
ASSEMBLY BILL No. 48—COMMITTEE ON
HEALTH AND HUMAN SERVICES

(ON BEHALF OF THE CLARK COUNTY CHILDREN'S
MENTAL HEALTH CONSORTIUM)

PREFILED DECEMBER 14, 2010

Referred to Concurrent Committees on Health
and Human Services and Ways and Means

SUMMARY—Revises provisions governing children's mental health consortia. (BDR 39-336)

FISCAL NOTE: Effect on Local Government: No.

Effect on the State: Contains Appropriation not included
in Executive Budget.

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EXPLANATION – Matter in ***bolded italics*** is new; matter between brackets **[omitted material]** is material to be omitted.

AN ACT relating to mental health; authorizing mental health consortia to perform certain activities relating to children's mental health; authorizing mental health consortia to accept and expend money for certain purposes; and providing other matters properly relating thereto.

Legislative Counsel's Digest:

1 Existing law: (1) establishes a mental health consortium in each county whose
2 population is 100,000 or more (currently Clark and Washoe Counties) and one
3 mental health consortium in the region that comprises all other counties; and (2)
4 requires each consortium to establish a long-term strategic plan for the provision of
5 mental health services to children with emotional disturbance within the
6 jurisdiction of the consortium. (NRS 433B.333, 433B.335) **Section 2** of this bill
7 authorizes each mental health consortium to implement the plan and to engage in
8 other activities to improve the provision of mental health services to children with
9 emotional disturbance and their families. **Section 3** of this bill authorizes each
10 consortium to apply for and accept gifts, grants, donations and bequests and enter
11 into contracts to carry out the activities of the consortium.

12 **Section 4** of this bill requires each consortium to submit to the Director of the
13 Department of Health and Human Services and to the Commission on Mental
14 Health and Developmental Services any request for an allocation for the
15 administrative expenses of the consortium for consideration as part of the
16 Department's biennial budget request.



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THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN
SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

1 **Section 1.** Chapter 433B of NRS is hereby amended by adding
2 thereto the provisions set forth as sections 2 and 3 of this act.

3 **Sec. 2. 1. A mental health consortium established by NRS
4 433B.333 may:**

5 (a) *Participate in activities within the jurisdiction of the
6 consortium to:*

7 (1) *Implement the provisions of the long-term strategic plan
8 established by the consortium pursuant to NRS 433B.335; and*

9 (2) *Improve the provision of mental health services to
10 children with emotional disturbance and their families, including,
11 without limitation, advertising the availability of mental health
12 services and carrying out a demonstration project relating to
13 mental health services.*

14 (b) *Take other action to carry out its duties set forth in this
15 section and NRS 433B.335 and section 3 of this act.*

16 2. *To the extent practicable, a mental health consortium shall
17 coordinate with the Department to avoid duplicating or
18 contradicting the efforts of the Department to provide mental
19 health services to children with emotional disturbance and their
20 families.*

21 **Sec. 3. 1. A mental health consortium established by NRS
22 433B.333 may:**

23 (a) *Enter into contracts and agreements to carry out the
24 provisions of this section and NRS 433B.335 and section 2 of this
25 act; and*

26 (b) *Apply for and accept gifts, grants, donations and bequests
27 from any source to carry out the provisions of this section and
28 NRS 433B.335 and section 2 of this act.*

29 2. Any money collected pursuant to subsection 1:

30 (a) *Must be deposited in the State Treasury and accounted for
31 separately in the State General Fund; and*

32 (b) *Except as otherwise provided by the terms of a specific gift,
33 grant, donation or bequest, must only be expended, under the
34 direction of the consortium which deposited the money, to carry
35 out the provisions of this section and NRS 433B.335 and section 2
36 of this act.*

37 3. The Administrator shall administer the account
38 maintained for each consortium.

39 4. Any interest or income earned on the money in an account
40 maintained pursuant to this section must be credited to the



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1 ***account and does not revert to the State General Fund at the end
2 of a fiscal year.***

3 ***5. Any claims against an account maintained pursuant to this
4 section must be paid as other claims against the State are paid.***

5 **Sec. 4.** NRS 433B.335 is hereby amended to read as follows:

6 433B.335 1. Each mental health consortium established
7 pursuant to NRS 433B.333 shall prepare and submit to the Director
8 of the Department a long-term strategic plan for the provision of
9 mental health services to children with emotional disturbance in the
10 jurisdiction of the consortium. A plan submitted pursuant to this
11 section is valid for 10 years after the date of submission, and each
12 consortium shall submit a new plan upon its expiration.

13 2. In preparing the long-term strategic plan pursuant to
14 subsection 1, each mental health consortium must be guided by the
15 following principles:

16 (a) The system of mental health services set forth in the plan
17 should be centered on children with emotional disturbance and their
18 families, with the needs and strengths of those children and their
19 families dictating the types and mix of services provided.

20 (b) The families of children with emotional disturbance,
21 including, without limitation, foster parents, should be active
22 participants in all aspects of planning, selecting and delivering
23 mental health services at the local level.

24 (c) The system of mental health services should be community-
25 based and flexible, with accountability and the focus of the services
26 at the local level.

27 (d) The system of mental health services should provide timely
28 access to a comprehensive array of cost-effective mental health
29 services.

30 (e) Children and their families who are in need of mental health
31 services should be identified as early as possible through screening,
32 assessment processes, treatment and systems of support.

33 (f) Comprehensive mental health services should be made
34 available in the least restrictive but clinically appropriate
35 environment.

36 (g) The family of a child with an emotional disturbance should
37 be eligible to receive mental health services from the system.

38 (h) Mental health services should be provided to children with
39 emotional disturbance in a sensitive manner that is responsive to
40 cultural and gender-based differences and the special needs of the
41 children.

42 3. The long-term strategic plan prepared pursuant to subsection
43 1 must include:

44 (a) An assessment of the need for mental health services in the
45 jurisdiction of the consortium;



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1 (b) The long-term strategies and goals of the consortium for
2 providing mental health services to children with emotional
3 disturbance within the jurisdiction of the consortium;

4 (c) A description of the types of services to be offered to
5 children with emotional disturbance within the jurisdiction of the
6 consortium;

7 (d) Criteria for eligibility for those services;

8 (e) A description of the manner in which those services may be
9 obtained by eligible children;

10 (f) The manner in which the costs for those services will be
11 allocated;

12 (g) The mechanisms to manage the money provided for those
13 services;

14 (h) Documentation of the number of children with emotional
15 disturbance who are not currently being provided services, the costs
16 to provide services to those children, the obstacles to providing
17 services to those children and recommendations for removing those
18 obstacles;

19 (i) Methods for obtaining additional money and services for
20 children with emotional disturbance from private and public entities;
21 and

22 (j) The manner in which family members of eligible children
23 and other persons may be involved in the treatment of the children.

24 4. On or before January 31 of each even-numbered year, each
25 mental health consortium shall submit to the Director of the
26 Department and the Commission:

27 (a) A list of the priorities of services necessary to implement the
28 long-term strategic plan submitted pursuant to subsection 1 and an
29 itemized list of the costs to provide those services; ~~and~~

30 (b) A description of any revisions to the long-term strategic plan
31 adopted by the consortium during the immediately preceding year
~~;~~ and

33 (c) *Any request for an allocation for administrative expenses
34 of the consortium.*

35 5. In preparing the biennial budget request for the Department,
36 the Director of the Department shall consider the list of priorities
37 *and any request for an allocation* submitted pursuant to subsection
38 4 by each mental health consortium. On or before September 30 of
39 each even-numbered year, the Director of the Department shall
40 submit to each mental health consortium a report which includes a
41 description of:

42 (a) Each item on the list of priorities of the consortium that was
43 included in the biennial budget request for the Department; ~~and~~



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1 (b) Each item on the list of priorities of the consortium that was
2 not included in the biennial budget request for the Department and
3 an explanation for the exclusion ~~H~~; and

4 (c) Any request for an allocation for administrative expenses
5 of the consortium that was included in the biennial budget request
6 for the Department.

7 6. On or before January 31 of each odd-numbered year, each
8 consortium shall submit to the Director of the Department and the
9 Commission:

10 (a) A report regarding the status of the long-term strategic plan
11 submitted pursuant to subsection 1, including, without limitation,
12 the status of the strategies, goals and services included in the plan;
13 ~~F~~and

14 (b) A description of any revisions to the long-term strategic plan
15 adopted by the consortium during the immediately preceding year
16 ~~H~~; and

17 (c) A report of all expenditures made from an account
18 maintained pursuant to section 3 of this act, if any.

19 Sec. 5. (Deleted by amendment.)

20 Sec. 6. This act becomes effective on July 1, 2011.

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