



Senate Fiscal Agency
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House Bill 5832 (Substitute H-3 as reported without amendment)

Sponsor: Representative Mary Whiteford

House Committee: Health Policy
Ways and Means

Senate Committee: Health Policy and Human Services

CONTENT

The bill would add Chapter 9A (Crisis Stabilization Units) to the Mental Health Code to do the following:

- Require the Department of Health and Human Services (DHHS) to provide for certification of crisis stabilization units to provide crisis services, including clinical services as a short-term alternative to inpatient psychiatric hospitalization, in a community-based setting.
- Allow a psychiatric hospital or general hospital to establish and operate a crisis stabilization unit.
- Require the DHHS to establish certain minimum standards and requirements for certifying a stabilization unit.
- Prohibit an entity from operating as a crisis stabilization unit without having a certification issued under Chapter 9A.
- Require an application for certification to operate a crisis stabilization unit to be submitted to the DHHS, and require the Department to issue a certification to an applicant who met all the standards and requirements set forth by the Department.
- Allow the DHHS to deny an application for certification that did not meet all the standards and requirements set forth by the Department, and allow it to suspend or revoke a certification if an applicant or certified crisis stabilization unit violated a provision of Chapter 9A or a standard or requirement set forth by the Department.
- Prohibit a crisis stabilization unit that also was not a preadmission screening unit from providing substance use disorder services without first obtaining the required license.
- Require a crisis stabilization unit to obtain and maintain accreditation from certain organizations.

The bill also would amend the Code to do the following:

- Require a preadmission screening unit to be available on a 24-hour basis to provide crisis services on a voluntary basis.
- Allow a preadmission screening unit to operate a crisis stabilization unit and provide crisis services to an individual who was found to be a person requiring treatment or who was seeking crisis services on a voluntary basis.
- Require crisis services at a crisis stabilization unit to entail an initial psychosocial assessment by a master's level mental health professional and a psychiatric evaluation within 24 hours to stabilize the individual.
- Allow crisis services to be provided for up to 72 hours, after which the individual would have to be provided with the appropriate level of care.

-- Specify that a cause of action would not be cognizable against a preadmission screening unit or crisis stabilization unit, or its employees or contractors, except for gross negligence or willful or wanton misconduct.

MCL 330.1100a et al.

Legislative Analyst: Stephen Jackson

FISCAL IMPACT

The bill would permit a preadmission screening unit to establish a crisis stabilization unit. The Department of Health and Human Services would have to certify these units and so would face minor administrative costs. The bill is permissive; crisis stabilization units would not be mandated. To the extent that these units were established and used, there would be an indeterminate fiscal impact. The fiscal impact would be indeterminate because the services provided by the crisis stabilization unit would supplant or supplement other services and could lead to increased overall costs in some cases and cost savings in other cases. The costs and savings would be shared by the State and local government.

Date Completed: 9-30-20

Fiscal Analyst: Steve Angelotti