# HB 142 REVIEW OF STATUTORY ADVISORY COUNCILS AND REPORTS FOR THE DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVICES

Prepared for the Children, Families, Health, and Human Services Interim Committee

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# INTRODUCTION

House Bill 142, approved by the 2011 Legislature, requires interim committees to review advisory councils and agency reports that have been created by law. Under HB 142, each interim committee is to conduct a review of the councils and reports required of agencies for which they have oversight authority. As a result, the Children, Families, Health, and Human Services Interim Committee is required to review councils and reports related to the Department of Public Health and Human Services (DPHHS).

During the 2011-2012 interim, the committee decided to review any type of advisory body that is created by law. For DPHHS, these range from formal "advisory councils" to committees, coalitions, and commissions. All told, 18 entities existed in statute in 2011 to advise DPHHS on items ranging from mental health services to services for senior citizens and for people with disabilities. In 2013, the Legislature added another advisory group when it created the Montana Suicide Review Team.

During the 2011-2012 interim, DPHHS recommended eliminating seven councils and six reports. Stakeholders also suggested elimination or modification of two councils.

However, the committee that interim decided against introducing any HB 142-related legislation. Some members said DPHHS was in a better position to determine which councils and reports were unnecessary and was able to propose legislation on its own to change those statutes.

# In This Report

This report provides a starting point for committee discussion of advisory councils and required reports during the 2013-2014 interim. It covers:

- the 14 advisory bodies that are currently active, presented in alphabetical order by name of the group;
- laws related to five advisory groups that either have not met in more than a year or have not yet been appointed because the activity that would require their creation has not yet occurred:
- the 15 reports that DPHHS is required by law to provide to the Legislature in one manner or another; and
- recommendations made by DPHHS and interested parties during the 2011-2012 interim for retaining, revising, or eliminating requirements for various advisory groups or reports.

The report also contains, on P. 17, options for committee action during the 2013-2014 interim.

# STATUTORY ADVISORY COUNCILS: ACTIVE

The requirements of each of the DPHHS advisory groups are established in law, as are many of the duties. Following are individual summaries for the advisory groups that are currently active.

# **Advisory Council on Aging**

Statutory Authority: 2-15-232 and 2-15-2206, MCA

### **Purpose**

 Advise the Governor's coordinator of aging and DPHHS in planning, coordinating, and operating state programs that affect senior citizens

#### **General Information**

#### Membership:

- Eleven members appointed by the governor
- A majority of members must be 60 years of age or older
- Members serve three-year terms

#### **Duties and Activities:**

- Assist DPHHS with planning of annual Governor's Conference on Aging
- Review the State Plan on Aging
- Follow issues at the local, state, and federal levels that affect senior citizens
- Raise funds for mini-grants that are awarded at the annual Conference on Aging
- Assist in reviewing mini-grant applications and recommending grant funding
- Meets four times per year, including two conference call meetings

#### **Budget Information**

• Expenses for meals, lodging, and travel for members and for meeting rooms and conference calls totaled about \$6,000 in Fiscal Year 2013.

#### **Advisory Council on Food Safety**

Statutory Authority: 50-50-103, MCA

#### **Purpose**

 Assist DPHHS in the development of administrative rules or review of legislation related to retail food establishments

#### **General Information**

# Membership:

- Six members appointed by the DPHHS director
- Composed of equal numbers of representatives of food establishments and representatives of state and local government
- Members serve two-year terms

#### Duties and Activities:

- Meet as needed to review rule and legislative proposals developed by either DPHHS or by other groups if the legislation is related to Title 50, Chapter 50, MCA
- DPHHS is required to inform the Legislature of the Council's comments

# **Budget Information**

• Council has no budget. All meetings and communications take place by phone or e-mail.

#### **Board of Public Assistance**

Statutory Authority: 2-15-2203 and 53-2-606, MCA

#### **Purpose**

Review proposed decisions on public assistance

#### **General Information**

# Membership:

- Three members appointed by the governor
- Governor may not appoint a DPHHS employee as a member of the board

# Duties and Activities:

- Review and decide denials of public assistance if denial is appealed
- Provide people who have appealed eligibility decisions made by DPHHS employees with prompt notice and opportunity for a fair hearing
- Meets every other month

# **Budget Information**

• Board member expenses and agency support totaled about \$34,800 in FY 2013; about \$5,250 of that amount was spent on per diem and travel reimbursements for members.

# **Children's System of Care Planning Committee**

Statutory Authority: 52-2-303 and 52-2-304, MCA

#### **Purpose**

 Develop an integrated system of services for seriously emotionally disturbed youth who are at risk for placement outside of the home and need services from more than one agency

#### **General Information**

# Membership:

- Eight members required by law, all representing state agencies and programs
- DPHHS director may appoint other members, including members of the public
- Statutory members appointed by state agencies
- DPHHS split the committee into two groups in 2007: the statutorily required group and a community planning committee emphasizing participation by family members and youth

# Duties and Activities of Statutory Planning Committee:

- Develop policies to eliminate or reduce barriers to creating a system of care
- Promote development of an array of services that allow youth to remain in state
- Encourage development of local interagency teams
- Specify outcome measures to evaluate the effectiveness of the system of care
- Coordinate responsibility for the development of a stable system of care, including coordination of funding sources for services
- Provide training and technical assistance opportunities throughout the state
- Meets quarterly

#### Duties and Activities of Community Planning Committee:

- Collaborate with stakeholders, families, and youth to improve services for youth
- Inform stakeholders about the activities of the Children's Mental Health Bureau
- Meets two to three times per year

# **Budget Information**

 Members of the Community Planning Committee are reimbursed for travel expenses, which totaled about \$5,000 in FY 2013.

# Children's Trust Fund Board

Statutory Authority: 2-15-2214 and Title 52, Chapter 7, Part 1, MCA

# **Purpose**

Created in 1985 to reduce and eliminate the mistreatment of Montana children

#### **General Information**

#### Membership:

- Seven members, two of whom must be chosen from state government agencies involved in education and social work relating to children
- Governor appoints members, ensuring geographic distribution of appointees
- Members serve three-year terms, but may be reappointed

#### **Duties and Activities:**

- Administer the child abuse and neglect prevention program
- Must keep costs to a minimum by using existing DPHHS office space and resources
- Meets four times per year

# **Budget Information**

#### Revenue/Funding:

- Federal Community-Based Child Abuse Prevention Grant (CBCAP)
- Special revenue from income tax check-off donations, other donations, interest earnings from the Endowment for Children, and a portion of divorce filing fees

# Expenditures:

Reimbursements to members for meeting expenses totaled about \$2,700 in FY 2013.

# **Committee on Telecommunications Access Services for Persons with Disabilities**

**Statutory Authority:** 2-15-2212, MCA, and Title 53, Chapter 19, Part 3 **Purpose** 

• Oversee the state program that provides equipment that allows people with disabilities to use a standard telephone and to contact emergency services and public safety agencies

#### **General Information**

# Membership:

- 13 members appointed by the governor
- Committee makeup specified in statute
- Members serve three-year terms

#### **Duties and Activities:**

- Establish policies and procedures for administration of the program
- Analyze and approve the program budget and monitor program expenditures
- Contract with qualified providers to design and put in place telecommunications relay programs that meet the needs of persons with disabilities
- Conduct outreach activities, as mandated by the Federal Communications Commission, to Montanans who are deaf, hard of hearing, or blind, to Montanans with speech or mobility disabilities, to families of people with disabilities, and to other state agencies in order to help the agencies comply with the Americans With Disabilities Act
- Meets four times per year

#### **Budget Information**

 Expenses in FY 2013 totaled about \$10,450 and covered a daily honorarium, travel reimbursement, and interpreters and captioning services to accommodate members' needs.

# **Mental Health Oversight Advisory Council**

Statutory Authority: 53-21-702, MCA

# Purpose

Provide input to DPHHS in developing and managing a public mental health system

# **General Information**

# Membership:

- Eighteen members appointed by DPHHS
- Half of the council members must be mental health services consumers, former recipients of mental health services, or immediate family members of recipients of mental health services
- Other members include advocates for mental health consumers and their families, mental health providers, legislators, the public, and DPHHS representatives
- Appointments must satisfy federal requirements for state oversight entities
- Geographic representation must be considered when appointing members
- Members serve four-year terms

#### **Duties and Activities:**

- Provide the Legislative Finance Committee (and other interim committees, if designated)
  with summaries of each meeting and recommendations made to DPHHS. (DPHHS must
  provide the committees with its rationale for not accepting or implementing any council
  recommendation.)
- Review and make recommendations on the state's plan for use of federal mental health funds
- Advocate for adults with mental illness and for seriously emotionally disturbed children
- Monitor, review, and evaluate at least annually the allocation and adequacy of mental health services in Montana
- Meets four times per year

#### Other Information

 Federal law requires states to perform mental health planning as a condition of receipt of federal Mental Health Block Grant funds. Montana's annual grant totals about \$1.2 million.

# **Budget Information**

- Expenses in FY 2013 totaled about \$39,200 and included costs for members' travel, lodging, and per diem, meeting rooms, teleconferencing expenses, and staff support.
- Member reimbursement and meeting expenses totaled about \$19,400.
- Staff support totaled about \$19,800.

# **Montana Health Coalition**

Statutory Authority: 53-2-215, MCA

#### Purpose

• Review certain Medicaid waiver proposals before submission to the federal government

#### **General Information**

#### Membership:

- No specific requirements for membership, other than inclusion of consumer advocates
- Members serve two-year terms and may be reappointed

#### **Duties and Activities:**

- Review section 1115 Medicaid waiver proposals
- Hear and provide comment on health care topics in order to promote short- and longrange planning for state health needs, particularly the needs of low-income residents
- Review and offer advice on other health care initiatives and proposals dealing with state health issues and services
- Meets at least annually

#### Other Information

- Meets the federal requirement for a group that advises DPHHS and Medicaid administrators about health and medical care services
- Federal regulation establishes requirements for membership of federally required advisory group, including physicians, other health professionals, and consumer groups

# **Budget Information**

The FY 2013 meeting was held at no cost via a Web conferencing system.

#### **Montana Suicide Review Team**

# Statutory Authority: 53-21-1105 through 53-21-1110, MCA Purpose

- Study the incidence and causes of suicides in Montana
  - Make recommendations for changes that may prevent future deaths

#### **General Information**

# Membership:

- Six members appointed by the governor
- Members must include a psychiatrist, a psychologist, a member of the clergy, and a licensed clinical social worker or professional counselor
- Two members must represent mid-level health care practitioners, federal or tribal health care agencies, family members, or law enforcement representatives
- Members serve three-year terms and may be reappointed
- Duties and Activities:
  - Review the records and circumstances related to suicides
  - Compile statistics related to suicides for use in reports published by DPHHS
  - Analyze the causes of suicides
  - Recommend measures to prevent future suicides
  - Report to the governor each biennium on the team's work and recommendations
  - Must meet at least eight times a year

#### Other Information

 The Montana Suicide Review Team will terminate July 30, 2016, unless the 2015 Legislature repeals or revises the termination date

#### **Budget Information**

The 2013 Legislature appropriated \$67,000 per year for the team's work.

# **Regional Trauma Care Advisory Committees**

Statutory Authority: 50-6-411, MCA

# Purpose

- Reduce the incidence of trauma injuries in Montana
- Promote and advance excellence in the care of injured patients

#### **General Information**

 Three regional trauma advisory committees (RTACs) are organized along geographic medical referral patterns

# Membership:

- Designated trauma facility appoints members
- Statutorily required to appoint one representative to an RTAC for a four-year term
- Members include representatives from both designated and nondesignated hospitals
- Members serve four-year terms, may be removed for cause, and may be reappointed
- Members receive no compensation for services or reimbursement for expenses

#### **Duties and Activities:**

- Establish standards, policies, procedures, and protocols for regional trauma care system
- Conduct regional quality care improvement and make recommendations to regional trauma care facilities based upon reports provided by DPHHS
- Advise the Trauma Care Committee regarding Montana's trauma care system
- Establish trauma care education and prevention programs
- Advise health care facilities and providers about trauma care
- Perform other duties required by DPHHS and conduct other activities to ensure quality trauma care
- Meets four times per year

#### **Budget Information**

- The committees have no budgeted costs other than staff travel to the meetings.
- Hospitals cover the costs for their staff to participate and provide meeting rooms, meals, and videoconferencing.

# **Service Area Authorities**

Statutory Authority: Title 53, Chapter 21, Part 10, MCA

# **Purpose**

- Collaborate with DPHHS and Local Advisory Councils (LACs) for regional planning and oversight of mental health services within a service area
- Promote consumer and family leadership within the mental health care system in order to advance access to mental health services and individual choice

#### **General Information**

• Divided into three regional groups: Western Service Area Authority (WSAA), Central Service Area Authority (CSAA), and Eastern Service Area Authority (ESAA)

# Membership:

- DPHHS approves a leadership committee within each service area, which in turn establishes a board and adopts bylaws
- Members include providers, county commissioners, representatives of LACs, mental health consumers, and family members of consumers
- Regional members are not appointed or elected -- membership is open
- Leadership committee elects board members, who serve terms of one to three years Duties and Activities:
  - Receive proposals and/or recommendations from LACs on matters affecting local communities
  - Serve in a collaborative and planning role for DPHHS
  - Leadership committees meet one to four times per year
  - Boards meet monthly

# **Budget Information**

• DPHHS provides funding to each SAA to cover meeting expenses as follows: \$35,000 for ESAA, \$25,000 for CSAA, and \$25,000 for WSAA.

# **Tobacco Prevention Advisory Board**

Statutory Authority: 17-6-610, MCA

#### Purpose

 Gather information and advise DPHHS regarding administration of the Tobacco Use Prevention Program established pursuant to 17-6-606, MCA

#### **General Information**

# Membership:

- Consists of 15 members appointed by the DPHHS director
- Members serve three-year terms, subject to reappointment for one succeeding term
- A board member may not have been paid by the tobacco products industry during the 10year period preceding appointment

#### **Duties and Activities:**

- Gather information, make recommendations regarding appropriations from the state special revenue accounts, and provide input related to administration of the Tobacco Use Prevention Program
- Must meet at least once per year

# **Budget Information**

• The board's FY 2013 meeting was held at no cost via a Web conferencing system.

#### **Trauma Care Committee**

Statutory Authority: 2-15-2216 and 50-6-404, MCA

#### **Purpose**

- Reduce the incidence of trauma injuries in Montana
- Promote and advance excellence in the care of an injured patient

#### **General Information**

- Members include representatives of the three regional trauma care advisory committees Membership:
  - Consists of health care representatives appointed by the governor
  - Members serve four-year terms and may be reappointed
  - Members receive no compensation, but are reimbursed for expenses

#### **Duties and Activities:**

- Provide direction to DPHHS regarding trauma care, implementation of a hospital data collection system, and a statewide quality improvement system for trauma care
- Analyze the effect of the trauma care system on patient care, morbidity, and mortality
- Oversee and provide recommendations to the regional trauma care advisory committees
- Meets four times per year

# **Budget Information**

Member reimbursements for meeting expenses totaled about \$6,000 in FY 2013.

# **Traumatic Brain Injury Advisory Council**

Statutory Authority: 2-15-2217, MCA

# **Purpose**

- Advise DPHHS on ways to improve and develop services regarding traumatic brain injury, including coordination of services between public and private groups
- Encourage citizen participation through public hearings and other types of community outreach and prevention activities
- Encourage research, public awareness, education, and prevention activities
- Advise DPHHS on the use of grant funds and funds in the traumatic brain injury account, which includes revenue from a \$1 donation that can be made when registering a vehicle

# **General Information**

# Membership:

- Nine members, three of whom represent state agencies and six of whom must be members of the public
- Governor appoints public members
- Committee makeup specified in statute to include a range of interested parties
- Public members serve three-year terms

#### Duties and Activities:

- Discuss issues of concern to the field of traumatic brain injury
- Work with the Brain Injury Association of Montana and the prevention staff at DPHHS
- Make recommendations to DPHHS on matters involving traumatic brain injury
- Must meet four times per year

#### **Budget Information**

Council expenses in FY 2013 totaled about \$10,200.

# STATUTORY ADVISORY GROUPS: INACTIVE

Some advisory bodies established in statute have not been active in recent years. Those entities, their purposes, and the current status of each are summarized below.

# **Child Support Enforcement Advisory Board**

Statutory Authority: 40-5-906, MCA

# **Purpose**

- Advise DPHHS about the policy, direction, control, and management of the child support
  case registry and payment processing unit and on forms, data processing needs,
  contract terms, and cooperative agreements related to child support enforcement
- State law allows DPHHS to enter into contracts to establish, operate, or maintain the case registry and payment processing unit if a board exists to act in an advisory capacity

#### Status

 Board has been disbanded, perhaps as long ago as 2004, because the Child Support Enforcement Division uses state employees, rather than a contractor, to operate the case registry and payment processing unit.

#### **Commission on Provider Rates and Services**

Statutory Authority: Title 53, Chapter 10, Part 2, MCA

# **Purpose**

- Monitor the Medicaid reimbursement rates paid to providers of Medicaid services in order to ensure that state funds are spent appropriately, providers are treated fairly, and consumer and taxpayer expectations are met
- Create a protocol for recommending provider reimbursement rates
- Recommend reimbursement levels, rate equity among service levels, and cost-effective methods of regulating and auditing provider services

#### Status

- Meetings are held at the call of the presiding officer.
- The last meeting appears to have been held in September 2010.
- Commission was to prioritize its requests for information before meeting again, and DPHHS says it is waiting to receive the commission's requests.

# **Community Health Centers Advisory Group**

Statutory Authority: 50-4-810 and 50-4-811, MCA

# **Purpose**

- Oversee the DPHHS grant process for creating and supporting new nonfederally funded community health centers and expanding services at existing federally qualified community health centers
- Make recommendations on applications for grant funds

#### **Status**

- Advisory group was created in 2007 and was active in 2007 and 2008.
- Legislature has not appropriated funds for the grant program since 2007, so group has been inactive since 2009.

# **Medicaid Managed Care Advisory Council**

Statutory Authority: 53-6-710, MCA

#### **Purpose**

- Review requests for proposals for Medicaid managed care programs
- Review contracts proposed to be awarded for managed care
- Hold a public hearing in the area affected by a proposed managed care effort and submit a report of findings related to the public comment process to the Legislature, the Legislative Auditor's Office, and DPHHS

#### Status

- The 2011 Legislature created the council with passage of Senate Bill 351.
- DPHHS has not appointed members because no managed care proposals are pending.

# **Montana 2-1-1 Community Coalition**

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

- Assist DPHHS in developing a strategic plan for putting in place, operating, and
  evaluating a 2-1-1 system to provide public information on and referral to local resources
  related to disaster, emergency, safety, health, or human services topics
- Provide a report to the Children, Families, Health, and Human Services Interim Committee and the Legislature each biennium

#### **Additional Information**

- Created by the 2005 Legislature
- No funding provided for coalition
- Governor did not appoint coalition members because of lack of funding; DPHHS established an informational work group that met three times

#### **Status**

- The coalition submitted a report to the Legislature on Nov. 1, 2006.
- DPHHS has not continued to work on 2-1-1 activities since completion of the report. However, individual 2-1-1 call centers continue to serve various areas of the state.

# STATUTORILY REQUIRED REPORTS

DPHHS is required by law to submit 15 reports to the Legislature. Some of the reports must be provided to a specific committee. Others must be submitted to the Legislative Services Division by Sept. 1 of even-numbered years, and the division serves as the "legislative clearinghouse" for information on agency reports. Agencies must provide the title and a description of the report, as well as any hyperlinks for reports that are already published on the Internet. Following the November election, the Legislative Services Division provides all members of the next Legislature with the list of the agency reports.

The reports are presented below in the order in which they appear in the statutes. However, they are divided into two categories:

- newly required reports and reports that DPHHS is currently providing; and
- reports that have been provided in the past but not in recent years.

# Ongoing or Newly Required Reports

Report 1: Trauma System Report Statutory Authority: 50-6-402, MCA

**Additional Information**: DPHHS is required to submit a report to each Legislature about the effectiveness of the trauma care system established under Title 50, Chapter 6, Part 4, MCA. The statute does not specify how the report is to be provided to the Legislature. DPHHS has submitted it using the procedure for providing reports to the legislative clearinghouse. The last report was submitted in fall 2012.

**Report 2**: Registry Information on the Use of Marijuana for Debilitating Medical Conditions **Statutory Authority**: 50-46-303, MCA

Additional Information: DPHHS must report to the Legislature twice a year on the number of people who have applied for registry identification cards, the number who have received cards, the debilitating conditions for which cards were issued, the number of providers, the number of cards revoked, the number of physicians providing written certification, and the number of certifications each physician has provided. DPHHS provides most of this information by publishing monthly statistics on its website and provides the legislative clearinghouse with a link to the information. The Children, Families, Health, and Human Services Interim Committee staff also provides this information to the committee at each regular meeting.

Report 3: Out-of-State Placement of Children with Mental Health Needs

Statutory Authority: 52-2-311, MCA

Additional Information: DPHHS must collect a variety of information related to the number of children who receive mental health services outside of Montana and the reasons they were not served by in-state providers. The statute requires DPHHS to report the information twice a year to the Children, Families, Health, and Human Services Interim Committee. DPHHS most recently provided the report in November 2013 and will be scheduled to provide it again before the end of the current interim.

Report 4: Older Montanans Trust Fund Statutory Authority: 52-3-115, MCA

**Additional Information:** DPHHS is required to submit a report every two years detailing how money in the Older Montanans Trust Fund has been used. The trust fund was created by the 2007 Legislature to fund new, innovative services or existing services for Montanans who are 60 years of age or older if the services will allow them to live an independent lifestyle in the least restrictive setting possible. DPHHS last provided a report to the legislative clearinghouse in January 2014.

Report 5: Medicaid Section 1115 Requests

Statutory Authority: 53-2-215, MCA

**Additional Information**: DPHHS is required to provide the legislative clearinghouse with a report indicating the status of each Medicaid section 1115 waiver request it submits to the U.S. Department of Health and Human Services. If the federal government denies the waiver, DPHHS is to report on the reasons the waiver was denied and provide an analysis of the costs of providing services to the target population as an optional Medicaid service, rather than as a waiver service. DPHHS last provided a report to the legislative clearinghouse in August 2012.

<u>Report 6</u>: Temporary Assistance for Needy Families (TANF) Parents as Scholars Program **Statutory Authority**: 53-4-209, MCA

Additional Information: The 2005 Legislature created a program requiring DPHHS to use TANF funds to help eligible individuals pay for education that would lead to a high school diploma, a general equivalency degree, vocational training, an associate's degree, or a bachelor's degree. The 2011 Legislature added a requirement for annual reports to the Children, Families, Health, and Human Services Interim Committee and the Legislative Finance Committee. DPHHS provided a report in June 2012 and will be scheduled to provide a report in 2014.

**Report 7**: Medicaid Report

**Statutory Authority**: 53-6-110, MCA

**Additional Information**: DPHHS is required to provide the Legislative Finance Committee with a report on Medicaid funding projections for each biennium. The report must analyze past and present funding levels, projections for the next biennium that identify trends in use and cost of services and in the number of Medicaid enrollees, and the effects of new and projected facilities and services identified by the State Health Care Facilities Plan. The Montana Medicaid Report to the 2013 Legislature was submitted in January 2013.

Report 8: Medicaid Managed Care Statutory Authority: 53-6-710, MCA

Additional Information: The advisory council that reviews Medicaid managed care proposals must submit a report of its findings to the Children, Families, Health, and Human Services Interim Committee and to the Legislative Auditor's Office. The council's duties include holding a public hearing in the area that would be affected by the contract in order to educate Medicaid enrollees, health care providers, and the public on the proposal and to accept public comment on the proposed contract. The advisory council and the reporting requirement were created by the 2011 Legislature. No managed care proposals have been made since that time, and DPHHS has not yet appointed an advisory council. As a result, the agency has not yet issued a report.

<u>Report 9</u>: Mental Health Services for Children with Serious Emotional Disturbance **Statutory Authority**: 53-21-1002, MCA

**Additional Information**: DPHHS is required to report at least every two years on the ways in which it is coordinating state and community resources to ensure comprehensive delivery of services to children who are seriously emotionally disturbed. The report also must include recommendations by DPHHS and by service providers. The report was last submitted to the legislative clearinghouse in September 2010.

Report 10: Suicide Reduction Plan Statutory Authority: 53-21-1102, MCA

Additional Information: Every two years, DPHHS is required to develop a Suicide Reduction Plan that assesses risk factors that affect Montana's suicide rate, discusses activities designed to reduce suicide, includes targets for suicide reduction among various demographic groups, provides information on all existing state suicide reduction activities, and is to include recommendations from the Montana Suicide Review Team. The report must be submitted to the Children, Families, Health, and Human Services Interim Committee and also to the legislative clearinghouse. Typically, DPHHS has presented the Suicide Reduction Plan to the committee at the committee's final meeting of the interim.

# Reports Not Currently Being Submitted

Report 11: Community Health Center Grants

Statutory Authority: 50-4-805, MCA

Additional Information: DPHHS is required to submit to the legislative clearinghouse a report that details grants made to create and support new non-federally funded community health centers or to expand services offered by existing federally qualified community health centers. The report is to include the number of people served because of the grant awards and the costs to the state of the services that will be provided. In addition, DPHHS is to provide regular reports on the status of the program to the Children, Families, Health, and Human Services Interim Committee and the Legislative Finance Committee. DPHHS made the required status reports during the 2007-2008 interim and submitted a report to the Legislature in 2008. The Legislature did not appropriate funds for grants in 2009, 2011, or 2013. As a result, DPHHS has not provided additional reports.

Report 12: Statewide 2-1-1 Calling System

Statutory Authority: 53-1-714, MCA

**Additional Information**: DPHHS is to submit a report to the legislative clearinghouse every two years to describe efforts undertaken by the 2-1-1 Community Coalition. The coalition was created in statute to assist DPHHS in putting in place a statewide 2-1-1 calling system to provide public information on and referral to local resources related to disaster, emergency, safety, health, or human services topics. The coalition was created by the 2005 Legislature and submitted a report to the Legislature in November 2006. DPHHS has not worked on 2-1-1 activities since that time and, as a result, has not submitted additional reports.

**Report 13**: Effectiveness of Medicaid Managed Care Standards

Statutory Authority: 53-6-705, MCA

**Additional Information**: DPHHS is required to prepare an annual report on the effectiveness of standards established for accessibility and quality of care under a Medicaid managed care contract. The report must indicate whether Medicaid enrollees covered by the managed care contract have had access to care. It also is supposed to provide information on whether the standards have ensured quality of care. While the statute requires a report, it does not specify that the report must be submitted to the Legislature or any other entity.

Report 14: Prescription Drug Plus Discount Program

Statutory Authority: 53-6-1005, MCA

**Additional Information**: DPHHS administers a prescription drug discount program for individuals who are at or below 250 percent of the federal poverty level and who do not have insurance coverage for prescription drugs. DPHHS was required by the statute to submit a report on prescription drug use, needs, and trends to the legislative clearinghouse by Sept. 15, 2006.

<u>Report 15</u>: Recommendations of the Commission on Provider Rates and Services **Statutory Authority**: 53-10-212, MCA

**Additional Information**: The Commission on Provider Rates and Services is required to submit to the legislative clearinghouse a report on the topics it has reviewed and on its findings and recommendations. The commission has not met since 2010 and did not submit reports to the 2011 or 2013 legislatures.

# **RECOMMENDATIONS FROM THE 2011-2012 INTERIM**

The Children, Families, Health, and Human Services Interim Committee received the following public comment on the advisory councils and required reports during the 2011-2012 interim.

# Recommendations by DPHHS

DPHHS recommended that seven councils and six reports be eliminated. The agency also suggested that the requirements for another report be changed.

The seven councils that DPHHS recommended eliminating were:

- the Child Support Enforcement Advisory Board, Community Health Centers Advisory Group, and Montana 2-1-1 Community Coalition, all of which have been inactive;
- the Advisory Council on Food Safety, because it has had relatively little activity in food safety issues and because its purpose of providing public comment on legislation and rules can be met in other ways;
- the Mental Health Oversight Advisory Council and the Children's System of Care
  Planning Committee, because DPHHS could create a single, non-statutory council that
  could replace both groups and meet federal requirements for review of federal mental
  health and substance abuse grants; and
- the EMS Advisory Committee, because it has not been used in more than a decade and is a permissive, rather than statutorily required, committee.

DPHHS recommended eliminating six reports, because they either have not been produced in recent years or little action has been taken as a result of the reports. The reports involve the state's trauma response system; the Older Montanans Trust Fund; mental health services for children with serious emotional disturbance; community health center grants; the statewide 2-1-1 calling system; and the Prescription Drug Plus Discount Program. The agency also suggested that the suicide reduction plan be produced every five years, rather than every two years.

#### Recommendations by the Public

Members of the public suggested eliminating:

- the Community Health Centers Advisory Group because the Legislature has not appropriated money for the related grant program in recent years; and
- the Commission on Provider Rates and Services because it had not met for more than a year and has had limited ability to obtain information for its work.

#### They recommended retaining:

- the Advisory Council on Food Safety and the Tobacco Prevention Advisory Board because both groups support the work of the Montana Public Health Association at the local level; and
- the regional Service Area Authorities that advise DPHHS on mental health issues.

# **OPTIONS FOR COMMITTEE ACTION**

After reviewing the information prepared for this report, the committee could take any of the following steps to meet its statutory obligation to review advisory councils and reports related to DPHHS:

- 1. Request additional information about or presentations by specific advisory councils.
- 2. Determine that some advisory group activities or purposes should be amended to better reflect the current role of an advisory group.
- 3. Determine that the requirements of some reports should be revised.
- 4. Determine that some advisory groups and/or required reports should be eliminated.
- 5. Determine that no committee action is necessary.

Options 2 through 4 would require that the committee authorize the drafting of legislation, which would be presented for committee review and public comment at a future meeting.

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