

Department of the Interior. The total funds transferred or reimbursed shall not exceed \$6,000,000 and shall not be available for activities other than the operation of the airfield. The Director of the Office of Management and Budget shall notify the Committees on Appropriations of such transfers or reimbursements within 15 days of this Act. Such transfers or reimbursements shall begin within 30 days of enactment of this Act.

This Act may be cited as the "Transportation, Treasury, and General Government Appropriations Act, 2004".

THREE AFFILIATED TRIBES HEALTH FACILITY COMPENSATION ACT

Mr. MCCONNELL. Mr. President, I ask unanimous consent that the Senate proceed to the immediate consideration of Calendar No. 308, S. 1146.

The PRESIDING OFFICER. The clerk will report the bill by title.

The legislative clerk read as follows:

A bill (S. 1146) to implement the recommendations of the Garrison Unit Tribal Advisory Committee by providing authorization for the construction of a rural health care facility on the Fort Berthold Indian Reservation, North Dakota.

There being no objection, the Senate proceeded to consider the bill which was reported from the Committee on Indian Affairs with an amendment, as follows:

(Strike the part shown in black brackets and insert the part shown in italic.)

S. 1146

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Three Affiliated Tribes Health Facility Compensation Act".

SEC. 2. FINDINGS.

Congress finds that—

(1) in 1949, the United States assumed jurisdiction over more than 150,000 prime acres on the Fort Berthold Indian Reservation, North Dakota, for the construction of the Garrison Dam and Reservoir;

(2) the reservoir flooded and destroyed vital infrastructure on the reservation, including a hospital of the Indian Health Service;

(3) the United States made a commitment to the Three Affiliated Tribes of the Fort Berthold Indian Reservation to replace the lost infrastructure;

(4) on May 10, 1985, the Secretary of the Interior established the Garrison Unit Joint Tribal Advisory Committee to examine the effects of the Garrison Dam and Reservoir on the Fort Berthold Indian Reservation;

(5) the final report of the Committee issued on May 23, 1986, acknowledged the obligation of the Federal Government to replace the infrastructure destroyed by the Federal action;

(6) the Committee on Indian Affairs of the Senate—

(A) acknowledged the recommendations of the final report of the Committee in Senate Report No. 102-250; and

(B) stated that every effort should be made by the Administration and Congress to provide additional Federal funding to replace the lost infrastructure; and

(7) on August 30, 2001, the Chairman of the Three Affiliated Tribes testified before the Committee on Indian Affairs of the Senate

that the promise to replace the lost infrastructure, particularly the hospital, still had not been kept.

SEC. 3. RURAL HEALTH CARE FACILITY, FORT BERTHOLD INDIAN RESERVATION, NORTH DAKOTA.

The Three Affiliated Tribes and Standing Rock Sioux Tribe Equitable Compensation Act is amended—

(1) in section 3504 (106 Stat. 4732), by adding at the end the following:

“(c) AUTHORIZATION OF APPROPRIATIONS.— There are authorized to be appropriated such sums as are necessary to carry out this section.”; and

(2) by striking section 3511 (106 Stat. 4739) and inserting the following:

“SEC. 3511. RURAL HEALTH CARE FACILITY, FORT BERTHOLD INDIAN RESERVATION, NORTH DAKOTA.

“[There is authorized to be appropriated to the Secretary of Health and Human Services for the construction of a rural health care facility on the Fort Berthold Indian Reservation of the Three Affiliated Tribes, North Dakota, \$20,000,000.”.]

“SEC. 3511. RURAL HEALTH CARE FACILITY, FORT BERTHOLD INDIAN RESERVATION, NORTH DAKOTA.

“There are authorized to be appropriated to the Secretary of Health and Human Services \$20,000,000 for the construction of, and such sums as are necessary for other expenses relating to, a rural health care facility on the Fort Berthold Indian Reservation of the Three Affiliated Tribes, North Dakota.”.

Mr. MCCONNELL. Mr. President, I ask unanimous consent that the committee amendment be agreed to.

The PRESIDING OFFICER. Without objection, it is so ordered.

The committee amendment was agreed to.

Mr. MCCONNELL. Mr. President, I ask unanimous consent that the bill, as amended, be read a third time and passed, the motion to reconsider be laid upon the table, and that any statements relating to the bill be printed in the RECORD.

The PRESIDING OFFICER. Without objection, it is so ordered.

The bill (S. 1146), as amended, was read the third time and passed, as follows:

S. 1146

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Three Affiliated Tribes Health Facility Compensation Act".

SEC. 2. FINDINGS.

Congress finds that—

(1) in 1949, the United States assumed jurisdiction over more than 150,000 prime acres on the Fort Berthold Indian Reservation, North Dakota, for the construction of the Garrison Dam and Reservoir;

(2) the reservoir flooded and destroyed vital infrastructure on the reservation, including a hospital of the Indian Health Service;

(3) the United States made a commitment to the Three Affiliated Tribes of the Fort Berthold Indian Reservation to replace the lost infrastructure;

(4) on May 10, 1985, the Secretary of the Interior established the Garrison Unit Joint Tribal Advisory Committee to examine the effects of the Garrison Dam and Reservoir on the Fort Berthold Indian Reservation;

(5) the final report of the Committee issued on May 23, 1986, acknowledged the obligation

of the Federal Government to replace the infrastructure destroyed by the Federal action;

(6) the Committee on Indian Affairs of the Senate—

(A) acknowledged the recommendations of the final report of the Committee in Senate Report No. 102-250; and

(B) stated that every effort should be made by the Administration and Congress to provide additional Federal funding to replace the lost infrastructure; and

(7) on August 30, 2001, the Chairman of the Three Affiliated Tribes testified before the Committee on Indian Affairs of the Senate that the promise to replace the lost infrastructure, particularly the hospital, still had not been kept.

SEC. 3. RURAL HEALTH CARE FACILITY, FORT BERTHOLD INDIAN RESERVATION, NORTH DAKOTA.

The Three Affiliated Tribes and Standing Rock Sioux Tribe Equitable Compensation Act is amended—

(1) in section 3504 (106 Stat. 4732), by adding at the end the following:

“(c) AUTHORIZATION OF APPROPRIATIONS.— There are authorized to be appropriated such sums as are necessary to carry out this section.”; and

(2) by striking section 3511 (106 Stat. 4739) and inserting the following:

“SEC. 3511. RURAL HEALTH CARE FACILITY, FORT BERTHOLD INDIAN RESERVATION, NORTH DAKOTA.

“There are authorized to be appropriated to the Secretary of Health and Human Services \$20,000,000 for the construction of, and such sums as are necessary for other expenses relating to, a rural health care facility on the Fort Berthold Indian Reservation of the Three Affiliated Tribes, North Dakota.”.

“There are authorized to be appropriated to the Secretary of Health and Human Services \$20,000,000 for the construction of, and such sums as are necessary for other expenses relating to, a rural health care facility on the Fort Berthold Indian Reservation of the Three Affiliated Tribes, North Dakota.”.

MENTALLY ILL OFFENDER TREATMENT AND CRIME REDUCTION ACT OF 2003

Mr. MCCONNELL. Mr. President, I ask unanimous consent that the Senate proceed to immediate consideration of Calendar No. 321, S. 1194.

The PRESIDING OFFICER. The clerk will report the bill by title.

The legislative clerk read as follows:

A bill (S. 1194) to foster local collaborations which will ensure that resources are effectively and efficiently used within the criminal and juvenile justice systems.

There being no objection, the Senate proceeded to consider the bill, which had been reported from the Committee on the Judiciary with an amendment, as follows:

[Strike the part in black brackets and insert the part in Italics.]

S. 1194

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

[This Act may be cited as the "Mentally Ill Offender Treatment and Crime Reduction Act of 2003".]

SECTION 2. FINDINGS.

[Congress finds the following:

(1) According to the Bureau of Justice Statistics, over 16 percent of adults incarcerated in United States jails and prisons have a mental illness.

(2) According to the Office of Juvenile Justice and Delinquency Prevention, approximately 20 percent of youth in the juvenile justice system have serious mental health problems, and a significant number

have co-occurring mental health and substance abuse disorders.

[(3) According to the National Alliance for the Mentally Ill, up to 40 percent of adults who suffer from a serious mental illness will come into contact with the American criminal justice system at some point in their lives.

[(4) According to the Office of Juvenile Justice and Delinquency Prevention, over 150,000 juveniles who come into contact with the juvenile justice system each year meet the diagnostic criteria for at least 1 mental or emotional disorder.

[(5) A significant proportion of adults with a serious mental illness who are involved with the criminal justice system are homeless or at imminent risk of homelessness; and many of these individuals are arrested and jailed for minor, nonviolent offenses.

[(6) The majority of individuals with a mental illness or emotional disorder who are involved in the criminal or juvenile justice systems are responsive to medical and psychological interventions that integrate treatment, rehabilitation, and support services.

[(7) Collaborative programs between mental health, substance abuse, and criminal or juvenile justice systems that ensure the provision of services for those with mental illness or co-occurring mental illness and substance abuse disorders can reduce the number of such individuals in adult and juvenile corrections facilities, while providing improved public safety.

ISEC. 3. PURPOSE.

[The purpose of this Act is to increase public safety by facilitating collaboration among the criminal justice, juvenile justice, mental health treatment, and substance abuse systems. Such collaboration is needed to—

[(1) reduce rearrests among adult and juvenile offenders with mental illness, or co-occurring mental illness and substance abuse disorders;

[(2) provide courts, including existing and new mental health courts, with appropriate mental health and substance abuse treatment options;

[(3) maximize the use of alternatives to prosecution through diversion in appropriate cases involving non-violent offenders with mental illness;

[(4) promote adequate training for criminal justice system personnel about mental illness and substance abuse disorders and the appropriate responses to people with such illnesses;

[(5) promote adequate training for mental health treatment personnel about criminal offenders with mental illness and the appropriate response to such offenders in the criminal justice system;

[(6) promote communication between criminal justice or juvenile justice personnel, mental health treatment personnel, nonviolent offenders with mental illness, and other support services such as housing, job placement, community, and faith-based organizations; and

[(7) promote communication, collaboration, and intergovernmental partnerships among municipal, county, and State elected officials with respect to mentally ill offenders.

ISEC. 4. DEPARTMENT OF JUSTICE MENTAL HEALTH AND CRIMINAL JUSTICE COLLABORATION PROGRAM.

[(a) IN GENERAL.—Title I of the Omnibus Crime Control and Safe Streets Act of 1968 (42 U.S.C. 3711 et seq.) is amended by adding at the end the following:

["PART HH—ADULT AND JUVENILE COLLABORATION PROGRAM GRANTS

["SEC. 2991. ADULT AND JUVENILE COLLABORATION PROGRAMS.

["(a) DEFINITIONS.—In this section, the following definitions shall apply:

["(1) APPLICANT.—The term 'applicant' means States, units of local government, Indian tribes, and tribal organizations that apply for a grant under this section.

["(2) COLLABORATION PROGRAM.—The term 'collaboration program' means a program to promote public safety by ensuring access to adequate mental health and other treatment services for mentally ill adults or juveniles that is overseen cooperatively by—

["(A) a criminal justice agency, a juvenile justice agency, or a mental health court; and

["(B) a mental health agency.

["(3) CRIMINAL OR JUVENILE JUSTICE AGENCY.—The term 'criminal or juvenile justice agency' means an agency of a State or local government that is responsible for detection, arrest, enforcement, prosecution, defense, adjudication, incarceration, probation, or parole relating to the violation of the criminal laws of that State or local government.

["(4) DIVERSION AND ALTERNATIVE PROSECUTION AND SENTENCING.—

["(A) IN GENERAL.—The terms 'diversion' and 'alternative prosecution and sentencing' mean the appropriate use of effective mental health treatment alternatives to juvenile justice or criminal justice system institutional placements for preliminarily qualified offenders.

["(B) APPROPRIATE USE.—In this paragraph, the term 'appropriate use' includes the discretion of the judge or supervising authority and the leveraging of justice sanctions to encourage compliance with treatment.

["(5) MENTAL HEALTH AGENCY.—The term 'mental health agency' means an agency of a State or local government that is responsible for mental health services.

["(6) MENTAL HEALTH COURT.—The term 'mental health court' means a judicial program that meets the requirements of part V of this title.

["(7) MENTAL ILLNESS.—The term 'mental illness' means a diagnosable mental, behavioral, or emotional disorder—

["(A) of sufficient duration to meet diagnostic criteria within the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association; and

["(B) that has resulted in functional impairment that substantially interferes with or limits 1 or more major life activities.

["(8) PRELIMINARILY QUALIFIED OFFENDER.—The term 'preliminarily qualified offender' means an adult or juvenile who—

["(A)(i) previously or currently has been diagnosed by a qualified mental health professional as having a mental illness or co-occurring mental illness and substance abuse disorders; or

["(ii) manifests obvious signs of mental illness or co-occurring mental illness and substance abuse disorders during arrest or confinement or before any court; and

["(B) has faced or is facing criminal charges and is deemed eligible by a designated pretrial screening and diversion process, or by a magistrate or judge, on the ground that the commission of the offense is the product of the person's mental illness.

["(9) SECRETARY.—The term 'Secretary' means the Secretary of the Department of Health and Human Services.

["(10) UNIT OF LOCAL GOVERNMENT.—The term 'unit of local government' means any city, county, township, town, borough, parish, village, or other general purpose political subdivision of a State, including a State

court, local court, or a governmental agency located within a city, county, township, town, borough, parish, or village.

["(b) PLANNING AND IMPLEMENTATION GRANTS.—

["(1) IN GENERAL.—The Attorney General, in consultation with the Secretary, may award nonrenewable grants to eligible applicants to prepare a comprehensive plan for and implement an adult or juvenile collaboration program, which targets adults or juveniles with mental illness or co-occurring mental illness and substance abuse disorders in order to promote public safety and public health.

["(2) PURPOSES.—Grants awarded under this section shall be used to create or expand—

["(A) mental health courts or other court-based programs for preliminarily qualified offenders;

["(B) programs that offer specialized training to the officers and employees of a criminal or juvenile justice agency and mental health personnel in procedures for identifying the symptoms of mental illness and co-occurring mental illness and substance abuse disorders in order to respond appropriately to individuals with such illnesses;

["(C) programs that support cooperative efforts by criminal and juvenile justice agencies and mental health agencies to promote public safety by offering mental health treatment services and, where appropriate, substance abuse treatment services for—

["(i) preliminarily qualified offenders with mental illness or co-occurring mental illness and substance abuse disorders; or

["(ii) adult offenders with mental illness during periods of incarceration, while under the supervision of a criminal justice agency, or following release from correctional facilities; and

["(D) programs that support intergovernmental cooperation between State and local governments with respect to the mentally ill offender.

["(3) APPLICATIONS.—

["(A) IN GENERAL.—To receive a planning grant or an implementation grant, the joint applicants shall prepare and submit a single application to the Attorney General at such time, in such manner, and containing such information as the Attorney General and the Secretary shall reasonably require. An application under part V of this title may be made in conjunction with an application under this section.

["(B) COMBINED PLANNING AND IMPLEMENTATION GRANT APPLICATION.—The Attorney General and the Secretary shall develop a procedure under which applicants may apply at the same time and in a single application for a planning grant and an implementation grant, with receipt of the implementation grant conditioned on successful completion of the activities funded by the planning grant.

["(4) PLANNING GRANTS.—

["(A) APPLICATION.—The joint applicants may apply to the Attorney General for a nonrenewable planning grant to develop a collaboration program.

["(B) CONTENTS.—The Attorney General and the Secretary may not approve a planning grant unless the application for the grant includes or provides, at a minimum, for a budget and a budget justification, a description of the outcome measures that will be used to measure the effectiveness of the program in promoting public safety and public health, the activities proposed (including the provision of substance abuse treatment services, where appropriate) and a schedule for completion of such activities, and the personnel necessary to complete such activities.

["(C) PERIOD OF GRANT.—A planning grant shall be effective for a period of 1 year, beginning on the first day of the month in which the planning grant is made. Applicants may not receive more than 1 such planning grant.

["(D) AMOUNT.—The amount of a planning grant may not exceed \$75,000, except that the Attorney General may, for good cause, approve a grant in a higher amount.

["(E) COLLABORATION SET ASIDE.—Up to 5 percent of all planning funds shall be used to foster collaboration between State and local governments in furtherance of the purposes set forth in the Mentally Ill Offender Treatment and Crime Reduction Act of 2003.

["(5) IMPLEMENTATION GRANTS.—

["(A) APPLICATION.—Joint applicants that have prepared a planning grant application may apply to the Attorney General for approval of a nonrenewable implementation grant to develop a collaboration program.

["(B) COLLABORATION.—To receive an implementation grant, the joint applicants shall—

["(i) document that at least 1 criminal or juvenile justice agency (which can include a mental health court) and 1 mental health agency will participate in the administration of the collaboration program;

["(ii) describe the responsibilities of each participating agency, including how each agency will use grant resources to jointly ensure that the provision of mental health treatment services is integrated with the provision of substance abuse treatment services, where appropriate;

["(iii) in the case of an application from a unit of local government, document that a State mental health authority has provided comment and review; and

["(iv) involve, to the extent practicable, in developing the grant application—

["(1) individuals with mental illness or co-occurring mental illness and substance abuse disorders; or

["(II) the families and advocates of such individuals under subclause (I).

["(C) CONTENT.—To be eligible for an implementation grant, joint applicants shall comply with the following:

["(i) DEFINITION OF TARGET POPULATION.—Applicants for an implementation grant shall—

["(I) describe the population with mental illness or co-occurring mental illness and substance abuse disorders that is targeted for the collaboration program; and

["(II) develop guidelines that can be used by personnel of a criminal or juvenile justice agency to identify individuals with mental illness or co-occurring mental illness and substance abuse disorders.

["(ii) SERVICES.—Applicants for an implementation grant shall—

["(I) ensure that preliminarily qualified offenders who are to receive treatment services under the collaboration program will first receive individualized, needs-based assessments to determine, plan, and coordinate the most appropriate services for such individuals;

["(II) specify plans for making mental health treatment services available and accessible to mentally ill offenders at the time of their release from the criminal justice system, including outside of normal business hours;

["(III) ensure that preliminarily qualified offenders served by the collaboration program will have access to effective and appropriate community-based mental health services, or, where appropriate, integrated substance abuse and mental health treatment services;

["(IV) make available, to the extent practicable, other support services that will ensure the preliminarily qualified offender's

successful reintegration into the community (such as housing, education, job placement, mentoring, and health care and benefits, as well as the services of faith-based and community organizations for mentally ill individuals served by the collaboration program); and

["(V) include strategies to address developmental and learning disabilities and problems arising from a documented history of physical or sexual abuse.

["(D) HOUSING AND JOB PLACEMENT.—Recipients of an implementation grant may use grant funds to assist mentally ill offenders compliant with the program in seeking housing or employment assistance.

["(E) POLICIES AND PROCEDURES.—Applicants for an implementation grant shall strive to ensure prompt access to defense counsel by criminal defendants with mental illness who are facing charges that would trigger a constitutional right to counsel.

["(F) FINANCIAL.—Applicants for an implementation grant shall—

["(i) explain the applicant's inability to fund the collaboration program adequately without Federal assistance;

["(ii) specify how the Federal support provided will be used to supplement, and not supplant, State, local, Indian tribe, or tribal organization sources of funding that would otherwise be available, including billing third-party resources for services already covered under programs (such as Medicaid, Medicare, and the State Children's Insurance Program); and

["(iii) outline plans for obtaining necessary support and continuing the proposed collaboration program following the conclusion of Federal support.

["(G) OUTCOMES.—Applicants for an implementation grant shall—

["(i) identify methodology and outcome measures, as required by the Attorney General and the Secretary, to be used in evaluating the effectiveness of the collaboration program;

["(ii) ensure mechanisms are in place to capture data, consistent with the methodology and outcome measures under clause (i); and

["(iii) submit specific agreements from affected agencies to provide the data needed by the Attorney General and the Secretary to accomplish the evaluation under clause (i).

["(H) STATE PLANS.—Applicants for an implementation grant shall describe how the adult or juvenile collaboration program relates to existing State criminal or juvenile justice and mental health plans and programs.

["(I) USE OF FUNDS.—Applicants that receive an implementation grant may use funds for 1 or more of the following purposes:

["(i) MENTAL HEALTH COURTS AND DIVERSION/ALTERNATIVE PROSECUTION AND SENTENCING PROGRAMS.—Funds may be used to create or expand existing mental health courts that meet program requirements established by the Attorney General under part V of this title or diversion and alternative prosecution and sentencing programs (including crisis intervention teams and treatment accountability services for communities) that meet requirements established by the Attorney General and the Secretary.

["(ii) TRAINING.—Funds may be used to create or expand programs, such as crisis intervention training, which offer specialized training to—

["(1) criminal justice system personnel to identify and respond appropriately to the unique needs of an adult or juvenile with mental illness or co-occurring mental illness and substance abuse disorders; or

["(II) mental health system personnel to respond appropriately to the treatment needs of preliminarily qualified offenders.

["(iii) SERVICE DELIVERY.—Funds may be used to create or expand programs that promote public safety by providing the services described in subparagraph (C)(ii) to preliminarily qualified offenders.

["(iv) IN-JAIL AND TRANSITIONAL SERVICES.—Funds may be used to promote and provide mental health treatment for those incarcerated or for transitional re-entry programs for those released from any penal or correctional institution.

["(J) GEOGRAPHIC DISTRIBUTION OF GRANTS.—The Attorney General, in consultation with the Secretary, shall ensure that planning and implementation grants are equitably distributed among the geographical regions of the United States and between urban and rural populations.

["(c) PRIORITY.—The Attorney General, in awarding funds under this section, shall give priority to applications that—

["(1) demonstrate the strongest commitment to ensuring that such funds are used to promote both public health and public safety;

["(2) demonstrate the active participation of each co-applicant in the administration of the collaboration program; and

["(3) have the support of both the Attorney General and the Secretary.

["(d) MATCHING REQUIREMENTS.—

["(1) FEDERAL SHARE.—The Federal share of the cost of a collaboration program carried out by a State, unit of local government, Indian tribe, or tribal organization under this section shall not exceed—

["(A) 80 percent of the total cost of the program during the first 2 years of the grant;

["(B) 60 percent of the total cost of the program in year 3; and

["(C) 25 percent of the total cost of the program in years 4 and 5.

["(2) NON-FEDERAL SHARE.—The non-Federal share of payments made under this section may be made in cash or in-kind fairly evaluated, including planned equipment or services.

["(e) FEDERAL USE OF FUNDS.—The Attorney General, in consultation with the Secretary, in administering grants under this section, may use up to 3 percent of funds appropriated to—

["(1) research the use of alternatives to prosecution through pretrial diversion in appropriate cases involving individuals with mental illness;

["(2) offer specialized training to personnel of criminal and juvenile justice agencies in appropriate diversion techniques;

["(3) provide technical assistance to local governments, mental health courts, and diversion programs, including technical assistance relating to program evaluation;

["(4) help localities build public understanding and support for community reintegration of individuals with mental illness;

["(5) develop a uniform program evaluation process; and

["(6) conduct a national evaluation of the collaboration program that will include an assessment of its cost-effectiveness.

["(f) INTERAGENCY TASK FORCE.—

["(1) IN GENERAL.—The Attorney General and the Secretary shall establish an interagency task force with the Secretaries of Housing and Urban Development, Labor, Education, and Veterans Affairs and the Commissioner of Social Security, or their designees.

["(2) RESPONSIBILITIES.—The task force established under paragraph (1) shall—

["(A) identify policies within their departments which hinder or facilitate local collaborative initiatives for adults or juveniles

with mental illness or co-occurring mental illness and substance abuse disorders; and

“(B) submit, not later than 2 years after the date of enactment of this section, a report to Congress containing recommendations for improved interdepartmental collaboration regarding the provision of services to adults and juveniles with mental illness or co-occurring mental illness and substance abuse disorders.

“(g) MINIMUM ALLOCATION.—Unless all eligible applications submitted by any State or unit of local government within such State for a planning or implementation grant under this section have been funded, such State, together with grantees within the State (other than Indian tribes), shall be allocated in each fiscal year under this section not less than 0.75 percent of the total amount appropriated in the fiscal year for planning or implementation grants pursuant to this section.

“(h) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to the Department of Justice to carry out this section—

“(1) \$100,000,000 for each of fiscal years 2004 and 2005; and

“(2) such sums as may be necessary for fiscal years 2006 through 2008.”

“(b) LIST OF “BEST PRACTICES”.—The Attorney General, in consultation with the Secretary of Health and Human Services, shall develop a list of “best practices” for appropriate diversion from incarceration of adult and juvenile offenders.

“(c) TECHNICAL AMENDMENT.—The table of contents of title I of the Omnibus Crime Control and Safe Streets Act of 1968 (42 U.S.C. 3711 et seq.) is amended by adding at the end the following:

“PART HH—ADULT AND JUVENILE COLLABORATION PROGRAM GRANTS

“Sec. 2991. Adult and juvenile collaboration programs.”

SECTION 1. SHORT TITLE.

This Act may be cited as the “Mentally Ill Offender Treatment and Crime Reduction Act of 2003”.

SEC. 2. FINDINGS.

Congress finds the following:

(1) According to the Bureau of Justice Statistics, over 16 percent of adults incarcerated in United States jails and prisons have a mental illness.

(2) According to the Office of Juvenile Justice and Delinquency Prevention, approximately 20 percent of youth in the juvenile justice system have serious mental health problems, and a significant number have co-occurring mental health and substance abuse disorders.

(3) According to the National Alliance for the Mentally Ill, up to 40 percent of adults who suffer from a serious mental illness will come into contact with the American criminal justice system at some point in their lives.

(4) According to the Office of Juvenile Justice and Delinquency Prevention, over 150,000 juveniles who come into contact with the juvenile justice system each year meet the diagnostic criteria for at least 1 mental or emotional disorder.

(5) A significant proportion of adults with a serious mental illness who are involved with the criminal justice system are homeless or at imminent risk of homelessness; and many of these individuals are arrested and jailed for minor, non-violent offenses.

(6) The majority of individuals with a mental illness or emotional disorder who are involved in the criminal or juvenile justice systems are responsive to medical and psychological interventions that integrate treatment, rehabilitation, and support services.

(7) Collaborative programs between mental health, substance abuse, and criminal or juvenile justice systems that ensure the provision of services for those with mental illness or co-

curring mental illness and substance abuse disorders can reduce the number of such individuals in adult and juvenile corrections facilities, while providing improved public safety.

SEC. 3. PURPOSE.

The purpose of this Act is to increase public safety by facilitating collaboration among the criminal justice, juvenile justice, mental health treatment, and substance abuse systems. Such collaboration is needed to—

(1) reduce rearrests among adult and juvenile offenders with mental illness or co-occurring mental illness and substance abuse disorders;

(2) provide courts, including existing and new mental health courts, with appropriate mental health and substance abuse treatment options;

(3) maximize the use of alternatives to prosecution through diversion in appropriate cases involving non-violent offenders with mental illness;

(4) promote adequate training for criminal justice system personnel about mental illness and substance abuse disorders and the appropriate responses to people with such illnesses;

(5) promote adequate training for mental health and substance abuse treatment personnel about criminal offenders with mental illness or co-occurring mental illness of substance abuse disorders and the appropriate response to such offenders in the criminal justice system;

(6) promote communication between criminal justice or juvenile justice personnel, mental health and co-occurring mental illness and substance abuse disorders treatment personnel, nonviolent offenders with mental illness or co-occurring mental illness and substance abuse disorders, and other support services such as housing, job placement, community, and faith-based organizations; and

(7) promote communication, collaboration, and intergovernmental partnerships among municipal, county, and State elected officials with respect to mentally ill offenders.

SEC. 4. DEPARTMENT OF JUSTICE MENTAL HEALTH AND CRIMINAL JUSTICE COLLABORATION PROGRAM.

(a) IN GENERAL.—Title I of the Omnibus Crime Control and Safe Streets Act of 1968 (42 U.S.C. 3711 et seq.) is amended by adding at the end the following:

“PART HH—ADULT AND JUVENILE COLLABORATION PROGRAM GRANTS

“SEC. 2991. ADULT AND JUVENILE COLLABORATION PROGRAMS.

“(a) DEFINITIONS.—In this section, the following definitions shall apply:

“(1) APPLICANT.—The term ‘applicant’ means States, units of local government, Indian tribes, and tribal organizations that apply for a grant under this section.

“(2) COLLABORATION PROGRAM.—The term ‘collaboration program’ means a program to promote public safety by ensuring access to adequate mental health and other treatment services for mentally ill adults or juveniles that is overseen cooperatively by—

“(A) a criminal justice agency, a juvenile justice agency, or a mental health court; and

“(B) a mental health agency.

“(3) CRIMINAL OR JUVENILE JUSTICE AGENCY.—The term ‘criminal or juvenile justice agency’ means an agency of a State or local government or its contracted agency that is responsible for detection, arrest, enforcement, prosecution, defense, adjudication, incarceration, probation, or parole relating to the violation of the criminal laws of that State or local government.

“(4) DIVERSION AND ALTERNATIVE PROSECUTION AND SENTENCING.—

“(A) IN GENERAL.—The terms ‘diversion’ and ‘alternative prosecution and sentencing’ mean the appropriate use of effective mental health treatment alternatives to juvenile justice or criminal justice system institutional placements for preliminarily qualified offenders.

“(B) APPROPRIATE USE.—In this paragraph, the term ‘appropriate use’ includes the discre-

tion of the judge or supervising authority, the leveraging of justice sanctions to encourage compliance with treatment, and law enforcement diversion, including crisis intervention teams.

“(5) MENTAL HEALTH AGENCY.—The term ‘mental health agency’ means an agency of a State or local government or its contracted agency that is responsible for mental health services or co-occurring mental health and substance abuse disorders.

“(6) MENTAL HEALTH COURT.—The term ‘mental health court’ means a judicial program that meets the requirements of part V of this title.

“(7) MENTAL ILLNESS.—The term ‘mental illness’ means a diagnosable mental, behavioral, or emotional disorder—

“(A) of sufficient duration to meet diagnostic criteria within the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association; and

“(B)(i) that, in the case of an adult, has resulted in functional impairment that substantially interferes with or limits 1 or more major life activities; or

“(ii) that, in the case of a juvenile, has resulted in functional impairment that substantially interferes with or limits the juvenile’s role or functioning in family, school, or community activities.

“(8) PRELIMINARILY QUALIFIED OFFENDER.—The term ‘preliminarily qualified offender’ means a nonviolent adult or juvenile who—

“(A)(i) previously or currently has been diagnosed by a qualified mental health professional as having a mental illness or co-occurring mental illness and substance abuse disorders; or

“(ii) manifests obvious signs of mental illness or co-occurring mental illness and substance abuse disorders during arrest or confinement or before any court; and

“(B) has faced, is facing, or could face criminal charges and is deemed eligible by a diversion process, designated pretrial screening process, or by a magistrate or judge, on the ground that the commission of the offense is the product of the person’s mental illness.

“(9) SECRETARY.—The term ‘Secretary’ means the Secretary of the Department of Health and Human Services.

“(10) UNIT OF LOCAL GOVERNMENT.—The term ‘unit of local government’ means any city, county, township, town, borough, parish, village, or other general purpose political subdivision of a State, including a State court, local court, or a governmental agency located within a city, county, township, town, borough, parish, or village.

“(b) PLANNING AND IMPLEMENTATION GRANTS.—

“(1) IN GENERAL.—The Attorney General, in consultation with the Secretary, may award nonrenewable grants to eligible applicants to prepare a comprehensive plan for and implement an adult or juvenile collaboration program, which targets preliminarily qualified offenders in order to promote public safety and public health.

“(2) PURPOSES.—Grants awarded under this section shall be used to create or expand—

“(A) mental health courts or other court-based programs for preliminarily qualified offenders;

“(B) programs that offer specialized training to the officers and employees of a criminal or juvenile justice agency and mental health personnel serving those with co-occurring mental illness and substance abuse problems in procedures for identifying the symptoms of preliminarily qualified offenders in order to respond appropriately to individuals with such illnesses;

“(C) programs that support cooperative efforts by criminal and juvenile justice agencies and mental health agencies to promote public safety by offering mental health treatment services and, where appropriate, substance abuse treatment services for—

“(i) preliminarily qualified offenders with mental illness or co-occurring mental illness and substance abuse disorders; or

“(ii) adult offenders with mental illness during periods of incarceration, while under the supervision of a criminal justice agency, or following release from correctional facilities; and

“(D) programs that support intergovernmental cooperation between State and local governments with respect to the mentally ill offender.

“(3) APPLICATIONS.—

“(A) IN GENERAL.—To receive a planning grant or an implementation grant, the joint applicants shall prepare and submit a single application to the Attorney General at such time, in such manner, and containing such information as the Attorney General and the Secretary shall reasonably require. An application under part V of this title may be made in conjunction with an application under this section.

“(B) COMBINED PLANNING AND IMPLEMENTATION GRANT APPLICATION.—The Attorney General and the Secretary shall develop a procedure under which applicants may apply at the same time and in a single application for a planning grant and an implementation grant, with receipt of the implementation grant conditioned on successful completion of the activities funded by the planning grant.

“(4) PLANNING GRANTS.—

“(A) APPLICATION.—The joint applicants may apply to the Attorney General for a nonrenewable planning grant to develop a collaboration program.

“(B) CONTENTS.—The Attorney General and the Secretary may not approve a planning grant unless the application for the grant includes or provides, at a minimum, for a budget and a budget justification, a description of the outcome measures that will be used to measure the effectiveness of the program in promoting public safety and public health, the activities proposed (including the provision of substance abuse treatment services, where appropriate) and a schedule for completion of such activities, and the personnel necessary to complete such activities.

“(C) PERIOD OF GRANT.—A planning grant shall be effective for a period of 1 year, beginning on the first day of the month in which the planning grant is made. Applicants may not receive more than 1 such planning grant.

“(D) AMOUNT.—The amount of a planning grant may not exceed \$75,000, except that the Attorney General may, for good cause, approve a grant in a higher amount.

“(E) COLLABORATION SET ASIDE.—Up to 5 percent of all planning funds shall be used to foster collaboration between State and local governments in furtherance of the purposes set forth in the Mentally Ill Offender Treatment and Crime Reduction Act of 2003.

“(5) IMPLEMENTATION GRANTS.—

“(A) APPLICATION.—Joint applicants that have prepared a planning grant application may apply to the Attorney General for approval of a nonrenewable implementation grant to develop a collaboration program.

“(B) COLLABORATION.—To receive an implementation grant, the joint applicants shall—

“(i) document that at least 1 criminal or juvenile justice agency (which can include a mental health court) and 1 mental health agency or agency providing mental health and substance abuse services to those with co-occurring mental health and substance abuse disorders will participate in the administration of the collaboration program;

“(ii) describe the responsibilities of each participating agency, including how each agency will use grant resources to jointly ensure that the provision of mental health treatment services and qualified substance abuse services is coordinated, which includes consultation, collaboration, and integrated services, where clinically appropriate;

“(iii) in the case of an application from a unit of local government, document that a State men-

tal health authority has provided comment and review; and

“(iv) involve, to the extent practicable, in developing the grant application—

“(I) preliminarily qualified offenders; or

“(II) the families and advocates of such individuals under subclause (I).

“(C) CONTENT.—To be eligible for an implementation grant, joint applicants shall comply with the following:

“(i) DEFINITION OF TARGET POPULATION.—Applicants for an implementation grant shall—

“(I) describe the population with mental illness or co-occurring mental illness and substance abuse disorders that is targeted for the collaboration program; and

“(II) develop guidelines that can be used by personnel of a criminal or juvenile justice agency to identify preliminarily qualified offenders.

“(ii) SERVICES.—Applicants for an implementation grant shall—

“(I) ensure that preliminarily qualified offenders who are to receive treatment services under the collaboration program will first receive individualized, needs-based assessments to determine, plan, and coordinate the most appropriate services for such individuals;

“(II) specify plans for making mental health, or mental health and substance abuse, treatment services available and accessible to preliminarily qualified offenders at the time of their release from the criminal justice system, including outside of normal business hours;

“(III) ensure that there are substance abuse personnel available to respond appropriately to the treatment needs of preliminarily qualified offenders;

“(IV) ensure that preliminarily qualified offenders served by the collaboration program will have access to effective and appropriate community-based mental health services, or, where clinically appropriate, coordinated substance abuse and mental health treatment services;

“(V) make available, to the extent practicable, other support services that will ensure the preliminarily qualified offender's successful reintegration into the community (such as housing, education, job placement, mentoring, and health care and benefits, as well as the services of faith-based and community organizations for mentally ill individuals served by the collaboration program); and

“(VI) include strategies, to the extent practicable, to address developmental and learning disabilities and problems arising from a documented history of physical or sexual abuse.

“(D) HOUSING AND JOB PLACEMENT.—Recipients of an implementation grant may use grant funds to assist mentally ill offenders compliant with the program in seeking housing or employment assistance.

“(E) POLICIES AND PROCEDURES.—Applicants for an implementation grant shall strive to ensure prompt access to defense counsel by criminal defendants with mental illness who are facing charges that would trigger a constitutional right to counsel.

“(F) FINANCIAL.—Applicants for an implementation grant shall—

“(i) explain the applicant's inability to fund the collaboration program adequately without Federal assistance;

“(ii) specify how the Federal support provided will be used to supplement, and not supplant, State, local, Indian tribe, or tribal organization sources of funding that would otherwise be available, including billing third-party resources for services already covered under programs (such as Medicaid, Medicare, and the State Children's Insurance Program); and

“(iii) outline plans for obtaining necessary support and continuing the proposed collaboration program following the conclusion of Federal support.

“(G) OUTCOMES.—Applicants for an implementation grant shall—

“(i) identify methodology and outcome measures, as required by the Attorney General and

the Secretary, to be used in evaluating the effectiveness of the collaboration program;

“(ii) ensure mechanisms are in place to capture data, consistent with the methodology and outcome measures under clause (i); and

“(iii) submit specific agreements from affected agencies to provide the data needed by the Attorney General and the Secretary to accomplish the evaluation under clause (i).

“(H) STATE PLANS.—Applicants for an implementation grant shall describe how the adult or juvenile collaboration program relates to existing State criminal or juvenile justice and mental health plans and programs.

“(I) USE OF FUNDS.—Applicants that receive an implementation grant may use funds for 1 or more of the following purposes:

“(i) MENTAL HEALTH COURTS AND DIVERSION/ALTERNATIVE PROSECUTION AND SENTENCING PROGRAMS.—Funds may be used to create or expand existing mental health courts that meet program requirements established by the Attorney General under part V of this title, other court-based programs, or diversion and alternative prosecution and sentencing programs (including crisis intervention teams and treatment accountability services for communities) that meet requirements established by the Attorney General and the Secretary.

“(ii) TRAINING.—Funds may be used to create or expand programs, such as crisis intervention training, which offer specialized training to—

“(I) criminal justice system personnel to identify and respond appropriately to the unique needs of preliminarily qualified offenders; or

“(II) mental health system personnel to respond appropriately to the treatment needs of preliminarily qualified offenders.

“(iii) SERVICE DELIVERY.—Funds may be used to create or expand programs that promote public safety by providing the services described in subparagraph (C)(ii) to preliminarily qualified offenders.

“(iv) IN-JAIL AND TRANSITIONAL SERVICES.—Funds may be used to promote and provide mental health treatment for those incarcerated or for transitional re-entry programs for those released from any penal or correctional institution.

“(J) GEOGRAPHIC DISTRIBUTION OF GRANTS.—The Attorney General, in consultation with the Secretary, shall ensure that planning and implementation grants are equitably distributed among the geographical regions of the United States and between urban and rural populations.

“(c) PRIORITY.—The Attorney General, in awarding funds under this section, shall give priority to applications that—

“(1) demonstrate the strongest commitment to ensuring that such funds are used to promote both public health and public safety;

“(2) demonstrate the active participation of each co-applicant in the administration of the collaboration program; and

“(3) have the support of both the Attorney General and the Secretary.

“(d) MATCHING REQUIREMENTS.—

“(1) FEDERAL SHARE.—The Federal share of the cost of a collaboration program carried out by a State, unit of local government, Indian tribe, or tribal organization under this section shall not exceed—

“(A) 80 percent of the total cost of the program during the first 2 years of the grant;

“(B) 60 percent of the total cost of the program in year 3; and

“(C) 25 percent of the total cost of the program in years 4 and 5.

“(2) NON-FEDERAL SHARE.—The non-Federal share of payments made under this section may be made in cash or in-kind fairly evaluated, including planned equipment or services.

“(e) FEDERAL USE OF FUNDS.—The Attorney General, in consultation with the Secretary, in administering grants under this section, may use up to 3 percent of funds appropriated to—

“(1) research the use of alternatives to prosecution through pretrial diversion in appropriate cases involving individuals with mental illness;

“(2) offer specialized training to personnel of criminal and juvenile justice agencies in appropriate diversion techniques;

“(3) provide technical assistance to local governments, mental health courts, and diversion programs, including technical assistance relating to program evaluation;

“(4) help localities build public understanding and support for community reintegration of individuals with mental illness;

“(5) develop a uniform program evaluation process; and

“(6) conduct a national evaluation of the collaboration program that will include an assessment of its cost-effectiveness.

“(f) INTERAGENCY TASK FORCE.—

“(1) IN GENERAL.—The Attorney General and the Secretary shall establish an interagency task force with the Secretaries of Housing and Urban Development, Labor, Education, and Veterans Affairs and the Commissioner of Social Security, or their designees.

“(2) RESPONSIBILITIES.—The task force established under paragraph (1) shall—

“(A) identify policies within their departments that hinder or facilitate local collaborative initiatives for preliminary qualified offenders; and

“(B) submit, not later than 2 years after the date of enactment of this section, a report to Congress containing recommendations for improved interdepartmental collaboration regarding the provision of services to preliminary qualified offenders.

“(g) MINIMUM ALLOCATION.—Unless all eligible applications submitted by any State or unit of local government within such State for a planning or implementation grant under this section have been funded, such State, together with grantees within the State (other than Indian tribes), shall be allocated in each fiscal year under this section not less than 0.75 percent of the total amount appropriated in the fiscal year for planning or implementation grants pursuant to this section.

“(h) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to the Department of Justice to carry out this section—

“(1) \$100,000,000 for each of fiscal years 2004 and 2005; and

“(2) such sums as may be necessary for fiscal years 2006 through 2008.”

(b) LIST OF “BEST PRACTICES”.—The Attorney General, in consultation with the Secretary of Health and Human Services, shall develop a list of “best practices” for appropriate diversion from incarceration of adult and juvenile offenders.

(c) TECHNICAL AMENDMENT.—The table of contents of title I of the Omnibus Crime Control and Safe Streets Act of 1968 (42 U.S.C. 3711 et seq.) is amended by adding at the end the following:

“PART HH—ADULT AND JUVENILE
COLLABORATION PROGRAM GRANTS

“Sec. 2991. Adult and juvenile collaboration programs.”

Mr. MCCONNELL. Mr. President, I ask unanimous consent that the committee reported substitute amendment be agreed to, the bill, as amended, be read three times, passed, the motion to reconsider be laid upon the table, and that any statements relating to the bill be printed in the RECORD without intervening action or debate.

The PRESIDING OFFICER. Without objection, it is so ordered.

The committee amendment in the nature of a substitute was agreed to.

The bill (S. 1194), as amended, was read the third time and passed.

NATIONAL FLOOD INSURANCE
PROGRAM REAUTHORIZATION
ACT OF 2004

Mr. MCCONNELL. Mr. President, I ask unanimous consent that the Banking Committee be discharged from further consideration of S. 1768, and the Senate proceed to its immediate consideration.

The PRESIDING OFFICER. Without objection, it is so ordered. The clerk will state the bill by title.

The legislative clerk read as follows:
A bill (S. 1768) to extend the national flood insurance program.

There being no objection, the Senate proceeded to consider the bill.

Mr. MCCONNELL. Mr. President, I ask unanimous consent that the bill be read the third time and passed, the motion to reconsider be laid upon the table, and that any statements relating to the bill be printed in the RECORD.

The PRESIDING OFFICER. Without objection, it is so ordered.

The bill (S. 1768) was read the third time and passed, as follows:

S. 1768

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the “National Flood Insurance Program Reauthorization Act of 2004”.

SEC. 2. EXTENSION OF NATIONAL FLOOD INSURANCE PROGRAM.

(a) EXTENSION.—The National Flood Insurance Act of 1968 is amended—

(1) in section 1309(a)(2) (42 U.S.C. 4016(a)(2)), by striking “December 31, 2003” and inserting “December 31, 2004”;

(2) in section 1319 (42 U.S.C. 4026), by striking “after” and all that follows through the period at the end and inserting “after December 31, 2004.”;

(3) in section 1336(a) (42 U.S.C. 4056(a)), by striking “ending” and all that follows through “in” and inserting “ending December 31, 2004, in”;

(4) in section 1376(c) (42 U.S.C. 4127), by striking “December 31, 2003” and inserting “December 31, 2004”.

(b) EFFECTIVE DATE.—The amendments made by this section shall be considered to have taken effect on December 31, 2003.

COMMENDING THE PEOPLE AND
GOVERNMENT OF ROMANIA ON
THE OCCASION OF THE VISIT OF
THE PRESIDENT OF ROMANIA TO
THE UNITED STATES

Mr. MCCONNELL. Mr. President, I ask unanimous consent that the Foreign Relations Committee be discharged from further consideration of S. Res. 250, and the Senate proceed to its immediate consideration.

The PRESIDING OFFICER. Without objection, it is so ordered. The clerk will state the bill by title.

The legislative clerk read as follows.

A resolution (S. Res. 250) commending the people and the government of Romania on the occasion of the visit of Romanian President Ion Iliescu to the United States, for the important progress they have made with respect to economic reform and democratic development, as well as for the strong relation-

ship between Romania and the United States.

There being no objection, the Senate proceeded to consider the resolution.

Mr. MCCONNELL. Mr. President, I ask unanimous consent that the resolution be agreed to, the preamble be agreed to, the motion to reconsider be laid upon the table, and any statements relating to the bill be printed in the RECORD.

The PRESIDING OFFICER. Without objection, it is so ordered.

The resolution (S. Res. 250) was agreed to.

The preamble was agreed to.

The resolution, with its preamble, reads as follows:

S. RES. 250

Whereas, in 1995, Romania joined with the United States and the North Atlantic Treaty Organization (NATO) to provide assistance to the Stabilization Force (SFOR) deployed to Bosnia and Herzegovina to support peace, security, and freedom in the western Balkans;

Whereas, in 1999, Romania joined with the United States and NATO member countries to provide assistance for Operation Allied Force to use military force in order to halt the genocide, known as ethnic cleansing, that was taking place in Kosovo;

Whereas, after the conclusion of Operation Allied Force, Romania provided support to democracy activists from the Federal Republic of Yugoslavia in their successful efforts to end the rule of Yugoslav dictator Slobodan Milosevic, and also provided support to NATO stabilization forces deployed in Kosovo Force (KFOR);

Whereas, following the terrorist attacks upon the United States in September 2001, the Government of Romania immediately expressed its sympathy for Americans and others killed in the attacks and pledged its full support in fighting the war on terror;

Whereas, on September 19, 2001, the Romanian Parliament voted to open Romanian territory and airspace to United States Armed Forces involved in Operation Enduring Freedom in Afghanistan;

Whereas thousands of American aircraft flew through Romanian airspace during the combat phase of Operation Enduring Freedom, and continue to do so as part of peace-building efforts;

Whereas, beginning on June 2002, Romanian aircraft flew Romanian soldiers to serve in Afghanistan as part of the forces involved in Operation Enduring Freedom and the International Security Assistance Force, and over 500 elite Romanian soldiers are currently stationed in Afghanistan;

Whereas Romania stood with the United States as a vital member of the international coalition in Operation Iraqi Freedom by offering diplomatic, political, and military support;

Whereas, in a January 31, 2003, letter to President George W. Bush, President Ion Iliescu of Romania stated that “Romania can understand that aggressive dictators cannot be appeased or ignored, but always be opposed. Romanians indeed know the value of freedom and living in peace. They have seen the face of evil embodied in communism and deeply share your conviction, expressed in the State of the Union address, that ‘free people will set the course of history’”;

Whereas, on February 12, 2003, the Romanian Parliament voted to open Romanian territory and airspace to United States Armed Forces carrying out Operation Iraqi Freedom;

Whereas hundreds of American aircraft flew through Romanian airspace and landed