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 $\begin{array}{c} 4 lr 1541 \\ CF \ SB \ 882 \end{array}$ 

# By: Delegates Hubbard, Costa, Cullison, Kach, Nathan–Pulliam, and Pena–Melnyk

Introduced and read first time: February 7, 2014 Assigned to: Health and Government Operations

### A BILL ENTITLED

### 1 AN ACT concerning

# Assertive Community Treatment (ACT) – Targeted Outreach, Engagement, and Services

4 FOR the purpose of establishing the Targeted Outreach, Engagement, and ACT  $\mathbf{5}$ Services Program in the Department of Health and Mental Hygiene; requiring 6 the Program to provide certain services and supports to certain individuals; 7 requiring the Department to identify certain individuals and to develop a 8 certain petition and process; establishing eligibility criteria for the Program; 9 authorizing certain individuals to file a petition; requiring a petition to be filed 10 with the Department and to contain certain information; requiring the Department to make a certain determination; requiring the Department to 11 12arrange for a certain Program provider to initiate contact with an eligible 13individual within a certain time period; requiring the Department to develop certain guidelines; requiring a Program provider to contact or attempt to 1415contact an eligible individual until the individual enrolls in the Program or no 16 longer meets eligibility criteria; requiring the Program to meet certain 17behavioral health needs of an eligible individual in a certain manner; requiring 18 the development of a certain service plan for certain individuals within a certain 19 time period; authorizing the Department to provide certain services and 20supports before the adoption of a service plan; requiring a service plan to be 21reviewed and modified periodically to make a certain determination; requiring 22the Program to use certain funds for certain services and in a certain manner; 23establishing requirements for certain meetings; requiring a client to be 24informed of certain services and to be a full partner in the creation and 25implementation of a certain plan; requiring a client to be informed about a 26certain directive and to be offered assistance in completing the directive under 27certain circumstances; providing that a certain directive shall be enforceable in 28accordance with certain laws; prohibiting the Department from discontinuing 29outreach if the Department has certain knowledge; prohibiting the Department 30 from discharging a client until the client takes certain action; requiring a

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW. [Brackets] indicate matter deleted from existing law.



1 Program provider seeking to discharge a client to take certain action; requiring  $\mathbf{2}$ certain clients to be reinstated to the Program under certain circumstances; 3 requiring a Program provider to use certain services in a certain manner and 4 ensure that a client enrolls in certain programs; requiring the Department to  $\mathbf{5}$ develop and provide a certain rate for certain services; requiring the 6 Department to provide certain funds to local mental health authorities; 7requiring the Department to document certain information, monitor certain 8 outcome data using a certain collection system, ensure that certain services and 9 supports are provided without disruption, expand the content and coverage of a certain system for a certain purpose, and establish a certain committee to make 10 11 certain recommendations; authorizing a client to appeal certain adverse actions; 12authorizing a client to appeal certain actions in accordance with a certain law; 13 providing that a client shall continue to receive certain services and supports 14under certain circumstances; requiring the Department to secure the services of 15an alternate provider under certain circumstances; requiring the Department, 16 in consultation with stakeholders, to adopt certain regulations; defining certain 17terms; and generally relating to the Targeted Outreach, Engagement, and ACT 18 Services Program.

- 19 BY adding to
- 20 Article Health General
- 21Section 10–1501 through 10–1510 to be under the new subtitle "Subtitle 15.22Targeted Outreach, Engagement, and ACT Services Program"
- 23 Annotated Code of Maryland
- 24 (2009 Replacement Volume and 2013 Supplement)
- 25 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF 26 MARYLAND, That the Laws of Maryland read as follows:

Article – Health – General

- SUBTITLE 15. TARGETED OUTREACH, ENGAGEMENT, AND ACT SERVICES
   PROGRAM.
- 30 **10–1501.**

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31 (A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS 32 INDICATED.

- 33 (B) "ACT" MEANS ASSERTIVE COMMUNITY TREATMENT THAT:
- 34 (1) USES AN EVIDENCE–BASED TRANSDISCIPLINARY TEAM;

35 (2) MEETS FIDELITY STANDARDS ESTABLISHED BY THE 36 DEPARTMENT; AND

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1 (3)  $\mathbf{IS}$ DESIGNED ТО PROVIDE COMPREHENSIVE,  $\mathbf{2}$ COMMUNITY-BASED, AND INTEGRATED BEHAVIORAL HEALTH TREATMENT, 3 **REHABILITATION, AND SUPPORT SERVICES, INCLUDING:** 4 **(I) CRISIS ASSESSMENT AND INTERVENTION; (II) COMPREHENSIVE ASSESSMENT;** 5 6 (III) ILLNESS MANAGEMENT AND RECOVERY SKILLS; 7 (IV) INDIVIDUAL SUPPORTIVE THERAPY, INCLUDING 8 TRAUMA THERAPY AS APPROPRIATE; 9 (V) SUBSTANCE ABUSE TREATMENT; 10 (VI) EMPLOYMENT SUPPORT SERVICES; 11 (VII) SIDE–BY–SIDE ASSISTANCE WITH ACTIVITIES OF DAILY 12LIVING; 13(VIII) INTERVENTION WITH SUPPORT NETWORKS; HOUSING, 14**(IX)** MEDICAL CARE, BENEFITS, AND 15**TRANSPORTATION;** 16 **(X) CASE MANAGEMENT; AND** 17(XI) MEDICATION PRESCRIPTION, ADMINISTRATION, AND 18 MONITORING. "ACT TEAM" MEANS THE REQUIRED MEMBERS OF EACH TEAM 19 **(C)** (1) 20SERVING PROGRAM CLIENTS. "ACT TEAM" INCLUDES: 21(2) **(I)** AN ACT LEADER; 2223**(II)** A PSYCHIATRIST; 24(III) A PSYCHIATRIC NURSE: 25(IV) A SOCIAL WORKER;

	4 HOUSE BILL 1267
1	(V) A CASE MANAGER;
2	(VI) AN EMPLOYMENT SPECIALIST;
3	(VII) A SUBSTANCE ABUSE SPECIALIST;
4	(VIII) A PEER SUPPORT SPECIALIST; AND
<b>5</b>	(IX) A PROGRAM ASSISTANT.
6	(D) "CLIENT" MEANS AN INDIVIDUAL ENROLLED IN THE PROGRAM.
7 8 9	(E) "ELIGIBLE INDIVIDUAL" MEANS AN INDIVIDUAL WHO HAS BEEN DETERMINED TO MEET THE ELIGIBILITY CRITERIA IN § 10–1503 OF THIS SUBTITLE.
$10 \\ 11 \\ 12$	(F) "FLEXIBLE USE FUNDS" MEANS FUNDING THAT IS PROVIDED TO A CLIENT AND USED TO PROVIDE NEEDED SUPPORTS, INCLUDING HOUSING, FOOD, CLOTHING, AND TRANSPORTATION.
$13\\14$	(G) "PERSON-CENTERED" MEANS SERVICES AND SUPPORTS THAT ARE CENTERED ON THE NEEDS AND DESIRES OF AN INDIVIDUAL.
$\begin{array}{c} 15\\ 16 \end{array}$	(H) "PETITION" MEANS A WRITTEN REQUEST FOR PROGRAM SERVICES MADE TO THE DEPARTMENT.
17 18	(I) "PROGRAM" MEANS THE TARGETED OUTREACH, ENGAGEMENT, AND ACT SERVICES PROGRAM.
19	10-1502.
$\begin{array}{c} 20\\ 21 \end{array}$	(A) THERE IS A TARGETED OUTREACH, ENGAGEMENT, AND ACT SERVICES PROGRAM IN THE DEPARTMENT.
$22 \\ 23$	(B) THE PROGRAM SHALL PROVIDE ACT SERVICES AND SUPPORTS TO ELIGIBLE INDIVIDUALS AND CLIENTS USING AN ACT TEAM.
24	10-1503.
25	(A) THE DEPARTMENT SHALL:
$\frac{26}{27}$	(1) IDENTIFY INDIVIDUALS WHO ARE ELIGIBLE FOR THE PROGRAM;

**DEVELOP A PETITION THAT LISTS THE PROGRAM ELIGIBILITY** 1 (2)  $\mathbf{2}$ **CRITERIA PROVIDED IN SUBSECTION (B) OF THIS SECTION; AND** 3 (3) PUBLICIZE THE AVAILABILITY OF THE PETITION PROCESS. 4 **(B)** AN INDIVIDUAL IS ELIGIBLE FOR THE PROGRAM IF THE  $\mathbf{5}$ **DEPARTMENT DETERMINES THAT THE INDIVIDUAL:** 6 (1) IS AN ADULT; 7 (2) HAS BEHAVIORAL HEALTH NEEDS; IS UNLIKELY TO SURVIVE SAFELY IN THE COMMUNITY 8 (3) 9 WITHOUT ASSISTANCE; 10 (4) IS UNLIKELY TO SEEK OUT OR TO PARTICIPATE VOLUNTARILY IN BEHAVIORAL HEALTH TREATMENT DUE TO: 11 12**(I) HOMELESSNESS;** (II) LACK OF SOCIAL SUPPORTS; 1314 (III) BEHAVIORAL HEALTH SYMPTOMS THAT ARE IMPACTING THE ABILITY OR WILLINGNESS OF THE INDIVIDUAL TO ENGAGE IN TREATMENT; 1516 OR 17(IV) A PRIOR HISTORY OF DISENGAGEMENT FROM 18 TREATMENT; **DURING THE 12–MONTH PERIOD BEFORE IDENTIFICATION BY** 19 (5) 20THE DEPARTMENT OR THE FILING OF A PETITION UNDER THIS SECTION: 21**(I)** HAS HAD SIX OR MORE VISITS TO AN EMERGENCY 22DEPARTMENT FOR BEHAVIORAL HEALTH REASONS; OR 23DUE TO A BEHAVIORAL HEALTH DISORDER, HAS **(II)** COMMITTED, ATTEMPTED, OR THREATENED A SERIOUS ACT OF VIOLENCE 2425TOWARDS SELF OR OTHERS THAT HAS RESULTED IN HOSPITALIZATION OR 26**INCARCERATION; AND** IS LIKELY TO BENEFIT FROM THE PROGRAM. 27(6)

THE PETITION DEVELOPED UNDER SUBSECTION (A) OF THIS 1 (C)  $\mathbf{2}$ SECTION MAY BE FILED BY: 3 (1) AN ADULT WHO RESIDES WITH THE SUBJECT OF THE 4 **PETITION;**  $\mathbf{5}$ THE PARENT, SPOUSE, ADULT SIBLING, OR ADULT CHILD OF (2) 6 THE SUBJECT OF THE PETITION; 7 (3) THE DIRECTOR OF A FACILITY IN WHICH THE SUBJECT OF 8 THE PETITION IS RECEIVING BEHAVIORAL HEALTH SERVICES; 9 (4) THE DIRECTOR OF A CORRECTIONAL FACILITY IN WHICH THE SUBJECT OF THE PETITION IS INCARCERATED: 10 11 (5) A PSYCHIATRIST, PSYCHOLOGIST, OR SOCIAL WORKER LICENSED IN THE STATE WHO IS TREATING OR SUPERVISING THE TREATMENT 12OF THE SUBJECT OF THE PETITION; OR 13 14(6) A PAROLE OFFICER OR PROBATION OFFICER ASSIGNED TO 15SUPERVISE THE SUBJECT OF THE PETITION. THE PETITION DEVELOPED UNDER SUBSECTION (A) OF THIS 16 **(D)** 17**SECTION SHALL: BE FILED WITH THE DEPARTMENT:** 18 (1) 19(2) SET FORTH THE FACTS THAT SUPPORT A REASONABLE BELIEF 20THAT THE SUBJECT OF THE PETITION IS AN ELIGIBLE INDIVIDUAL; AND 21PROVIDE THE LOCATION WHERE THE SUBJECT OF THE (3) PETITION IS PRESENT OR BELIEVED TO BE PRESENT. 2223**(E)** THE DEPARTMENT SHALL DETERMINE WHETHER THE SUBJECT OF THE PETITION IS ELIGIBLE FOR THE PROGRAM WITHIN 24 HOURS AFTER 24**RECEIPT OF THE PETITION.** 252610 - 1504.THE DEPARTMENT SHALL ARRANGE FOR THE APPROPRIATE (A)

HOUSE BILL 1267

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(A) THE DEPARTMENT SHALL ARRANGE FOR THE APPROPRIATE
PROGRAM PROVIDER TO INITIATE CONTACT WITH AN ELIGIBLE INDIVIDUAL
WITHIN 24 HOURS AFTER THE DEPARTMENT DETERMINES THAT AN INDIVIDUAL
IS ELIGIBLE FOR THE PROGRAM.

1 (B) THE DEPARTMENT SHALL DEVELOP GUIDELINES BASED ON RISK 2 CATEGORIES THAT SET FORTH THE REQUIRED FREQUENCY OF CONTACT AND 3 ATTEMPTED CONTACT WITH AN ELIGIBLE INDIVIDUAL.

4 (C) A PROGRAM PROVIDER SHALL CONTINUE TO CONTACT OR ATTEMPT 5 TO CONTACT AN ELIGIBLE INDIVIDUAL UNTIL THE INDIVIDUAL:

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(1) HAS ENROLLED IN THE PROGRAM; OR

7 (2) NO LONGER MEETS THE ELIGIBILITY CRITERIA.

8 **10–1505.** 

9 (A) THE PROGRAM SHALL MEET THE URGENT BEHAVIORAL HEALTH 10 NEEDS OF AN ELIGIBLE INDIVIDUAL IMMEDIATELY WITHOUT THE NEED FOR 11 THE DEVELOPMENT OF A SERVICE PLAN.

12 (B) (1) A PERSON-CENTERED SERVICE PLAN SHALL BE DEVELOPED 13 BY THE ACT TEAM FOR EACH CLIENT WITHIN 5 BUSINESS DAYS FOLLOWING 14 ENROLLMENT.

15(2)SERVICES AND SUPPORTS MAY BE PROVIDED BEFORE THE16ADOPTION OF A SERVICE PLAN, AS APPROPRIATE.

17 (3) A SERVICE PLAN SHALL BE REVIEWED AND MODIFIED 18 PERIODICALLY BY THE ACT TEAM TO DETERMINE WHETHER THE CLIENT IS 19 SATISFIED WITH THE SERVICES AND SUPPORTS PROVIDED AND IS MAKING 20 PROGRESS TOWARDS THE GOALS LISTED IN THE PLAN.

21 (C) (1) THE PROGRAM SHALL USE FLEXIBLE-USE FUNDS AS 22 NECESSARY TO:

23

(I) SECURE SUPPORTED HOUSING; AND

24(II) PROVIDE THE CLIENT WITH BASIC NECESSITIES,25INCLUDING FOOD, CLOTHING, AND TRANSPORTATION.

26 (2) FLEXIBLE–USE FUNDS:

27 (I) SHALL BE ASSIGNED TO THE CLIENT AND NOT TO THE 28 PROVIDER OF SERVICES;

HOUSE F	BILL 1267
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1(II) MAY NOT BE CONTINGENT ON THE CLIENT'S2ENGAGEMENT IN ANY PARTICULAR INDIVIDUAL PROGRAM SERVICE; AND

3 (III) SHALL FOLLOW THE CLIENT AS THE CLIENT MOVES
 4 THROUGH TREATMENT SERVICES REGARDLESS OF THE LEVEL OF INTENSITY OF
 5 THE SERVICES.

6 **(D) ANY MEETING HELD FOR THE PURPOSE OF ADOPTING OR** 7 **CHANGING A SERVICE PLAN SHALL:** 

8 (1) INCLUDE THE CLIENT AND ANY OTHER INDIVIDUAL 9 DESIGNATED BY THE CLIENT, INCLUDING PEERS OR FAMILY MEMBERS;

10 (2) BE HELD IN A MANNER AND LOCATION THAT REASONABLY 11 ACCOMMODATES THE CLIENT AND ALLOWS THE CLIENT TO PARTICIPATE 12 EFFECTIVELY IN THE SERVICE–PLANNING PROCESS; AND

13(3)FOCUS ON THE INDIVIDUAL STRENGTHS AND LIFE GOALS OF14THE CLIENT AND ON THE MENTAL HEALTH SERVICES AND SUPPORTS THAT THE15CLIENT NEEDS TO MEET THE GOALS.

16 (E) A CLIENT SHALL BE INFORMED FULLY OF AVAILABLE SERVICES 17 AND SUPPORTS AND SHALL BE A FULL PARTNER IN THE CREATION AND 18 IMPLEMENTATION OF THE CLIENT'S SERVICE PLAN.

19 (F) (1) A CLIENT SHALL BE INFORMED ABOUT MENTAL HEALTH 20 ADVANCE DIRECTIVES AND, IF THE CLIENT CHOOSES TO COMPLETE AN 21 ADVANCE DIRECTIVE, SHALL BE OFFERED ASSISTANCE IN COMPLETING AND 22 EXECUTING THE ADVANCE DIRECTIVE.

(2) AN ADVANCE DIRECTIVE COMPLETED UNDER PARAGRAPH (1)
 OF THIS SUBSECTION SHALL BE ENFORCEABLE IN ACCORDANCE WITH STATE
 AND FEDERAL LAW.

26 **10–1506.** 

(A) IF THE DEPARTMENT HAS KNOWLEDGE OF THE LOCATION OF AN
ELIGIBLE INDIVIDUAL, THE DEPARTMENT MAY NOT DISCONTINUE OUTREACH
TO THE INDIVIDUAL.

30 (B) THE DEPARTMENT MAY NOT DISCHARGE A CLIENT FROM THE 31 PROGRAM UNTIL THE INDIVIDUAL:

1 (1) HAS NOT USED ANY PROGRAM SERVICE FOR A CONTINUOUS 2 12-MONTH PERIOD, DESPITE ASSERTIVE OUTREACH;

3 (2) HAS BEEN ADMITTED TO AN INPATIENT FACILITY FOR 4 LONGER THAN 3 MONTHS;

5 (3) HAS MOVED FROM THE AREA AND IS RECEIVING SERVICES 6 FROM A PROGRAM IN ANOTHER JURISDICTION IN THE STATE OR HAS MOVED 7 OUT OF THE STATE; OR

8 (4) HAS TRANSITIONED SUCCESSFULLY TO LESS INTENSIVE 9 COMMUNITY SERVICES AS DEMONSTRATED BY AN ABILITY TO FUNCTION 10 INDEPENDENTLY IN ALL MAJOR ROLES, INCLUDING WORK, SOCIAL, AND 11 SELF-CARE, OVER THE PRECEDING 24-MONTH PERIOD.

- 12 (C) A PROGRAM PROVIDER SEEKING TO DISCHARGE A CLIENT SHALL:
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(1) **DOCUMENT THE BASIS FOR THE DISCHARGE;** 

14(2) DEVELOP A PLAN TO TRANSITION THE CLIENT TO OTHER15APPROPRIATE SERVICES THAT MEET THE NEEDS OF THE INDIVIDUAL; AND

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(3) **OBTAIN PRIOR APPROVAL FROM THE DEPARTMENT.** 

17 (D) A CLIENT WHO IS DISCHARGED FROM THE PROGRAM SHALL BE 18 REINSTATED AUTOMATICALLY ON THE REQUEST OF THE FORMER CLIENT.

- 19 **10–1507.**
- 20 (A) A PROGRAM PROVIDER SHALL:
- 21 (1) ENSURE THAT A CLIENT ENROLLS IN ANY ENTITLEMENT 22 PROGRAM FOR WHICH THE CLIENT IS ELIGIBLE; AND

23(2)USE MEDICAID-REIMBURSABLE SERVICES TO THE GREATEST24EXTENT POSSIBLE.

25 (B) THE DEPARTMENT SHALL DEVELOP AND PROVIDE AN ENHANCED 26 RATE FOR ACT SERVICES AT A LEVEL THAT ALLOWS FOR INCREASED 27 FREQUENCY OF CONTACT AND DECREASED STAFF-TO-CLIENT RATIOS.

28 (C) THE DEPARTMENT SHALL PROVIDE LOCAL MENTAL HEALTH 29 AUTHORITIES WITH FLEXIBLE–USE FUNDS FOR EACH CLIENT IN AN AMOUNT

SUFFICIENT TO ADDRESS HOUSING, FOOD, CLOTHING, AND TRANSPORTATION 1  $\mathbf{2}$ NEEDS. 10 - 1508.3 THE DEPARTMENT SHALL: 4  $\mathbf{5}$ (1) DOCUMENT THE NUMBER OF CONTACTS MADE WITH EACH 6 ELIGIBLE INDIVIDUAL AND THE OUTCOMES OF THE CONTACTS; 7 MONITOR OUTCOME DATA FOR EACH CLIENT USING THE (2) 8 ASSERTIVE COMMUNITY TREATMENT OUTCOMES DATA COLLECTION SYSTEM 9 THAT SHALL INCLUDE: 10 **(I)** THE NUMBER AND LENGTH OF STAY OF INPATIENT 11 **PSYCHIATRIC HOSPITALIZATIONS;** 12**(II)** THE NUMBER OF EMERGENCY ROOM VISITS FOR 13 **PSYCHIATRIC REASONS; AND** 14(III) MEASURES FOR CRIMINAL JUSTICE SYSTEM INVOLVEMENT, HOUSING STABILITY, AND FAMILY INVOLVEMENT; 1516 ENSURE THAT PROGRAM SERVICES AND SUPPORTS ARE (3) 17**PROVIDED WITHOUT DISRUPTION;** EXPAND THE CONTENT AND COVERAGE OF THE OUTCOMES 18 (4) 19 MEASUREMENT SYSTEM TO ESTABLISH THE BASIS OF A SYSTEM OF 20CONTINUOUS QUALITY IMPROVEMENT FOR ALL SERVICES PROVIDED UNDER 21THIS SUBTITLE; AND 22(5) ESTABLISH A COMMITTEE OF STAKEHOLDERS, INCLUDING 23CURRENT OR FORMER MENTAL HEALTH SERVICE RECIPIENTS, FAMILY 24ADVOCATES, PROVIDERS, ASSURANCE MEMBERS. AND QUALITY 25**PROFESSIONALS, TO RECOMMEND:** 26**REVISIONS TO AND EXPANSION OF THE OUTCOMES (I)** MEASUREMENT SYSTEM AND THE ASSERTIVE COMMUNITY TREATMENT 2728**OUTCOMES DATA COLLECTION SYSTEM:** 29**(II) ACCOUNTABILITY MEASURES; AND** 

30 (III) EVALUATION TOOLS.

1 **10–1509.** 

2 (A) A CLIENT MAY APPEAL THE FOLLOWING ADVERSE ACTIONS BY THE 3 DEPARTMENT:

4 (1) DENIAL, REDUCTION, IRREGULARITY, OR TERMINATION OF 5 SERVICES, INCLUDING FAILURE TO PROVIDE THE SERVICES LISTED IN THE 6 SERVICE PLAN; AND

7 (2) FAILURE TO PROVIDE MENTAL HEALTH SERVICES OR 8 SUPPORTS SUFFICIENT IN AMOUNT, SCOPE, OR QUALITY TO SUPPORT 9 RECOVERY, COMMUNITY INTEGRATION, AND ECONOMIC SELF-SUFFICIENCY.

10 **(B)** A CLIENT MAY APPEAL AN ADVERSE ACTION DESCRIBED UNDER 11 SUBSECTION (A) OF THIS SECTION IN ACCORDANCE WITH TITLE 10, SUBTITLE 2 12 OF THE STATE GOVERNMENT ARTICLE.

13 (C) (1) A CLIENT SHALL CONTINUE TO RECEIVE ANY SERVICE OR 14 SUPPORT LISTED IN THE SERVICE PLAN THAT WAS IN EFFECT PENDING THE 15 OUTCOME OF AN APPEAL UNDER THIS SECTION.

16 (2) IF A PROGRAM PROVIDER HAS PROVIDED NOTICE AND 17 DOCUMENTED THAT THE NEEDS OF THE CLIENT EXCEED THE CAPABILITY OF 18 THE PROGRAM PROVIDER TO SERVE THE CLIENT SAFELY AND APPROPRIATELY, 19 THE DEPARTMENT SHALL SECURE THE SERVICES OF AN ALTERNATE PROVIDER 20 FOR THE CLIENT DURING THE APPEAL OF AN ADVERSE ACTION.

21 **10–1510.** 

22 (A) THE DEPARTMENT, IN CONSULTATION WITH STAKEHOLDERS, 23 SHALL ADOPT REGULATIONS TO IMPLEMENT THIS SUBTITLE.

24 **(B)** THE REGULATIONS ADOPTED UNDER SUBSECTION (A) OF THIS 25 SECTION SHALL INCLUDE:

26 (1) THE RESPONSIBILITIES OF A PROGRAM PROVIDER WHEN 27 DISCHARGING CLIENTS;

28 (2) **PROCEDURES FOR LOCATING ELIGIBLE INDIVIDUALS;** 

29 (3) PROCEDURES FOR LOCATING CLIENTS WHEN THE LOCATION
 30 OF THE CLIENTS IS UNKNOWN;

1 (4) A REIMBURSEMENT METHODOLOGY TO ACCOUNT FOR 2 OUTREACH AND ENGAGEMENT SERVICES PROVIDED THROUGH THE PROGRAM;

- 3 (5) A PROCESS FOR FILING A PETITION WITH THE DEPARTMENT;
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- (6) A PROCESS FOR APPEALING PETITION DENIALS; AND

5 (7) ANY OTHER ITEM NECESSARY TO CARRY OUT THE 6 REQUIREMENTS OF THIS SUBTITLE.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
 October 1, 2014.