

BY: Environmental Matters Committee

AMENDMENTS TO HOUSE BILL NO. 650

(First Reading File Bill)

AMENDMENT NO. 1

On page 1, strike beginning with the first “Maryland” in line 2 down through “Program” in line 3 and substitute “Department of Health and Mental Hygiene”; in lines 4 and 5, strike “to establish” and substitute “in developing”; in lines 5 and 6, strike “certain programs that reflect” and substitute “the Maryland Medical Assistance Program and the Maryland Children’s Health Program that considers”; in line 6 strike, “rates, systems,” and substitute “systems”; in the same line, after “codes;” insert “requiring the Department to establish a certain annual process to set reimbursement rates for the public mental health system that considers certain costs;”; in line 7, strike “a”; in the same line, strike “report” and substitute “reports”; in the same line, strike “making stylistic changes;”; in line 9, strike “and” and substitute a comma; and in the same line, after the second “Program” insert “, and the public mental health system”.

AMENDMENT NO. 2

On page 1, in line 18, strike the opening bracket; in line 19, strike the closing bracket; in line 21, strike the opening bracket; in line 23, strike the closing bracket; in the same line, strike “AND THAT REFLECTS”; in line 24, in each instance, strike the bracket; and in the same line, strike “(1)”.

AMENDMENT NO. 3

On page 2, in line 1, strike the brackets; in the same line, strike “(2)”; and in line 2, strike “CPT-3” and substitute “CDT-3”.

AMENDMENT NO. 4

On page 2, after line 17, insert:

“SECTION 2. AND BE IT FURTHER ENACTED, That:

(Over)

(a) The Department of Health and Mental Hygiene shall establish a process to annually set the fee-for-service reimbursement rates for the public mental health system in a manner that ensures participation of providers and that considers the reasonable costs of such factors as:

(1) employees that offer treatment, rehabilitation, and other services directly to recipients in the public mental health system, including fringe benefits offered to those employees;

(2) employees that provide supervisory, billing, personnel, and other supports to direct care staff, including fringe benefits offered to those employees;

(3) the regular operating expenses of providing services, including the costs of rent, utilities, and upkeep;

(4) interest payments made by the provider to finance operations during the time between delivery of services and receipt of payment for those services;

(5) future capital needs, including information technology development;

(6) requirements specified in regulation or processes required by the managed care system for which providers may not receive reimbursement under the fee-for-service system;

(7) annual medical inflation; and

(8) other costs as may be identified by the Community Services Reimbursement Rate Commission.

(b) On or before September 1 of each year, the Department shall submit a report to the Governor, the Senate Finance Committee, the Senate Budget and Taxation Committee, the House Environmental Matters Committee, and the House Appropriations Committee on:

(1) its progress in complying with subsection (a) of this section;

(2) an analysis of the estimated costs of implementing the fee-for-service reimbursement rate system proposed under subsection (a) of this section;

(3) any proposed changes to the fee-for-service reimbursement rates for the public mental health system; and

(4) the schedule for implementing any proposed changes.”