

**Department of Legislative Services**  
Maryland General Assembly  
2017 Session

**FISCAL AND POLICY NOTE**  
**Enrolled - Revised**

House Bill 786

(Delegate Angel, *et al.*)

Ways and Means

Education, Health, and Environmental Affairs

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**Education - Individualized or Group Behavioral Counseling Services -  
Establishment**

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This bill requires the Department of Health and Mental Hygiene (DHMH), in conjunction with the Maryland State Department of Education (MSDE), to recommend best practices for local boards of education to provide to students (1) behavioral needs assessments and (2) individualized or group behavioral health counseling services with a health care provider through a school-based health center or community-partnered school-based behavioral health services. The bill may not be construed to require a local board of education to provide behavioral needs assessments or individualized or group behavioral health counseling services to students. The bill also prohibits an insurer, nonprofit health service plan, or health maintenance organization (collectively known as carriers) from denying a covered, medically necessary behavioral health care service provided by a participating provider to a member who is a student solely on the basis that the service is provided at a public school or through a school-based health center.

The bill takes effect July 1, 2017, and applies to all policies, contracts, and health benefit plans issued, delivered, or renewed in the State on or after that date.

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**Fiscal Summary**

**State Effect:** Minimal increase in special fund revenues for the Maryland Insurance Administration (MIA) from the \$125 rate and form filing fee in FY 2018 only. Review of filings can likely be handled with existing MIA resources. DHMH general fund expenditures increase by as much as \$50,000 in FY 2018 for contractual services to identify best practices. To the extent best practices need updating, expenditures may increase in future years by an indeterminate amount. MSDE can disseminate best practices to local boards of education using existing budgeted resources.

**Local Effect:** No material impact on local revenues or expenditures.

**Small Business Effect:** None.

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## **Analysis**

**Bill Summary:** “Behavioral health counseling services” means prevention, intervention, and treatment services for the social-emotional, psychological, behavioral, and physical health of students, including mental health and substance abuse disorders.

**Current Law:** Under the Code of Maryland Regulations 13A.05.05, each local school board must provide a coordinated program of pupil services for all students, which must include school counseling, pupil personnel services, school psychology, and health services. The pupil services program must focus on the health, personal, interpersonal, academic, and career development of students.

**Background:** According to the U.S. Centers for Disease Control and Prevention, up to one in five children experience a diagnosable mental health disorder in a given year. Behavioral and emotional issues can act as a barrier to academic success and high school graduation, as well as create disciplinary and attendance problems in school. In addition, research indicates that school mental health programs can improve educational outcomes by decreasing absences, decreasing discipline referrals, and improving test scores.

MSDE advises that pupil personnel service providers regularly participate in professional development to remain current in social and emotional issues that create barriers to learning for children and adolescents. The determination of whether or not a student needs a mental, behavioral, or medical assessment occurs through coordination of pupil services and the student support team process. The student support team also provides referrals for students to trained specialists, depending on the student’s area of need. School psychologists are trained to determine whether students need a behavioral health assessment. School nurses are trained to identify student physical health, behavioral health, and evaluation needs. Behavioral health staff may provide on-site behavioral health assessments and supports. Space for community-partnered school-based health care providers is, when practical and available, provided in the school building.

**State Expenditures:** DHMH advises that it would contract with the University of Maryland School of Medicine’s Center for School Mental Health to identify best practices as required under the bill. Thus, general fund expenditures increase by as much as \$50,000 in fiscal 2018 for contractual services. To the extent such best practices require updating in future years, general fund expenditures increase by an indeterminate amount. MSDE

can disseminate information about best practices to local boards of education using existing budgeted resources.

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### **Additional Information**

**Prior Introductions:** None.

**Cross File:** None.

**Information Source(s):** U.S. Centers for Disease Control and Prevention; Anne Arundel, Baltimore, and Montgomery counties; Maryland State Department of Education; Department of Health and Mental Hygiene; Maryland Insurance Administration; Department of Legislative Services

**Fiscal Note History:** First Reader - March 9, 2017  
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