

BILL ANALYSIS

C.S.H.B. 1908
By: Naishtat
Corrections
Committee Report (Substituted)

BACKGROUND AND PURPOSE

Interested parties contend that current law does not adequately identify specific diagnoses for determining eligibility and qualifying offenders with mental impairments for services provided by the Texas Correctional Office on Offenders with Medical or Mental Impairments, which coordinates the continuity of care and transitional case management for eligible participants who are released on probation or parole. The parties report that, in practice, services are limited to offenders with schizophrenia, bipolar disorder, or clinically severe depression diagnoses, leaving offenders with other diagnoses at risk of experiencing deteriorating health conditions, homelessness, unemployment, and financial and emotional instability, all of which are risk factors for recidivism. C.S.H.B. 1908 seeks to address this situation by clarifying the eligibility criteria used for identifying and qualifying offenders with mental impairments.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

C.S.H.B. 1908 amends the Health and Safety Code to require, subject to available resources and to the extent feasible, that the methods established for the continuity of care system instituted for offenders with mental impairments in the criminal justice system under a memorandum of understanding between certain state and local agencies and authorities ensure that each offender with a mental impairment is identified and qualified for the system and serve adults with severe and persistent mental illness who are experiencing significant functional impairment due to a mental health disorder that is defined by the Diagnostic and Statistical Manual of Mental Disorders, 5th Edition.

EFFECTIVE DATE

September 1, 2015.

COMPARISON OF ORIGINAL AND SUBSTITUTE

While C.S.H.B. 1908 may differ from the original in minor or nonsubstantive ways, the following comparison is organized and formatted in a manner that indicates the substantial differences between the introduced and committee substitute versions of the bill.

INTRODUCED

SECTION 1. Section 614.013, Health and Safety Code, is amended by adding Subsection (b-1) to read as follows:

(b-1) The methods established under Subsection (b):

(1) must ensure that each offender with a mental impairment is identified and qualified for the continuity of care and service program regardless of diagnosis; and

(2) may not restrict access to the continuity of care and service program or services to those offenders who have been diagnosed with specific mental disorders.

SECTION 2. This Act takes effect September 1, 2015.

HOUSE COMMITTEE SUBSTITUTE

SECTION 1. Section 614.013, Health and Safety Code, is amended by adding Subsection (b-1) to read as follows:

(b-1) Subject to available resources, and to the extent feasible, the methods established under Subsection (b) must ensure that each offender with a mental impairment is identified and qualified for the continuity of care system and serve adults with severe and persistent mental illness who are experiencing significant functional impairment due to a mental health disorder that is defined by the Diagnostic and Statistical Manual of Mental Disorders, 5th Edition (DSM-5), including:

(1) major depressive disorder, including single episode or recurrent major depressive disorder;

(2) post-traumatic stress disorder;

(3) schizoaffective disorder, including bipolar and depressive types;

(4) psychotic disorder;

(5) anxiety disorder;

(6) delusional disorder; or

(7) any other diagnosed mental health disorder that is severe or persistent in nature.

SECTION 2. Same as introduced version.