

NEW YORK STATE ASSEMBLY • SHELDON SILVER, SPEAKER



2014 ANNUAL REPORT



Committee on
Mental Health and
Developmental Disabilities

Aileen M. Gunther, Chair



Aileen M. Gunther
Member of Assembly
100th District

THE ASSEMBLY
STATE OF NEW YORK
ALBANY

CHAIR
Mental Health

CHAIR
Subcommittee on Women's
Health

COMMITTEES
Agriculture
Environmental Conservation
Health
Racing and Wagering
Real Property Taxation
Tourism, Arts and Sports
Development

December 15, 2014

Honorable Sheldon Silver
Speaker of the Assembly
Legislative Office Building, Room 932
Albany, New York 12248

Dear Mr. Speaker:

It is my privilege to submit to you the 2014 Annual Report for the Assembly Standing Committee on Mental Health and Developmental Disabilities. This year has proven to be a significant time of transition in the fields of mental health and developmental disabilities, specifically in regard to the move from Medicaid fee-for-service to a managed care service delivery model. It will be crucial for the Committee to closely monitor this transition to ensure that individuals receive quality care and programs are funded properly to meet the needs of those who require services.

The Committee continues to closely watch other important changes occurring throughout the mental health and developmental disability systems including the implementation of behavioral health organizations (BHOs) and health homes, the People First Waiver, and the implementation of New York's Olmstead Plan. The Committee is dedicated to ensuring that the needs and rights of individuals with mental illness and developmental disabilities are kept at the forefront throughout many of these changes that will vastly impact the service delivery system.

During the 2014 Legislative Session, the Committee also reviewed numerous bills which focused on strengthening individual rights and requiring higher quality of care and safety for individuals served in the mental hygiene system.

In closing, I would like to thank you for your leadership and support of the Committee on Mental Health and Developmental Disabilities. I look forward to 2015 as we develop solutions to the challenges we face.

A handwritten signature in black ink that reads "Aileen M. Gunther". The signature is written in a cursive style with a large initial 'A' and 'G'.

Aileen M. Gunther
Chair
Assembly Standing Committee on
Mental Health and Developmental Disabilities

**2014 ANNUAL REPORT
OF THE
NEW YORK STATE ASSEMBLY
STANDING COMMITTEE ON MENTAL HEALTH
AND DEVELOPMENTAL DISABILITIES**

**Aileen M. Gunther
Chair**

Committee Members

Majority

Didi Barrett
Karim Camara
Michael Cusick
Philip Goldfeder
Ellen Jaffee
Barbara Lifton
John McDonald, III
Robert Rodriguez
Harvey Weisenberg

Minority

Steven Katz– Ranking Member
Joseph Borelli
Jane Corwin

Committee Staff

Allison Horan, Chief of Staff
Thomas Gatto, Legislative Assistant and Committee Clerk

Program and Counsel Staff

Simonia Brown, Senior Assistant Secretary for Program and Policy
Katie L. Birchenough, Legislative Analyst
Marisa Francini, Legislative Counsel
Terri Zaleski, Secretary

TABLE OF CONTENTS

I. INTRODUCTION	5
II. STATE BUDGET HIGHLIGHTS	6
III. SIGNIFICANT LEGISLATION 2014	8
IV. PUBLIC HEARINGS	11
V. OUTLOOK	13
APPENDIX A: 2014 Summary of Bill Actions	14
APPENDIX B: Final Action on All Bills Reported by the Committee	15
APPENDIX C: Laws Enacted in 2014	19
APPENDIX D: Laws Vetoed in 2014	20

I. INTRODUCTION

The Assembly Committee on Mental Health and Developmental Disabilities has jurisdiction over legislation affecting programs that provide services, care, treatment, and advocacy for individuals with various disabilities. The Committee focuses on ensuring that individuals with a mental illness or a developmental disability and those with multiple disabilities are provided appropriate and necessary services to live a fulfilling life and are protected from abuse or harm in institutional and community settings.

The Committee has legislative oversight of programs administered and licensed by the State Office of Mental Health (OMH) and the State Office for People with Developmental Disabilities (OPWDD). The Committee also has statutory oversight of the Justice Center for People with Special Needs, the Developmental Disabilities Planning Council (DDPC), the Inter-Office Coordinating Council (IOCC), and the Most Integrated Setting Coordinating Council (MISCC).

The aforementioned agencies are expected to serve over 800,000 individuals in 2015-16, including 700,000 persons with mental illness, and 126,000 persons with developmental disabilities. The Committee also works closely with the New York State Assembly Standing Committee on Alcoholism and Drug Abuse, the Assembly Standing Committee on Veterans Affairs, the Assembly Standing Committee on Correction, and the Task Force on People with Disabilities.

During the 2014 session, the Committee reviewed a number of bills and addressed many issues aimed at providing quality services and enhancing protections for individuals with various disabilities.

This report describes the Committee's major legislative activities during the 2014 session.

II. STATE BUDGET HIGHLIGHTS

After several years of significant cuts and sweeping changes to funding structures of programs under the auspices of the Office of Mental Health and the Office for People with Developmental Disabilities, the 2014-15 Enacted Budget provided some long sought-after and much needed support for people with mental illness and developmental disabilities and for those that care for these individuals. Within the Office of Mental Health and the Office for People with Developmental Disabilities, the following proposals and appropriations were enacted in the 2014-15 Budget:

A. Continuing Support for Behavioral Health Services in Medicaid Managed Care

As the state continues to transition individuals from fee-for-service Medicaid to a managed care service delivery model, it must ensure that both plans and providers have the necessary resources and infrastructure to provide quality care to these vulnerable populations. To support this transition, the SFY 2014-15 budget includes \$105 million directed to plans and behavioral health providers, including funding for the development of additional supportive services, the integration of physical health and behavioral health services, and the support of financially distressed providers.

In addition, the SFY 2014-15 budget authorizes the state to reinvest any savings that result from a reduction of inpatient psychiatric capacity or the transition of behavioral health services from fee-for-service to managed care, in behavioral health services. Additionally, the SFY 2014-15 budget extends benchmark rates for behavioral health services in managed care, to ensure the continued financial stability of providers.

B. Expanding Services for Individuals with Developmental Disabilities

The SFY 2014-15 budget provides \$9.1 million in additional funding to support the transition of 300 individuals into community-based care. This funding represents the latest increment in the state's multi-year plan to close all state-operated developmental centers by the end of 2017.

The SFY 2014-15 budget expands the existing exemption in the Nurse Practice Act, to allow certain OPWDD employees providing direct care to administer medication to consumers under a Registered Nurse's supervision in non-certified settings. The budget also creates a Managed Care for Persons with Developmental Disabilities Advocacy Program to support individuals with developmental disabilities transitioning to managed care.

Additionally, the SFY 2014-15 budget requires OPWDD to establish a plan that facilitates integrated employment for individuals with developmental disabilities and requires OPWDD to make recommendations for the establishment of a direct support professional credentialing pilot program.

C. Investing in the Workforce

The SFY 2014-15 budget includes \$13 million to support a two percent Cost of Living Adjustment (COLA), effective January 1, 2015, for various human services agencies. OPWDD received a \$6.3 million allocation and OMH was allocated \$1.3 million. The budget also provides for \$122 million in SFY 2015-16 for an additional two percent targeted COLA, effective April 1, 2015, and expands the types of eligible employees to include clinical staff.

D. State Psychiatric Center Closures

The SFY 2014-15 budget included language to extend the expiration of the Community Mental Health Support and Workforce Reinvestment Program until March 31, 2018, and increase the minimum annual amount that must be reinvested into the community based services when state-operated inpatient services are reduced, from \$70,000 per bed to \$110,000 per bed.

III. SIGNIFICANT LEGISLATION

A. INCREASED ACCESS TO SERVICES

It is critical that individuals who may be in need of services from OMH and OPWDD are aware of available options for services and afforded access to such programs. Equally important to guaranteeing access to services is ensuring that individuals with a mental illness or developmental disability feel encouraged and supported in their decision to seek services.

Protecting Individuals Transitioning to Managed Care

A.9766-A (Gunther)/ S.7400-B (Carlucci) Veto Memo 506

As New York State transitions to managed care, it is crucial that managed care organizations understand the unique needs of individuals with developmental disabilities. Organizations that are profit driven and unfamiliar with services for this specific population may be apt to eliminate vital services based on the cost associated with operating the program rather than on the needs of the individual.

This bill would require Health Maintenance Organizations (HMOs) and Managed Long-Term Care Plans (MLTCs) that have been approved to provide services to individuals with developmental disabilities to be affiliated with not-for-profit entities who are overseen by the Office for People With Developmental Disabilities.

Improving Access to OPWDD Services through the “Front Door”

A.8846-C (Weisenberg)/ S.6641-C (Carlucci) Veto Memo 519

OPWDD recently implemented the "Front Door Policy," a new method of service allocation for individuals transitioning into the OPWDD system. While the Front Door promised easy access and streamlining of processes, there continues to be widespread reports of significant numbers of individuals that are waiting for services, including individuals aging out of school and living at home with their elderly parents. At the same time, there remain vacancies at agencies that can accommodate these individuals. This bill would provide guidance to OPWDD service providers and to family members that are trying to navigate the service delivery system by requiring the Office to develop a plan to overhaul and improve the Front Door Policy, as well as establish guidelines that will help determine what level of care is most appropriate for individuals with disabilities.

B. QUALITY OF CARE

A primary focus of the Committee is to increase the safety and quality of care for individuals receiving services from the mental hygiene agencies. The Committee is focused on continuing to support and advance legislation to alleviate abuse and neglect that may occur while individuals

receive services through the Office for People With Developmental Disabilities (OPWDD) and the Office of Mental Health (OMH).

Ensuring Proper Investigation Procedures for Vulnerable Populations

A.9605-A (Gunther) /S.7232-A (Carlucci) Chapter 394

This law will require the Justice Center for the Protection of People with Special Needs to develop guidelines on interviewing vulnerable persons, including whether or not interviewing individuals is clinically contraindicated, appropriateness of notifying a qualified person, and establishing timely notification procedures to administrative agency personnel.

Integrating Behavioral Health Services

A.9768-A (Gunther) / S.7481-A (Hannon) Chapter 281

This law will help to reduce duplicative survey requirements for certain providers under the auspices of OMH and Office of Alcoholism and Substance Abuse Services (OASAS) by extending the accreditation by the Joint Commission of OMH and OASAS providers of inpatient services in an Article 28 General Hospital to such hospital's outpatient mental health and substance use services.

Limiting Mandatory Overtime

A.6085-A (Ortiz) / S.5281-A (Carlucci) Reported to Ways and Means

Excessive amounts of overtime can, in some cases, lead to hazardous conditions for the employee and the individuals receiving care. To ensure patient safety and prevent staff fatigue, this bill would establish a cap of a 60 hour work week for direct care workers at programs licensed by OMH and OPWDD.

C. EMPOWERING SERVICE RECIPIENTS AND THEIR FAMILIES

A key detail in ensuring service recipients receive sufficient person-centered care is providing individuals and their families with access and information. This empowers individuals and their families to keep the service system accountable.

Bill of Rights for Individuals with Developmental Disabilities

A.7312-D (Abinanti) / S.5223-D (Carlucci) Passed Assembly

Often, individuals with developmental disabilities and their parents have difficulty navigating the system of care through OPWDD and are unsure of what rights are afforded to them. This bill would require OPWDD to post a bill of rights for individuals and their families in residential programs under the auspices of the Office.

Coordinating Statewide Locator Systems for Individuals with Autism

A.10146 (Titone)/ S.7917 (Savino) Passed Assembly

Throughout the state, there is a myriad of locator systems for individuals who, because of a disability, wander. These systems have helped save lives, shortened rescue times, and saved taxpayer money by allowing authorities to more efficiently and effectively coordinate rescue efforts. However, local police have found that coordinating various locator systems across jurisdictions is difficult because of the varying technology. This bill would require the Division of Criminal Justice Services (DCJS), in consultation with the Office for People with Developmental Disabilities (OPWDD), to conduct a study of current information technology systems used to locate missing children with developmental disabilities in order to synchronize such systems. The bill would also require the Department of Financial Services (DFS), in consultation with the Department of Health (DOH), to conduct a study to review health insurance coverage of technology systems used for locating missing children with developmental disabilities.

IV. PUBLIC HEARINGS

A. OLMSTEAD IMPLEMENTATION AND SUPPORTS AND SERVICES FOR INDIVIDUALS WITH DEVELOPMENTAL DISABILITIES

In 1999, the United States Supreme Court decision in *Olmstead v. L.C.*, 527 U.S. 581 (1999) (Olmstead) held that the state's services, programs, and activities for people with disabilities must be administered in the most integrated setting appropriate to a person's needs. Recently, in the spirit of Olmstead, there have been several initiatives set forth by New York State which are aimed at assisting individuals with disabilities who wish to move into more integrated community settings.

On August 11th, the Assembly Standing Committee on Mental Health and Developmental Disabilities held a hearing in conjunction with the Senate Standing Committee on Mental Health and Developmental Disabilities and the Senate Standing Committee on Health. The purpose of the hearing was to examine the availability of supports and services for individuals with developmental disabilities and to discuss the future needs of this population as more individuals move into community settings. Those who testified were parents of people with disabilities, advocacy groups, and developmental disability service providers.

The majority of those who testified were supportive of New York State working to comply with Olmstead and moving away from institutional care to a least restrictive setting for the delivery of services. However, many of the witnesses questioned whether New York has sufficient resources to ensure the needs of people with disabilities are met. Specifically, it was stated that there is a lack of community housing options, and that funding levels have steadily decreased and have not kept up with inflation. In addition, many of the parents and providers gave testimony that New York State does not have a plan to ensure a successful transition into managed care. Without such a plan, there is fear that it would result in a cookie-cutter approach for the provision of services, and individuals would not have access to programs which allow them to live productive lives. Another point of emphasis was the need to provide more job opportunities as well as education regarding different employment options for people with disabilities. It was also suggested that providers will need to engage with the business community in an effort to create work opportunities for individuals with disabilities.

The Committee will continue to work with the disabled community and stakeholders to ensure that services are readily available and meet the needs of each individual who requires them.

B. MENTAL HEALTH TREATMENT IN CORRECTIONAL SETTINGS

On November 13th, the Assembly Standing Committee on Mental Health and Developmental Disabilities convened a hearing in conjunction with the Assembly Standing Committee on Correction to examine the status of inmates with mental illness in our prisons and jails, and to determine what changes are necessary to facilitate treatment, diversion and recovery of New Yorkers with mental illness involved in the criminal justice system. Testimony was presented by state agencies and local government officials, criminal justice and mental health advocacy groups, and other stakeholders, including parents of individuals currently incarcerated and diagnosed with a mental illness.

Those in attendance heard from state and local governmental agencies that the correctional system had not been prepared to meet the needs of a rapidly growing population of inmates with mental illness. However, each state and local agency representative stated that they continue to move towards providing a more therapeutic environment for individuals with a mental illness involved in the correctional system. Other witnesses offered several suggestions to improve the mental health treatment system in correctional settings, including the need for intensive clinical case management services, requiring an inmate who is eligible for Medicaid to have their benefits reinstated prior to their release from incarceration, increasing training for corrections staff, and making mental health history records more accessible to correctional facilities that house inmates diagnosed with a mental illness. In addition, nearly every advocacy group that testified called for more effective screening and assessment to help identify inmates with an undiagnosed mental illness. Finally, under current law, inmates with serious mental illness are excluded from placement in a Segregated Housing Unit (SHU). Advocates stressed the need to expand the SHU exclusion to inmates who have diagnoses other than a serious mental illness.

The Committee is dedicated to ensuring that the rights of inmates with mental illness are protected and that the State meet its obligations to provide effective mental health treatment services to individuals with mental illness who are involved in the criminal justice system.

V. OUTLOOK 2015

This year brought significant changes in both the mental health and developmental disabilities systems in New York State. Many of these changes are a result of national trends toward inclusive healthcare, alleviating waste and fraud in benefits programs, and finding efficiencies in service delivery. There also continues to be publicized events within the state that have forced New York to look at improving these systems in order to establish a higher level of quality in care and to protect the individuals they serve. The Committee will continue to work throughout the coming years to ensure that the rights and needs of our most vulnerable residents are kept at the highest priority during this process.

APPENDIX A

**2014 SUMMARY OF ACTION ON ALL BILLS REFERRED TO
THE COMMITTEE ON MENTAL HEALTH**

<u>FINAL ACTION</u>	<u>ASSEMBLY BILLS</u>	<u>SENATE BILLS</u>	<u>TOTAL BILLS</u>
<u>Bills Reported With or Without Amendment</u>			
To Floor; Not Returning to Committee	2	0	2
To Floor; Recommitted and Died	0	0	0
To Ways & Means	9	0	9
To Codes	7	0	7
To Rules	0	0	0
To Judiciary	0	0	0
TOTAL	18	0	18
<u>Bills Having Committee Reference Changed</u>			
	2	0	2
TOTAL		0	
<u>Senate Bills Substituted or Recalled</u>			
Substituted		1	1
Recalled			
Total		0	0
Bills Defeated in Committee	0	0	0
Bills Held For Consideration With A Roll-Call Vote	12	0	12
Bills Never Reported, Held in Committee	58	8	66
Bills Having Enacting Clauses Stricken	1	0	1
Motions to Discharge Lost	0	0	0
TOTAL BILLS IN COMMITTEE	91	9	100
Total Number of Committee Meetings Held	7		

APPENDIX B

**FINAL ACTION ON BILLS REPORTED BY THE STANDING COMMITTEE ON
MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES IN 2014**

ASSEMBLY BILL # SPONSOR	SENATE BILL # SPONSOR	FINAL ACTION	DESCRIPTION
A.190 Cusick	S.801 Parker	Passed Assembly	This bill would provide Mental Hygiene Legal Services (MHLS) to patients or residents of residential health care facilities who have been admitted directly from a psychiatric facility or a psychiatric ward of a hospital and who have a serious mental illness for which they are receiving services related to such illness.
A.538-A Abinanti	S.1470-A Parker	Passed Assembly	This bill would direct the Commissioner of the Office for People With Developmental Disabilities (OPWDD) to study and report upon the cost to the state for the early diagnosis and long-term treatment of autism spectrum disorder.
A.1272 Gunther	S.481 Kennedy	Reported to the Assembly Committee on Codes	This bill would provide persons diagnosed with Autism, and Autism Spectrum Disorders (ASDs) certain rights with respect to the funding of research and provision of treatment.
A.1662-A Abinanti	S.3107-A Carlucci	Reported to the Assembly Committee on Ways and Means	This bill would require OPWDD in consultation with the Department of Labor (DOL), the State Education Department (SED) and any other office deemed appropriate to produce a report regarding state workforce need projections and credentialing of direct support professionals.
A.1715-A Gunther	S.2000-A Carlucci	Reported to the Assembly Committee on Codes	This bill would require video cameras in facilities operated by the Office for People With Developmental Disabilities.
A.5153 Brennan	S.7589 Espaillat	Passed Assembly	This bill would prohibit the Office of Mental Health (OMH) from billing a person for his/her care and treatment when the source of the funds for making such a payment comes from the proceeds of a suit against the State for negligent or improper treatment.
A.6085-A Ortiz	S.5281-A Carlucci	Reported to the Assembly Committee on Ways and Means	This bill would limit direct care workers at OMH, OPWDD, and the Office of Alcoholism and Substance Abuse Services (OASAS) facilities to working a maximum sixty hours per week.

ASSEMBLY BILL # SPONSOR	SENATE BILL # SPONSOR	FINAL ACTION	DESCRIPTION
A.6531 O'Donnell	N/A	Passed Assembly	This bill would provide mental health records to attorneys representing inmates in prison disciplinary hearings and other legal proceedings in which mental health is at issue.
A.7312-D Abinanti	S.5223-D Carlucci	Passed Assembly	This bill would create a bill of rights for family and guardians of people with developmental disabilities that reside in residences certified or approved by OPWDD.
A.7721-A Gunther	S.5228-A Carlucci	Veto 494	This bill would require the Commissioner of OMH to establish a community housing waiting list for adults seeking housing services in the OMH service system.
A.7907 Weisenberg	S.6929 Golden	Passed Assembly	This bill would require the visible posting of the phone numbers of local law enforcement and the Vulnerable Persons Central Register (VPCR) in facilities or programs under the auspices of OPWDD. The sign would also notify employees to call 911 if there is an emergency.
A.7908-B Weisenberg	S.6809-A Marcellino	Reported to the Assembly Committee on Ways and Means	This bill would require the Commissioner of OPWDD to create regulations requiring the use of video surveillance cameras with sound capabilities in vehicles primarily used for the transport of service recipients to programing and services.
A.7909 Gunther	S.6183 Carlucci	Chapter 492	This bill would clarify that the "whistleblower" protections pursuant to Labor Law §740 and §741 apply to employees of OMH, OPWDD and OASAS.
A.7910-B Gunther	S.5813-A Ritchie	Passed Assembly	This bill would require the Commissioner of OPWDD to create rules and regulations requiring all employees and volunteers to receive training on abuse, neglect and maltreatment indication and prevention; laws, regulations and procedures governing the protection of persons with disabilities from abuse, neglect, and maltreatment; identification, safety and security procedures; fire safety; first aid; cardiopulmonary resuscitation; cultural competence; and any other appropriate topic.
A8061-A Abinanti	S.5802-A Griffo	Reported to the Assembly Committee on Ways and Means	This bill would create the Diagnostic and Statistical Manual of Mental Disorders Implementation Council.

ASSEMBLY BILL # SPONSOR	SENATE BILL # SPONSOR	FINAL ACTION	DESCRIPTION
A.8294-B Lupardo	S.5986-B Libous	Reported to the Assembly Committee on Ways and Means	This bill would postpone the closures and consolidation of state facilities operated by OMH and the OPWDD until April 1, 2017.
A.8452 Gunther	S.1109-D Maziarz	Veto 496	This bill would enact the People First Act of 2014.
A.8835-A Gunther	S.6659-A Carlucci	Veto 499	This bill would establish the Task Force on Adults with Developmental Disabilities within OPWDD.
A.8837-A Aubry	S.6659-A Carlucci	Reported to the Assembly Committee on Ways and Means	This bill would establish a crisis intervention demonstration program in any city having a population of one million or more for the purpose of assisting police officers in responding to a crisis involving persons with a mental illness or substance use issue.
A.8846-C Weisenberg	S.6641 Carlucci	Veto 519	This bill would require the Commissioner of the OPWDD to develop a plan to overhaul and improve the front door process. The Commissioner would be required to develop the plan in collaboration with the Developmental Disabilities Advisory Council and must submit the plan to the Speaker of the Assembly and Senate Majority Leader no later than January 1, 2015 with implementation beginning no later than April 1, 2015.
A.9605-A Gunther	S.7232-A Carlucci	Chapter 394	This law requires the development and implementation of protocols and procedures which the Justice Center for People with Special Needs shall adopt to protect the health and safety of consumers of services in the event that it is necessary to obtain information from them for purposes of conducting an investigation.
A.9729 Jaffee	S.7374 Bonacic	Chapter 478	This law requires OPWDD to provide written notification to an individual who is receiving transitional care, the person's guardian, or any other person who may represent interests of the person in care, a description of any proposed new placement; and thirty days to request an appeal of such placement. If a request for an appeal is made, the Commissioner of OPWDD must notify the objecting party no less than ten days prior to the scheduled date of the hearing. Additionally, the Commissioner or their designee must provide a written determination to the

ASSEMBLY BILL # SPONSOR	SENATE BILL # SPONSOR	FINAL ACTION	DESCRIPTION
			objecting party within thirty days of the adjournment of the hearing.
A.9733-A Gunther	S.7885 Gallivan	Chapter 126	This law makes technical corrections to the Protection of People with Special Needs Act (PPSNA) (Chapter 501, Laws of 2012), which created the Justice Center for the Protection of People with Special Needs.
A.9766-A Gunther	S.7400-B Carlucci	Veto 506	This bill would require Health Maintenance Organizations (HMOs) and Managed Long-Term Care Plans (MLTCs) that have been approved to provide services to individuals with developmental disabilities to be affiliated with not-for-profit entities who are overseen by OPWDD.
A.9768-A Gunther	S.7481-A Hannon	Chapter 281	This law extends the accreditation status of a general hospital's inpatient mental health and substance abuse services to such outpatient service providers.
A.10146 Titone	S.7917 Savino	Reported to the Assembly Committee on Rules	This bill would require the Commissioner of the Division of Criminal Justice Services (DCJS), in consultation with the Commissioner of OPWDD to review information technology systems used for locating missing children with disabilities for the purpose of making recommendations on the creation of a statewide communication program.

APPENDIX C

LAWS ENACTED IN 2014

ASSEMBLY BILL # SPONSOR	SENATE BILL # SPONSOR	FINAL ACTION	DESCRIPTION
A.9733-A Gunther	S.7885 Gallivan	Chapter 126	This law makes technical corrections to the Protection of People with Special Needs Act (PPSNA) (Chapter 501, Laws of 2012), which created the Justice Center for the Protection of People with Special Needs (Justice Center).
A.9768-A Gunther	S.7481-A Hannon	Chapter 281	This law extends the accrediting requirements placed upon general hospitals to outpatient service providers for persons mentally ill or developmental disabled.
A.9605-A Gunther	S.7232-A Carlucci	Chapter 394	This law requires the development and implementation of protocols and procedures which the Justice Center for People with Special Needs shall adopt to protect the health and safety of consumers of services in the event that it is necessary to obtain information from them for purposes of conducting an investigation.
A.7909 Gunther	S.6183 Carlucci	Chapter 492	This bill would clarify that the “whistleblower” protections pursuant to Labor Law §740 and §741 apply to employees of OMH, OPWDD and OASAS.

**APPENDIX D
LAWS VETOED IN 2014**

ASSEMBLY BILL # SPONSOR	SENATE BILL # SPONSOR	FINAL ACTION	DESCRIPTION
A.7721-A Gunther	S.5228-A Carlucci	Veto 494	This bill would require the Commissioner of OMH to establish a community housing waiting list for adults seeking housing services in the OMH service system.
A.8452 Gunther	S.1109-D Maziarz	Veto 496	This bill would enact the people first act of 2014.
A.8835-A Gunther	S.6659-A Carlucci	Veto 499	This bill would establish the task force on adults with developmental disabilities within OPWDD.
A.9766-A Gunther	S.7400-B Carlucci	Veto 506	This bill would require Health Maintenance Organizations (HMOs) and Managed Long-Term Care Plans (MLTCs) that have been approved to provide services to individuals with developmental disabilities to be affiliated with not-for-profit entities who are overseen by the OPWDD.
A.8846-C Weisenberg	S.6641 Carlucci	Veto 519	This bill would require the Commissioner of OPWDD to develop a plan to overhaul and improve the front door process. The Commissioner would be required to develop the plan in collaboration with the Developmental Disabilities Advisory Council and must submit the plan to the Speaker of the Assembly and Senate Majority Leader no later than January 1, 2015 with implementation beginning no later than April 1, 2015.