

1 State of Arkansas
2 92nd General Assembly
3 Regular Session, 2019
4

A Bill

HOUSE BILL 1710

5 By: Representative Perry
6

For An Act To Be Entitled

8 AN ACT TO CREATE THE TASK FORCE ON TRANSPORTATION OF
9 NONEMERGENCY BEHAVIORAL HEALTH PATIENTS; TO REVIEW
10 AND RECOMMEND PROTOCOL AND PROCEDURES TO CREATE
11 STANDARDIZATION AND CONSISTENCY WHEN TRANSPORTING
12 BEHAVIORAL HEALTH PATIENTS IN A NONEMERGENCY
13 SITUATION; AND FOR OTHER PURPOSES.
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Subtitle

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16 TO CREATE THE TASK FORCE ON
17 TRANSPORTATION OF NONEMERGENCY BEHAVIORAL
18 HEALTH PATIENTS.
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22 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:
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24 SECTION 1. TEMPORARY LANGUAGE. DO NOT CODIFY. Task Force on
25 Transportation of Nonemergency Behavioral Health Patients – Creation –
26 Membership – Duties.

27 (a) The General Assembly finds that:

28 (1) Resources necessary for emergency medical services are being
29 utilized in transportation of nonemergency behavioral health patients and may
30 place the public in a precarious situation if a medical emergency arises
31 while personnel and equipment are involved in the nonemergency transportation
32 of a behavioral health patient;

33 (2) These nonemergency behavioral health transportation
34 situations can result in emergency medical services personnel and equipment
35 being out of their coverage area for long periods of time, leaving minimal
36 resources to cover an area in case of a true emergency situation;



1 (3) These nonemergency behavioral health transports take a toll
2 on emergency medical services personnel who are already overextended and
3 nearing the end of a shift; and

4 (4) A study of possible solutions to the issues arising from the
5 use of emergency medical personnel and equipment to provide nonemergency
6 transportation for behavioral health patients is necessary.

7 (b) There is created the Task Force on Transportation of Nonemergency
8 Behavioral Health Patients.

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

10 (1) A member of the House Committee on Public Health, Welfare
11 and Labor appointed by the Speaker of the House of Representatives;

12 (2) A member of the Senate Committee on Public Health, Welfare,
13 and Labor appointed by the President Pro Tempore of the Senate;

14 (3) A representative of the Department of Health;

15 (4) A representative of the Department of Human Services;

16 (5) A representative of the Arkansas Hospital Association, Inc.;

17 (6) The Director of the Division of Medical Services of the
18 Department of Human Services, or his or her designee;

19 (7) A representative of the Arkansas Association of Chiefs of
20 Police;

21 (8) A representative of the Arkansas Sheriffs' Association;

22 (9) A representative of the Association of Arkansas Counties;

23 (10) A representative of the Developmental Disabilities Provider
24 Association;

25 (11) A representative of a provider-led Arkansas shared savings
26 entity, as appointed by the Director of the Division of Medical Services of
27 the Department of Human Services;

28 (12) The Executive Director of the Mental Health Council of
29 Arkansas, or his or her designee;

30 (13) A representative of each health insurance carrier providing
31 policies available under the Arkansas Works Program; and

32 (14) A representative of the Arkansas Ambulance Association.

33 (d) If a vacancy occurs on the task force, the vacancy shall be filled
34 by the same process as the original appointment.

35 (e) The legislative members of the task force shall be paid per diem
36 and mileage as authorized by law for attendance at meetings of interim

1 committees of the General Assembly.

2 (f)(1) The Director of the Department of Health shall call the first
3 meeting of the task force within sixty (60) days of the effective date of
4 this act and shall serve as chair at the first meeting.

5 (2) At the first meeting of the task force, the members of the
6 task force shall elect from the task force's membership a chair or cochair
7 and other officers as needed for the transaction of its business.

8 (3)(A) The task force shall meet at the Department of Health.

9 (B) Meetings of the task force shall be held at least
10 one (1) time every three (3) months but may occur more often at the call of
11 the chair or cochair.

12 (4) The task force shall establish rules and procedures for
13 conducting its business.

14 (5) A majority of the members of the task force shall constitute
15 a quorum for transacting business of the task force.

16 (6)(A) The Department of Health shall provide staff, meeting
17 space, and materials for the task force.

18 (B) An affirmative vote of a majority of a quorum present
19 shall be required for the passage of a motion or other task force action.

20 (g)(1) The purpose of the task force is to examine and identify areas
21 of needed reform with regard to the protocol, procedures, and mechanisms in
22 place for the nonemergency transportation of behavioral health patients to
23 behavioral health facilities.

24 (2) To achieve this purpose, the task force shall:

25 (A) Study practices and protocols of other states with
26 regard to nonemergency transportation of behavioral health patients;

27 (B) Consult stakeholders and interested parties in the
28 state involved in the treatment and transportation of behavioral health
29 patients; and

30 (C) Develop best practices and recommended protocol,
31 including identifying areas of needed statutory or regulatory reform with
32 regard to the nonemergency transportation of behavioral health patients.

33 (h) On or before March 1, 2020, the task force shall file with the
34 House Committee on Public Health, Welfare, and Labor and the Senate Committee
35 on Public Health, Welfare, and Labor a final written report of the task
36 force's activities, findings, and recommendations.

1 (i) The task force shall expire on March 1, 2020.

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APPROVED: 4/16/19