

HOUSE BILL 1140

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CF SB 624

By: **Delegate Charles**

Introduced and read first time: February 6, 2020

Assigned to: Health and Government Operations

A BILL ENTITLED

1 AN ACT concerning

2 **Health – Mobile Response and Stabilization System for Children and Families in**
3 **Maryland – Study**

4 FOR the purpose of requiring the Maryland Department of Health and the Governor's
5 Commission to Study Mental and Behavioral Health in Maryland jointly to take
6 certain actions in order to develop and implement a comprehensive mobile response
7 and stabilization system for children and families in the State; requiring the
8 Department and the Commission jointly to submit their findings and
9 recommendations to certain committees in the General Assembly on or before a
10 certain date; and generally relating to a study regarding a mobile response and
11 stabilization system for children and families in Maryland.

12 Preamble

13 WHEREAS, The State of Maryland lacks a mobile response and stabilization system
14 for children and young adults; and

15 WHEREAS, Recent data from the Maryland Hospital Association indicates that
16 some children with behavioral health needs have remained in general hospitals more than
17 100 days beyond what is medically necessary while they await transfer to a more
18 appropriate setting; and

19 WHEREAS, A new nationwide study by Milliman, Inc. found that children with
20 commercial insurance were ten times more likely to receive outpatient mental health care
21 out-of-network compared to primary care visits, twice the disparity faced by adults; and

22 WHEREAS, Behavioral health services for children and youth are particularly
23 limited in rural neighborhoods; and

24 WHEREAS, An increasing number of residential programs are closing; and

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



WHEREAS, Maryland lacks an outpatient substance use program for youth at least 13 years old and under the age of 18 years; now, therefore,

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
That:

(a) In order to develop and implement a comprehensive mobile response and stabilization system for children and families in the State, the Maryland Department of Health and the Governor's Commission to Study Mental and Behavioral Health in Maryland jointly shall:

(1) review the data from the most recent annual report submitted under § 7.5–209 of the Health – General Article;

(2) study the feasibility of applying for the Substance Abuse and Mental Health Services Administration System of Care Grant in 2021 to build a mobile response continuum in the State;

(3) develop a method for expanding and refining the current Target Case Management Maryland Medical Assistance Program service to serve as a clinical intervention for intensive care coordination implemented with high fidelity wraparound;

(4) study existing mobile response efforts and financing models;

(5) examine mechanisms for payer reimbursement for individuals who are not in the Maryland Medical Assistance Program, but are commercially or otherwise insured;

(6) examine responsible and parity complaint provisions for family cost-sharing commensurate with usual and customary charges for other health services;

(7) identify the various models of creating a mobile response and stabilization system that services children and youth;

(8) study the costs associated with building a mobile response and stabilization system in each region in the State;

(9) study associated cost-savings of building a mobile response and stabilization system including cost savings related to the reduction in emergency department visits, inpatient stays, out-of-state placements, juvenile detentions, and foster care;

(10) seek input from interested stakeholders, including the Children's Behavioral Health Coalition and the University of Maryland Mobile Response and Stabilization System collaborative to provide insight and inform policy recommendations; and

(11) develop a plan to implement a comprehensive statewide Mobile Response and Stabilization System by July 1, 2022, that:

(i) includes:

1. a 72-hour mobile response;
2. an 8-week stabilization service; and
3. intensive care coordination; and

(ii) adheres to:

1. a system of care principles;
2. national best practices and curriculum; and
3. definitions for children, families, and single assessment

tool.

(b) On or before December 1, 2020, the Maryland Department of Health and the Governor's Commission to Study Mental and Behavioral Health in Maryland jointly shall submit their findings and recommendations to the Senate Finance Committee and the House Health and Government Operations Committee in accordance with § 2-1257 of the State Government Article.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect June 1, 2020.