nursing and behavioral services available on a  
406 twenty-four-hour-a-day basis. The board may provide for all or  
407 part of the costs of establishing and operating the holding

408 centers in each district from such funds as may be appropriated to  
409 the board for such use, and may participate in any plan or  
410 agreement with any public or private entity under which the entity  
411 will provide all or part of the costs of establishing and  
412 operating a holding center in any district;

413 (r) To certify/license case managers, mental health  
414 therapists, intellectual disability therapists, mental  
415 health/intellectual disability program administrators, addiction  
416 counselors and others as deemed appropriate by the board. Persons  
417 already professionally licensed by another state board or agency  
418 are not required to be certified/licensed under this section by  
419 the Department of Mental Health. The department shall not use  
420 professional titles in its certification/licensure process for  
421 which there is an independent licensing procedure. Such  
422 certification/licensure shall be valid only in the state mental  
423 health system, in programs funded and/or certified by the  
424 Department of Mental Health, and/or in programs certified/licensed  
425 by the State Department of Health that are operated by the state  
426 mental health system serving persons with mental illness, an  
427 intellectual disability, a developmental disability or addictions,  
428 and shall not be transferable;

429 (s) To develop formal mental health worker  
430 qualifications for regional mental health and intellectual  
431 disability commissions and other community service providers. The  
432 State Personnel Board shall develop and promulgate a recommended



433 salary scale and career ladder for all regional mental  
434 health/intellectual disability center therapists and case managers  
435 who work directly with clients. The State Personnel Board shall  
436 also develop and promulgate a career ladder for all direct care  
437 workers employed by the State Department of Mental Health;

438 (t) The employees of the department shall be governed  
439 by personnel merit system rules and regulations, the same as other  
440 employees in state services;

441 (u) To establish such rules and regulations as may be  
442 necessary in carrying out the provisions of this chapter,  
443 including the establishment of a formal grievance procedure to  
444 investigate and attempt to resolve consumer complaints;

445 (v) To grant easements for roads, utilities and any  
446 other purpose it finds to be in the public interest;

447 (w) To survey statutory designations, building markers  
448 and the names given to mental health/intellectual disability  
449 facilities and proceedings in order to recommend deletion of  
450 obsolete and offensive terminology relative to the mental  
451 health/intellectual disability system. Based upon a  
452 recommendation of the executive director, the board shall have the  
453 authority to name/ rename any facility operated under the auspices  
454 of the Department of Mental Health for the sole purpose of  
455 deleting such terminology;

456 (x) To ensure an effective case management system  
457 directed at persons who have been discharged from state and



458 private psychiatric hospitals to ensure their continued well-being  
459 in the community;

460 (y) To develop formal service delivery standards  
461 designed to measure the quality of services delivered to community  
462 clients, as well as the timeliness of services to community  
463 clients provided by regional mental health/intellectual disability  
464 commissions and other community services providers;

465 (z) To establish regional state offices to provide  
466 mental health crisis intervention centers and services available  
467 throughout the state to be utilized on a case-by-case emergency  
468 basis. The regional services director, other staff and delivery  
469 systems shall meet the minimum standards of the Department of  
470 Mental Health;

471 (aa) To require performance contracts with community  
472 mental health/intellectual disability service providers to contain  
473 performance indicators to measure successful outcomes, including  
474 diversion of persons from inpatient psychiatric hospitals,  
475 rapid/timely response to emergency cases, client satisfaction with  
476 services and other relevant performance measures;

477 (bb) To enter into interagency agreements with other  
478 state agencies, school districts and other local entities as  
479 determined necessary by the department to ensure that local mental  
480 health service entities are fulfilling their responsibilities to  
481 the overall state plan for behavioral services;



482 (cc) To establish and maintain a toll-free grievance  
483 reporting telephone system for the receipt and referral for  
484 investigation of all complaints by clients of state and community  
485 mental health/intellectual disability facilities;

486 (dd) To establish a peer review/quality assurance  
487 evaluation system that assures that appropriate assessment,  
488 diagnosis and treatment is provided according to established  
489 professional criteria and guidelines;

490 (ee) To develop and implement state plans for the  
491 purpose of assisting with the care and treatment of persons with  
492 Alzheimer's disease and other dementia. This plan shall include  
493 education and training of service providers, caregivers in the  
494 home setting and others who deal with persons with Alzheimer's  
495 disease and other dementia, and development of adult day care,  
496 family respite care and counseling programs to assist families who  
497 maintain persons with Alzheimer's disease and other dementia in  
498 the home setting. No agency shall be required to provide any  
499 services under this section until such time as sufficient funds  
500 have been appropriated or otherwise made available by the  
501 Legislature specifically for the purposes of the treatment of  
502 persons with Alzheimer's and other dementia;

503 (ff) Working with the advice and consent of the  
504 administration of Ellisville State School, to enter into  
505 negotiations with the Economic Development Authority of Jones  
506 County for the purpose of negotiating the possible exchange, lease

507 or sale of lands owned by Ellisville State School to the Economic  
508 Development Authority of Jones County. It is the intent of the  
509 Mississippi Legislature that such negotiations shall ensure that  
510 the financial interest of the persons with an intellectual  
511 disability served by Ellisville State School will be held  
512 paramount in the course of these negotiations. The Legislature  
513 also recognizes the importance of economic development to the  
514 citizens of the State of Mississippi and Jones County, and  
515 encourages fairness to the Economic Development Authority of Jones  
516 County. Any negotiations proposed which would result in the  
517 recommendation for exchange, lease or sale of lands owned by  
518 Ellisville State School must have the approval of the State Board  
519 of Mental Health. The State Board of Mental Health may and has  
520 the final authority as to whether or not these negotiations result  
521 in the exchange, lease or sale of the properties it currently  
522 holds in trust for persons with an intellectual disability served  
523 at Ellisville State School.

524 If the State Board of Mental Health authorizes the sale of  
525 lands owned by Ellisville State School, as provided for under this  
526 paragraph (ff), the monies derived from the sale shall be placed  
527 into a special fund that is created in the State Treasury to be  
528 known as the "Ellisville State School Client's Trust Fund." The  
529 principal of the trust fund shall remain inviolate and shall never  
530 be expended. Any interest earned on the principal may be expended  
531 solely for the benefits of clients served at Ellisville State



532 School. The State Treasurer shall invest the monies of the trust  
533 fund in any of the investments authorized for the Mississippi  
534 Prepaid Affordable College Tuition Program under Section 37-155-9,  
535 and those investments shall be subject to the limitations  
536 prescribed by Section 37-155-9. Unexpended amounts remaining in  
537 the trust fund at the end of a fiscal year shall not lapse into  
538 the State General Fund, and any interest earned on amounts in the  
539 trust fund shall be deposited to the credit of the trust fund.  
540 The administration of Ellisville State School may use any interest  
541 earned on the principal of the trust fund, upon appropriation by  
542 the Legislature, as needed for services or facilities by the  
543 clients of Ellisville State School. Ellisville State School shall  
544 make known to the Legislature, through the Legislative Budget  
545 Committee and the respective Appropriations Committees of the  
546 House and Senate, its proposed use of interest earned on the  
547 principal of the trust fund for any fiscal year in which it  
548 proposes to make expenditures thereof. The State Treasurer shall  
549 provide Ellisville State School with an annual report on the  
550 Ellisville State School Client's Trust Fund to indicate the total  
551 monies in the trust fund, interest earned during the year,  
552 expenses paid from the trust fund and such other related  
553 information.

554 Nothing in this section shall be construed as applying to or  
555 affecting mental health/intellectual disability services provided  
556 by hospitals as defined in Section 41-9-3(a), and/or their



557       subsidiaries and divisions, which hospitals, subsidiaries and  
558       divisions are licensed and regulated by the Mississippi State  
559       Department of Health unless such hospitals, subsidiaries or  
560       divisions voluntarily request certification by the Mississippi  
561       State Department of Mental Health.

562           All new programs authorized under this section shall be  
563       subject to the availability of funds appropriated therefor by the  
564       Legislature;

565               (gg) Working with the advice and consent of the  
566       administration of Boswell Regional Center, to enter into  
567       negotiations with the Economic Development Authority of Simpson  
568       County for the purpose of negotiating the possible exchange, lease  
569       or sale of lands owned by Boswell Regional Center to the Economic  
570       Development Authority of Simpson County. It is the intent of the  
571       Mississippi Legislature that such negotiations shall ensure that  
572       the financial interest of the persons with an intellectual  
573       disability served by Boswell Regional Center will be held  
574       paramount in the course of these negotiations. The Legislature  
575       also recognizes the importance of economic development to the  
576       citizens of the State of Mississippi and Simpson County, and  
577       encourages fairness to the Economic Development Authority of  
578       Simpson County. Any negotiations proposed which would result in  
579       the recommendation for exchange, lease or sale of lands owned by  
580       Boswell Regional Center must have the approval of the State Board  
581       of Mental Health. The State Board of Mental Health may and has



582 the final authority as to whether or not these negotiations result  
583 in the exchange, lease or sale of the properties it currently  
584 holds in trust for persons with an intellectual disability served  
585 at Boswell Regional Center. In any such exchange, lease or sale  
586 of such lands owned by Boswell Regional Center, title to all  
587 minerals, oil and gas on such lands shall be reserved, together  
588 with the right of ingress and egress to remove same, whether such  
589 provisions be included in the terms of any such exchange, lease or  
590 sale or not.

591 If the State Board of Mental Health authorizes the sale of  
592 lands owned by Boswell Regional Center, as provided for under this  
593 paragraph (gg), the monies derived from the sale shall be placed  
594 into a special fund that is created in the State Treasury to be  
595 known as the "Boswell Regional Center Client's Trust Fund." The  
596 principal of the trust fund shall remain inviolate and shall never  
597 be expended. Any earnings on the principal may be expended solely  
598 for the benefits of clients served at Boswell Regional Center.  
599 The State Treasurer shall invest the monies of the trust fund in  
600 any of the investments authorized for the Mississippi Prepaid  
601 Affordable College Tuition Program under Section 37-155-9, and  
602 those investments shall be subject to the limitations prescribed  
603 by Section 37-155-9. Unexpended amounts remaining in the trust  
604 fund at the end of a fiscal year shall not lapse into the State  
605 General Fund, and any earnings on amounts in the trust fund shall  
606 be deposited to the credit of the trust fund. The administration



607 of Boswell Regional Center may use any earnings on the principal  
608 of the trust fund, upon appropriation by the Legislature, as  
609 needed for services or facilities by the clients of Boswell  
610 Regional Center. Boswell Regional Center shall make known to the  
611 Legislature, through the Legislative Budget Committee and the  
612 respective Appropriations Committees of the House and Senate, its  
613 proposed use of the earnings on the principal of the trust fund  
614 for any fiscal year in which it proposes to make expenditures  
615 thereof. The State Treasurer shall provide Boswell Regional  
616 Center with an annual report on the Boswell Regional Center  
617 Client's Trust Fund to indicate the total monies in the trust  
618 fund, interest and other income earned during the year, expenses  
619 paid from the trust fund and such other related information.

620 Nothing in this section shall be construed as applying to or  
621 affecting mental health/intellectual disability services provided  
622 by hospitals as defined in Section 41-9-3(a), and/or their  
623 subsidiaries and divisions, which hospitals, subsidiaries and  
624 divisions are licensed and regulated by the Mississippi State  
625 Department of Health unless such hospitals, subsidiaries or  
626 divisions voluntarily request certification by the Mississippi  
627 State Department of Mental Health.

628 All new programs authorized under this section shall be  
629 subject to the availability of funds appropriated therefor by the  
630 Legislature;

631 (hh) Notwithstanding any other section of the code, the  
632 Board of Mental Health shall be authorized to fingerprint and  
633 perform a criminal history record check on every employee or  
634 volunteer. Every employee and volunteer shall provide a valid  
635 current social security number and/or driver's license number  
636 which shall be furnished to conduct the criminal history record  
637 check. If no disqualifying record is identified at the state  
638 level, fingerprints shall be forwarded to the Federal Bureau of  
639 Investigation for a national criminal history record check;

640 (ii) The Department of Mental Health shall have the  
641 authority for the development of a consumer friendly single point  
642 of intake and referral system within its service areas for persons  
643 with mental illness, an intellectual disability, developmental  
644 disabilities or alcohol or substance abuse who need assistance  
645 identifying or accessing appropriate services. The department  
646 will develop and implement a comprehensive evaluation procedure  
647 ensuring that, where appropriate, the affected person or their  
648 parent or legal guardian will be involved in the assessment and  
649 planning process. The department, as the point of intake and as  
650 service provider, shall have the authority to determine the  
651 appropriate institutional, hospital or community care setting for  
652 persons who have been diagnosed with mental illness, an  
653 intellectual disability, developmental disabilities and/or alcohol  
654 or substance abuse, and may provide for the least restrictive  
655 placement if the treating professional believes such a setting is

656 appropriate, if the person affected or their parent or legal  
657 guardian wants such services, and if the department can do so with  
658 a reasonable modification of the program without creating a  
659 fundamental alteration of the program. The least restrictive  
660 setting could be an institution, hospital or community setting,  
661 based upon the needs of the affected person or their parent or  
662 legal guardian;

663 (jj) To have the sole power and discretion to enter  
664 into, sign, execute and deliver long-term or multiyear leases of  
665 real and personal property owned by the Department of Mental  
666 Health to and from other state and federal agencies and private  
667 entities deemed to be in the public's best interest. Any monies  
668 derived from such leases shall be deposited into the funds of the  
669 Department of Mental Health for its exclusive use. Leases to  
670 private entities shall be approved by the Department of Finance  
671 and Administration and all leases shall be filed with the  
672 Secretary of State;

673 (kk) To certify and establish minimum standards and  
674 minimum required services for county facilities used for housing,  
675 feeding and providing medical treatment for any person who has  
676 been involuntarily ordered admitted to a treatment center by a  
677 court of competent jurisdiction. The minimum standard for the  
678 initial assessment of those persons being housed in county  
679 facilities is for the assessment to be performed by a physician,  
680 preferably a psychiatrist, or by a nurse practitioner, preferably



681 a psychiatric nurse practitioner. If the department finds  
682 deficiencies in any such county facility or its provider based on  
683 the minimum standards and minimum required services established  
684 for certification, the department shall give the county or its  
685 provider a six-month probationary period to bring its standards  
686 and services up to the established minimum standards and minimum  
687 required services. After the six-month probationary period, if  
688 the department determines that the county or its provider still  
689 does not meet the minimum standards and minimum required services,  
690 the department may remove the certification of the county or  
691 provider and require the county to contract with another county  
692 having a certified facility to hold those persons for that period  
693 of time pending transportation and admission to a state treatment  
694 facility. Any cost incurred by a county receiving an  
695 involuntarily committed person from a county with a decertified  
696 holding facility shall be reimbursed by the home county to the  
697 receiving county \* \* \*; and

698                             (11) To provide mental health services to persons  
699                             within the counties and geographic areas assigned to the  
700                             department by the coordinator under Section 6(4) of this act. The  
701                             State Board of Mental Health shall promulgate any rules and  
702                             regulations:

(ii) Requested by the coordinator in the fulfillment of his or her duties under Sections 1 through 7 of this act.

**SECTION 9.** Section 41-19-33, Mississippi Code of 1972, is  
amended as follows:

41-19-33. (1) Each region so designated or established under Section 41-19-31 shall establish a regional commission to be composed of members appointed by the boards of supervisors of the various counties in the region. It shall be the duty of such regional commission to administer mental health/intellectual disability programs certified and required by the State Board of Mental Health and as specified in Section 41-4-1(2). In addition, once designated and established as provided hereinabove, a regional commission shall have the following authority and shall pursue and promote the following general purposes:

(a) To establish, own, lease, acquire, construct, build, operate and maintain mental illness, mental health, intellectual disability, alcoholism and general rehabilitative facilities and services designed to serve the needs of the people of the region so designated, provided that the services supplied by the regional commissions shall include those services determined by the Department of Mental Health to be necessary and may include, in addition to the above, services for persons with developmental and learning disabilities; for persons suffering from narcotic addiction and problems of drug abuse and drug

730 dependence; and for the aging as designated and certified by the  
731 Department of Mental Health. Such regional mental health and  
732 intellectual disability commissions and other community service  
733 providers shall, on or before July 1 of each year, submit an  
734 annual operational plan to the Department of Mental Health for  
735 approval or disapproval based on the minimum standards and minimum  
736 required services established by the department for certification  
737 and itemize the services as specified in Section 41-4-1(2). As  
738 part of the annual operation plan required by Section 41-4-7(h)  
739 submitted by any regional community mental health center or by any  
740 other reasonable certification deemed acceptable by the  
741 department, the community mental health center shall state those  
742 services specified in Section 41-4-1(2) that it will provide and  
743 also those services that it will not provide. If the department  
744 finds deficiencies in the plan of any regional commission or  
745 community service provider based on the minimum standards and  
746 minimum required services established for certification, the  
747 department shall give the regional commission or community service  
748 provider a six-month probationary period to bring its standards  
749 and services up to the established minimum standards and minimum  
750 required services. After the six-month probationary period, if  
751 the department determines that the regional commission or  
752 community service provider still does not meet the minimum  
753 standards and minimum required services established for  
754 certification, the department may remove the certification of the



755 commission or provider, and from and after July 1, 2011, the  
756 commission or provider shall be ineligible for state funds from  
757 Medicaid reimbursement or other funding sources for those  
758 services. After the six-month probationary period, the Department  
759 of Mental Health may identify an appropriate community service  
760 provider to provide any core services in that county that are not  
761 provided by a community mental health center. However, the  
762 department shall not offer reimbursement or other accommodations  
763 to a community service provider of core services that were not  
764 offered to the decertified community mental health center for the  
765 same or similar services.

766 (b) To provide facilities and services for the  
767 prevention of mental illness, mental disorders, developmental and  
768 learning disabilities, alcoholism, narcotic addiction, drug abuse,  
769 drug dependence and other related handicaps or problems (including  
770 the problems of the aging) among the people of the region so  
771 designated, and for the rehabilitation of persons suffering from  
772 such illnesses, disorders, handicaps or problems as designated and  
773 certified by the Department of Mental Health.

774 (c) To promote increased understanding of the problems  
775 of mental illness, intellectual disabilities, alcoholism,  
776 developmental and learning disabilities, narcotic addiction, drug  
777 abuse and drug dependence and other related problems (including  
778 the problems of the aging) by the people of the region, and also  
779 to promote increased understanding of the purposes and methods of



780 the rehabilitation of persons suffering from such illnesses,  
781 disorders, handicaps or problems as designated and certified by  
782 the Department of Mental Health.

783 (d) To enter into contracts and to make such other  
784 arrangements as may be necessary, from time to time, with the  
785 United States government, the government of the State of  
786 Mississippi and such other agencies or governmental bodies as may  
787 be approved by and acceptable to the regional commission for the  
788 purpose of establishing, funding, constructing, operating and  
789 maintaining facilities and services for the care, treatment and  
790 rehabilitation of persons suffering from mental illness, an  
791 intellectual disability, alcoholism, developmental and learning  
792 disabilities, narcotic addiction, drug abuse, drug dependence and  
793 other illnesses, disorders, handicaps and problems (including the  
794 problems of the aging) as designated and certified by the  
795 Department of Mental Health.

796 (e) To enter into contracts and make such other  
797 arrangements as may be necessary with any and all private  
798 businesses, corporations, partnerships, proprietorships or other  
799 private agencies, whether organized for profit or otherwise, as  
800 may be approved by and acceptable to the regional commission for  
801 the purpose of establishing, funding, constructing, operating and  
802 maintaining facilities and services for the care, treatment and  
803 rehabilitation of persons suffering from mental illness, an  
804 intellectual disability, alcoholism, developmental and learning



805        disabilities, narcotic addiction, drug abuse, drug dependence and  
806        other illnesses, disorders, handicaps and problems (including the  
807        problems of the aging) relating to minimum services established by  
808        the Department of Mental Health.

809                (f)    To promote the general mental health of the people  
810        of the region.

811                (g)    To pay the administrative costs of the operation of  
812        the regional commissions, including per diem for the members of  
813        the commission and its employees, attorney's fees, if and when  
814        such are required in the opinion of the commission, and such other  
815        expenses of the commission as may be necessary. The Department of  
816        Mental Health standards and audit rules shall determine what  
817        administrative cost figures shall consist of for the purposes of  
818        this paragraph. Each regional commission shall submit a cost  
819        report annually to the Department of Mental Health in accordance  
820        with guidelines promulgated by the department.

821                (h)    To employ and compensate any personnel that may be  
822        necessary to effectively carry out the programs and services  
823        established under the provisions of the aforesaid act, provided  
824        such person meets the standards established by the Department of  
825        Mental Health.

826                (i)    To acquire whatever hazard, casualty or workers'  
827        compensation insurance that may be necessary for any property,  
828        real or personal, owned, leased or rented by the commissions, or  
829        any employees or personnel hired by the commissions.



830 (j) To acquire professional liability insurance on all  
831 employees as may be deemed necessary and proper by the commission,  
832 and to pay, out of the funds of the commission, all premiums due  
833 and payable on account thereof.

834 (k) To provide and finance within their own facilities,  
835 or through agreements or contracts with other local, state or  
836 federal agencies or institutions, nonprofit corporations, or  
837 political subdivisions or representatives thereof, programs and  
838 services for persons with mental illness, including treatment for  
839 alcoholics, and promulgating and administering of programs to  
840 combat drug abuse and programs for services for persons with an  
841 intellectual disability.

842 (1) To borrow money from private lending institutions  
843 in order to promote any of the foregoing purposes. A commission  
844 may pledge collateral, including real estate, to secure the  
845 repayment of money borrowed under the authority of this paragraph.  
846 Any such borrowing undertaken by a commission shall be on terms  
847 and conditions that are prudent in the sound judgment of the  
848 members of the commission, and the interest on any such loan shall  
849 not exceed the amount specified in Section 75-17-105. Any money  
850 borrowed, debts incurred or other obligations undertaken by a  
851 commission, regardless of whether borrowed, incurred or undertaken  
852 before or after March 15, 1995, shall be valid, binding and  
853 enforceable if it or they are borrowed, incurred or undertaken for

854 any purpose specified in this section and otherwise conform to the  
855 requirements of this paragraph.

856 (m) To acquire, own and dispose of real and personal  
857 property. Any real and personal property paid for with state  
858 and/or county appropriated funds must have the written approval of  
859 the Department of Mental Health and/or the county board of  
860 supervisors, depending on the original source of funding, before  
861 being disposed of under this paragraph.

862 (n) To enter into managed care contracts and make such  
863 other arrangements as may be deemed necessary or appropriate by  
864 the regional commission in order to participate in any managed  
865 care program. Any such contract or arrangement affecting more  
866 than one (1) region must have prior written approval of the  
867 Department of Mental Health before being initiated and annually  
868 thereafter.

869 (o) To provide facilities and services on a discounted  
870 or capitated basis. Any such action when affecting more than one  
871 (1) region must have prior written approval of the Department of  
872 Mental Health before being initiated and annually thereafter.

873 (p) To enter into contracts, agreements or other  
874 arrangements with any person, payor, provider or other entity,  
875 under which the regional commission assumes financial risk for the  
876 provision or delivery of any services, when deemed to be necessary  
877 or appropriate by the regional commission. Any action under this  
878 paragraph affecting more than one (1) region must have prior



879 written approval of the Department of Mental Health before being  
880 initiated and annually thereafter.

881 (q) To provide direct or indirect funding, grants,  
882 financial support and assistance for any health maintenance  
883 organization, preferred provider organization or other managed  
884 care entity or contractor, where such organization, entity or  
885 contractor is operated on a nonprofit basis. Any action under  
886 this paragraph affecting more than one (1) region must have prior  
887 written approval of the Department of Mental Health before being  
888 initiated and annually thereafter.

889 (r) To form, establish, operate, and/or be a member of  
890 or participant in, either individually or with one or more other  
891 regional commissions, any managed care entity as defined in  
892 Section 83-41-403(c). Any action under this paragraph affecting  
893 more than one (1) region must have prior written approval of the  
894 Department of Mental Health before being initiated and annually  
895 thereafter.

896 (s) To meet at least annually with the board of  
897 supervisors of each county in its region for the purpose of  
898 presenting its total annual budget and total mental  
899 health/intellectual disability services system. The commission  
900 shall submit an annual report on the adult mental health services,  
901 children mental health services and intellectual disability  
902 services required by the State Board of Mental Health.



(t) To provide alternative living arrangements for persons with serious mental illness, including, but not limited to, group homes for persons with chronic mental illness.

(u) To make purchases and enter into contracts for purchasing in compliance with the public purchasing law, Sections 31-7-12 and 31-7-13, with compliance with the public purchasing law subject to audit by the State Department of Audit.

(v) To \* \* \* ensure that all available funds are used for the benefit of persons with mental illness, persons with an intellectual disability, substance abusers and persons with developmental disabilities with maximum efficiency and minimum administrative cost. At any time a regional commission, and/or other related organization whatever it may be, accumulates surplus funds in excess of one-half (1/2) of its annual operating budget, the entity must submit a plan to the Department of Mental Health stating the capital improvements or other projects that require such surplus accumulation. If the required plan is not submitted within forty-five (45) days of the end of the applicable fiscal year, the Department of Mental Health shall withhold all state appropriated funds from such regional commission until such time as the capital improvement plan is submitted. If the submitted capital improvement plan is not accepted by the department, the surplus funds shall be expended by the regional commission in the local mental health region on group homes for persons with mental illness, persons with an intellectual disability, substance

928 abusers, children or other mental health/intellectual disability  
929 services approved by the Department of Mental Health.

930 (w) Notwithstanding any other provision of law, to  
931 fingerprint and perform a criminal history record check on every  
932 employee or volunteer. Every employee or volunteer shall provide  
933 a valid current social security number and/or driver's license  
934 number that will be furnished to conduct the criminal history  
935 record check. If no disqualifying record is identified at the  
936 state level, fingerprints shall be forwarded to the Federal Bureau  
937 of Investigation for a national criminal history record check.

938 (x) Notwithstanding any other provisions of law, each  
939 regional commission shall have the authority to create and operate  
940 a primary care health clinic to treat (i) its patients; and (ii)  
941 its patients' family members related within the third degree; and  
942 (iii) its patients' household members or caregivers, subject to  
943 the following requirements:

944 (i) The regional commission may employ and  
945 compensate any personnel necessary and must satisfy applicable  
946 state and federal laws and regulations regarding the  
947 administration and operation of a primary care health clinic.

948 (ii) A Mississippi licensed physician must be  
949 employed or under agreement with the regional commission to  
950 provide medical direction and/or to carry out the physician  
951 responsibilities as described under applicable state and/or  
952 federal law and regulations.



953 (iii) The physician providing medical direction  
954 for the primary care clinic shall not be certified solely in  
955 psychiatry.

956 (iv) A sliding fee scale may be used by the  
957 regional commission when no other payer source is identified.

958 (v) The regional commission must ensure services  
959 will be available and accessible promptly and in a manner that  
960 preserves human dignity and assures continuity of care.

961 (vi) The regional commission must provide a  
962 semiannual report to the Chairmen of the Public Health Committees  
963 in both the House of Representatives and Senate. At a minimum,  
964 for each reporting period, these reports shall describe the number  
965 of patients provided primary care services, the types of services  
966 provided, and the payer source for the patients. Except for  
967 patient information and any other information that may be exempt  
968 from disclosure under the Health Information Portability and  
969 Accountability Act (HIPAA) and the Mississippi Public Records Act,  
970 the reports shall be considered public records.

971 (vii) The regional commission must employ or  
972 contract with a core clinical staff that is multidisciplinary and  
973 culturally and linguistically competent.

974 (viii) The regional commission must ensure that  
975 its physician as described in subparagraph (ii) of this paragraph  
976 (x) has admitting privileges at one or more local hospitals or has

977 an agreement with a physician who has admitting privileges at one  
978 or more local hospitals to ensure continuity of care.

979 (ix) The regional commission must provide an  
980 independent financial audit report to the State Department of  
981 Mental Health and, except for patient information and any other  
982 information that may be exempt from disclosure under HIPAA and the  
983 Mississippi Public Records Act, the audit report shall be  
984 considered a public record.

985 For the purposes of this paragraph (x), the term "caregiver"  
986 means an individual who has the principal and primary  
987 responsibility for caring for a child or dependent adult,  
988 especially in the home setting.

989 (y) In general to take any action which will promote,  
990 either directly or indirectly, any and all of the foregoing  
991 purposes.

992 (2) The types of services established by the State  
993 Department of Mental Health that must be provided by the regional  
994 mental health/intellectual disability centers for certification by  
995 the department, and the minimum levels and standards for those  
996 services established by the department, shall be provided by the  
997 regional mental health/intellectual disability centers to children  
998 when such services are appropriate for children, in the  
999 determination of the department.

1000 (3) (a) Upon an instruction from the coordinator pursuant  
1001 to Section 6(4) of this act, a regional commission shall reassign



1002       any of its regions to another regional commission, to the  
1003       Department of Mental Health, or to a nonprofit entity for the  
1004       provision of mental health services.

1005               (b) Each regional commission shall compile quarterly  
1006       financial reports and status reports from each individual  
1007       community health center. The compiled reports shall be submitted  
1008       to the coordinator quarterly. The reports shall contain a:  
1009                       (i) Balance sheet;  
1010                       (ii) Statement of operations;  
1011                       (iii) Statement of cash flows; and  
1012                       (iv) Description of the status of individual  
1013       community health center's actions taken to increase access to and  
1014       availability of community mental health services.

1015               **SECTION 10.** This act shall take effect and be in force from  
1016 and after its passage.