

HOUSE BILL No. 5922

March 30, 2006, Introduced by Reps. Meisner, Tobocman, Accavitti, Leland, Kolb,
Anderson, Mortimer, Sheltroun, Alma Smith, Vagnozzi, Donigan, Plakas, Farrah,
Gleason, Cushingberry and Zelenko and referred to the Committee on Health Policy.

A bill to amend 1974 PA 258, entitled
"Mental health code,"
by amending section 206 (MCL 330.1206), as amended by 1995 PA 290.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

1 Sec. 206. (1) The purpose of a community mental health
2 services program ~~shall be~~ **IS** to provide ~~a comprehensive array of~~
3 mental health services appropriate to conditions of individuals who
4 are located within its geographic service area, regardless of an
5 individual's ability to pay **OR MEDICAID STATUS**. The array of mental
6 health services ~~shall include~~ **AVAILABLE TO AN INDIVIDUAL WHO**
7 **QUALIFIES FOR PRIORITY SERVICE CONSIDERATION INCLUDES**, at a
8 minimum, all of the following:

9 ~~— (a) Crisis stabilization and response including a 24 hour, 7-~~

~~day per week, crisis emergency service that is prepared to respond to persons experiencing acute emotional, behavioral, or social dysfunctions, and the provision of inpatient or other protective environment for treatment.~~

~~—— (b) Identification, assessment, and diagnosis to determine the specific needs of the recipient and to develop an individual plan of services.~~

~~—— (c) Planning, linking, coordinating, follow-up, and monitoring to assist the recipient in gaining access to services.~~

~~—— (d) Specialized mental health recipient training, treatment, and support, including therapeutic clinical interactions, socialization and adaptive skill and coping skill training, health and rehabilitative services, and pre-vocational and vocational services.~~

~~—— (e) Recipient rights services.~~

~~—— (f) Mental health advocacy.~~

~~—— (g) Prevention activities that serve to inform and educate with the intent of reducing the risk of severe recipient dysfunction.~~

~~—— (h) Any other service approved by the department.~~

~~(2) Services shall promote the best interests of the individual and shall be designed to increase independence, improve quality of life, and support community integration and inclusion. Services for children and families shall promote the best interests of the individual receiving services and shall be designed to strengthen and preserve the family unit if appropriate. The community mental health services program shall deliver services in~~

~~a manner that demonstrates they are based upon recipient choice and involvement, and shall include wraparound services when appropriate.~~

(A) TREATMENT AND SUPPORT, THAT INCLUDES, AT A MINIMUM, ALL OF THE FOLLOWING:

(i) CLINICAL ASSESSMENT, DIAGNOSTIC, PLANNING, AND THERAPEUTIC SERVICES.

(ii) CRISIS RESPONSE AND STABILIZATION THAT IS AVAILABLE 24 HOURS A DAY, 7 DAYS A WEEK.

(iii) INPATIENT CARE.

(iv) ALTERNATIVES TO OR STEP-DOWNS FROM INPATIENT CARE.

(v) SERVICES FOR MAINTAINING COMMUNITY TENURE.

(vi) SERVICES PROMOTING COMMUNITY INCLUSION AND INTEGRATION, INCLUDING, AMONG OTHER SUBELEMENTS, THE COMPONENTS OF SUPPORTED EMPLOYMENT AND SUPPORTED EDUCATIONAL ASSISTANCE.

(vii) PSYCHOSOCIAL REHABILITATION AND RECOVERY PROGRAMMING.

(viii) TRANSPORTATION ASSISTANCE.

(B) REFERRAL TO AND COORDINATION AND COLLABORATION WITH OTHER HEALTH CARE AND HUMAN SERVICE SYSTEMS AS NEEDED TO ACCESS MEDICALLY NECESSARY SERVICE COVERED BY THIS SECTION.

(C) CONSUMER AND FAMILY SERVICES, INCLUDING, AT A MINIMUM, CONSUMER ORIENTATION AND INVOLVEMENT, FAMILY INFORMATION, MENTAL HEALTH ADVOCACY, AND MECHANISMS FOR CONSUMER APPEALS, GRIEVANCES, AND RIGHTS.

(2) THE DEPARTMENT SHALL PUBLISH ANNUALLY, LIST ON ITS WEBSITE, AND INCLUDE IN ITS CONTRACTS WITH COMMUNITY MENTAL HEALTH SERVICES PROGRAMS ALL OF THE FOLLOWING:

1 (A) THE SUBELEMENTS OF THE SERVICE CATEGORIES SPECIFIED IN
2 SUBSECTION (1).

3 (B) THE SERVICE SELECTION GUIDELINE PRINCIPLES RECOMMENDED BY
4 THE MICHIGAN MENTAL HEALTH COMMISSION IN ITS OCTOBER 2004 REPORT.

5 (C) A STATEMENT OF THE ACCEPTABLE COMPONENTS OF THE SERVICE
6 TERM KNOWN AS "COMMUNITY CRISIS STABILIZATION".

7 (D) STANDARDS AND PROTOCOLS FOR COMMUNITY MENTAL HEALTH
8 SERVICE PROGRAMS TO FOLLOW IN EACH OF THE FOLLOWING AREAS:

9 (i) CASE-FINDING OUTREACH AND SCREENING ACTIVITIES,
10 DIFFERENTIATED AS APPROPRIATE BY DEMOGRAPHIC, SOCIOECONOMIC, OR
11 CULTURAL CONSIDERATIONS.

12 (ii) LINKAGE OF INDIVIDUALS AND SERVICE PLANS TO OTHER
13 COMMUNITY RESOURCES FOR CARE AND HUMAN SERVICE ASSISTANCE,
14 INCLUDING, BUT NOT LIMITED TO, FEDERALLY FUNDED, QUALIFIED HEALTH
15 CENTERS AND CHILDREN'S SCREENING PROGRAMS.

16 (E) CATEGORIES OF MINORS AND ADULTS ELIGIBLE FOR PRIMARY AND
17 SECONDARY PREVENTION INITIATIVES RELATED TO SPECIAL RISK FACTORS
18 FOR EMOTIONAL DISTURBANCE OR MENTAL ILLNESS AND THEIR CONSEQUENCES.

19 (3) AN INDIVIDUAL WHO HAS QUALIFIED FOR PRIORITY SERVICE
20 CONSIDERATION IN ANY COMMUNITY MENTAL HEALTH SERVICES PROGRAM
21 RETAINS THAT QUALIFICATION OVER TIME FOR ANY MEDICALLY NECESSARY
22 SERVICE IN THE ARRAY ESTABLISHED IN SUBSECTION (1) IN ANY OTHER
23 COMMUNITY MENTAL HEALTH SERVICES PROGRAM.