

HOUSE BILL 322

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CF SB 255

By: **Delegates Bagnall, Allen, Foley, Guyton, Healey, Hill, D. Jones, Kaufman, McCaskill, Pruski, Ruth, Simmons, Simpson, Taveras, Taylor, Terrasa, White, Woods, and Ziegler**

Introduced and read first time: January 25, 2023

Assigned to: Health and Government Operations and Appropriations

A BILL ENTITLED

1 AN ACT concerning

2 **Public Health – Home– and Community–Based Services for Children and Youth**

3 FOR the purpose of requiring the Maryland Department of Health to expand access to and
4 provide reimbursement for certain wraparound, intensive in–home, and case
5 management services; requiring the Governor to include in the annual budget bill
6 certain appropriations to fund certain behavioral health services and supports; and
7 generally relating to home– and community–based services for children and youth.

8 BY adding to

9 Article – Health – General

10 Section 15–1101 and 15–1102 to be under the new subtitle “Subtitle 11. Home– and
11 Community–Based Services for Children and Youth”

12 Annotated Code of Maryland

13 (2019 Replacement Volume and 2022 Supplement)

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

16 **Article – Health – General**

17 **SUBTITLE 11. HOME– AND COMMUNITY–BASED SERVICES FOR CHILDREN AND**
18 **YOUTH.**

19 **15–1101.**

20 **(A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS**
21 **INDICATED.**

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 **(B) “FAMILY-CENTERED TREATMENT” MEANS AN EVIDENCE-BASED**
2 **PRACTICE USED TO STABILIZE YOUTH IN THE HOME BY ADDRESSING UNDERLYING**
3 **FUNCTIONS OF BEHAVIOR IN ORDER TO REDUCE DISRUPTIONS IN THE HOME,**
4 **SCHOOL, AND COMMUNITY.**

5 **(C) “FUNCTIONAL FAMILY THERAPY” MEANS A FAMILY-BASED**
6 **PREVENTION AND INTERVENTION PROGRAM FOR HIGH-RISK YOUTH THAT**
7 **ADDRESSES COMPLEX AND MULTIDIMENSIONAL PROBLEMS THROUGH CLINICAL**
8 **PRACTICE THAT IS FLEXIBLY STRUCTURED AND CULTURALLY SENSITIVE.**

9 **(D) “HIGH-FIDELITY WRAPAROUND MODEL” MEANS A RESEARCH-BASED**
10 **MODEL OF CARE COORDINATION THAT USES A HIGHLY STRUCTURED, TEAM-BASED,**
11 **FAMILY-CENTERED MANAGEMENT PROCESS TO MEET THE NEEDS OF CHILDREN**
12 **AND ADOLESCENTS WHO EXPERIENCE COMPLEX EMOTIONAL, BEHAVIORAL, OR**
13 **MENTAL HEALTH NEEDS.**

14 **(E) “MENTAL HEALTH CASE MANAGEMENT PROGRAM” MEANS A PROGRAM**
15 **THAT PROVIDES AN IDENTIFIED SUBSET OF WRAPAROUND SERVICES.**

16 **(F) “1915(I) MODEL” MEANS THE 1915(I) INTENSIVE BEHAVIORAL HEALTH**
17 **SERVICES FOR CHILDREN, YOUTH, AND FAMILIES PROGRAM ESTABLISHED UNDER**
18 **TITLE 10, SUBTITLE 9, CHAPTER 89 OF THE CODE OF MARYLAND REGULATIONS.**

19 **(G) “VALUE-BASED PURCHASING” MEANS FINANCIALLY INCENTIVIZING**
20 **PROVIDERS TO MEET SELECTED OUTCOME MEASURES.**

21 **(H) “WRAPAROUND SERVICES” MEANS SERVICES PROVIDED TO CHILDREN**
22 **AND YOUTH WITH INTENSIVE MENTAL HEALTH NEEDS AND THEIR FAMILIES IN**
23 **THEIR COMMUNITIES, INCLUDING:**

24 **(1) INTENSIVE CARE COORDINATION;**

25 **(2) CHILD AND FAMILY TEAM MEETINGS; AND**

26 **(3) PLANS OF CARE THAT ARE INDIVIDUALIZED TO EACH FAMILY AND**
27 **INCLUDE:**

28 **(I) FORMAL SUPPORTS, INCLUDING INDIVIDUAL AND FAMILY**
29 **THERAPY; AND**

30 **(II) INFORMAL SUPPORTS, INCLUDING INTENSIVE IN-HOME**
31 **SERVICES, RESPITE CARE, MOBILE CRISIS RESPONSE AND STABILIZATION, FAMILY**

1 PEER SUPPORT, EXPERIENTIAL THERAPIES, AND FLEXIBLE FUNDS FOR GOODS AND
2 SERVICES THAT ARE IDENTIFIED IN THE PLAN OF CARE.

3 15-1102.

4 (A) THE DEPARTMENT SHALL ENSURE THAT CARE COORDINATORS
5 DELIVERING SERVICES UNDER THE 1915(I) MODEL OR A MENTAL HEALTH CASE
6 MANAGEMENT PROGRAM RECEIVE TRAINING IN THE DELIVERY OF SERVICES UNDER
7 A HIGH-FIDELITY WRAPAROUND MODEL.

8 (B) THE DEPARTMENT SHALL PROVIDE REIMBURSEMENT FOR:

9 (1) WRAPAROUND SERVICES DELIVERED BY CARE COORDINATORS
10 UNDER A HIGH-FIDELITY WRAPAROUND MODEL UNDER THE 1915(I) MODEL OR A
11 MENTAL HEALTH CASE MANAGEMENT PROGRAM THAT IS COMMENSURATE WITH
12 INDUSTRY STANDARDS FOR THE REIMBURSEMENT OF THE DELIVERY OF
13 WRAPAROUND SERVICES;

14 (2) INTENSIVE IN-HOME SERVICES DELIVERED BY PROVIDERS USING
15 FAMILY-CENTERED TREATMENT, FUNCTIONAL FAMILY THERAPY, AND OTHER
16 EVIDENCE-BASED PRACTICES UNDER THE 1915(I) MODEL THAT IS COMMENSURATE
17 WITH INDUSTRY STANDARDS FOR THE REIMBURSEMENT OF THE DELIVERY OF
18 FAMILY-CENTERED TREATMENT, FUNCTIONAL FAMILY THERAPY, AND OTHER
19 EVIDENCE-BASED PRACTICES; AND

20 (3) AT LEAST ONE PILOT PROGRAM UTILIZING VALUE-BASED
21 PURCHASING FOR CASE MANAGEMENT SERVICES.

22 (C) BEGINNING IN FISCAL YEAR 2024, THE BEHAVIORAL HEALTH
23 ADMINISTRATION SHALL FUND 100 SLOTS IN THE MENTAL HEALTH CASE
24 MANAGEMENT PROGRAM FOR CHILDREN OR YOUTH WHO ARE NOT ELIGIBLE FOR
25 PROGRAM SERVICES AND WHO ARE AT RISK OF OUT-OF-HOME PLACEMENT.

26 (D) THE DEPARTMENT SHALL EXPAND ELIGIBILITY CRITERIA TO ENSURE
27 THAT ALL CHILDREN WHO ARE MEDICAID-ELIGIBLE WILL BE ABLE TO UTILIZE THE
28 1915(I) MODEL.

29 (E) THE GOVERNOR SHALL INCLUDE IN THE ANNUAL OPERATING BUDGET
30 BILL THE FOLLOWING AMOUNTS TO FUND CUSTOMIZED GOODS AND SERVICES FOR
31 YOUTH RECEIVING SERVICES UNDER THE 1915(I) MODEL OR MENTAL HEALTH CASE
32 MANAGEMENT PROGRAM:

33 (1) \$150,000 FOR FISCAL YEAR 2025;

1 **(2) \$250,000 FOR FISCAL YEAR 2026; AND**

2 **(3) \$350,000 FOR FISCAL YEAR 2027 AND EACH FISCAL YEAR**
3 **THEREAFTER.**

4 SECTION 2. AND BE IT FURTHER ENACTED, That:

5 (a) On or before December 1, 2024, the Maryland Department of Health, in
6 consultation with stakeholders, shall:

7 (1) review for the model established under § 1915(i) of the Social Security
8 Act:

9 (i) current eligibility requirements and provider reimbursement
10 rates generally, including value-based purchasing options; and

11 (ii) current eligibility requirements and provider reimbursement
12 rates for child and adolescent mental health case management services, including for youth
13 with primary substance use disorders; and

14 (2) submit recommendations for expanding eligibility and enrollment in
15 these programs to the General Assembly, in accordance with § 2-1257 of the State
16 Government Article.

17 (b) On or before December 1, 2023, the Department shall consult early childhood
18 community-based services stakeholders to ensure that services comparable to those
19 available under the 1915(i) model are available for young children with acute or high
20 intensity behavioral health needs.

21 (c) (1) On or before December 1, 2023, and quarterly thereafter, the
22 Department shall report to the Senate Finance Committee and the House Health and
23 Government Operations Committee, in accordance with § 2-1257 of the State Government
24 Article, on enrollment in:

25 (i) the 1915(i) model; and

26 (ii) child and adolescent case management services.

27 (2) The report shall include:

28 (i) the total number of children and adolescents served by each
29 program;

30 (ii) whether the number represents an increase or a decrease in the
31 number served; and

1 (iii) any steps the Department has taken to increase enrollment in
2 the programs.

3 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect
4 October 1, 2023.