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SENATE BILL NO. 1427

AMENDMENT IN THE NATURE OF A SUBSTITUTE

(Proposed by the House Committee on Health, Welfare and Institutions on February 16, 2021)

(Patron Prior to Substitute—Senator Morrissey)

A BILL to amend the Code of Virginia by adding a section numbered 37.2-313.2, relating to Department of Behavioral Health and Developmental Services; Early Psychosis Intervention and Coordinated Specialty Care Advisory Board established.

Be it enacted by the General Assembly of Virginia:

1. That the Code of Virginia is amended by adding a section numbered 37.2-313.2 as follows: § 37.2-313.2. Early Psychosis Intervention and Coordinated Specialty Care Advisory Board.

A. The Early Psychosis Intervention and Coordinated Specialty Care Advisory Board (the Advisory Board) is hereby established as an advisory board within the meaning of § 2.2-2100 to assist the Department in expanding the provision of high-quality, evidence-based early psychosis and mood disorder detection and intervention services. The Advisory Board shall provide advice and guidance to the Commissioner of Behavioral Health and Developmental Services (the Commissioner) on strategies for the early identification of and early intervention for children and young adults who are determined to be at high clinical risk of psychosis and mood disorders or who are experiencing a first episode of psychosis, develop recommendations for funding early identification and intervention strategies for children and young adults who are determined to be at high clinical risk of psychosis and mood disorders or who are experiencing a first episode of psychosis, and develop recommendations for standardized clinical and outcome measures for children and young adults who are determined to be at high clinical risk of psychosis and mood disorders or who are experiencing a first episode of psychosis.

B. The Advisory Board shall consist of eight nonlegislative citizen members and one ex officio member. Nonlegislative citizen members shall be appointed by the Governor as follows: one member shall be a member of a local community services board; one member shall be a representative of a nonprofit community mental health organization that provides services to transition-aged youth and young adults; two members shall be a licensed psychiatrist or licensed psychologist; one member shall be a representative of a health insurance plan participating in the Commonwealth's program of medical assistance and the private health care market; one member shall be a person who is knowledgeable of evidence-based practices related to the operation of programs for the early detection of and intervention for early psychosis and mood disorder, which may include a person who has gained knowledge of such evidence-based practices through experience outside of the Commonwealth; one member shall be a parent or guardian caring for a young child with mental illness; and one member shall be a person diagnosed with a mental illness. The Commissioner of Behavioral Health and Developmental Services or his designee shall serve ex officio with voting privileges. Nonlegislative citizen members of the Advisory Board shall be citizens of the Commonwealth.

Appointments to fill vacancies, other than by expiration of a term, shall be for the unexpired term. Vacancies shall be filled in the same manner as the original appointments. All members may be reappointed.

Ex officio members of the Advisory Board shall serve terms coincident with their terms of office. After the initial staggering of terms, nonlegislative citizen members shall be appointed for a term of four years. No nonlegislative citizen members shall serve more than two successive terms. The remainder of any term to which a member is appointed to fill a vacancy shall not constitute a term in determining the member's eligibility for reappointment.

C. The Advisory Board shall elect a chairman and vice-chairman from among its membership. A majority of the members shall constitute a quorum. The Advisory Board shall meet at least once a year and may hold additional meetings as necessary to perform its duties. Meetings of the Advisory Board shall be held at the call of the chairman or whenever the majority of the members so request.

D. Noncitizen members of the Advisory Board shall serve without compensation; however, members of the Advisory Board shall be reimbursed for all reasonable and necessary expenses incurred in the performance of their duties as provided in §§ 2.2-2813 and 2.2-2825. Funding for the costs of expenses of the members shall be provided by the Department.

E. The Advisory Board shall develop and recommend to the Commissioner a strategic plan for early identification of and early intervention for children and young adults in the Commonwealth who are determined to be at high clinical risk of psychosis and mood disorders or who are experiencing a first episode of psychosis. Such strategic plan shall be for a period of at least three years and no more than five years, and shall include strategies for:

1. Enhancing services provided by existing Coordinated Specialty Care programs;

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 2. Expanding programs for early identification of and early intervention for children and young adults who are determined to be at high clinical risk of psychosis and mood disorders or who are experiencing a first episode of psychosis in underserved areas of the Commonwealth;

3. Identifying and applying for funds from individuals, foundations, and federal and state sources and disbursing such funds to support the work of existing programs and support the development of new programs for the early identification of and early intervention for children and young adults who are determined to be at high clinical risk of psychosis and mood disorders or who are experiencing a first

episode of psychosis in the Commonwealth; and

4. Establishing procedures for billing public or private insurance or other sources of health care coverage for services for the early identification of and early intervention for children and young adults who are determined to be at high clinical risk of psychosis and mood disorders or who are experiencing a first episode of psychosis, including recommendations for developing an insurance mandate establishing a bundled rate for Coordinated Specialty Care, the establishment of a fair reimbursement rate for Coordinated Specialty Care services, and a means to evaluate the effectiveness of billing for Coordinated Specialty Care and the sustainability of programs for the early identification of and early intervention for children and young adults who are determined to be at high clinical risk of psychosis and mood disorders or who are experiencing a first episode of psychosis.

The strategic plan shall also include recommendations for minimum fidelity standards for Coordinated Specialty Care programs, procedures for regular fidelity reviews of Coordinated Specialty Care programs, and data required for evaluation of Coordinated Specialty Care programs and

collection and analysis of such data in conjunction with the Department.

F. The Department shall provide staff support to the Advisory Board. All agencies of the Commonwealth shall provide assistance to the Advisory Board upon request.

G. The Advisory Board shall report annually by December 1 to the Commissioner and the General Assembly regarding its activities, findings, and recommendations. The Commissioner shall respond in

writing to such report, in writing, to the Advisory Board upon receipt of the report.

2. That the initial appointments of nonlegislative citizen members to the Early Psychosis Intervention and Coordinated Specialty Care Advisory Board shall be staggered as follows: two nonlegislative citizen members for a term of one year; two nonlegislative citizen members for a term of two years; two nonlegislative citizen members for a term of three years, and two nonlegislative citizen members for a term of four years.