

---

**By: Delegate Hurson**

Introduced and read first time: February 25, 1997

Assigned to: Rules and Executive Nominations

---

A BILL ENTITLED

1 AN ACT concerning

2 **Medicaid - Children with Special Health Care Needs Council**

3 FOR the purpose of creating the Children with Special Health Care Needs Council in the  
4 Department of Health and Mental Hygiene; providing for the membership of the  
5 Council; providing that the Council shall conduct certain studies into certain  
6 programs and issue certain reports based on its findings and recommendations;  
7 defining certain terms; and generally relating to the Children with Special Health  
8 Care Needs Council.

9 BY adding to

10 Article - Health - General  
11 Section 15-106.1  
12 Annotated Code of Maryland  
13 (1994 Replacement Volume and 1996 Supplement)

14 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF  
15 MARYLAND, That the Laws of Maryland read as follows:

16 **Article - Health - General**

17 15-106.1.

18 (A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS  
19 INDICATED.

20 (2) "CHILDREN WITH SPECIAL HEALTH CARE NEEDS" MEANS  
21 INDIVIDUALS YOUNGER THAN 21 YEARS OF AGE, REGARDLESS OF MARITAL  
22 STATUS, SUFFERING FROM A MODERATE TO SEVERE CHRONIC HEALTH CONDITION  
23 WITH SIGNIFICANT POTENTIAL OR ACTUAL IMPACT ON HEALTH AND ABILITY TO  
24 FUNCTION WHICH REQUIRES SPECIAL HEALTH CARE SERVICES AND WHICH IS  
25 EXPECTED TO LAST LONGER THAN 6 MONTHS.

26 (3) "COUNCIL" MEANS THE CHILDREN WITH SPECIAL HEALTH CARE  
27 NEEDS COUNCIL.

28 (B) (1) THERE IS A CHILDREN WITH SPECIAL HEALTH CARE NEEDS  
29 COUNCIL IN THE DEPARTMENT.

2

1 (2) THE COUNCIL CONSISTS OF 13 MEMBERS APPOINTED BY THE  
2 SECRETARY.

3 (3) OF THE 13 MEMBERS OF THE COUNCIL:

4 (I) FOUR SHALL BE PHYSICIANS WITH SPECIAL EXPERTISE WITH  
5 CHILDREN WITH SPECIAL HEALTH CARE NEEDS;

6 (II) TWO SHALL BE EDUCATORS WITH SPECIAL EXPERTISE WITH  
7 CHILDREN WITH SPECIAL HEALTH CARE NEEDS;

8 (III) TWO SHALL BE HEALTH CARE PROVIDERS WITH EXPERTISE IN  
9 THE MENTAL HEALTH NEEDS OF CHILDREN WITH SPECIAL HEALTH CARE NEEDS;

10 (IV) ONE SHALL BE THE CHAIRMAN OF THE MEDICAID MANAGED  
11 CARE ADVISORY COUNCIL, OR THE CHAIRMAN'S DESIGNEE;

12 (V) TWO SHALL BE NONPHYSICIAN PROVIDERS WITH EXPERTISE  
13 IN TREATING CHILDREN WITH SPECIAL HEALTH CARE NEEDS; AND

14 (VI) TWO SHALL BE PARENTS OF CHILDREN WITH SPECIAL HEALTH  
15 CARE NEEDS.

16 (4) THE SECRETARY SHALL APPOINT A CHAIRMAN OF THE COUNCIL.

17 (5) THE COUNCIL SHALL MEET ONCE A MONTH FOR THE FIRST 2 YEARS  
18 OF ITS EXISTENCE AND EVERY 6 MONTHS THEREAFTER.

19 (6) A MEMBER OF THE COUNCIL MAY NOT RECEIVE COMPENSATION  
20 BUT IS ENTITLED TO REIMBURSEMENT FOR EXPENSES UNDER THE STANDARD  
21 STATE TRAVEL REGULATIONS, AS PROVIDED IN THE STATE BUDGET.

22 (C) (1) THE COUNCIL SHALL CONDUCT A MONTHLY REVIEW OF THE  
23 AVAILABLE DATA FROM THE MARYLAND MEDICAID MANAGED CARE PROGRAM  
24 AND THE SPECIALTY MENTAL HEALTH PROGRAM TO DETERMINE THE VOLUME OF  
25 REFERRALS MADE, AND NOT MADE, FOR SPECIALTY CARE FOR CHILDREN WITH  
26 SPECIAL HEALTH CARE NEEDS.

27 (2) IN ORDER TO REVIEW THE MARYLAND MEDICAID MANAGED CARE  
28 PROGRAM AND THE SPECIALTY MENTAL HEALTH PROGRAM, THE COUNCIL SHALL:

29 (I) SELECT THE DIAGNOSTIC CODES TO BE REVIEWED;

30 (II) SELECT THE BASELINE DATA WHICH IS TO BE COMPARED; AND

31 (III) SELECT INDICATORS THAT WILL HELP DETERMINE WHETHER  
32 CHILDREN WITH SPECIAL HEALTH CARE NEEDS ARE RECEIVING ADEQUATE  
33 SERVICES FROM THE MARYLAND MEDICAID MANAGED CARE PROGRAM AND THE  
34 SPECIALTY MENTAL HEALTH PROGRAM.

35 (3) THE COUNCIL SHALL COORDINATE THE DATA GAINED FROM THE  
36 REVIEW OF THE MARYLAND MEDICAID MANAGED CARE PROGRAM AND THE  
37 SPECIALTY MENTAL HEALTH PROGRAM WITH DATA FROM THE EARLY PERIODIC  
38 SCREENING DIAGNOSIS AND TREATMENT PROGRAM.

1 (4) THE COUNCIL SHALL ANNUALLY REVIEW THE RARE AND  
2 EXPENSIVE CASE MANAGEMENT PROGRAM IN ORDER TO MAKE  
3 RECOMMENDATIONS TO THE SECRETARY ON WHETHER ADDITIONAL DIAGNOSTIC  
4 GROUPS SHOULD BE ADDED OR DELETED FROM THE PROGRAM.

5 (5) THE COUNCIL SHALL ANNUALLY REVIEW THE RISK ADJUSTED  
6 CAPITATION PROGRAM OF THE MARYLAND MEDICAID MANAGED CARE PROGRAM,  
7 THE RISK ADJUSTED CAPITATION PROGRAMS OF OTHER STATES OR ENTITIES, AND  
8 MAKE RECOMMENDATIONS TO THE SECRETARY AS TO WHICH CAPITATION  
9 PROGRAM WILL BEST SERVE ALL OF THE CHILDREN IN MARYLAND, INCLUDING  
10 CHILDREN WITH SPECIAL HEALTH CARE NEEDS.

11 (D) (1) THE COUNCIL SHALL REPORT TO THE SECRETARY MONTHLY FOR  
12 THE FIRST 2 YEARS OF ITS EXISTENCE AND QUARTERLY THEREAFTER:

13 (I) THE INDICATORS USED AND THE STATUS OF HEALTH  
14 SERVICES PROVIDED TO CHILDREN WITH SPECIAL HEALTH CARE NEEDS IN THE  
15 MARYLAND MEDICAID MANAGED CARE PROGRAM; AND

16 (II) THE RECOMMENDATIONS FOR IMPROVEMENTS NEEDED,  
17 INCLUDING RECOMMENDATIONS FOR MORE SPECIFIC STUDIES OR REPORTS BY  
18 CONSULTANTS.

19 (2) (I) THE COUNCIL SHALL REPORT TO THE GENERAL ASSEMBLY, IN  
20 ACCORDANCE WITH § 2-1312 OF THE STATE GOVERNMENT ARTICLE, ITS FINDINGS  
21 AND RECOMMENDATIONS FROM THE REQUIRED STUDIES UNDER SUBSECTION (C)  
22 OF THIS SECTION.

23 (II) THE REPORTS SHALL BE ISSUED QUARTERLY DURING THE  
24 FIRST 2 YEARS OF THE COUNCIL'S EXISTENCE AND ANNUALLY THEREAFTER.

25 (3) THE COUNCIL SHALL DEVELOP A SEPARATE ANNUAL REPORT THAT  
26 WILL BE WRITTEN SUCH THAT IT CAN BE USED AND UNDERSTOOD BY THE GENERAL  
27 PUBLIC.

28 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect  
29 October 1, 1997.