



2021 Maryland General Assembly Legislative Session Summary

On April 12, 2021, the 442nd legislative session of the Maryland General Assembly came to end. This year's session was conducted in a mostly virtual manner to mitigate the spread of COVID-19. Despite only having virtual access for the legislative process, BHSB and our partners successfully advocated for policies to expand access to quality behavioral health services at a time of increasing demand.

Strengthen and Expand Behavioral Health Crisis Services

- **Behavioral Health Crisis Response Services- Modifications** (*HB 108/SB 286 passed*)
This legislation extends the Behavioral Health Crisis Response Grant Program through FY25 with an additional \$5 million per year. It adds grant criteria that directs the state to prioritize mobile crisis team services and ensure there is community feedback.
- **Recovery for the Economy, Livelihoods, Industries, Entrepreneurs, and Families (RELIEF) Act** (*SB 496 passed*) This emergency legislation was introduced by Governor Hogan to provide stimulus payments, tax relief and benefit increases to families and businesses affected by the COVID-19 pandemic. It also included \$15 million in additional funding for behavioral health crisis response services.

Support Funding Commitments for Behavioral Health

The FY22 budget increased funding for the public behavioral health system by more than \$200 million (8.5%) bringing it to a total of \$2.36 billion. Before the start of session, the Governor announced that the 3.5% reimbursement rate increase for community behavioral health services would take effect January 1, 2021, four months ahead of schedule.

The budget also includes language requiring the Maryland Department of Health (MDH) and other agencies to complete various reports and take other actions related to behavioral health including:

- A report on the ongoing Administrative Services Organization (ASO) payment reconciliation process with community behavioral health providers due August 1, 2021.
- A report on the increases in psychiatric rehabilitation program (PRP) and utilization seen in the prior years and factors contributing to the overpayments to PRP providers due October 1, 2021.
- A report reviewing the Care Traffic Control System (CTCS) component of the Greater Baltimore Regional Integrated Crisis System (GBRICS) Partnership due October 1, 2021.



- A report on the implementation schedule for phone carriers in Maryland to implement 988 phone number, the newly established nationwide three-digit phone number for Americans in crisis to connect with suicide prevention and mental health counselors, due October 1, 2021.
- Department of Human Services to report on youth emergency room visits, hospital stays, and placements after discharge due November 30, 2021.

Increase School Behavioral Health Supports

- **Blueprint for Maryland's Future** (*HB 1300/CH036 veto overridden*). Blueprint for Maryland's Future is a landmark public education reform bill that passed in 2020 but was vetoed by the Governor. During the 2021 Legislative Session, the House of Delegates and the Maryland Senate each voted to override the veto, officially enacting a range of new education funding and policy reforms. The bill includes millions in new funding and a comprehensive set of strategies to enhance school-based behavioral health services, which have been shown to improve student health and education outcomes.
- **Blueprint for Maryland's Future- Revisions** (*HB 1372 passed*). This emergency legislation makes revisions to HB 1300 (above) to account for delays in implementation and revenue adjustments related to the COVID-19 pandemic. In addition, the bill encourages local boards of education use funds provided in FY 2021 and 2022 to address trauma and behavioral health because of the pandemic on students and their families.

Improve Maryland's Public Behavioral Health System

- **Preserve Telehealth Access Act of 2021** (*HB 123/ SB 3 passed*). This legislation will ensure continued access to vital telehealth services. It guarantees access to audio-only telehealth through 2023, provides for the delivery of telehealth regardless of where the recipient is located and requires that providers are reimbursed for telehealth at the same rate as in-person care. This legislation also includes language that prohibits commercial insurers from denying coverage for an in-person behavioral health service solely because that service may also be provided via telehealth.
- **Alcohol and Drug Counseling- Alcohol and Drug Trainees- Practice through Telehealth** (*HB 1287/ SB 646 passed*) This legislation permits an alcohol and drug counseling trainee under supervision to use telehealth while fulfilling experiential or course of study requirements.
- **Maryland Insurance Commissioner- Specialty Mental Health Services and Payment of Claims-Enforcement** (*HB 919/SB 638 passed*). This emergency legislation requires the Maryland Insurance Commissioner to



enforce the prompt payment of claims submitted by behavioral health providers to the state Administrative Services Organization (ASO). It also gives the Maryland Insurance Administration (MIA) the authority to levy fines and penalties against the ASO. This bill will go into effect immediately after it is signed by the Governor and will terminate two years from the date of enactment.

Support a Coordinated Response to Adverse Childhood Experiences

- **Public Schools- Centers for Disease Control and Prevention Surveys- Revisions** (*HB 771/SB 548 passed*). This legislation requires that the Maryland State Department of Education (MSDE), in coordination with the MDH include at least five questions from the Centers for Disease Control and Prevention (CDC) Youth Risk Behavioral Survey (YRBS) on adverse childhood experiences (ACES). MDH must publish a data summary and trends report with State and county level data.
- **Human Services- Trauma-Informed Care- Commission and Training (Healing Maryland's Trauma Act)** (*SB 299 passed*) This legislation establishes the Commission on Trauma-Informed Care as an independent commission in the Department of Human Services (DHS) to coordinate a statewide initiative to prioritize the trauma- responsive and trauma-informed delivery of State services that affect children, youth, families and older adults. It also requires that the commission study and implement an Adverse Childhood Experiences (ACEs) Awareness program.

Promote Harm Reduction Strategies

- **Criminal Law-Drug Paraphernalia for Administration- Decriminalization-** (*SB 420 passed*) This legislation decriminalizes the possession of drug paraphernalia, such as syringes, spoons, or pipes, intended for administration of an illicit substance. This eliminates the risk of arrest or prosecution that syringe service program staff and participants sometimes faced in possessing syringes. Possession of paraphernalia intended for use in growing or manufacturing illegal drugs remains prohibited, but the penalties were reduced.
- **Overdose Response and Infectious Disease Prevention Services Program** (*HB 396/SB 279 failed*) 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 would provide a supervised location where individuals can consume drugs. Sites would also provide essential healthcare services, education and referrals to treatment.



- **Criminal Procedure- Medical Emergency- Immunity** (*HB 212 failed*) This legislation would have improved the existing “Good Samaritan” law enacted in 2015 by clarifying that the victim of the overdose medical emergency is provided the same immunity from arrest, charge and prosecution as the person calling for help. It also sought to expand the offenses that people are immune from.