

HB1267/626782/1

BY: Health and Government Operations Committee

AMENDMENTS TO HOUSE BILL 1267
(First Reading File Bill)

AMENDMENT NO. 1

On page 1, strike beginning with “Assertive” in line 2 down through “and” in line 3 and substitute “Department of Health and Mental Hygiene – Outpatient”; in line 3, after “Services” insert “Programs Stakeholder Workgroup”; and in line 4, after “of” insert “requiring the Secretary of Health and Mental Hygiene to convene a stakeholder workgroup to examine certain outpatient services programs and develop a certain proposal; requiring the Department of Health and Mental Hygiene to recommend certain draft legislation; requiring the Secretary to submit a certain report to certain committees of the General Assembly on or before a certain date; providing for the termination of this Act.”.

On pages 1 and 2, strike beginning with “establishing” in line 4 on page 1 down through “terms;” in line 17 on page 2.

On page 2, strike beginning with “the” in line 17 down through “Program” in line 18 and substitute “an outpatient services programs stakeholder workgroup”; and strike in their entirety lines 19 through 24, inclusive.

AMENDMENT NO. 2

On page 2, in line 26, strike “the Laws of Maryland read as follows”; and after line 26, insert:

“(a) The Secretary of Health and Mental Hygiene shall convene a stakeholder workgroup to:

(Over)

(1) examine assisted outpatient programs, assertive community treatment programs, and other outpatient services programs with targeted outreach, engagement, and services; and

(2) develop a proposal for a program that:

(i) best serves individuals with mental illness who are at high risk for disruptions in the continuity of care;

(ii) respects the civil liberties of individuals to be served;

(iii) addresses the potential for racial bias and health disparities in program implementation;

(iv) is based on evidence of the effectiveness of assisted outpatient treatment programs, assertive community treatment programs, and other outpatient services programs with targeted outreach, engagement, and services in other jurisdictions;

(v) includes a data-monitoring strategy;

(vi) promotes parity between public and private insurers;

(vii) addresses the potential for variance in program implementation among urban and rural jurisdictions; and

(viii) assesses the cost of the program to the Department of Health and Mental Hygiene and other State agencies, including the feasibility of securing federal funding for services provided by the program.

(b) The Department of Health and Mental Hygiene shall recommend draft legislation as necessary to implement the program included in the proposal developed under subsection (a)(2) of this section.

(c) On or before November 1, 2014, the Secretary of Health and Mental Hygiene shall submit, in accordance with § 2-1246 of the State Government Article, a report that includes the proposal developed under subsection (a)(2) of this section and the draft legislation recommended by the Department under subsection (b) of this section to the Senate Finance Committee and the House Health and Government Operations Committee.”.

On pages 2 through 12, strike in their entirety the lines beginning with line 27 on page 2 through line 6 on page 12, inclusive.

On page 12, in line 8, strike “October” and substitute “July”; and in the same line, after “2014.” insert “It shall remain effective for a period of 1 year and, at the end of June 30, 2015, with no further action required by the General Assembly, this Act shall be abrogated and of no further force and effect.”.