

# **An Act Providing a Right to Mental Health Services and Supports**

## **Section-by-Section Summary**

### **Article 1**

Sets out findings and explains the purpose of the bill. The inability of many people with serious mental illnesses to access comprehensive and timely mental health services and supports results in their unnecessary institutionalization, homelessness, dependence and incarceration. The state spends millions of dollars dealing with the consequences of untreated mental illness due to inadequate resources and poor design. With advances in knowledge, an array of effective community-based services and supports has been identified as promoting recovery, community integration and economic self-sufficiency for adults with serious mental illnesses. It is therefore in taxpayers' interest to establish an enforceable right to mental health services and supports for adults with serious mental illnesses.

The purpose of this Act is to empower and authorize individuals with serious mental illnesses to obtain the services and supports they need to be partners in their own recovery.

### **Article 2**

Defines various terms used in the bill, including: advocate, eligible person, mental health services, petition, potentially eligible person, presumptively eligible person, public mental health authority, recovery-oriented, service plan, service matrix and supports.

### **Article 3**

The bill grants to eligible individuals an enforceable right to receive mental health services and supports in sufficient amount, duration, scope and quality to support recovery, community integration and economic self-sufficiency. Services and supports must be based on the person's own goals, established in partnership with appropriate treatment professionals and spelled out in a service plan. Services and supports must be furnished in a timely, culturally appropriate manner and in the most integrated appropriate setting.

The bill establishes a right to voluntary services. It is not intended to impair the validity of court orders under the state's involuntary commitment and involuntary treatment statutes. The refusal or discontinuation of services by an individual would not affect that individual's right to receive other services.

Individuals have a right to information on available services and supports and to choose an advocate to assist them.

#### **Article 4**

The bill lays out the process to be used for accessing services and supports. A person with a mental illness may petition for services and supports, in writing, although the public mental health agency must assist any individual who makes an oral request in completing the written form. A decision on a petition must be made within 10 days; however, a potentially eligible person at imminent risk of hospitalization, incarceration or homelessness is presumptively eligible and services, such as crisis services, must be made available within 24 hours of the filing of a petition. Notice is required if any petition is denied.

An individual who has been found eligible by the Social Security Administration for federal disability programs (Supplemental Security Income and Social Security Disability Insurance) because of a psychiatric impairment is deemed to meet the eligibility standard of having a serious mental illness.

#### **Article 5**

The bill requires development of an individualized service plan for eligible individuals. Urgent mental health needs must be met even before a service plan is developed. The service-planning process must accommodate the individual. The service plan, which will be reviewed and modified periodically, will focus on the petitioner's strengths and life goals and the services and supports needed to achieve those goals. Petitioners are to be full partners in development of their plan and will be given information for making informed choices. Information will also be provided them about advance service planning through advance directives.

Petitioners must be notified of denials, reductions or terminations of requested services and of their right to appeal.

#### **Article 6**

The bill requires the mental health authority to conduct outreach to inform people about the availability of supports and services and their rights under this law. Special efforts are required to engage potentially eligible individuals who are or are at risk of homelessness or incarceration. Outreach staff will be available to assist individuals in completing petitions. Individuals must receive information describing the list of available services and the availability of transportation, scheduling assistance and housing and employment programs.

#### **Article 7**

The bill provides that each eligible or potentially eligible person shall have access to a trained advocate who is independent of the public mental health authority. Petitioners will choose their advocate from a list of qualified individuals. Within two years of enactment, a majority of the individuals recruited, trained and employed as advocates will be people who have personally experienced mental illness.

## **Article 8**

The bill authorizes an appeals process for those who wish to contest adverse actions. There will be two avenues for appeal: An administrative complaint may be filed with the public mental health authority or an action may be brought in a court of competent jurisdiction.

Appeals may be filed with respect to: the eligibility determination; the service planning process; a denial, reduction, irregularity or termination of services; failure to provide services and supports in sufficient amount, duration, scope or quality; failure of the public agency to appoint an advocate; or the denial of any other right provided by this legislation. Services and supports listed in the service plan shall continue during the appeal.

In the case of an administrative complaint, a hearing by an impartial hearing officer is required. In the case of a court action, the court may award costs and reasonable attorney fees.

## **Article 9**

The bill sets up an emergency hearing process to be used when an individual is at risk of severe harm. Severe harm includes, but is not limited to, risk of imminent hospitalization, incarceration or homelessness. Emergency hearing decisions must be rendered within 24 hours and followed by a full hearing.

## **Article 10**

The bill describes a quality-improvement and evaluation process that the public mental health authority must implement. This will include a performance-measurement system, employing outcome measures developed by a commission appointed for that purpose. Individuals with serious mental illnesses, family members, advocates, providers and experts in quality assurance must be appointed to the commission.

## **Article 11**

The bill includes requirements relating to its administration, including privacy protection for personal health care information. The public agency must seek other available sources of funds (such as private insurance, Medicaid, Medicare) before using funds appropriated specifically for the purposes of this legislation. The rights and obligations created under this legislation will remain in effective should the public mental health system be reorganized or privatized in the future.

## **Article 12**

Authorizes appropriations for necessary services to eligible individuals.