

**GENERAL ASSEMBLY OF NORTH CAROLINA**  
**SESSION 2009**

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**SENATE DRS55544-MGz-86A\* (01/26)**

Short Title: NCIOM Studies/Funds.

(Public)

Sponsors: Senator Nesbitt.

Referred to:

A BILL TO BE ENTITLED

AN ACT TO APPROPRIATE FUNDS TO THE NORTH CAROLINA INSTITUTE OF MEDICINE TO COMPLETE ITS CURRENT STUDIES AND TO ESTABLISH A TASK FORCE TO STUDY THE NEEDS OF YOUNG CHILDREN WITH MENTAL HEALTH PROBLEMS AND THEIR FAMILIES, AS RECOMMENDED BY THE JOINT LEGISLATIVE OVERSIGHT COMMITTEE ON MENTAL HEALTH, DEVELOPMENTAL DISABILITIES, AND SUBSTANCE ABUSE SERVICES.

The General Assembly of North Carolina enacts:

**SECTION 1.** There is appropriated from the General Fund to the North Carolina Institute of Medicine (NCIOM) the sum of two hundred fifty thousand dollars (\$250,000) in recurring funds for the 2010-2011 fiscal year. These funds shall be used by NCIOM to complete the following Task Force studies authorized in Section 10.78(ff) of S.L. 2009-451:

- (1) The availability of Medicaid and State-funded mental health, developmental disabilities, and substance abuse services to active duty, reserve, and veteran members of the military and National Guard. The study should discuss the current availability of services, the extent of use, and any gaps in services.
- (2) The Health Access Study Group on issues related to cost, quality, and access to appropriate and affordable health care for all North Carolinians, and the impact of federal health-related legislation on costs, quality, and access to health care.
- (3) Short-term and long-term strategies to address issues within adult care homes that provide residence to persons who are frail and elderly and to persons suffering from mental illness.

**SECTION 2.(a)** There is appropriated from the General Fund to the North Carolina Institute of Medicine the sum of one hundred fifty thousand dollars (\$150,000) for the 2010-2011 fiscal year. These funds shall be used to convene a Task Force to study the needs of young children with mental health problems and their families. The Task Force shall:

- (1) Examine the current mental health needs of young children, defined as children from birth to age five.
- (2) Examine existing public and private systems of mental health care that are currently available to families of young children with mental health problems.
- (3) Identify evidence-based and promising universal, selective, and indicated prevention strategies to promote the emotional well-being of young children.



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- 1 (4) Identify strategies for early screening and identification of young children  
2 with mental health risk factors or mental health problems. The screening and  
3 identification strategies shall address the impact of parents' behavioral health  
4 problems on the mental health of their young children.
- 5 (5) Review evidence-based and promising interventions and systems to promote  
6 the positive mental health and emotional well-being of young children and  
7 their families.
- 8 (6) Identify strategies to ensure that children who are at high risk of developing  
9 mental health problems and their families have access to a comprehensive  
10 range of treatments and services, coordinated across agencies and service  
11 systems that are (i) culturally, linguistically, and developmentally sensitive;  
12 (ii) individualized; (iii) family-centered; (iv) home-, school-, and  
13 community-based; and (v) evidence-based.
- 14 (7) Examine workforce adequacy and training needs of mental health  
15 professionals and other professionals who provide services to young children  
16 and their families.
- 17 (8) Examine the adequacy of State and other funding to support a  
18 comprehensive array of evidence-based services.
- 19 (9) Recommend strategies to develop, evaluate, and disseminate treatment and  
20 service delivery models to meet young children's mental health needs.
- 21 (10) Examine any other issue that the NCIOM deems relevant to the study.

22 **SECTION 2.(b)** The NCIOM shall make an interim report to the Joint Legislative  
23 Oversight Committee on Mental Health, Developmental Disabilities, and Substance Abuse  
24 Services no later than January 15, 2012, which may include legislative and other  
25 recommendations, and shall issue its final report with findings, recommendations, and any  
26 proposed legislation to the 2013 General Assembly upon its convening.

27 **SECTION 3.** This act becomes effective July 1, 2010.