Legislative Analysis

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REPORTING REQUIREMENTS FOR MICHIGAN CRISIS AND ACCESS LINE

House Bills 4043 and 4044 as reported from committee
Sponsor: Rep. Mary Whiteford
Committee: Health Policy
Complete to 2-25-21

SUMMARY:

House Bills 4043 and 4044 would amend the Mental Health Code to modify reporting requirements related to the Michigan Crisis and Access Line (MiCAL) created by 2020 PA 12.[1] That access line, established for individuals experiencing a mental health crisis, is a telephone referral system that will be available 24 hours a day, 7 days a week.[2]

Currently, in addition to other requirements, a contractor operating or maintaining MiCAL must have the ability to access information related to the availability of services, including near-real-time access to any registry of available inpatient psychiatric beds, crisis residential beds, and substance use disorder beds. House Bill 4044 would require the contractors maintaining the access line to inform individuals seeking behavioral health care that bed registry data may not be accurate and bed availability is not guaranteed.

Any such state-operated registry would also have to report all data collected for the registry to the Department of Health and Human Services (DHHS) or the entity contracted to operate or maintain MiCAL.

Under HB 4044, the Department of Licensing and Regulatory Affairs (LARA) would have to provide behavioral health provider licensure data to DHHS. Currently, DHHS must work with contractors to leverage existing databases and other sources of information and to utilize the most current provider information available. The bill would make that collaboration optional for DHHS.

A health facility, health professional, or contractor could not be held civilly or criminally liable for inaccurate registry data that is shared as provided in HB 4044.

Additionally, 2018 PA 658[3] established an electronic inpatient psychiatric bed registry, with beds categorized by patient gender, acuity, age, and diagnosis. House Bill 4043 would require that the information listed on the registry be provided by DHHS to the contractor or entity that operates or maintains MiCAL.

HB 4043: MCL 330.1165
HB 4044: MCL 330.1151

[1] House Fiscal Agency analysis of 2020 PA 12 (HB 4051): http://www.legislature.mi.gov/documents/2019-2020/billanalysis/House/pdf/2019-HLA-4051-EE6CC87D.pdf
[2] See https://www.michigan.gov/documents/mdhhs/MEMO_--_Michigan_Crisis_and_Access_Line_MiCAL_Overview_and_Next_Steps_696799_7.pdf
[3] House Fiscal Agency analysis of 2018 PA 658 (HB 5439): http://www.legislature.mi.gov/documents/2017-2018/billanalysis/House/pdf/2017-HLA-5439-7C32C200.pdf

BRIEF DISCUSSION:

According to committee testimony, the crisis and access line—MiCAL—is expected to streamline collection and dispersal of information regarding the state's psychiatric bed registries. HBs 4043 and 4044 are intended to serve as the wrap-up bills on the access line for what is hoped to be the most comprehensive system of this type in the country. In response to questions, the bill sponsor stated that the system was modeled on the parallel system for non-behavioral health already existing in the state. Two sites are expected to be ready to go live in April: the pilot regions of Oakland County and the Upper Peninsula. The anticipated target date for full implementation across Michigan is fall of 2022.[4]

FISCAL IMPACT:

House Bills 4043 and 4044 would have a negligible fiscal impact on the state and no fiscal impact on local units of government. The data that the state would be required to provide to the Michigan crisis and access line is information that the state is already required to possess, and any costs related to the sharing of that data are likely to be minimal and sufficiently offset by existing appropriations.

House Bill 4044 would not have an appreciable fiscal impact on LARA. The data that LARA would be required to provide is information that the department already possesses, and any costs related to the sharing of that data are likely to be minimal and sufficiently offset by existing appropriations.

POSITIONS:

Representatives of the Department of Health and Human Services testified in support of the bills. (2-11-21)

The following entities indicated support for the bills (2-11-21):

- Michigan Council of Nurse Practitioners
- Oakland Community Health Network

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[4] https://www.michigan.gov/mdhhs/0,5885,7-339-71550_2941_101247---,00.html