

BILL ANALYSIS

Senate Research Center
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C.S.S.B. 292
By: Huffman et al.
Health & Human Services
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Committee Report (Substituted)

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

The 83rd Legislature passed S.B. 1155 (Huffman), which created the Harris County Mental Health Jail Diversion Pilot Program. Based on the successes of this program and similar diversion projects across the state, many entities have recommended that these types of programs be implemented statewide.

C.S.S.B. 292 creates a grant program for local collaborations with the goals of reducing recidivism, incarceration, and the frequency of arrests in the county jail among persons with mental illness. This will help the state by reducing the number of people with mental illness in county jails and thereby reducing the waiting time for a forensic commitment to a state hospital.

Local collaborations must include the county, the local mental health authority serving that county, and the hospital district located in the county (if present). This collaboration may also designate other local entities to join the collaboration.

Grants would be awarded to the 20 most populous counties according to formula funding based on cases of serious mental illness (SMI) in the county for household populations below 200 percent of federal poverty. State funds would be distributed on the condition that each local collaborative provides matching funds in a total amount at least equal to the awarded grant amount. Counties that do not meet the criteria for formula funding may apply to the commission to receive state funds, if available.

C.S.S.B. 292 amends current law relating to the creation of a grant program to reduce recidivism, arrest, and incarceration of individuals with mental illness.

RULEMAKING AUTHORITY

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Subchapter B, Chapter 531, Government Code, by adding Section 531.0993, as follows:

Sec. 531.0993. GRANT PROGRAM TO REDUCE RECIDIVISM, ARREST, AND INCARCERATION AMONG INDIVIDUALS WITH MENTAL ILLNESS AND TO REDUCE WAIT TIME FOR FORENSIC COMMITMENT. (a) Defines "low-income household."

(b) Requires the Health and Human Services Commission (HHSC), each state fiscal year using money appropriated to HHSC for that purpose, to make grants to county-based community collaboratives (collaboratives) for the purpose of reducing recidivism by, the frequency of arrests of, and incarceration of persons with mental illness; and the total waiting time for forensic commitment of persons with mental illness to a state hospital.

(c) Provides that a collaborative is eligible to receive a grant under this section only if the collaborative includes a county, a local mental health authority that operates in the county, and each hospital district, if any, located in the county. Authorizes a collaborative to include other local entities designated by the collaborative's members.

(d) Requires HHSC to condition each grant provided to a community collaborative under this section on the collaborative submitting a plan described by Subsection (i) and providing matching funds from non-state sources in a total amount at least equal to the awarded grant amount. Authorizes a collaborative, to raise matching funds, to seek and receive gifts, grants, or donations from any person.

(e) Requires HHSC, not later than the 30th day of each fiscal year, to make available to a collaborative established in the most populous county in this state a grant in a certain amount.

(f) Requires HHSC to estimate the number of persons with serious mental illness (SMI) in low-income households located in each of the 20 most populous counties in this state. Requires HHSC, for the purposes of distributing grants under this section to collaboratives established in the 19 counties other than the most populous county, for each fiscal year, to determine an amount of grant money available on a per-case basis by dividing the amount of the grant made available under Subsection (e) by the estimated total number of persons with serious mental illness in low-income households located in the most populous county.

(g) Requires HHSC, not later than the 60th day of each fiscal year, to make available to a collaborative established in each of the 19 most populous counties in this state other than the most populous county a grant in an amount equal to the lesser of an amount determined by multiplying the per-person amount determined under Subsection (f) by the estimated number of cases of SMI in low-income households in that county or an amount equal to the collaborative's available matching funds.

(h) Requires HHSC, to the extent appropriated money remains available to HHSC for that purpose after HHSC makes grants available under Subsections (e) and (g), to make available to collaboratives established in other counties in this state grants through a competitive request for proposal process. Authorizes a collaborative, for purposes of awarding a grant under this subsection, to include adjacent counties if, for each member county, the collaborative's members include a local mental health authority that operates in the county and each hospital district, if any, located in the county. Requires HHSC to condition a grant awarded under this subsection on the collaborative submitting a plan described by Subsection (i).

(i) Requires the collaboratives established in each of the 20 most populous counties in this state, not later than the 30th day of each fiscal year, to submit to HHSC a plan that is endorsed by each of the collaborative's member entities, identifies a target population, describes how the grant money and matching funds will be used, includes outcome measures to evaluate the success of the plan, and describes how the success of the plan in accordance with the outcome measures would further the state's interest in the grant program's purposes.

(j) Sets forth acceptable uses for the grant money and matching funds.

(k) Requires each collaborative that receives a grant to, not later than December 31 following the end of the fiscal year for which HHSC distributes a grant under this section, prepare and submit a report describing the effect of the grant money and matching funds in achieving the standard defined by the outcome measures in the submitted plan.

(l) Authorizes HHSC to make inspections of the operation and provision of mental health services provided by a collaborative to ensure state money appropriated for the grant program is used effectively.

SECTION 2. Effective date: September 1, 2017.