DPHHS Recommendations on Advisory Councils and Statutory Reports Prepared for the Children, Families, Health, and Human Services Interim Committee May 2012

ADVISORY COUNCILS

The following councils are inactive and we recommend they be repealed. See detailed information on each in <u>HB142 Review of DPHHS Advisory Councils and Agency Reports:</u> <u>Not Currently Active</u> prepared by Sue O'Connell of Legislative Services, dated May 2012:

Child Support Enforcement Advisory Board Statutory Authority: 40-5-906, MCA

Community Health Center Advisory Council Statutory Authority: 50-4-810 and 50-4-811, MCA

Montana 2-1-1 Community Coalition

Statutory Authority: 53-1-703, 53-1-704, 53-1-710, and 53-1-711, MCA

We recommend the following two councils be repealed. The Department Director, by the authority granted in Section 2-15-122, will create a non-statutory council as a single replacement. See below:

Mental Health Oversight Advisory Council Statutory Authority: 53-21-702(4)

Children's System of Care Planning Committee Statutory Authority: 52-2-303

Create new Behavioral Health Planning and Advisory Council

- Meet the federal requirements of Mental Health Community Block Grant and Substance Abuse Prevention and Treatment Block Grant
 - Review the Mental Health and Substance Abuse Block Grants and to make recommendations
 - Serve as an advocate for adults with a serious mental illness, children with a serious emotional disturbance, and individuals with substance abuse illnesses
 - Monitor, review and evaluate, not less than once a year, the allocation and adequacy of mental health and chemical dependency services within the State.
 - o Provide input to the department in the development and management of services for individuals with co-occurring mental health and substance use disorders
 - Provide input to the department on transition between the youth and adult behavioral health systems
- Membership appointed by the Director of DPHHS

The following councils are not being utilized as intended. We recommend they be repealed:

Food Safety Advisory Council Statutory Authority: 50-50-103

There is very little activity related to food safety issues in which this group is involved. Over the last five years, there has been one bill and no department rules that have utilized this committee. Further, the only requirement of the Department is to seek comment from this group on food safety-related bills and rule changes, and forward the comments to the Legislature. We believe the public comment mechanisms related to legislation and rules adequately cover the same function.

EMS Advisory Committee Statutory Authority: 50-6-324

There is no need for this advisory committee and it has not been used. While we've routinely administer waivers, we have never had requested a hearing pursuant to our actions or denial of a waiver. Long-time EMS staff members indicate that a Committee has only been formed once under this statute, when a final action was taken to revoke an ambulance service license and a hearing was requested. Staff estimated this was 10-15 years ago and in the end the person gave up the license before a hearing was held. Other than this single instance, staff report no other service has ever requested a hearing related to a program action or complaint.

STATUTORY REPORTS

Recommended for Repeal:

Report: Trauma System Report Statutory Authority: 50-6-402, MCA

Public Health and Safety Division – To our knowledge, no one has ever read this report or taken any action as a result of it. We have never been contacted by a legislator or anyone else about the report.

Report: Older Montanans Trust Fund **Statutory Authority**: 52-3-115, MCA

This trust fund has not been funded as originally contemplated so no expenditures have been made. The language is confusing as to whether the Department is required to provide a report to each legislature or only if funds are expended.

Report: Mental Health Services for Children with Serious Emotional Disturbance **Statutory Authority**: 53-21-1002, MCA

This is a report that was put in place when mental health managed care was in effect. There was a similar report for adult mental health that was eliminated several years ago, and we believe that this one was simply missed when the adult report was eliminated (it is placed in an unusual spot with Service Area Authorities which deal with the adult population). There is no committee to send this report to, so it goes to the legislative library. We do not think that any legislators have reviewed this report for several years, if ever.

Report: Suicide Reduction Plan

Statutory Authority: 53-21-1102, MCA

We recommend the plan be produced every five years with a biennial update of statistics

and data.

Report: Community Health Center Grants **Statutory Authority**: 50-4-805, MCA

The Legislature has not appropriated funds for the grant program since 2007. The

council is inactive and there is no need for this report.

Report: Statewide 2-1-1 Calling System **Statutory Authority**: 53-1-714, MCA

Public Health and Safety Division - The Department coordinated a group of local 2-1-1 call center providers between 2005 and 2007 to create the last report on this issue. The 2007 Legislature took no further action to fund the project, but did not change or repeal the statute (all of Part 7, 53-1 MCA deals with 2-1-1). The Department has not been contacted by anyone (call centers, the public, providers) about additional work on 2-1-1 since the last report was submitted.

Report: Prescription Drug Plus Discount Program

Statutory Authority: 53-6-1005, MCA

This was a one-time only report that was made in September 2006. It could be eliminated without any effect. Drug companies have never been willing to participate with Montana in a "drug access" program. Most of them have individual programs that offer discounts to clients that they (the drug company) determine to have special needs.

Other Consideration:

Report: Effectiveness of Medicaid Managed Care Standards

Statutory Authority: 53-6-705, MCA

This is a newly enacted requirement in 2011 that would require the Department to provide an annual report if we contracted with a managed care company. Since we are not doing that, we are assuming that no report is necessary until such time that we do contract, but the MCA does not explicitly say that. The requirement is also placed in the middle of a section that outlines what the managed health care entity must do, not the Department, and could be easily missed inadvertently in the future if the Department does contract.