

# HOUSE BILL 650

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CF SB 281

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By: **Delegates Pena–Melnyk, Angel, Barron, Beidle, Bromwell, Campos, Carr, Cullison, Hayes, Hill, Kelly, Kipke, McMillan, Miele, Morhaim, Oaks, Reznik, B. Robinson, Saab, Sample–Hughes, Sophocleus, Tarlau, C. Wilson, and K. Young**

Introduced and read first time: February 12, 2015

Assigned to: Health and Government Operations

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## A BILL ENTITLED

1 AN ACT concerning

2 **Blue Ribbon Commission to Study Maryland’s Behavioral Health System**

3 FOR the purpose of establishing the Blue Ribbon Commission to Study Maryland’s  
4 Behavioral Health System; providing for the composition, chair, and staffing of the  
5 Commission; requiring, to the extent practicable, the membership of the Commission  
6 to reflect a certain diversity; prohibiting a member of the Commission from receiving  
7 certain compensation, but authorizing the reimbursement of certain expenses;  
8 requiring the Commission to study and make certain recommendations; requiring  
9 the Commission to submit certain reports to the Governor and the General Assembly  
10 on or before certain dates; providing for the termination of this Act; and generally  
11 relating to the Blue Ribbon Commission to Study Maryland’s Behavioral Health  
12 System.

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

15 (a) There is a Blue Ribbon Commission to Study Maryland’s Behavioral Health  
16 System.

17 (b) The Commission consists of the following members:

18 (1) one member of the Senate of Maryland, appointed by the President of  
19 the Senate;

20 (2) one member of the House of Delegates, appointed by the Speaker of the  
21 House;

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EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1                   (3)     one member of the Judiciary, appointed by the Chief Judge of the Court  
2 of Appeals; and

3                   (4)     the following 14 members, appointed by the Governor:

4                   (i)     one representative from the Department of Health and Mental  
5 Hygiene, with knowledge of mental health and substance use disorder services;

6                   (ii)    one representative from the Department of Public Safety and  
7 Correctional Services, with knowledge of mental health and substance use disorder  
8 services;

9                   (iii)  one representative from the Department of Juvenile Services,  
10 with knowledge of mental health and substance use disorder services;

11                  (iv)    one national expert on mental health services;

12                  (v)     one national expert on substance use disorder services;

13                  (vi)    one representative from the insurance industry;

14                  (vii)  one representative from a school-based clinic offering mental  
15 health and substance use disorder services;

16                  (viii) one representative from law enforcement, with knowledge of  
17 mental health and substance use disorder services;

18                  (ix)    two hospital provider representatives;

19                  (x)     two community provider representatives, one each from a mental  
20 health and substance use disorder service line; and

21                  (xi)    two consumer members.

22                  (c)     The Governor shall designate the chair of the Commission from among the  
23 members of the Commission.

24                  (d)     To the extent practicable, the membership of the Commission shall reflect the  
25 geographic, racial, ethnic, cultural, and gender diversity of the State.

26                  (e)     The Department of Health and Mental Hygiene shall provide staff for the  
27 Commission.

28                  (f)     A member of the Commission:

29                   (1)     may not receive compensation as a member of the Commission; but

1           (2) is entitled to reimbursement for expenses under the Standard State  
2 Travel Regulations, as provided in the State budget.

3           (g) The Commission shall:

4           (1) evaluate and collect data on the acuity characteristics of patients  
5 receiving mental health and substance use disorder services in community and  
6 institutional settings;

7           (2) evaluate and collect data on the current capacity of community and  
8 institutional settings to provide mental health and substance use disorder services;

9           (3) identify areas of service delivery that are not meeting the current  
10 demand or where sufficient services do not exist;

11           (4) evaluate the sufficiency of funding levels for programs serving the  
12 Maryland Medical Assistance Program population, including both institutional and  
13 community placements;

14           (5) assess the adequacy of the supply of physicians and other behavioral  
15 health providers in the State;

16           (6) assess payor trends, including payment parity for behavioral health  
17 services;

18           (7) review interagency coordination for the delivery of mental health and  
19 substance use disorder services, including the judiciary and agencies with jurisdiction over  
20 education, law enforcement, and health;

21           (8) consider geographic differences in the State when assessing the state of  
22 the behavioral health system and appropriate funding levels;

23           (9) survey and compile best practices in the State and around the country  
24 to meet the needs of individuals with mental health, substance use disorder, and dual  
25 diagnosis illnesses;

26           (10) evaluate the effectiveness of the integrated service delivery model for  
27 mental health and substance use disorder services in the Maryland Medical Assistance  
28 Program;

29           (11) review historical funding trends for behavioral health services in the  
30 State; and

31           (12) make recommendations regarding:

32           (i) a comprehensive State plan to address deficiencies in services or  
33 provider supply identified through the Commission's work;

1 (ii) best practices for interagency coordination to effectively deliver  
2 mental health and substance use disorder services to individuals in the State; and

3 (iii) an assessment of the resources needed to fully fund the State's  
4 behavioral health system.

5 (h) (1) On or before November 1, 2015, the Commission shall submit an  
6 interim report on its preliminary findings and recommendations to the Governor and, in  
7 accordance with § 2–1246 of the State Government Article, the General Assembly.

8 (2) On or before December 31, 2016, the Commission shall submit a final  
9 report on its findings and recommendations to the Governor and, in accordance with §  
10 2–1246 of the State Government Article, the General Assembly.

11 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect June  
12 1, 2015. It shall remain effective for a period of 2 years and, at the end of May 31, 2017,  
13 with no further action required by the General Assembly, this Act shall be abrogated and  
14 of no further force and effect.