

## LEGISLATIVE BILL 302

Approved by the Governor April 16, 1974

Introduced by Interim on Appropriations, Marvel, 33, Chen.; Whitney, 44; Stahmer, 8; Clark, 47; S. Marsh, 29; Savage, 10; Johnson, 15; Nore, 22; Simpson, 46

AN ACT relating to mental health; to adopt the Nebraska Comprehensive Community Mental Health Services Act; to amend section 83-1,143.06, Revised Statutes Supplement, 1973; to change mental retardation regions; to provide for service in different regions; to provide an operative date; to repeal the original section; and to declare an emergency.

Be it enacted by the people of the State of Nebraska,

Section 1. Sections 1 to 14 of this act shall be known and may be cited as the Nebraska Comprehensive Community Mental Health Services Act. It is hereby declared to be the public policy of the State of Nebraska that all persons residing in Nebraska shall have access to mental health facilities, programs, and services. Such mental health facilities, programs, and services shall meet standards established by the Medical Services Division of the Department of Public Institutions subject to the requirements of subdivision 3 (7) of this act. Sections 1 to 14 of this act are intended to organize and provide methods of financing community mental health facilities, programs, and services; to provide for more effective utilization of existing mental health resources; to provide a means for participation of local communities in the determination of the need for and allocation of mental health facilities, programs, and services; to provide a means to grant state mental health funds as appropriated for community needs; to define administrative structure; and to coordinate and integrate such programs with other human service programs.

Sec. 2. As used in sections 1 to 14 of this act, unless the context otherwise requires:

(1) Director shall mean the Director of Medical Services of the Department of Public Institutions or such officer of the department as he may designate to carry out in whole or in part the administration of the provisions of sections 1 to 14 of this act;

(2) Department shall mean the Department of Public Institutions;

(3) Services shall mean those mental health, drug abuse, and alcoholism services, programs, and facilities which, under the provisions of sections 1 to 14 of this act, provide (a) inpatient services, (b) outpatient services, (c) partial care services, (d) twenty-four hour emergency services, (e) consultation and education services, (f) specialized services as federal legislation may require, or (g) other forms of preventive, treatment, or rehabilitation services which are designed to promote, restore, and maintain the mental health of the people of Nebraska;

(4) Program administrator shall mean the chief executive officer of each comprehensive community mental health services program;

(5) Income shall mean fees from workshops, board and room payments, and receipts from patients, relatives of patients receiving services, or third party payments;

(6) There shall be six mental health regions. The mental health regions shall consist of the following counties:

(a) Region I shall consist of Sioux, Dawes, Fox Butte, Sheridan, Scotts Bluff, Morrill, Garden, Garner, Kimball, Cheyenne, and Deuel counties;

(b) Region II shall consist of Grant, Hooker, Thomas, Arthur, McPherson, Logan, Keith, Lincoln, Perkins, Chase, Hayes, Frontier, Dawson, Gosper, Lundy, Hitchcock, and Red Willow counties;

(c) Region III shall consist of Elaine, LePue, Garfield, Wheeler, Custer, Valley, Greeley, Sherman, Howard, Buffalo, Hall, Phelps, Kearney, Adams, Clay, Furnas, Barlan, Hamilton, Merrick, Franklin, Webster, and Nuckolls counties;

(d) Region IV shall consist of Cherry, Keya Paha, Foyd, Brown, Rock, Holt, Knox, Cedar, Dix, Dakota, Thurston, Wayne, Pierce, Antelope, Focne, Nance, Madison, Stanton, Cuming, Burt, Colfax, and Platte counties;

(e) Region V shall consist of Polk, Butler, Saunders, Seward, Lancaster, Ctoe, Fillmore, Saline, Thayer, Jefferson, Gage, Johnson, Nebraska, Pawnee, York, and Richardson counties; and

(f) Region VI shall consist of Lodge, Washington, Douglas, Sarpy, and Cass counties; and

(7) Service agency shall mean any public or private agency or organization which delivers any of the services defined in subdivision (3) of this section and which receives funds under the provisions of sections 1 to 14 of this act.

Sec. 3. The director shall (1) provide a comprehensive and integrated statewide plan for mental health services, (2) establish minimum standards for the operation of any facility or program providing services funded in whole or in part under the provisions of sections 1 to 14 of this act, (3) provide such assistance as may be necessary to place a mentally ill person in an appropriate facility or program, (4) encourage research by public and private agencies, institutions of higher learning, and hospitals in the interest of the elimination and amelioration of mental illness and of the care and treatment of mentally ill persons, (5) require budgets to be submitted by each region, which budgets shall detail expected expenditures and projected levels of services and revenue, (6) evaluate submitted budgets to determine the state's share of funding requirements and the services to be rendered, and (7) promulgate such rules and regulations as are necessary to carry out the provisions of sections 1 to 14 of this act. In adopting such rules and regulations, the director shall be governed by the provisions of Chapter 84, article 9. Any standards, rules, and regulations shall be adopted only after consultation with the committee provided for in section 8 of this act.

The director may enter into agreements with other departments or agencies of the State of Nebraska that provide mental health, drug abuse, and alcoholism facilities, programs, or services. Contracts may be made with those organizations designated by the regional boards described herein to assist in the administration or supervision of all mental health services and programs provided for by the provisions of sections 1 to 14 of this act within the region. The director shall provide necessary limitations on payment for inpatient services. Programs or services may be provided if community-based programs are not available and the director determines that such programs or services cannot reasonably be provided locally where such services are necessary.

The director shall take whatever actions as are lawfully required to assure the coordination of the facilities, programs, and services of the various agencies of the State of Nebraska and those in the regions and communities, whether they be public or private, which are supported in whole or in part by state funds provided by the provisions of sections 1 to 14 of

this act.

Sec. 4. Any continuation of counties operating under the provisions of the Interlocal Cooperation Act shall appoint a governing board which shall govern and supervise the operation of the comprehensive community mental health services program offered within their geographical boundaries, no later than sixty days following the effective date of this act. The governing board may enter into contracts with public or private service agencies or individuals. Such board shall contract with any public agency or approved private agency or approved individual presently providing those services specified in subdivision (3) of section 2 of this act subject to the minimum standards adopted under section 3 of this act. The governing board shall consist of one member from each of the county boards of supervisors or county commissioners as represented by the Interlocal Cooperation Act. Local governing boards, which shall govern and supervise the comprehensive community mental health services shall consist of only elected officials. Initial terms of the regional governing board members shall be determined as nearly as possible as follows: One-third shall serve for one year, one-third shall serve for two years, and one-third shall serve for three years. All subsequent appointments shall be for three years. Each of the counties shall contribute financial support for the operation of the regional comprehensive community mental health services program based upon a funding formula ascertainable to each of the counties involved.

Sec. 5. The members of the regional governing board shall serve without compensation, but shall be entitled to reimbursement for their actual and necessary expenses incurred in attending meetings or in the discharge of any duty assigned to them by the board.

Sec. 6. The governing board shall (1) organize and supervise the comprehensive mental health, drug abuse, and alcoholism programs, services, and facilities under its jurisdiction, (2) cause such services to be provided to the people, (3) name and appoint a program director to serve as the chief executive officer of the program, (4) report annually to the director regarding the expenditure of funds and the evaluation of services rendered during the preceding year, (5) submit annually to the director a proposed budget and plan of the services to be offered the community, (6) establish the amount of funds to be requested of each county, (7) appoint an advisory committee which is representative of all counties in the region and which shall include one or more members of the governing board, one or more mental

health professionals, one or more mental health employee representatives, one or more representatives of mental health organizations or associations, and a majority of consumers who do not receive more than one-tenth of their income from the provision of mental health care, and (8) consult with the appointed advisory committee on the planning, organization, contracting, provision, evaluation, and fiscal analysis of the mental health services in the region. The advisory committee shall meet on a quarterly basis, and the members shall be reimbursed for actual and necessary expenses incurred in carrying out their duties.

Sec. 7. The governing board shall determine the powers and authority of the program administrator. The administrator shall (1) serve as the principal executive officer directly responsible to the governing board for administering and supervising the programs, services, and facilities, (2) make an annual report to the board of the activities of the services provided during the preceding year, and (3) prepare and submit to the board a proposed budget of the finances required to carry forth the program for the next fiscal year.

In making any application to the federal government for any grant-in-aid, appropriate plans, and a budget defining the purpose and use to be made of such funds must first be submitted to the director by any governing board for review and approval before any such plan is submitted formally to any federal agency.

Sec. 8. A state citizens' advisory committee shall be created. The committee shall consult with the director on the statewide plan, minimum standards, equitable provision of mental health services, including program priorities, encouragement of research, statewide fee schedules and general fiscal analysis, and other matters as necessary to insure the implementation of section 1 of this act. The committee shall consist of one member of each regional governing board as appointed by that board and one consumer from each regional mental health advisory committee as nominated by that committee and appointed by that regional governing board. The committee shall elect a chairman from the members of such committee. The committee shall meet on a quarterly basis. Members shall be reimbursed for actual and necessary expenses incurred in carrying out their duties.

Sec. 9. The six mental health regional governing boards shall offer comprehensive community mental health, drug abuse, and alcoholism programs, services, and facilities. The boards shall provide funds for such community-based projects. Federal funding,

private sources, third party payments, and fees collected may be used as sources of necessary funds. The state shall provide seventy-five per cent of the funds required to provide the services for each region, exclusive of federal funding, private sources, third party payments, and fees collected under the provisions of sections 1 to 14 of this act. Local, county and other tax-generated sources shall account for twenty-five per cent of the funds. The regional governing boards shall account for all sources and expenditure of funds for any agency receiving any state funds under the provisions of sections 1 to 14 of this act.

Sec. 10. Allocation of state matching funds shall be limited to employment of staff personnel, technical assistance, operation of programs, leasing, renting, maintenance of facilities, and for the initiation and continuation of programs and services. State matching funds shall not be used for capital construction. Federal matching funds or other federal funding sources shall not be considered a part of local or state matching.

It shall be the responsibility of the department to require annual audits and reports as it deems necessary to supervise and monitor the provisions of sections 1 to 14 of this act. It shall be the further responsibility of the department to provide accountability for all sources of funds and all expenditure of funds for all agencies receiving any state funds under the provisions of sections 1 to 14 of this act.

Sec. 11. Existing community mental health outpatient clinic services now operated and supported by the state shall continue to receive such support until regional funds are secured to provide for their support. In no event shall support be furnished beyond two years from the effective date of this act. Nothing in this section shall be construed to limit the power of the director to establish facilities, programs, and services.

Sec. 12. Any income received by the community-based facility from charges for services to persons under the provisions of section 14 of this act shall remain in the account of the service agency.

Sec. 13. The director shall provide for an orderly transition to the provisions of sections 1 to 14 of this act to insure the proper care and treatment of all patients, to insure proper placements, and to provide for full utilization of existing manpower and resources at the state, regional or community level subject to the

minimum standards developed under section 3 of this act.

Sec. 14. Persons receiving mental health, drug abuse, and alcoholic services shall be charged fees in accordance with their ability to pay, but not in excess of actual cost. After consultation with the state citizens' advisory committee, the director shall prepare and adopt a uniform patient fee schedule to be used by the governing board in all mental health facilities, programs, and services funded in whole or in part under the provisions of sections 1 to 14 this act. The scheduled fees may be reduced or waived by authorization of the program administrator as may be considered necessary to further the objective of the facilities, programs, and services. No services covered under this act may be denied residents of Nebraska because of inability to pay scheduled fees.

Sec. 15. Any individual requiring mental health services who desires to change to another region may do so with the approval of the regional directors from the region delivering the service and the region contracting for the service. Any such change shall be subject to contract and payment by the regions involved. Payment shall be based upon actual cost for the provision of the service or services exclusive of other available funds which may be utilized to support the cost of services to the individual.

Sec. 16. That section 83-1,143.06, Revised Statutes Supplement, 1973, be amended to read as follows:

83-1,143.06. There are hereby created six mental retardation regions in the state. Each region shall consist of the following counties:

Region 1 shall consist of Sioux, Dawes, Sheridan, Box Butte, Scotts Bluff, Morrill, Garden, Kimball, Banner, Cheyenne, and Deuel counties;

Region 2 shall consist of Grant, Hooker, Thomas, Arthur, McPherson, Logan, Keith, Lincoln, Perkins, Dawson, Chase, Hayes, Frontier, Gosper, Dundy, Hitchcock, and Red Willow counties;

Region 3 shall consist of Plaine, Loup, Garfield, Wheeler, Custer, Valley, Greeley, Sherman, Howard, Merrick, Buffalo, Hall, Hamilton, Phelps, Kearney, Adams, Clay, Furnas, Harlan, Franklin, Webster, and Nuckolls counties;

Region 4 shall consist of Cherry, Keya Paha, Boyd, Brown, Rock, Holt, Knox, Cedar, Dixon, Antelope,

Pierce, Wayne, Dakota, Thurston, Madison, Stanton, Cuming, Burt, Boone, Platte, Colfax, and ~~Nance, Peck, and Butler~~ counties;

Region 5 shall consist of Saunders, York, Seward, Lancaster, Ctoe, Folk, Butler, Fillmore, Saline, Gage, Johnson, Nemaha, Thayer, Jefferson, Pawnee, and Richardson counties; and

Region 6 shall consist of Dodge, Washington, Douglas, Sarpy, and Cass counties.

Sec. 17. As of the effective date of this act any developmentally disabled individual attending any existing regional program may continue to do so and actual costs shall be contracted and paid by the regions involved. Any developmentally disabled individual desiring to change to another region may do so with the approval of the regional directors from the region delivering the service and the region contracting for the service. Any such change shall be subject to contract and payment by the regions involved. Payment shall be based upon actual cost for the provision of the service or services exclusive of other available funds which may be utilized to support the cost of services to the individual.

Sec. 18. This act shall become operative on July 1, 1974.

Sec. 19. That original section 83-1,143.06, Revised Statutes Supplement, 1973, is repealed.

Sec. 20. Since an emergency exists, this act shall be in full force and take effect, from and after its passage and approval, according to law.