

**Department of Legislative Services**  
Maryland General Assembly  
2015 Session

**FISCAL AND POLICY NOTE**  
**Revised**

Senate Bill 174

(Senator Eckardt)

Finance

Health and Government Operations

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**Behavioral Health Administration - Behavioral Health Advisory Council**

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This bill repeals and replaces the Maryland Advisory Council on Mental Hygiene and the State Drug and Alcohol Abuse Council with the Behavioral Health Advisory Council in the Office of the Governor. The new advisory council is tasked with promoting and advocating for the enhancement of behavioral health services across the State for individuals who have behavioral health disorders and their family members. The council must submit an annual report to the Governor and the General Assembly on or before December 31 of each year. The Behavioral Health Administration (BHA) within the Department of Health and Mental Hygiene (DHMH) must provide one full-time project manager for administrative coordination and other staff as necessary to support council functions.

The bill also establishes the Behavioral Health Advisory Council as the State council to which county mental health advisory committees and intercounty mental health advisory committees must send annual reports, and as the State council that the Secretary of Health and Mental Hygiene must consult before initiating the development of core service agencies for the planning, management, and financing of mental health services.

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**Fiscal Summary**

**State Effect:** Reimbursement for additional members can be handled with existing budgeted resources. DHMH already provides staff support for both existing councils and can continue to do so for the new advisory council. Revenues are not affected.

**Local Effect:** The bill does not affect local government finances.

**Small Business Effect:** None.

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## Analysis

### Bill Summary:

#### *Composition of the Behavioral Health Advisory Council*

The 55-member council consists of several Executive department Secretaries and directors, as well as representatives from the Legislative and Judicial branches of State government, local government associations, local behavioral health advisory councils, local and State behavioral health organizations (appointed by the Secretary of Health and Mental Hygiene), and the mental health and substance use disorder treatment community (appointed by the Governor). Representatives from the mental health and substance use disorder treatment community must include treatment providers and treatment recipients, and must represent geographic and socio-demographic diversity. The Secretary of Health and Mental Hygiene may also appoint additional representatives designated by the council. The council must designate a chair from amongst its members. The chair, with the consent of the council, may designate additional individuals to serve on a committee or task force.

Governor-appointed members (1) serve a three-year term; (2) serve for a maximum of two consecutive terms; (3) may be reappointed after at least six years have passed since serving; (4) at the end of a term, continue to serve until a successor is appointed and qualifies; and (5) if appointed after a term has begun, serve only for the rest of the term and until a successor is appointed and qualifies. *Ex officio* members serve as long as the member holds the specified office or designation. All members serve at the pleasure of the Governor.

#### *Council Rules and Procedures*

The council may adopt procedures necessary to conduct business, including the creation of committees or task forces. The council may also consult with State agencies to carry out its duties. The council must meet at least six times a year. A majority of the voting members of the council constitutes a quorum. Council members may not receive compensation, but they are entitled to reimbursement for standard State travel expenses.

#### *Council Responsibilities*

The council must promote and advocate for (1) planning, policy, workforce development, and services to ensure a coordinated, quality system of care that is outcome-guided and integrates prevention, recovery, evidence-based practices, and cost-effective strategies that enhance behavioral health services across the State and (2) a culturally competent and comprehensive approach to publicly funded prevention, early intervention, treatment, and recovery services that support and foster wellness, recovery, resiliency, and health for individuals who have behavioral health disorders and their family members.

**Current Law/Background:** The Maryland Advisory Council on Mental Hygiene consists of 18 members appointed by the Governor, with representatives from a broad range of agencies and groups that are concerned, directly or indirectly, with mental hygiene, including members from State and local government, the medical profession, major socio-economic and ethnic groups, and private organizations. Members serve for three years. The council must be a strong advocate of a comprehensive, broad-based approach to the social, economic, and medical problems of mental hygiene. Additionally, each county mental health advisory committee and intercounty mental health advisory committee must prepare and disseminate an annual report to the council. The Secretary of Health and Mental Hygiene must also consult with the council before initiating the development of core service agencies as a mechanism for community planning, management, and financing of mental health services. BHA staffs the council.

The State Drug and Alcohol Abuse Council in the Office of the Governor consists of several Executive department Secretaries and directors, as well as representatives from the Legislative and Judicial branches of State government, and members of the substance use disorder treatment community (appointed by the Governor). Members of the substance use disorder treatment community must include both treatment providers and treatment recipients, and represent geographic and socio-demographic diversity. Members serve for three years. The council must develop coordinated and comprehensive approaches for using State and local resources to effectively provide drug and alcohol abuse prevention, intervention, and treatment services for all State residents. BHA staffs the council.

DHMH has been examining the issue of integrating substance use disorder and mental health care in recent years to address fragmentation in the delivery and government financing of those services. Chapter 460 of 2014 merged DHMH's Alcohol and Drug Abuse Administration and Mental Hygiene Administration into the Behavioral Health Administration. According to a 2014 DHMH report on the *Implementation of the Behavioral Health Integrated Service Delivery and Financing System*, representatives from both the Maryland Advisory Council on Mental Hygiene and the State Drug and Alcohol Abuse Council began holding joint meetings in July 2012 to explore the possibility of combining into one behavioral health advisory council; stakeholders have continued to meet jointly and have developed a proposal for full integration of the two councils. DHMH plans to use the integrated council as a forum to solicit stakeholder input on policy decisions regarding behavioral health services.

**State Fiscal Effect:** DHMH advises that BHA can use current resources, including existing staff of the Maryland Advisory Council on Mental Hygiene and the State Drug and Alcohol Abuse Council to support the new Behavioral Health Advisory Council.

## Additional Information

**Prior Introductions:** None.

**Cross File:** HB 1262 (Delegate Sample-Hughes, *et al.*) – Rules and Executive Nominations.

**Information Source(s):** Baltimore City, Montgomery and Howard counties, Governor's Office, Department of Health and Mental Hygiene, Department of Legislative Services

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