

March 24, 2005

S 1161. CENTRAL REGISTRY/MH BEDS/INVOL. COMM. REQUIRING THE DEPARTMENT OF HEALTH AND HUMAN SERVICES TO DEVELOP A CENTRAL REGISTRY OF AVAILABLE BEDS IN MENTAL HEALTH FACILITIES TO ASSIST IN THE PLACEMENT OF INDIVIDUALS INVOLUNTARILY COMMITTED TO THE FACILITIES. As title indicates. Dep't to report on implementation to Senate and House Appropriations Subcommittees on Health and Human Services and Fiscal Research Division by October 1, 2005, and again on March 1, 2006. Effective July 1, 2005.

Intro. by Apodaca.

Ref. to Health Care

UNCODIFIED

May 26, 2005

S 1161. CENTRAL REGISTRY/MH BEDS/INVOL. COMM. Intro. 3/24/05. Senate committee substitute makes the following changes to 1st edition. Requires that central call registry be implemented by January 1, 2006. Enacts new GS 122C-141(a1) to require that the area authority, county programs, and persons covered under GS 122C-142 (contracts for mental health services) utilize central registry to the extent of their involvement with the placement of involuntarily committed individuals. Makes technical changes.

July 27, 2005

S 1161. CENTRAL LISTING/MH BEDS/INVOL. COMM. (NEW) Intro. 3/24/05. Senate committee substitute makes the following changes to 2nd edition. Deletes provisions governing the creation of a central call registry and replaces them with provisions requiring the Dep't of Health and Human Services to develop a central listing of mental health facilities designated for the placement of individuals to be involuntarily committed. Requires that the listing be developed with existing funds, be available on the Internet, and be implemented by October 1, 2005 (rather than January 1, 2006). Deletes amendment to GS 122C-141 that would have required certain providers involved in involuntary commitment activities to utilize the central registry. Enacts new GS 122C-117(a)(14) requiring area authorities to maintain crisis response services. These services must include triage and referral as well as prevention, intervention, and resolution. Crisis services must be provided without prior authorization and must be provided in least restrictive setting possible. Dep't to report on the implementation of the central listing and the status of the area authorities' crisis response services to the Joint Commission on Governmental Operations and the Joint Legislative Oversight Committee on Mental Health, Developmental Disabilities and Substance Abuse Services by March 1, 2006.

June 21, 2006

S 1161. HOSPICE BRANCH OFFICE NOT NEW INSTL HLTH SERV. (NEW). Filed 3/23/05. House committee substitute makes the following changes to 3rd edition. Deletes all provisions of the bill and substitutes a new act *DEFINING ADDITIONAL OFFICES OF CERTAIN EXISTING HOSPICES AS NOT BEING "NEW INSTITUTION HEALTH SERVICES" FOR THE PURPOSES OF STATE CERTIFICATE OF NEED LAW*. Amends G.S. 131E-176(16)o. to clarify that an additional office of an existing hospice is not a new institutional health service if the additional office was licensed on or before December 31, 2005.