SENATE BILL 1053

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0lr3698 CF HB 611

By: **Senator Klausmeier** Introduced and read first time: February 21, 2020 Assigned to: Rules

A BILL ENTITLED

1 AN ACT concerning

2 Baltimore County – Behavioral Health – Hub and Spoke Pilot Program

3 FOR the purpose of establishing the Baltimore County Hub and Spoke Pilot Program; 4 establishing the purpose and goals of the Program; requiring the Program to use a $\mathbf{5}$ certain model of care; requiring the Baltimore County Department of Health, in 6 consultation with the Behavioral Health Administration in the Maryland 7 Department of Health and certain stakeholders, to develop and implement the 8 Program in a certain manner; requiring the Baltimore County Department of Health 9 to report to certain committees of the General Assembly on or before a certain date on the results of the Program; providing for the application of this Act; providing for 1011 the termination of this Act; defining certain terms; and generally relating to the 12Baltimore County Hub and Spoke Pilot Program.

13 BY adding to

- 14 Article Health General
- Section 13–4101 through 13–4105 to be under the new subtitle "Subtitle 41.
 Baltimore County Hub and Spoke Pilot Program"
- 17 Annotated Code of Maryland
- 18 (2019 Replacement Volume)

19	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
20	That the Laws of Maryland read as follows:

- 21 Article Health General
- 22 SUBTITLE 41. BALTIMORE COUNTY HUB AND SPOKE PILOT PROGRAM.
- 23 **13–4101.**
- 24 (A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW. [Brackets] indicate matter deleted from existing law.



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1 INDICATED.

2 (B) "COMMUNITY CARE PROVIDER" MEANS A PRIMARY CARE PROVIDER, AN 3 INFECTIOUS DISEASE PHYSICIAN, A PSYCHIATRIST, OR ANY OTHER PROVIDER WHO 4 IS:

5 (1) WAIVERED TO PRESCRIBE BUPRENORPHINE; AND

6 (2) KNOWLEDGEABLE OF THE DISEASE MODEL OF ADDICTION.

7 (C) "MEDICATION" MEANS A DRUG APPROVED BY THE FEDERAL FOOD AND 8 DRUG ADMINISTRATION FOR THE TREATMENT OF OPIOID USE DISORDER.

9 (D) "MEDICATION-ASSISTED TREATMENT" MEANS THE USE OF 10 MEDICATION, IN COMBINATION WITH COUNSELING AND BEHAVIORAL HEALTH 11 THERAPIES, TO PROVIDE A HOLISTIC APPROACH TO THE TREATMENT OF OPIOID USE 12 DISORDER.

13 (E) "PROGRAM" MEANS THE BALTIMORE COUNTY HUB AND SPOKE PILOT 14 PROGRAM.

15 **(F)** "SPOKE PROVIDER" MEANS A COMMUNITY CARE PROVIDER WHO IS 16 WILLING AND ABLE TO:

17(1)PROVIDE ONGOING OPIOID USE DISORDER TREATMENT THAT IS18FULLY INTEGRATED WITH GENERAL HEALTH CARE AND WELLNESS SERVICES;

19 (2) WORK WITHIN THE INTEGRATIVE MODEL OF CARE ESTABLISHED 20 UNDER THE PROGRAM; AND

21(3)MANAGE AND MONITOR THE BUPRENORPHINE TREATMENT OF AN22INDIVIDUAL.

23 **13–4102.**

24 This subtitle applies only in Baltimore County.

25 **13–4103.**

26 (A) THERE IS A HUB AND SPOKE PILOT PROGRAM IN BALTIMORE COUNTY.

27 (B) (1) THE PURPOSE OF THE PROGRAM IS TO INCREASE THE 28 AVAILABILITY OF ADDICTION TREATMENT THROUGH THE ESTABLISHMENT OF A **SENATE BILL 1053**

1 HUB AND SPOKE MODEL OF CARE FOR INDIVIDUALS WITH OPIOID USE DISORDER. $\mathbf{2}$ (2) THE GOALS OF THE PROGRAM ARE TO: 3 **(I)** OFFER AND PROVIDE TREATMENT ON DEMAND BY 4 MINIMIZING BARRIERS TO TREATMENT THROUGH A MODEL THAT OFFERS ONGOING $\mathbf{5}$ **OPIOID USE DISORDER TREATMENT THAT IS FULLY INTEGRATED WITH GENERAL** 6 HEALTH CARE AND WELLNESS SERVICES; 7 USE AN INDIVIDUALIZED AND WHOLE PERSON APPROACH **(II)** TO OPIOID USE DISORDER TREATMENT, INCLUDING HEALTH INTEGRATION 8 9 PRINCIPLES, CASE MANAGEMENT, COUNSELING SERVICES, AND PEER SUPPORT; 10 AND 11 (III) INCREASE PARTICIPATION OF COMMUNITY-BASED SPOKE 12PROVIDERS IN MANAGING AND MONITORING BUPRENORPHINE TREATMENT FOR **ONGOING MAINTENANCE.** 13 14 **13–4104**. 15THE PROGRAM SHALL USE A HUB AND SPOKE MODEL OF CARE THAT: 16 (1) IS AN EVIDENCE–BASED REGIONAL APPROACH FOR DELIVERING 17MEDICATION-ASSISTED TREATMENT TO INDIVIDUALS WITH OPIOID USE DISORDER; 18 (2) ENABLES THE INITIATION OF TREATMENT AT A HUB SITE AT 19 WHICH PROVIDERS COLLABORATE WITH OTHER PROVIDERS AND SYSTEMS TO 20**COORDINATE CARE;** 21(3) **OFFERS AT THE HUB SITE:** 22**(I) DAILY MEDICATION AND THERAPEUTIC SUPPORT;** 23(II) ALL ELEMENTS OF MEDICATION-ASSISTED TREATMENT, 24INCLUDING ASSESSMENT, MEDICATION DISPENSING, AND INDIVIDUAL AND GROUP 25**COUNSELING;** 26(III) PEER SUPPORT SERVICES FOR TREATMENT ENGAGEMENT, 27**COUNSELING, AND HEALTH INTEGRATION;** 28(IV) HEALTH HOME SUPPORTS, INCLUDING CASE MANAGEMENT, CARE COORDINATION, MANAGEMENT OF TRANSITIONS OF CARE, FAMILY SUPPORT 2930 SERVICES, HEALTH PROMOTION, AND REFERRAL TO COMMUNITY SERVICES; AND

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1 (V) TRAININGS AND CONSULTATION TO SPOKE PROVIDERS; 2 AND

3 (4) REFERS TO TREATMENT BY A SPOKE PROVIDER INDIVIDUALS 4 WHO ARE DETERMINED TO BE STABLE AT THE HUB SITE.

5 **13–4105.**

6 (A) THE BALTIMORE COUNTY DEPARTMENT OF HEALTH, IN 7 CONSULTATION WITH THE BEHAVIORAL HEALTH ADMINISTRATION IN THE 8 DEPARTMENT AND LOCAL STAKEHOLDERS, SHALL DEVELOP AND IMPLEMENT THE 9 PROGRAM.

10**(B)THE DEVELOPMENT AND IMPLEMENTATION OF THE PROGRAM SHALL**11**INCLUDE:**

12(1) A DETERMINATION OF THE NUMBER OF HUB SITES AND SPOKE13PROVIDERS THAT CAN PARTICIPATE IN THE PROGRAM; AND

14(2) THE SELECTION OF HUB SITES AND SPOKE PROVIDERS FOR15PARTICIPATION IN THE PROGRAM.

16 (C) ON OR BEFORE OCTOBER 1, 2023, THE BALTIMORE COUNTY 17 DEPARTMENT OF HEALTH SHALL REPORT TO THE SENATE FINANCE COMMITTEE 18 AND THE HOUSE HEALTH AND GOVERNMENT OPERATIONS COMMITTEE, IN 19 ACCORDANCE WITH § 2–1257 OF THE STATE GOVERNMENT ARTICLE, ON THE 20 RESULTS OF THE BALTIMORE COUNTY HUB AND SPOKE PILOT PROGRAM.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect July 1, 2020. It shall remain effective for a period of 4 years and, at the end of June 30, 2024, this Act, with no further action required by the General Assembly, shall be abrogated and of no further force and effect.

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