

Article - Insurance

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§15–840.

(a) In this section, “residential crisis services” means intensive mental health and support services that are:

(1) provided to a child or an adult with a mental illness who is experiencing or is at risk of a psychiatric crisis that would impair the individual’s ability to function in the community;

(2) designed to prevent a psychiatric inpatient admission, provide an alternative to psychiatric inpatient admission, or shorten the length of inpatient stay;

(3) provided out of the individual’s residence on a short-term basis in a community-based residential setting; and

(4) provided by entities that are licensed by the Department of Health and Mental Hygiene to provide residential crisis services.

(b) This section applies to:

(1) insurers and nonprofit health service plans that provide hospital, medical, or surgical benefits to individuals or groups on an expense-incurred basis under health insurance policies or contracts that are issued or delivered in the State; and

(2) health maintenance organizations that provide hospital, medical, or surgical benefits to individuals or groups under contracts that are issued or delivered in the State.

(c) (1) An entity subject to this section shall provide coverage for medically necessary residential crisis services.

(2) The services required under this section may be delivered under a managed care system.

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