

99TH GENERAL ASSEMBLY State of Illinois 2015 and 2016 SB1249

Introduced 2/17/2015, by Sen. Heather A. Steans

SYNOPSIS AS INTRODUCED:

210 ILCS 49/1-101.6

Amends the Specialized Mental Health Rehabilitation Act of 2013. In a provision concerning mental health system planning, provides that the Office of the Governor (instead of the Governor's Office of Health Innovation and Transformation) shall oversee a process for identifying needed services and identifying the financing strategies for developing those needed services. Makes a change in a provision concerning the purpose of the process. Adds language requiring the process to address the need and financing strategies for trauma-informed care. Requires the Office of the Governor (instead of the Governor's Office of Health Innovation and Transformation) to report its findings and recommendations to the General Assembly by January 15, 2016 (instead of July 1, 2015). Makes other changes. Effective immediately.

LRB099 07694 RPS 27827 b

FISCAL NOTE ACT MAY APPLY

1 AN ACT concerning regulation.

Be it enacted by the People of the State of Illinois, represented in the General Assembly:

- Section 5. The Specialized Mental Health Rehabilitation

 Act of 2013 is amended by changing Section 1-101.6 as follows:
- 6 (210 ILCS 49/1-101.6)
- 7 (Section scheduled to be repealed on July 1, 2016)
- Sec. 1-101.6. Mental health system planning; services for individuals with substance use conditions or disorders. The General Assembly finds the services contained in this Act are
- 11 necessary for the effective delivery of mental health and
- 12 <u>substance use</u> services for the citizens of the State of
- 13 Illinois.
- The General Assembly also finds that the mental health and substance use system in the State requires further review <u>and</u>
- 16 <u>actions</u> to develop additional needed services.
- To ensure the adequacy of community-based services and to offer choice to all individuals with serious mental illness and
- 19 substance use disorders or conditions who choose to live in the
- 20 community, and for whom the community is the appropriate
- 21 setting, but are at risk of institutional care, the <u>Office of</u>
- 22 <u>the Governor's Office of Health Innovation and</u>
- 23 Transformation shall oversee a process for (i) identifying

needed services in the different geographic regions in the State and (ii) identifying the financing strategies for developing those needed services.

The process shall address or examine the need and financing strategies for the following:

- (1) Network adequacy in all 102 counties of the State for: (i) health homes authorized under Section 2703 of the federal Patient Protection and Affordable Care Act; (ii) systems of care for children; (iii) care coordination; (iv) trauma-informed care; and (v) (iv) access to a full continuum of quality care, treatment, services, and supports for persons with serious emotional disturbance, serious mental illness, or substance use disorder.
- (2) Workforce development for the workforce of community providers of care, treatment, services, and supports for persons with mental health and substance use disorders and conditions.
- (3) Information technology to manage the delivery of integrated services for persons with mental health and substance use disorders and medical conditions.
- (4) The needed continuum of statewide community health care, treatment, services, and supports for persons with mental health and substance use disorders and conditions.
- (5) Reducing health care disparities in access to a continuum of care, care coordination, and engagement in networks.

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- The Office of the Governor Governor's Office of Health Innovation and Transformation shall include the Division of Alcoholism and Substance Abuse and the Division of Mental Health in the Department of Human Services, the Department of Healthcare and Family Services, the Department of Public Health, community mental health and substance use providers, statewide associations of mental health and substance use providers, mental health and substance use advocacy groups, and any other entity as deemed appropriate for participation in the needed services process of identifying and financing strategies as described in this Section.
- The Office of the Governor Health Innovation and
 Transformation shall report its findings and recommendations
 to the General Assembly by January 15, 2016 July 1, 2015.
- This Section is repealed on July 1, 2016.
- Before September 1, 2014, the State shall develop and implement a service authorization system available 24 hours a day, 7 days a week for approval of services in the following 3 levels of care under this Act: crisis stabilization; recovery and rehabilitation supports; and transitional living units.
- 21 (Source: P.A. 98-104, eff. 7-22-13; 98-651, eff. 6-16-14;
- 98-878, eff. 8-11-14; revised 10-2-14.)
- 23 Section 99. Effective date. This Act takes effect upon 24 becoming law.