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SENATE BILL NO. 1486

AMENDMENT IN THE NATURE OF A SUBSTITUTE

(Proposed by the Joint Conference Committee on February 27, 2011)

(Patron Prior to Substitute—Senator Northam)

A BILL to amend and reenact § 37.2-319 of the Code of Virginia, relating to administration of the Behavioral Health and Developmental Services Trust Fund.

Be it enacted by the General Assembly of Virginia:

1. That § 37.2-319 of the Code of Virginia is amended and reenacted as follows:

§ 37.2-319. Administration of Behavioral Health and Developmental Services Trust Fund.

A. The Fund shall be administered by the Commissioner. Moneys in the Fund shall be used solely to provide mental health, mental retardation, and substance abuse services to enhance and ensure the quality of care and treatment provided by the Commonwealth to persons with for mental illness, mental retardation, or substance abuse services and to facilitate transition of individuals with mental retardation from state training centers to community-based services. Notwithstanding any other provision of law, the net proceeds from the sale of any vacant buildings and land shall first be used to (i) deliver mental health, mental retardation, and substance abuse services within the same service area where the sold buildings and land were located to ensure the same level of mental health, mental retardation, and substance abuse services as before the sale and (ii) provide benefits pursuant to the Workforce Transition Act of 1995 (§ 2.2-3200 et seq.) to those persons who were employees of the Commonwealth and, as a result of the sale, are no longer employed by the Commonwealth or are otherwise negatively affected by the sale. Benefits shall include appropriate transitional benefits.

B. For each fiscal year starting with the Commonwealth's 2011-2012 fiscal year, any funds directed to be deposited into the Fund pursuant to the general appropriation act shall be appropriated for financing (i) a broad array of community-based services including but not limited to Intellectual Disability Home and Community Based Waivers or (ii) appropriate community housing, for the purpose of transitioning individuals with mental retardation from state training centers to community-based care. 2. At the direction of the Governor, the Secretary of Health and Human Resources shall develop a plan to transition individuals with mental retardation from state training centers to community-based settings. The plan shall include provisions to reduce the number of individuals who are currently residing in state training centers and include provisions to (i) offer a broad array of community-based services including but not limited to Intellectual Disability Home and Community Based Waivers and (ii) address the availability of appropriate community housing. The plan shall also include facility specific objectives and timeframes to implement changes and shall be developed with input from individuals receiving training center services and their families, community services boards, private providers, and the Department of Medical Assistance Services. The Secretary shall submit the plan to the Governor and Chairmen of the House Committee on Appropriations and the Senate Committee on Finance by November 1, 2011. The Secretary shall submit reports on the development and implementation of the plan to the Governor and the Chairmen of the House Committee on Appropriations and the Senate Committee on Finance on the first of July and December of each year beginning July 1, 2011.

3. For the fiscal year beginning July 1, 2011, any funds directed to be deposited into the Behavioral Health and Developmental Services Trust Fund pursuant to the general appropriation act shall be appropriated for the purpose of financing a broad array of community-based services, including up to six hundred Intellectual Disability Home and Community Based Waiver slots, one-time transition costs for community placements, appropriate community housing, and other identified community services that may not be covered through the waiver program, for the purpose of transitioning individuals with mental retardation from state training centers to

community-based settings.