

General Assembly

Raised Bill No.

578

February Session, 2006

LCO No. 2469



Referred to Committee on

PUBLIC HEALTH

Introduced by: (PH)

AN ACT IMPLEMENTING THE RECOMMENDATIONS OF THE BEHAVIORAL HEALTH PARTNERSHIP OVERSIGHT COUNCIL.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- Section 1. Subsection (b) of section 17a-22j of the 2006 supplement to the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2006*):
- 4 (b) The council shall consist of the following members:
- (1) The chairpersons and ranking members of the joint standing committees of the General Assembly having cognizance of matters relating to human services, public health, appropriations and the budgets of state agencies, or their designees;
- 9 (2) A member of the Community Mental Health Strategy Board, 10 established pursuant to section 17a-485b, as selected by said board;
- (3) The Commissioner of Mental Health and Addiction Services, or
 said commissioner's designee;
- 13 (4) Sixteen members appointed by the chairpersons of the advisory

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14 15	council on Medicaid managed care, established pursuant to section 17b-28;
16 17	(A) Two of whom are representatives of general or specialty psychiatric hospitals;
18	(B) One of whom is an adult with a psychiatric disability;
19 20	(C) One of whom is an advocate for adults with psychiatric disabilities;
21 22 23	(D) Two of whom are parents of children who have a behavioral health disorder or have received child protection or juvenile justice services from the Department of Children and Families;
24	(E) One of whom has expertise in health policy and evaluation;
25 26	(F) One of whom is an advocate for children with behavioral health disorders;
27 28	(G) One of whom is a primary care provider serving HUSKY children;
29	(H) One of whom is a child psychiatrist serving HUSKY children;
30 31	(I) One of whom is either an adult with a substance use disorder or an advocate for adults with substance use disorders;
32	(J) One of whom is a representative of school-based health clinics;
33 34	(K) One of whom is a provider of community-based behavioral health services for adults;
35	(L) One of whom is a provider of residential treatment for children;
36 37	(M) One of whom is a provider of community-based services for children with behavioral health problems; and
38	(N) One of whom is a member of the advisory council on Medicaid

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39	managed	care;
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1 1	the Commissioners of Social Services, Children and Families and
1 2	[Mental Health and Addiction Services] Education to represent his or
13	her department and one appointed by the State Comptroller, the
14	Secretary of the Office of Policy and Management and the Office of
15	Health Care Access to represent said Idenartment Offices: Land

- 46 (6) One or more consumers appointed by the chairpersons of the council, to be nonvoting ex-officio members; and 47
- 48 [(6)] (7) One representative from the administrative services 49 organization and from each Medicaid managed care organization, to be nonvoting ex-officio members. 50
- 51 Sec. 2. Subsection (c) of section 17a-22j of the 2006 supplement to the 52 general statutes is repealed and the following is substituted in lieu 53 thereof (Effective October 1, 2006):
 - (c) All appointments to the council shall be made no later than July 1, 2005, except that the chairpersons of the council may appoint additional consumers to the council as nonvoting ex-officio members. Any vacancy shall be filled by the appointing authority.
 - Sec. 3. Section 17a-22l of the 2006 supplement to the general statutes is repealed and the following is substituted in lieu thereof (Effective October 1, 2006):
 - The Departments of Children and Families and Social Services shall develop consumer and provider grievance procedures and shall submit such procedures to the Behavioral Health Partnership Oversight Council for review and comment. Such procedures shall include, but not be limited to, procedures for appealing a denial or determination by an enrollee or any provider acting on behalf of an enrollee. The Departments of Children and Families and Social Services shall establish time frames for appealing decisions made by

LCO No. 2469 3 of 5 the administrative services organization, including an expedited review in emergency situations. Any procedure for appeals shall require that an appeal be heard not later than thirty days after such appeal is filed and shall be decided not later than forty-five days after such appeal is filed.

Sec. 4. Section 17a-22o of the 2006 supplement to the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):

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- (a) The Departments of Children and Families and Social Services may establish provider specific inpatient, partial hospitalization, intensive outpatient and other intensive service rates. Within available appropriations, the initial rates shall not be less than each provider's blend of rates from the HUSKY Plans in effect on July 1, 2005, unless the date of implementation of the Behavioral Health Partnership is later than January 1, 2006. If such implementation date is later then January 1, 2006, such initial rates, within available appropriations, shall not be less than each provider's blend of rates in effect sixty days prior to the implementation date of the Behavioral Health Partnership. Within available appropriations, the departments may provide grant payments, where necessary, to address provider financial impacts. The departments may establish uniform outpatient rates allowing a differential for child and adult services. In no event shall such rate increases exceed rates paid through Medicare for such services. The Behavioral Health Partnership Oversight Council shall review any such rate methodology as provided for in subsection (b) of this section. Notwithstanding the provisions of sections 17b-239, as amended, and 17b-241, rates for behavioral health services shall be established in accordance with this section.
- (b) All proposals for initial rates, reductions to existing rates and changes in rate methodology within the Behavioral Health Partnership shall be submitted to the Behavioral Health Partnership Oversight Council for review. If the council does not recommend acceptance, it

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101 may forward its recommendation to the joint standing committees of 102 the General Assembly having cognizance of matters relating to public 103 health, human services and appropriations and the budgets of state 104 agencies. The committees shall hold a joint public hearing on the 105 subject of the proposed rates, to receive the partnership's rationale for 106 making such a rate change. Not later than ninety days after submission 107 by the departments, the committees of cognizance shall make 108 recommendations to the departments regarding the proposed rates. 109 departments shall make every effort to 110 recommendations of both the council and the committees of 111 cognizance when setting rates.

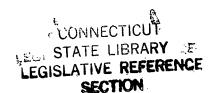
(c) Beginning July 1, 2006, the departments shall adjust all rates
 established under this section, annually, by an amount that is at least
 equal to the average increase granted by the Department of Social
 Services in the current fiscal year to managed care organizations that
 provide services under the HUSKY plan.

This act shall take effect as follows and shall amend the following sections:		
Section 1	October 1, 2006	17a-22j(b)
Sec. 2	October 1, 2006	17a-22j(c)
Sec. 3	October 1, 2006	17a-22 <i>l</i>
Sec. 4	from passage	17a-22o

Statement of Purpose:

To implement the recommendations of the Behavioral Health Partnership Oversight Council.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]





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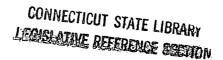
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- 6 committees of the General Assembly having cognizance of matters
- 7 relating to human services, public health, appropriations and the
- 8 budgets of state agencies, or their designees;
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38	(N) One of whom is a member of the advisory council on Medicaid

39	managed	care;
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(5) [Four] \underline{Six} nonvoting ex-officio members, one each appointed by
the Commissioners of Social Services, Children and Families and
[Mental Health and Addiction Services] Education to represent his or
her department and one appointed by the State Comptroller, the
Secretary of the Office of Policy and Management and the Office of
Health Care Access to represent said Idepartment offices; [and]

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