



HOUSE BILL 822: Comprehensive Behavioral Health Plan.

2019-2020 General Assembly

Committee:	House Rules, Calendar, and Operations of the House	Date:	July 31, 2019
Introduced by:	Reps. Insko, Ball, Quick	Prepared by:	Jennifer Hillman
Analysis of:	First Edition		Staff Attorney

OVERVIEW: *House Bill 822 revises requirements for the State Plan for Mental Health, Developmental Disabilities, and Substance Abuse Services (MH/DD/SAS) to ensure that the State develops a comprehensive plan for the publicly-funded behavioral health system.*

BILL ANALYSIS: Part I of the bill directs DHHS, in new G.S. 122C-102A, to produce a Comprehensive Behavioral Health Plan for the Publicly-Funded Behavioral Health System annually by January 31. The Comprehensive Plan will be reported to the Joint Legislative Oversight Committee on Health and Human Services and the Joint Legislative Oversight Committee on Medicaid and NC Health Choice.

The plan must include: (i) a mission statement, (ii) a 10-year vision of a future State behavioral health system if the mission is achieved, (iii) three-year goals that identify the results to be achieved relative to the mission and vision, and (iv) specific, measurable 12-month objectives that will be achieved to support the goals of the Comprehensive Plan.

In creating the Comprehensive Plan, the Department must assess the adequacy of the current system, in areas including staffing, training, and competency; access to services, solvency of local management entities/managed care organizations (LME/MCOs); need and utilization of services; coordination of services; and appropriateness of services.

In the Comprehensive Plan, DHHS must define outcomes and data to measure progress on goals and objectives in at least the areas of employment, education, homelessness, imprisonment, and social determinants of health.

Section 2 of the bill requires DHHS to engage a third-party vendor to assist with the completion of the Comprehensive Plan if DHHS determines that the Comprehensive Plan will not be completed on time. No funds will be appropriated for this purpose.

Part II of the bill (i) repeals the existing requirement in G.S. 122C-102 that DHHS develop and implement a State Plan for MH/DD/SAS services every three years and (ii) revises references throughout the statutes to refer to the Comprehensive Plan instead of the State Plan.

EFFECTIVE DATE: The bill is effective when it becomes law.

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