AMENDMENTS TO HOUSE BILL 908
(First Reading File Bill)

AMENDMENT NO. 1
On page 1, in the sponsor line, strike “and P. Young” and substitute “P. Young, Hammen, Angel, Bromwell, Cullison, Hayes, Kipke, Krebs, McDonough, McMillan, Miele, Morgan, Oaks, Pendergrass, Rose, Saab, Sample-Hughes, West, and K. Young”; in line 2, strike “Establishment of”; in the same line, after “Treatment” insert “Demonstration”; in the same line, strike “Programs” and substitute “Program”; in line 4, after “of” insert “authorizing a certain number of hospitals in the State to participate in a substance use treatment demonstration program; providing for the purpose of the demonstration program; requiring each hospital in the demonstration program to operate a certain substance use treatment program or ensure that certain substance use treatment services are made available; requiring a hospital seeking to participate in the demonstration program to apply to the Health Services Cost Review Commission; requiring the Commission, or an entity designated by the Commission, to select demonstration program participants based on a request for participants and to develop a certain methodology to evaluate the effectiveness of the demonstration program; providing for a delayed effective date”; strike beginning with “requiring” in line 4 down through “analysis” in line 13; in line 13, after “to” insert “a”; in the same line, strike “programs” and substitute “demonstration program”; and strike in their entirety lines 15 through 19, inclusive.

AMENDMENT NO. 2
On pages 2 and 3, strike in their entirety the lines beginning with line 17 on page 2 through line 16 on page 3, inclusive.

AMENDMENT NO. 3
On page 3, in line 18, strike “EACH HOSPITAL SHALL ESTABLISH” and substitute “UP TO FIVE HOSPITALS IN THE STATE MAY PARTICIPATE IN”; in the same line, after “TREATMENT” insert “DEMONSTRATION”; in line 20, after “THE”
insert “DEMONSTRATION”; in the same line, after “TO” insert “IDENTIFY BEST PRACTICES TO”; in line 21, after “PATIENTS” insert “WHO MAY BE”; after line 22, insert:

“(2) (I) SCREEN THE PATIENTS USING A STANDARDIZED PROCESS AND SCREENING TOOL; AND

(II) REFER THE PATIENTS WHO ARE IN NEED OF SUBSTANCE USE TREATMENT TO APPROPRIATE HEALTH CARE AND SUPPORT SERVICES.”;

strike in their entirety lines 23 through 26, inclusive; in line 27, after “HOSPITAL” insert “IN THE DEMONSTRATION PROGRAM”; and in line 29, strike “UNIT” and substitute “PROGRAM”.

On page 4, strike beginning with “CONTRACT” in line 1 down through “ENTITY” in line 3 and substitute “ENSURE THAT INPATIENT AND OUTPATIENT SUBSTANCE USE TREATMENT SERVICES ARE MADE AVAILABLE.

(D) INPATIENT AND OUTPATIENT SUBSTANCE USE TREATMENT SERVICES PROVIDED THROUGH THE DEMONSTRATION PROGRAM SHALL INCLUDE:

(1) SUBSTANCE USE COUNSELING 24 HOURS A DAY AND 7 DAYS A WEEK EITHER ON-SITE OR ON-CALL;

(2) SCREENING, INTERVENTION, AND TREATMENT SERVICES FOR ANY PATIENT IN THE HOSPITAL’S INPATIENT OR OUTPATIENT CARE WHO IS IDENTIFIED TO BE IN NEED OF SUBSTANCE USE TREATMENT; AND
(3) **Referral to the Next Appropriate Level of Care or Resource.**

(E) A HOSPITAL SEEKING TO PARTICIPATE IN THE DEMONSTRATION PROGRAM ESTABLISHED BY THIS SECTION SHALL APPLY TO THE HEALTH SERVICES COST REVIEW COMMISSION.

(F) **The Health Services Cost Review Commission, or an entity authorized by the Commission, shall:**

(1) SELECT DEMONSTRATION PROGRAM PARTICIPANTS BASED ON A REQUEST FOR PARTICIPANTS; AND

(2) DEVELOP A METHODOLOGY TO EVALUATE THE EFFECTIVENESS OF THE DEMONSTRATION PROGRAM, INCLUDING AN ANALYSIS OF THE EFFECT OF THE PROGRAM ON TOTAL COST OF CARE”;

strike in their entirety lines 4 through 20, inclusive; and in line 22, strike “October 1, 2016” and substitute “January 1, 2017”.