

HB 142: Review of DPHHS Advisory Councils and Reports

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

House Bill 142, approved by the 2011 Legislature, requires interim committees to review advisory councils and agency reports that have been created by law for the agencies under their jurisdiction. The interim committees are to make recommendations to the next Legislature on retaining, revising, or eliminating any of the councils or reports.

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).

The committee received a comprehensive report on DPHHS advisory groups and reports at its November 2015 meeting but did not have time to review or act on the report. This briefing paper summarizes key information from the report and presents options for committee action.

Summary of Councils and Reports

Eighteen¹ advisory councils, committees, coalitions, or commissions exist in statute to advise DPHHS on items ranging from mental health services to services for senior citizens and for people with disabilities. DPHHS also is required to submit 20 reports to the Legislature or legislative committees.

The table on Page 3 of this report lists each advisory entity and indicates whether the group is active, temporary, or inactive. Similarly, it lists each report and indicates whether the report is being provided, is newly required, or has not been provided in recent years.

Recommendations and Action in Previous Interims

Past interim committees have decided against introducing any legislation to repeal or revise statutes related to the DPHHS councils and reports.

During the 2011-2012 interim, DPHHS recommended eliminating:

- the Child Support Enforcement Advisory Board, Community Health Centers Advisory Group, and Montana 2-1-1 Community Coalition, because they had been inactive;
- the Advisory Council on Food Safety, because it had worked on relatively few food safety issues and because its purpose of providing public comment on legislation and administrative rules can be met in other ways;

¹ Earlier HB 142 reports in this and previous interims have included three entities that legislative staff, upon further review, has determined act in more than an advisory role. Those groups — the Board of Public Assistance, the Children's Trust Fund Board, and the Committee on Telecommunication Access Services for Persons with Disabilities — are not included in this report.

- the Mental Health Oversight Advisory Council and the Children's System of Care Planning Committee, because DPHHS could create a single, nonstatutory 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 also recommended eliminating reports that are required on the state's trauma response system, 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. It said those reports have not been produced in recent years or have resulted in little action. The department also proposed that it publish the suicide reduction plan every five years, rather than every two years.

Since making those recommendations, the department has stopped preparing the report on mental health services for children with serious emotional disturbance.

In 2012, 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, which at that time had not met for more than a year and had not received the DPHHS support that some felt was necessary to carry out its work. The commission still has not met.

Stakeholders also recommended retaining the Advisory Council on Food Safety, the Tobacco Prevention Advisory Board, and the regional Service Area Authorities for mental health.

Options for Committee Action

The committee could take any of the following steps to meet its HB 142 obligations:

1. Request additional information about specific advisory councils.
2. Determine that some advisory council 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. This would fulfill the committee's HB 142 responsibilities.

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.

Statutorily Required Advisory Groups

Active	Temporary	Inactive
<ol style="list-style-type: none"> 1. Advisory Council on Aging 2. Advisory Council on Food Safety 3. Children's System of Care Planning Committee 4. Mental Health Oversight Advisory Council 5. Montana Health Coalition 6. Regional Trauma Care Committees 7. Service Area Authorities 8. Tobacco Prevention Advisory Board 9. Trauma Care Committee 10. Traumatic Brain Injury Advisory Council 	<ol style="list-style-type: none"> 11. MDC Transition Planning Committee (sunsets no later than June 30, 2017) 12. HELP Act (Medicaid Expansion) Oversight Committee (sunsets June 30, 2019) 13. Montana Suicide Review Team (sunsets June 30, 2016) 	<ol style="list-style-type: none"> 14. Child Support Enforcement Advisory Board 15. Commission on Provider Rates and Services 16. Community Health Centers Advisory Group 17. Medicaid Managed Care Advisory Council 18. Montana 2-1-1 Community Coalition

Statutorily Required Reports

Currently Provided	Newly Required Reports	Not Currently Provided
<ol style="list-style-type: none"> 1. Trauma System Report 2. Marijuana Registry Information 3. Out-of-State Placement of Children with Mental Health Needs 4. Older Montanans Trust Fund 5. Medicaid Section 1115 Waiver Requests 6. TANF Parents as Scholars Report 7. Medicaid Report 8. Suicide Reduction Plan 	<ol style="list-style-type: none"> 9. Office of the Child and Family Ombudsman Report 10. Use and Outcomes of Youth Crisis Diversion Grants (one-time report) 11. HELP Act (Medicaid Expansion) Report (optional) 12. Patient-Centered Medical Homes Report (one-time report) 13. MDC Transition Planning Committee Report (optional) 	<ol style="list-style-type: none"> 14. Community Health Center Grants Report 15. Statewide 2-1-1 Calling System 16. Effectiveness of Medicaid Managed Care Standards 17. Medicaid Managed Care Report 18. Prescription Drug Discount Program 19. Recommendations of the Commission on Provider Rates and Services 20. Mental Health Services for Children with Serious Emotional Disturbance