



State of Connecticut

GENERAL ASSEMBLY

STATE CAPITOL
HARTFORD, CONNECTICUT 06106-1591

Senate Bill No. 1160 Public Act No. 13-3

Task Force To Study The Provision Of Behavioral Health Services For Young Adults

Sec. 66. (*Effective from passage*) (a) There is established a task force to study the provision of behavioral health services in the state with particular focus on the provision of behavioral health services for persons sixteen to twenty-five years of age, inclusive.

(b) The task force shall analyze and make recommendations concerning: (1) Improving behavioral health screening, early intervention and treatment; (2) closing gaps in private insurance coverage; (3) improving behavioral health case management services; (4) addressing the insufficient number of certain behavioral health providers, including psychiatrists who specialize in treating children and those offering specialized services; (5) improving the delivery system for behavioral health services; (6) improving payment models for behavioral health services; (7) creating a central clearinghouse with information for members of the public concerning behavioral health services; (8) providing intensive, individualized behavioral health intervention services in schools for students who are exhibiting violent tendencies; (9) requiring the State Department of Education to provide technical assistance to school districts concerning behavioral intervention specialists in public and private schools and for preschool programs; (10) employing the use of assisted outpatient behavioral health services and involuntary outpatient commitment as treatment options; (11) conducting behavioral health screenings of public school

children; (12) requiring disclosure of communications by mental health professionals concerning persons who present a clear and present danger to the health or safety of themselves or other persons; and (13) reducing the stigma of mental illness as it presents a barrier to a person's receipt of appropriate mental health services.

(c) The task force shall consist of the following members:

(1) The Healthcare Advocate;

(2) The Child Advocate;

(3) Two appointed by the president pro tempore of the Senate, one of whom shall be a child psychiatrist and the other a primary care provider;

(4) Two appointed by the speaker of the House of Representatives, one of whom shall be a pediatrician whose practice is focused on treating adolescents and the other a representative of a school-based health center;

(5) Two appointed by the majority leader of the Senate, one of whom shall be a judge of probate and the other a parent with a child who has utilized behavioral health services;

(6) Two appointed by the majority leader of the House of Representatives, one of whom shall be a school psychologist and the other a representative of a community health center;

(7) Two appointed by the minority leader of the Senate, one of whom shall be a representative of a health insurer and the other a representative of a hospital that offers behavioral health services; and

(8) Two appointed by the minority leader of the House of Representatives, one of whom shall be a representative of an

organization that offers behavioral health case management services and the other a consumer of behavioral health services or the representative of an organization that advocates for consumers of behavioral health services;

(9) One appointed by the Governor, who shall be a representative of an institution of higher education; and

(10) The Commissioners of Children and Families, Mental Health and Addiction Services, Public Health and Education, and the Insurance Commissioner or the commissioners' designees.

(d) All appointments to the task force shall be made not later than thirty days after the effective date of this section. Any vacancy shall be filled by the appointing authority.

(e) The president pro tempore of the Senate and the speaker of the House of Representatives shall each appoint one chairperson of the task force from among the members. Such chairpersons shall schedule the first meeting of the task force, which shall be held not later than sixty days after the effective date of this section. A majority of the voting task force members shall constitute a quorum. A majority vote of a quorum shall be required for any official action of the task force. Any tie vote shall be decided by the chairpersons. The task force shall meet not less than monthly until February 1, 2014, and at other times upon the call of the chairs or upon the request of a majority of the members.

(f) The administrative staff of the joint standing committee of the General Assembly having cognizance of matters relating to public health shall serve as administrative staff of the task force.

(g) Members of the task force shall serve without compensation,

except for necessary expenses incurred in the performance of their duties.

(h) The task force may seek funding from any state, federal or private source and may enter into contracts to carry out its duties.

(i) Not later than February 1, 2014, the task force shall submit a report on its findings and recommendations to the Governor, the president pro tempore of the Senate, the speaker of the House of Representatives, the minority leader of the Senate, the minority leader of the House of Representatives, and the joint standing committees of the General Assembly having cognizance of matters relating to appropriations, public health, human services, education and insurance, in accordance with the provisions of section 11-4a of the general statutes. The task force shall provide additional information not contained in such report to said members of the General Assembly, upon their request. The task force shall terminate on July 1, 2014.