

SCS SB 1003 -- CHILDREN'S MENTAL HEALTH

SPONSOR: Gibbons (Bean)

COMMITTEE ACTION: Voted "do pass" by the Committee on Health Care Policy by a vote of 13 to 0.

This substitute establishes a comprehensive mental health services system for children. The system will be required to:

- (1) Be child centered, family focused, and family driven. The needs of the child and family will dictate the types and mix of services provided;
- (2) Provide community-based mental health services to children and their families;
- (3) Respond in a culturally competent and responsive manner;
- (4) Stress prevention, early identification, and intervention;
- (5) Assure access to a continuum of services;
- (6) Include early screening services;
- (7) Address problems associated with paying for mental health services for children;
- (8) Assure a smooth transition from mental health services appropriate for children to mental health services appropriate for adults;
- (9) Coordinate a service delivery system with providers and schools that serves children with emotional and behavioral disturbance problems; and
- (10) Be outcome based.

The substitute requires the Department of Mental Health to develop a comprehensive children's mental health service system plan, which must be submitted to the General Assembly and the Children's Services Commission by December 2004. The requirements for the plan include:

- (1) Defining the mental health service and support needs of children and their families;
- (2) Defining a comprehensive array of services to be provided;
- (3) Establishing short- and long-term goals;

- (4) Describing the parameters for local implementation of the comprehensive children's mental health system;
- (5) Describing the importance of family involvement;
- (6) Describing financing mechanisms for the comprehensive children's mental health system;
- (7) Describing the coordination of services across child-serving agencies with emphasis on the involvement of local schools;
- (8) Describing methods for service, program and system evaluation, and the need for training and technical assistance; and
- (9) Describing the roles and responsibilities of state and local child-service agencies in the comprehensive children's mental health system.

The substitute also makes various changes to laws relating to children's mental health services. The substitute:

- (1) Adds child-serving agencies within the comprehensive children's mental health service system to the definition of "mental health services" for the purpose of defining services for the Medicaid Program;
- (2) Requires the Children's Division within the Department of Social Services to look at the children in its custody and determine which are there solely because of a mental health issue. Within 60 days of a child being identified, an individualized service plan must be developed to provide the appropriate and necessary services for the child;
- (3) Requires the departments of Social Services and Mental Health to jointly develop a financing plan to provide for the payment by the Department of Social Services for services provided to children who are returned to their parents' custody;
- (4) Requires the Department of Mental Health to develop a Comprehensive System Management Team to facilitate interagency cooperation and to assist the departments in developing strategies and ensuring positive outcomes for children who are served by the system; and
- (5) Allows the means test of the Department of Mental Health to be waived for a child in need of mental health services in order to avoid transfer of custody to the Children's Division.

FISCAL NOTE: Total Estimated Net Cost on General Revenue Fund of

Unknown in FY 2005, FY 2006, and FY 2007. Subject to Appropriations. Total Estimated Net Effect on Other State Funds of \$0 in FY 2005, FY 2006, and FY 2007.

PROPOSERS: Supporters say that the current delivery system for providing mental health care services to children is fragmented, underfunded, and needs improvement. Many parents have had to temporarily relinquish custody of their children in order to obtain adequate mental health care services. The bill requires a judicial review or family support team meetings that identify children who need mental health care services which will expand the mental health care delivery system for children and will improve treatment outcomes.

Testifying for the bill were Senator Gibbons; Representatives Stefanick and Bean; Department of Mental Health; Department of Social Services; Beth Viviano; Rita Prindiville Jurotich; Cindy Fefferman; Missouri Statewide Parent Advisory Network; Coalition of Community Mental Health Centers; Stephen Osmon, M.D.; Colleen Dolnick; Debra Bryant Kornmann; Missouri Coalition of Children's Agencies; Citizens for Missouri's Children; National Association of the Mentally Ill; Missouri Nurses Association; and Eastern Missouri Psychiatric Society.

OPPOSERS: There was no opposition voiced to the committee.

Joseph Deering, Legislative Analyst