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HOUSE JOINT RESOLUTION NO. 212
AMENDMENT IN THE NATURE OF A SUBSTITUTE
(Proposed by the Senate Committee on Finance
on March 5, 1998)

(Patron Prior to Substitute—Delegate Bloxom)

Continuing the Joint Subcommittee to Evaluate the Future Delivery of Publicly Funded Mental Health, Mental Retardation and Substance Abuse Services.

WHEREAS, the Joint Subcommittee to Evaluate the Future Delivery of Publicly Funded Mental Health, Mental Retardation and Substance Abuse Services was established by House Joint Resolution No. 240 in the 1996 Session of the General Assembly; and

WHEREAS, the resolution directed the joint subcommittee to examine (i) the current services system, (ii) the principles and goals of a comprehensive publicly funded system, (iii) the range of services and eligibility for those services, (iv) the methods of funding publicly supported community and facility services, (v) the relationship between the Department of Mental Health, Mental Retardation and Substance Abuse Services and the components of the service system, (vi) the information and technology needs to provide appropriate and enhanced accountability, (vii) changes needed in the Code of Virginia, (viii) ways to effectively involve consumers and families in planning and evaluating the publicly funded system, and (ix) recommendations of previous studies and the work of the Secretary of Health and Human Resources' Task Force; and

WHEREAS, the joint subcommittee has made recommendations to effect sweeping changes in the delivery of publicly funded services; and

WHEREAS, while numerous recommendations have been made, the joint subcommittee believes that many issues still need to be resolved and oversight is needed for the implementation of current recommendations; and

WHEREAS, the joint subcommittee identified two particular issues that will require review and resolution; and

WHEREAS, the first of these issues is determining the most effective structure and location of an external human rights protection system in Virginia, increased attention to which has been brought by the serious incidents and deaths in state mental health and mental retardation facilities; and

WHEREAS, two human rights programs now operate to protect consumers: one is the program operated by the Department of Mental Health, Mental Retardation and Substance Abuse Services, commonly known as the "internal" system since the Department also provides services to some of the same persons protected by its system; and the other program is operated by the Department for the Rights of Virginians with Disabilities under the federal Protection and Advocacy for Individuals with Mental Illness (PAIMI) Act and the Developmental Disabilities Assistance and Bill of Rights (DD) Act; and

WHEREAS, there is a perception that more needs to be done to (i) ensure complete independence of any external human rights system from the internal system, (ii) complement but not duplicate the internal system, (iii) ensure the system is supported by adequate levels of resources, (iv) increase consumer access, (v) increase oversight responsibility, and (vi) ensure the system is objective; and

WHEREAS, recommendations in a 1997 State Board of Mental Health, Mental Retardation and Substance Abuse report on human rights called for further study; and

WHEREAS, the second issue involves the need to study welfare reform and substance abuse policy, since public assistance recipients often experience a wide range of employment barriers, including the abuse of alcohol and other drugs; and

WHEREAS, a 1995 study by the U.S. Department of Health and Human Services concluded that substance abuse affected the ability of more than 15 percent of welfare recipients to find and maintain employment; and

WHEREAS, an integrated welfare reform and substance abuse policy will need to address issues concerning assessment, treatment capacity, funding, data collection and analysis, interagency coordination, work and treatment coordination, staff training, and outcome measurement; now, therefore, be it

RESOLVED by the House of Delegates, the Senate concurring, That the Joint Subcommittee to Evaluate the Future Delivery of Publicly Funded Mental Health, Mental Retardation and Substance Abuse Services be continued. The membership of the joint subcommittee shall continue as provided in the original resolution. Vacancies shall be filled in the following manner: one shall be a member of the House of Delegates and one shall be a former member of the House of Delegates, to be appointed by the Speaker of the House; and one shall be a former member of the Senate, to be appointed by the Senate Committee on Privileges and Elections; and, be it

60 RESOLVED, That the joint subcommittee shall study the impact of a "carve out" of
61 Medicaid-financed mental health, mental retardation and substance abuse services from any managed
62 care contracts negotiated with health maintenance organizations and the feasibility of contracting out the
63 administration of all Medicaid-covered mental health, mental retardation and substance abuse services to
64 the Department of Mental Health, Mental Retardation and Substance Abuse Services. In examining these
65 two approaches, the joint subcommittee shall (i) suggest ways to increase program efficiencies, (ii)
66 assess the impact on private providers, and (iii) determine the increase, if any, in the administrative costs
67 of providing mental health, mental retardation and substance abuse services; and, be it

68 RESOLVED FURTHER, That, with the exception of replacing the match currently transferred from
69 grants to localities, the Secretary of Health and Human Resources and Departments of Medical
70 Assistance Services and Mental Health, Mental Retardation and Substance Abuse Services be requested
71 to defer including mental health, mental retardation and substance abuse services in any managed care
72 implementation plan, until 2000.

73 The direct costs of this study shall not exceed \$26,400.

74 An estimated \$50,000 is allocated for consulting services. Such expenses shall be funded by a
75 separate appropriation from the General Assembly.

76 The Division of Legislative Services shall provide staff support for the study. All agencies of the
77 Commonwealth shall provide assistance to the joint subcommittee, upon request.

78 The Joint Subcommittee to Evaluate the Future Delivery of Publicly Funded Mental Health, Mental
79 Retardation and Substance Abuse Services shall complete its work in time to submit its findings and
80 recommendations to the Governor and the 2000 Session of the General Assembly as provided in the
81 procedures of the Division of Legislative Automated Systems for the processing of legislative
82 documents.

83 Implementation of this resolution is subject to subsequent approval and certification by the Joint
84 Rules Committee. The Committee may withhold expenditures or delay the period for the conduct of the
85 study.