SENATE BILL 1097

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By: Senator Hershey

Introduced and read first time: March 3, 2014 Assigned to: Rules Re–referred to: Finance, March 7, 2014

Committee Report: Favorable with amendments Senate action: Adopted Read second time: March 16, 2014

CHAPTER _____

1 AN ACT concerning

Mental Hygiene Administration – Upper Shore Community Mental Health
Center – Reopening and Maintenance
Department of Health and Mental Hygiene – Workgroup to Evaluate Mental
Health Care Delivery on the Eastern Shore

6 FOR the purpose of requiring that the Upper Shore Community Mental Health Center 7 be maintained under the direction of the Mental Hygiene Administration; declaring the intent of the General Assembly for the State to reopen the Center 8 and the Administration to maintain the Center in accordance with certain 9 10 provisions of law; and generally relating to the Mental Hygiene Administration and the reopening and maintenance of the Upper Shore Community Mental 11 Health Center the Department of Health and Mental Hygiene to convene a 12workgroup to evaluate and make findings and recommendations regarding the 13 state of mental health care delivery on the Eastern Shore of Maryland; 14 15requiring the workgroup to include certain individuals; requiring the Department to report the findings and recommendations of the workgroup in a 16 17certain manner to certain legislative committees on or before a certain date; and 18 generally relating to the Workgroup to Evaluate Mental Health Care Delivery on the Eastern Shore. 19

20 BY repealing and reenacting, with amendments,

- 21 Article Health General
- 22 Section 10-406(a)
- 23 Annotated Code of Maryland

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

<u>Underlining</u> indicates amendments to bill.

Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.



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1	(2009 Replacement Volume and 2013 Supplement)				
$\frac{2}{3}$			1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF at the Laws of Maryland read as follows :		
4	Article – Health – General				
5	10-406.				
$6 \\ 7$	(a) The following State facilities shall be maintained under the direction of the Administration:				
8		(1)	Clifton T. Perkins Hospital Center;		
9		(2)	Eastern Shore Hospital Center;		
10 11	Rockville;	(3)	Regional Institutes for Children and Adolescents – Baltimore and		
12		(4)	Springfield Hospital Center;		
13		(5)	Spring Grove Hospital Center; [and]		
14		(6)	Thomas B. Finan Hospital Center; AND		
15		(7)	UPPER SHORE COMMUNITY MENTAL HEALTH CENTER.		
16 17 18 19 20 21	SECTION 2. AND BE IT FURTHER ENACTED, That it is the intent of the General Assembly for the State to reopen the Upper Shore Community Mental Health Center in Chestertown, Maryland, that was closed in 2010 and for the facility to be maintained under the direction of the Mental Hygiene Administration in accordance with the appropriate provisions of the Health – General Article and the Code of Maryland Regulations.				
$22 \\ 23 \\ 24$	(a) <u>The Department of Health and Mental Hygiene shall convene a</u> workgroup to evaluate the state of mental health care delivery on the Eastern Shore of <u>Maryland, including:</u>				
$\frac{25}{26}$	being referr	<u>(1)</u> red to o	whether and to what extent individuals with mental illness are out-of-state mental health facilities;		
27		<u>(2)</u>	the adequacy of the mental health care workforce;		
$\frac{28}{29}$	<u>Health Cen</u>	<u>(3)</u> ter has	the impact the closure of the Upper Shore Community Mental s had on communities in the former service area of the Center;		

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$\frac{1}{2}$	(4) the feasibility of reopening the Upper Shore Community Mental Health Center, including:
3	(i) the cost of reopening the Center;
4 5	(ii) <u>measures that may be taken to minimize operating expenses</u> <u>at the facility; and</u>
$egin{array}{c} 6 \ 7 \ 8 \end{array}$	(iii) the extent to which the Center may be operated at a cost to the State that is less than the cost of its operation before the Center was closed in 2009;
9 10	(5) <u>the barriers to accessibility of mental health services on the</u> <u>Eastern Shore</u> ;
11 12	(6) the volume of admissions and mix of forensic and nonforensic patients in State–run psychiatric facilities; and
13 14	(7) whether there is sufficient capacity for nonforensic patients in State–run psychiatric facilities.
$\begin{array}{c} 15\\ 16\end{array}$	(b) <u>The workgroup convened under subsection (a) of this section shall</u> <u>include:</u>
17 18	(1) <u>the Deputy Secretary of Behavioral Health and Disabilities of the</u> Department, or the Deputy Secretary's designee;
19 20	(2) <u>the Executive Director of the Maryland Health Care Commission,</u> or the Executive Director's designee;
$\begin{array}{c} 21 \\ 22 \end{array}$	(3) <u>the Executive Director of the Health Services Cost Review</u> <u>Commission, or the Executive Director's designee;</u>
$\frac{23}{24}$	(4) <u>the Executive Director of the Tri–County Council for the Lower</u> Eastern Shore of Maryland, or the Executive Director's designee;
$\begin{array}{c} 25\\ 26 \end{array}$	(5) <u>the Executive Director of the Mid–Shore Regional Council, or the</u> Executive Director's designee;
27 28	(6) <u>the Executive Director of the Upper Shore Regional Council, or the</u> <u>Executive Director's designee;</u>
29 30	(7) <u>the Chief Executive Officer of Shore Health System, or the Chief</u> Executive Officer's designee;
$\frac{31}{32}$	(8) <u>the Chief Executive Officer of Peninsula Regional Medical Center,</u> or the Chief Executive Officer's designee;

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$\frac{1}{2}$	<u>(9)</u> Director's designed	the Executive Director of AFSCME Maryland, or the Executive e;		
$egin{array}{c} 3 \\ 4 \\ 5 \end{array}$	<u>(10)</u> <u>Health Center wh</u> <u>Chairman's design</u>	the Chairman of the Board of the Upper Shore Community Mental no served on the Board at the time of the Center's closure, or the nee;		
$6 \\ 7$	<u>(11)</u> Director's designed	<u>the Executive Director of the Lower Shore Clinic, or the Executive</u> <u>e;</u>		
8	<u>(12)</u>	three mental health professionals;		
9	<u>(13)</u>	one representative of the National Alliance on Mental Illness;		
10	<u>(14)</u>	one representative of the Mental Health Association of Maryland;		
11	<u>(15)</u>	one representative of the Maryland Psychological Association; and		
12	<u>(16)</u>	three health officers:		
13 14	<u>Queen Anne's Cou</u>	(i) <u>one of whom shall be from Cecil County, Kent County, or</u> <u>nty;</u>		
$\begin{array}{c} 15\\ 16 \end{array}$	<u>County, or Talbot</u>	<u>(ii)</u> <u>one of whom shall be from Caroline County, Dorchester</u> <u>County; and</u>		
17 18	<u>County, or Worces</u>	<u>(iii)</u> <u>one of whom shall be from Somerset County, Wicomico</u> <u>ter County.</u>		
19 20 21 22	Hygiene shall re accordance with §	r before December 31, 2014, the Department of Health and Mental eport the findings and recommendations of the workgroup, in § 2–1246 of the State Government Article, to the Senate Finance e House Health and Government Operations Committee.		
$\begin{array}{c} 23 \\ 24 \end{array}$	SECTION 3. <u>2.</u> AND BE IT FURTHER ENACTED, That this Act shall take effect October <u>June</u> 1, 2014.			