J1 9lr1747 CF 9lr1745

By: Senators Kelley, Augustine, Beidle, Benson, Feldman, Jennings, Klausmeier, Kramer, and Reilly

Introduced and read first time: February 4, 2019

Assigned to: Finance

A BILL ENTITLED

1 AN ACT concerning

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Maryland Medical Assistance Program – Managed Care Organizations – Behavioral Health Services

FOR the purpose of requiring the Maryland Department of Health, subject to certain limitations, to provide reimbursement for certain medically necessary and appropriate behavioral health services to managed care organizations; repealing a requirement that the Department provide certain reimbursement for certain services; requiring managed care organizations to provide behavioral health services beginning on a certain date; requiring the Secretary of Health to include in certain capitation payments funding for community provider rates; requiring the Department, rather than the Behavioral Health Administration, to design and monitor a certain delivery system and establish performance standards for managed care organizations, rather than providers, in the delivery system; requiring the Department to establish procedures to ensure that certain referrals include specification of certain diagnoses and conditions and a certain preauthorization; requiring managed care organizations, rather than a certain delivery system, to provide certain specialty mental health services needed by certain enrollees, coordinate certain services, consist of a network of certain professionals, include certain linkages, and comply with certain other requirements; repealing the authority of the Department to contract with a certain managed care organization for the delivery of certain health services under certain circumstances; requiring the Department to implement a certain delivery system on or before a certain date; defining a certain term; and generally relating to behavioral health services in the Maryland Medical Assistance Program.

25 BY repealing and reenacting, without amendments,

Article – Health – General

27 Section 15–101(a) and 15–103(b)(1) and (2)(i) and (iii)

28 Annotated Code of Maryland

29 (2015 Replacement Volume and 2018 Supplement)

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



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organizations.

1 2 3 4 5	BY adding to Article – Health – General Section 15–101(a–1) Annotated Code of Maryland (2015 Replacement Volume and 2018 Supplement)			
6 7 8 9 10	BY repealing and reenacting, with amendments, Article – Health – General Section 15–101(a–1) and (a–2) and 15–103(b)(2)(ii), (9)(xi), (18), and (21) Annotated Code of Maryland (2015 Replacement Volume and 2018 Supplement)			
11 12	,			
13	Article – Health – General			
14	15–101.			
15	(a) In this title the following words have the meanings indicated.			
16 17 18 19 20	(A-1) (1) "BEHAVIORAL HEALTH SERVICES" MEANS PREVENTION, SCREENING, EARLY INTERVENTION, TREATMENT, RECOVERY, SUPPORT, AND REHABILITATION SERVICES FOR INDIVIDUALS WITH SUBSTANCE-RELATED DISORDERS, ADDICTIVE DISORDERS, MENTAL DISORDERS, OR A COMBINATION OF THESE DISORDERS.			
21	(2) "BEHAVIORAL HEALTH SERVICES" INCLUDES:			
22	(I) PRIMARY MENTAL HEALTH SERVICES; AND			
23	(II) SPECIALTY MENTAL HEALTH SERVICES.			
24 25	[(a-1)] (A-2) "Dental managed care organization" means a pre-paid dental plan that receives fees to manage dental services.			
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28	15–103.			
29	(b) (1) As permitted by federal law or waiver, the Secretary may establish a			

program under which Program recipients are required to enroll in managed care

- 1 (2) (i) The benefits required by the program developed under 2 paragraph (1) of this subsection shall be adopted by regulation and shall be equivalent to 3 the benefit level required by the Maryland Medical Assistance Program on January 1, 1996.
- 4 (ii) Subject to the limitations of the State budget and as permitted by federal law or waiver, the Department shall provide reimbursement for medically necessary and appropriate inpatient, intermediate care, and [halfway house substance abuse treatment services for substance abusing enrollees 21 years of age or older who are recipients of temporary cash assistance under the Family Investment Program] PEHAVIORAL HEALTH SERVICES.
- 10 (iii) Each managed care organization participating in the program 11 developed under paragraph (1) of this subsection shall provide or arrange for the provision 12 of the benefits described in subparagraph (ii) of this paragraph.
- 13 (9) Each managed care organization shall:

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- 14 (xi) Provide or arrange to provide primary mental health services 15 AND, BEGINNING JANUARY 1, 2021, BEHAVIORAL HEALTH SERVICES;
- 16 (18) (i) The Department shall make capitation payments to each 17 managed care organization as provided in this paragraph.
- 18 (ii) In consultation with the Insurance Commissioner, the Secretary 19 shall:
- 20 1. Set capitation payments at a level that is actuarially 21 adjusted to the benefits provided; [and]
- 22 2. Actuarially adjust the capitation payments to reflect the relative risk assumed by the managed care organization; **AND**
- 3. IN ACCORDANCE WITH § 16–201.3 OF THIS ARTICLE, 25 INCLUDE IN THE CAPITATION PAYMENTS FUNDING FOR COMMUNITY PROVIDER 26 RATES.
- 27 In actuarially adjusting capitation (iii) payments under 28 subparagraph (ii)2 of this paragraph, the Secretary, in consultation with the Insurance 29 Commissioner, shall take into account, to the extent allowed under federal law, the 30 expenses incurred by the managed care organization applicable to the business of providing care to enrolled individuals. 31
- 32 (21) (i) The Department shall establish a delivery system for specialty 33 mental health services for enrollees of managed care organizations.
 - (ii) The [Behavioral Health Administration] **DEPARTMENT** shall:

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1		1.	Design and monitor the delivery system;
2 3	MANAGED CARE ORGAN	2. I IZATI	Establish performance standards for [providers] ONS in the delivery system; and
4 5	referrals from managed c	3. are org	Establish procedures to ensure appropriate and timely ganizations [to the delivery system] that include:
6 7	referral to the delivery sy	A. rstem];	Specification of the diagnoses and conditions [eligible for
8	delivery system for mana	B. ged ca	Training and clinical guidance in appropriate use of the re organization primary care providers;
10	delivery system] BY THE	C. MANA	Preauthorization [by the utilization review agent of the GED CARE ORGANIZATION; and
12		D.	Penalties for a pattern of improper referrals.
13 14 15	(iii) organizations to develop health services.	The stand	Department shall collaborate with managed care ards and guidelines for the provision of specialty mental
16	(iv)	The [delivery system] MANAGED CARE ORGANIZATIONS shall:
17 18	enrollees;	1.	Provide all specialty mental health services needed by
19 20 21	provision of substance ab	2. ouse se	For enrollees who are dually diagnosed, coordinate the ervices provided by the managed care organizations of the
22 23	health professionals from	3. all co	Consist of a network of qualified [mental] BEHAVIORAL re disciplines;
24		4.	Include linkages with other public service systems; and
25 26	collection, and other requ	5. iremei	Comply with quality assurance, enrollee input, data at specified by the Department in regulation.
27 28 29		y of s	Department may contract with a managed care specialty mental health services if the managed care ance standards adopted by the Department in regulations.

(vi)] The provisions of § 15–1005 of the Insurance Article apply to the

- delivery system for specialty mental health services established under this paragraph and administered by an administrative services organization.
- SECTION 2. AND BE IT FURTHER ENACTED, That, on or before January 1, 2021, the Maryland Department of Health shall implement the delivery system established under Section 1 of this Act.
- 6 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect July 7 1, 2019.