



April 15, 2019

2019 Maryland General Assembly Legislative Session Summary

The 2019 Legislative Session of the Maryland General Assembly began on January 10th and ended at midnight on April 8th, marking considerable progress in advancing Behavioral Health System Baltimore's 2019 Policy Priorities. This year, the General Assembly considered over 2000 bills and resolutions. We are pleased to report that several bills passed that will better support behavioral health and wellness in Baltimore City.

Legislative Priorities

To continue to expand access to quality behavioral health services for the citizens of Baltimore, BHSB worked closely with our partners on the passage of key priority pieces of legislation and budgetary actions.

- **Medication Assisted Treatment in Local Correctional Facilities- (HB 116)**
This legislation requires that individuals entering local correctional facilities be assessed for opioid use disorders and that all forms of medication assisted treatment be available. Those individuals diagnosed with an opioid use disorder must be provided with behavioral health counseling, access to peer recovery specialist and comprehensive reentry plans. Local correctional facilities will be phased in starting with four counties (Howard, Montgomery, Prince George's and St. Mary's) and then gradually expanding to the remaining jurisdictions by January 2023. It also establishes a pilot program in Baltimore City pre-trial complex.
- **The Blueprint for Maryland's Future (SB 1030)** This legislation mandates funding in fiscal years 2020 and 2021 for a number of priorities identified by the Kirwan Commission. It provides \$83,333 per year to each local school system (\$2 million total) to fund dedicated mental health services coordinators in each jurisdiction. The bill also creates a Concentration of Poverty Grant Program to provide increased resources to schools in which at least 80 percent of students are eligible for free and reduced-price meals. Schools receiving this funding are considered community schools and are required to employ a dedicated staff member to coordinate a number of wraparound services including enhanced access



to behavioral health resources and mental health practitioners. It also includes a provision requiring trauma-informed professional development for school staff.

- **Minimum Wage (Fight for Fifteen) - (HB 166/ SB 280)** This legislation will phase in an increase in Maryland’s minimum wage to \$15 an hour by January 1, 2025 with a longer phase-in for employers with 14 or fewer employees. The legislation includes an increase in funding for community behavioral health providers over the six-year minimum wage implementation period.
- **Outpatient Civil Commitment- (HB 427/ SB 403)** This legislation strengthens the current pilot program operating in Baltimore City. It modifies the referral source by allowing an immediate family member and an individual to request enrollment for voluntary admission into the program.
- **Alcoholic Beverages- License Renewals- (HB 959)** This legislation authorizes the Baltimore City Board of License Commissioners to consider determining whether to renew an alcoholic beverages license the performance of the license holder during the four-year preceding the renewal application date.
- **Local Licenses- Prohibited Transfers Act- (HB 960)** This legislation prohibits the Baltimore City Board of License Commissioners from allowing the transfer of an alcoholic beverages license until the resolution of any pending criminal charge filed against the transferor that directly relates to the operation of the establishment or any disciplinary matter before the board concerning the transferor.

Fiscal Year 2020 Budget

The Fiscal Year 2020 budget maintains the increase in funding for community behavioral health services. The original budget proposed by the Governor included the 3.5 percent increase for community behavioral health services. In addition, the budget included the \$425,000 funding for the Law Enforcement Assisted Diversion (LEAD) Program piloted in Baltimore City.

The budget also includes language requiring the Maryland Department of Health and other agencies to complete various reports related to the public behavioral health system including:



- Individuals in the public behavioral health system (PBHS) with serious and persistent mental illnesses (SPMI), including expenses related to treating this population, impact on expenditures due to non-adherence to medication, and potential patient benefits and cost savings from use of advanced medication adherence technology for the SPMI population
- Availability of and reimbursement for occupational therapy in the PBHS
- Progress of the two Maryland providers awarded federal grants to establish Certified Community Behavioral Health Clinics (CCBHCs) and the potential for broad implementation of the model across the state
- Development of a program that educates Maryland's rural and school-based clinicians in identification and management of childhood neurodevelopmental and mental health disorders through an integrated tele-education model
- Availability of family-centered substance use disorder residential treatment for women with children in which the child may stay with the mother during treatment
- Potential expansion of the Baltimore City capitation project for individuals with serious mental illness
- Efforts to meet increased demand for mental health services at colleges and universities

Summary of Other Legislation

BHSB took positions on several bills in the 2019 General Assembly that impact behavioral health in Baltimore City. The following bills **passed**:

- **Prenatal and Infant Care Coordination (HB 520/ SB 406)** - This legislation will increase the funding to The Maryland Prenatal and Infant Care Coordination Services Grant Program Fund from \$50,000 to \$100,000 per year. It also establishes the Maryland Task Force on Maternal and Child Health to study and make recommendations on ways to incentivize early intervention and prevention of key adverse health outcomes such as trauma and mental health crises.
- **Outpatient Mental Health Centers- Medical Directors- Telehealth (HB 570/ SB 178)** - This legislation allows outpatient mental health centers to satisfy the



regulatory requirement that the medical director be on site through the use of telehealth by the director.

- **Telemedicine- Psychiatric Nurse Practitioners and Psychiatrists (HB 605/SB 524)** - This legislation allows psychiatric nurse practitioners providing Assertive Community Treatment (ACT) or mobile treatment services to provide services remotely via telehealth. It also extends the termination of last year's Telehealth bill authorizing psychiatrists involved in these services to use telehealth from September 30, 2020 to September 30, 2021.
- **Opioid Restitution Fund (HB 1274)** - This legislation establishes the Opioid Restitution to retain any revenues received by the State relating to specified opioid judgements or settlements. The fund may be used only for specified opioid-related programs and services. It also requires that the Governor must report to the General Assembly by November 1 each year an accounting of the total funds expended from the fund and the performance indicators and progress toward achieving developed goals and objectives as well as recommended appropriations from the fund.

The following bills **failed**:

- **Overdose and Infectious Disease Prevention Site Program (HB139/ SB 135)** - This legislation would have authorized the establishment of Overdose and Infectious Disease Prevention Site Programs by community- based organization in rural, urban and suburban areas of the state with no more than two programs in each area. These sites will provide a supervised location where individuals can consume reobtained drugs. Sites will also provide essential healthcare services, education and referrals to treatment. While this legislation did not move forward this year, it continues to show growing support amongst community groups, legislators and other stakeholders.
- **Medical Cannabis - Opioid Use Disorder (HB33/ SB 893)** - This legislation would have allowed the Natalie M. LaPrade Medical Cannabis Commission to approve certifying provider applications that included using medical cannabis as treatment for an opioid use disorder. The Commission released a report in the beginning of session that stated currently there is no significant evidence that medical cannabis is an effective treatment for opioid use disorder.
- **Public Safety Crisis Intervention Team Technical Assistance Center (HB 1210/ SB 815)** The legislation would have established a Crisis Intervention Technical Assistance Center in the Governor's Office of Crime Control and



Prevention. It also would have established a Collaborative Planning and Implementation Committee for the Center that would have included a variety of stakeholders.

- **Alcoholic Beverages Licenses- Grounds for Suspension (HB 965)** - This legislation would have given the Liquor Board the power to immediately suspend a liquor license when a death or serious injury occurs at an alcohol outlet. While the bill did not move forward it was sent to an interim study for further examination.
- **Protest of License Renewal - Zoning Violations (HB 980)** - This legislation would have removed a Baltimore- only liquor rule that prohibits the Baltimore City Board of License Commissioners from considering zoning violations when liquor license renewals are protested by citizens. This bill was also sent for interim study for further examination.