Stricken language would be deleted from and underlined language would be added to present law. Act 1041 of the Regular Session

A Bill

HOUSE BILL 1710

By: Representative Perry

For An Act To Be Entitled

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

Subtitle

TO CREATE THE TASK FORCE ON TRANSPORTATION OF NONEMERGENCY BEHAVIORAL HEALTH PATIENTS.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

SECTION 1. TEMPORARY LANGUAGE. DO NOT CODIFY. Task Force on Transportation of Nonemergency Behavioral Health Patients – Creation – Membership – Duties.

(a) The General Assembly finds that:

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

(2) These nonemergency behavioral health transportation situations can result in emergency medical services personnel and equipment being out of their coverage area for long periods of time, leaving minimal resources to cover an area in case of a true emergency situation;
(3) These nonemergency behavioral health transports take a toll on emergency medical services personnel who are already overextended and nearing the end of a shift; and

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

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

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

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

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

(3) A representative of the Department of Health;

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

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

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

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

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

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

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

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

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

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


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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

APPROVED: 4/16/19