

BY: Environmental Matters Committee

AMENDMENTS TO SENATE BILL NO. 481

(Third Reading File Bill)

AMENDMENT NO. 1

On page 1, strike beginning with the first “Maryland” in line 2 down through “System” in line 3 and substitute “Department of Health and Mental Hygiene”; in lines 4 and 5, strike “to establish” and substitute “in developing”; strike beginning with the second “certain” in line 5 down through “reflect” in line 6 and substitute “the Maryland Medical Assistance Program and the Maryland Children’s Health Program that considers”; in lines 6 and 7, strike “rates, systems,” and substitute “systems”; in line 7, 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 the same line, strike “a”; in the same line, strike “report” and substitute “reports”; and in line 8, strike “making stylistic changes;”.

AMENDMENT NO. 2

On page 1, in line 19, strike the opening bracket; in line 20, strike the closing bracket; and in line 22, strike the opening bracket.

On page 2, in line 2, strike beginning with the closing bracket through “CONSIDERS”; in line 3, strike the first set of brackets; in the same line, strike “(1)”; in the same line, strike the second set of brackets; in line 5, strike the brackets; in the same line, strike “(2)”; and after line 35, insert:

“(d) On or before September 1 of each year, the Department shall submit a report to the Governor, and in accordance with § 2-1246 of the State Government Article, 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 subsections (a), (b), and (c) of this section;
- (2) an analysis of the estimated costs of implementing the fee-for-service

(Over)

reimbursement rate system proposed under subsections (a), (b), and (c) 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.”.