J1 8lr0889 CF SB 864

By: Delegates Lam, Branch, Gutierrez, McComas, and Morhaim

Introduced and read first time: February 9, 2018 Assigned to: Health and Government Operations

Committee Report: Favorable with amendments

House action: Adopted

Read second time: March 16, 2018

CHAPTER	CH.	APTEI	R.
---------	-----	-------	----

1 AN ACT concerning

2

3

4

5 6

7

8

9

10

11

12

13

1415

16

17 18

19

20

21

22

23

24

25

Health – Emergency Evaluees and Involuntarily Admitted or Committed Individuals – Procedures

FOR the purpose of requiring a health care provider to disclose certain directory information about a patient to a certain division in the Office of the Public Defender under certain circumstances; requiring a health care provider to disclose certain directory information under a certain provision of this Act regardless of whether the request refers to the patient by name; requiring a health care provider to disclose a certain medical record and legal records without the authorization of a person in interest an individual to legal counsel for the patient a public defender who states in writing that the Office of the Public Defender represents the individual or recipient in connection with or for use in certain proceedings; requiring that certain records be provided within a certain time period and only under certain circumstances; requiring a certain emergency facility to notify a certain division in the Office in a certain manner and within a certain time period of after the acceptance completion of an application for the involuntary admission of an emergency evaluee into the facility; providing that a certain notice requirement does not apply to a certain patient; prohibiting a hearing officer from ordering the release of a certain individual on the grounds that the emergency facility did not provide certain notice; requiring that notice be given to a certain division in the Office of a certain admission of an individual into a certain facility or certain hospital within a certain period of time after the admission of the individual into the facility or hospital; requiring that certain notices include certain documents; requiring a certain individual who has been involuntarily admitted to a certain facility or a certain hospital to be evaluated by certain staff within a certain time period before a certain hearing; requiring a

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

<u>Underlining</u> indicates amendments to bill.

Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.



1 2 3	certain facility to notify a certain division in the Office in a certain manner of a certain admission of an individual into the facility within a certain period of time after a certain change in the admission status of the individual; defining certain		
$\frac{4}{5}$	terms; making conforming and stylistic changes; and generally relating to the procedures related to emergency evaluees and involuntarily admitted or committed individuals.		
7	BY repealing and reenacting, with amendments,		
8	Article – Health – General		
9	Section 4-302(c), 4-306(b)(11) and (12), 4-307(k)(1)(v) and (vi), 10-624, 4-306(c),		
10 11	<u>10–625,</u> 10–631(b), and 10–803 Annotated Code of Maryland		
12	(2015 Replacement Volume and 2017 Supplement)		
13	BY adding to		
14			
15 16	Section 4 -306(b)(13), 4-307(k)(1)(vii), and 10-632(h) 4-306(c) and 4-307(l)		
16 17	Annotated Code of Maryland (2015 Replacement Volume and 2017 Supplement)		
1,	(2019 Replacement Volume and 2017 Supplement)		
18	BY repealing and reenacting, without amendments,		
19	Article – Health – General		
20	Section 10–631(a)		
21 22	Annotated Code of Maryland (2015 Replacement Volume and 2017 Supplement)		
22	(2019 Replacement Volume and 2017 Supplement)		
23 24	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:		
25	Article – Health – General		
26	4–302.		
27	(c) (1) Unless the patient has restricted or prohibited the disclosure of		
28	directory information, AND SUBJECT TO PARAGRAPH (2) OF THIS SUBSECTION, a		
29	health care provider may disclose directory information about a patient to an individual		
30	who has asked for the patient by name.		
31	{(2)} (II) A health care provider shall:		
32	(i) 1. Inform a patient of the health care information that the		
33	health care provider may include in a directory and the persons to whom the health care		
34	provider may disclose the information; and		
35	{(ii)} 2. As soon as practicable, provide the patient with the		
36	opportunity to restrict or prohibit disclosure of directory information.		

1	(3) (III) If providing an opportunity under [paragraph (2)(ii) of this
2	subsection] SUBPARAGRAPH (II)2 OF THIS PARAGRAPH to restrict or prohibit the
3	disclosure of directory information is not practicable because of the patient's incapacity or
4	need for emergency care or treatment, a health care provider may disclose the patient's
5	directory information if the disclosure is:
6	(i) 1. Consistent with a prior expressed preference of the patient
7	that is known to the health care provider; and
8	(ii) 2. Determined to be, based on the health care provider's
9	professional judgment, in the patient's best interest.
10	(2) (I) A HEALTH CARE PROVIDER SHALL DISCLOSE DIRECTORY
11	INFORMATION ABOUT A PATIENT TO THE MENTAL HEALTH DIVISION IN THE OFFICE
12	OF THE PUBLIC DEFENDER IF THE PATIENT IS:
13	1. INVOLUNTARILY ADMITTED TO THE HEALTH CARE
14	FACILITY UNDER TITLE 10, SUBTITLE 6 OF THIS ARTICLE; OR
	THE DITT CHEEK TITLE TO, SCENTIEL OUT THIS HIVITCHE, ON
15	2. ADMITTED TO THE HEALTH CARE FACILITY AS A
16	COMMITTED PERSON UNDER TITLE 3 OF THE CRIMINAL PROCEDURE ARTICLE.
17	(H) A HEALTH CARE PROVIDER SHALL DISCLOSE DIRECTORY
18	INFORMATION ABOUT A PATIENT UNDER SUBPARAGRAPH (I) OF THIS PARAGRAPH
19	REGARDLESS OF WHETHER THE REQUEST REFERS TO THE PATIENT BY NAME.
20	4–306.
21	(b) A health care provider shall disclose a medical record without the
22	authorization of a person in interest:
23	(11) To a local drug overdose fatality review team established under Title 5,
24	Subtitle 9 of this article as necessary to carry out its official functions, subject to:
25	(i) The additional limitations under § 4–307 of this subtitle for
26	disclosure of a medical record developed primarily in connection with the provision of
27	mental health services; and
28	(ii) Any additional limitations for disclosure or redisclosure of a
29	medical record developed in connection with the provision of substance abuse treatment
30	services under State law or 42 U.S.C. § 290DD-2 and 42 C.F.R. Part 2; [or]
31	(12) To a guardian ad litem appointed by a court to protect the best interests

of a minor or a disabled or elderly individual who is a victim of a crime or a delinquent act,

for the sole purpose and use of the guardian ad litem in carrying out the guardian ad litem's

official function to protect the best interests of the minor or the disabled or elderly

32

33

34

1	individual in a criminal or juvenile delinquency court proceeding as permitted under 42
2	C.F.R. § 164.512(e); OR
3	(13) TO LEGAL COUNSEL FOR THE PATIENT OR RECIPIENT IN
4	CONNECTION WITH OR FOR USE IN:
1	CONNECTION WITH ON TON CSE IN.
5	(C) (1) SUBJECT TO PARAGRAPHS (2) THROUGH (4) OF THIS
6	SUBSECTION, A HEALTH CARE PROVIDER SHALL DISCLOSE MEDICAL AND LEGAL
7	RECORDS WITHOUT THE AUTHORIZATION OF AN INDIVIDUAL TO A PUBLIC
8	DEFENDER WHO STATES IN WRITING THAT THE OFFICE OF THE PUBLIC DEFENDER
9	REPRESENTS THE INDIVIDUAL IN:
10	(I) AN INVOLUNTARY ADMISSION PROCEEDING UNDER TITLE
11	10, SUBTITLE 6 OF THIS ARTICLE;
12	(II) A RELEASE PROCEEDING UNDER TITLE 10, SUBTITLE 8 OF
13	THIS ARTICLE; OR
14	(III) A COMMITMENT OR RELEASE PROCEEDING UNDER TITLE 3
15	OF THE CRIMINAL PROCEDURE ARTICLE.
16	(2) <u>Legal records required to be disclosed under</u>
17	PARAGRAPH (1) OF THIS SUBSECTION INCLUDE:
18	(I) AN EMERGENCY PETITION;
10	(I) IN EMBROENCE I ETITION,
19	(II) AN APPLICATION FOR INVOLUNTARY ADMISSION; AND
20	(III) A CERTIFICATION FOR INVOLUNTARY ADMISSION.
21	(3) THE RECORDS DISCLOSED UNDER PARAGRAPH (1) OF THIS
22	SUBSECTION SHALL BE LIMITED TO THOSE RECORDS NEEDED BY THE PUBLIC
23	DEFENDER TO REPRESENT THE INDIVIDUAL IN THE PROCEEDINGS LISTED IN
24	PARAGRAPH (1) OF THIS SUBSECTION.
25	(4) RECORDS PROVIDED UNDER PARAGRAPH (1)(I) OF THIS
26	SUBSECTION SHALL BE PROVIDED:
27	(I) WITHIN 24 HOURS AFTER THE CERTIFICATION OF
28	INVOLUNTARY ADMISSION; AND
	· · · · · · · · · · · · · · · · · · ·

(II) ONLY IF THE INDIVIDUAL HAS NOT YET RETAINED PRIVATE

30 **COUNSEL.**

29

1	<u>[(c)]</u> <u>(D)</u> When a disclosure is sought under this section:
2 3 4	(1) A written request for disclosure or written confirmation by the health care provider of an oral request that justifies the need for disclosure shall be inserted in the medical record of the patient or recipient; and
5 6	(2) <u>Documentation of the disclosure shall be inserted in the medical record of the patient or recipient.</u>
7	4–307.
8	(k) (1) A health care provider shall disclose a medical record without the authorization of a person in interest:
10	(v) In accordance with a subpoena for medical records on specific recipients:
$egin{array}{c} 12 \\ 13 \\ 14 \end{array}$	1. To health professional licensing and disciplinary boards for the sole purpose of an investigation regarding licensure, certification, or discipline of a health professional or the improper practice of a health profession; and
15 16	2. To grand juries, prosecution agencies, and law enforcement agencies under the supervision of prosecution agencies for the sole purposes of investigation and prosecution of a provider for the fit and found related offeress.
18	of investigation and prosecution of a provider for theft and fraud, related offenses, obstruction of justice, perjury, unlawful distribution of controlled substances, and of any
19 20	eriminal assault, neglect, patient abuse or sexual offense committed by the provider against a recipient, provided that the prosecution or law enforcement agency shall:
21 22 23	A. Have written procedures which shall be developed in consultation with the Director to maintain the medical records in a secure manner so as to protect the confidentiality of the records; and
24 25	B. In a criminal proceeding against a provider, to the maximum extent possible, remove and protect recipient identifying information from the
26 27	medical records used in the proceeding; [or] (vi) In the event of the death of a recipient, to the office of the medical
28	examiner as authorized under § 5–309 or § 10–713 of this article; OR
29 30	(VII) TO LEGAL COUNSEL FOR THE RECIPIENT IN CONNECTION WITH OR FOR USE IN:
31 32	(L) (1) SUBJECT TO PARAGRAPHS (2) THROUGH (4) OF THIS SUBSECTION, A HEALTH CARE PROVIDER SHALL DISCLOSE MEDICAL AND LEGAL
33	RECORDS WITHOUT THE AUTHORIZATION OF AN INDIVIDUAL TO A PUBLIC

1 2	<u>DEFENDER WHO STATES IN WRITING THAT THE OFFICE OF THE PUBLIC DEFENDER REPRESENTS THE INDIVIDUAL IN:</u>
3 4	\pm (I) An involuntary admission proceeding under Title 10, Subtitle 6 of this article;
5 6	2∓ (II) A RELEASE PROCEEDING UNDER TITLE 10, SUBTITLE 8 OF THIS ARTICLE; OR
7 8	$\frac{3}{4}$ (III) A COMMITMENT OR RELEASE PROCEEDING UNDER TITLE 3 OF THE CRIMINAL PROCEDURE ARTICLE.
9	(2) <u>Legal records required</u> to <u>be disclosed under Paragraph (1) of this subsection include:</u>
1	(I) AN EMERGENCY PETITION;
12	(II) AN APPLICATION FOR INVOLUNTARY ADMISSION; AND
13	(III) A CERTIFICATION FOR INVOLUNTARY ADMISSION.
14 15 16 17	(3) THE RECORDS DISCLOSED UNDER PARAGRAPH (1) OF THIS SUBSECTION SHALL BE LIMITED TO THOSE RECORDS NEEDED BY THE PUBLIC DEFENDER TO REPRESENT THE INDIVIDUAL IN THE PROCEEDINGS LISTED IN PARAGRAPH (1) OF THIS SUBSECTION.
18 19	(4) RECORDS PROVIDED UNDER PARAGRAPH (1)(I) OF THIS SUBSECTION SHALL BE PROVIDED:
20 21	(I) WITHIN 24 HOURS AFTER THE CERTIFICATION OF INVOLUNTARY ADMISSION; AND
22 23	(II) ONLY IF THE INDIVIDUAL HAS NOT YET RETAINED PRIVATE COUNSEL.
24	10-624.
25 26	(a) (1) A peace officer shall take an emergency evaluee to the nearest emergency facility if the peace officer has a petition under Part IV of this subtitle that:
27	(i) Has been endorsed by a court within the last 5 days; or
28 29	(ii) Is signed and submitted by a physician, psychologist, clinical social worker, licensed clinical professional counselor, clinical purse specialist in

- psychiatric and mental health nursing, psychiatric nurse practitioner, licensed clinical marriage and family therapist, health officer or designee of a health officer, or peace officer.
- 3 (2) After a peace officer takes the emergency evaluee to an emergency
 4 facility, the peace officer need not stay unless, because the emergency evaluee is violent, a
 5 physician asks the supervisor of the peace officer to have the peace officer stay.
- 6 (3) A peace officer shall stay until the supervisor responds to the request
 7 for assistance. If the emergency evaluee is violent, the supervisor shall allow the peace
 8 officer to stay.
- 9 (4) If a physician asks that a peace officer stay, a physician shall examine 10 the emergency evaluee as promptly as possible.
- 11 (b) (1) (I) If the petition is executed properly, the emergency facility shall 12 accept the emergency evaluee.
- 13 <u>10–625.</u>
- 14 (a) If an emergency evaluee meets the requirements for an involuntary admission
 15 and is unable or unwilling to agree to a voluntary admission under this subtitle, the
 16 examining physician shall take the steps needed for involuntary admission of the
 17 emergency evaluee to an appropriate facility, which may be a general hospital with a
 18 licensed inpatient psychiatric unit.
- 19 <u>(b) (1) If the examining physician is unable to have the emergency evaluee</u> 20 <u>admitted to a facility, the physician shall notify the Department.</u>
- 21 (2) Within 6 hours after notification, the Department shall provide for admission of the emergency evaluee to an appropriate facility.
- 23 WITHIN 24 30 HOURS AFTER THE EMERGENCY (II) (C) **(1)** 24FACILITY ACCEPTS THE EMERGENCY EVALUEE EMERGENCY FACILITY COMPLETES 25 AN APPLICATION FOR THE INVOLUNTARY ADMISSION OF AN EMERGENCY EVALUEE, THE EMERGENCY FACILITY SHALL NOTIFY THE MENTAL HEALTH DIVISION IN THE 26 OFFICE OF THE PUBLIC DEFENDER, BY E-MAIL OR FACSIMILE, OF THE 27 28 ACCEPTANCE OF THE EMERGENCY EVALUEE INTO THE EMERGENCY FACILITY 29 COMPLETION OF THE APPLICATION.
- 30 (HI) (2) THE NOTICE REQUIRED UNDER SUBPARAGRAPH (II)
 31 PARAGRAPH (1) OF THIS PARAGRAPH SUBSECTION SHALL INCLUDE ANY LEGAL
 32 DOCUMENTS RELATING TO THE ACCEPTANCE OF THE EMERGENCY EVALUEE INTO
 33 THE EMERGENCY FACILITY, INCLUDING THE EMERGENCY PETITION, APPLICATION
 34 FOR INVOLUNTARY ADMISSION, AND CERTIFICATION FOR INVOLUNTARY
 35 ADMISSION.

1 2 3 4 5 6 7	(3) A HEARING OFFICER MAY NOT ORDER THE RELEASE OF AN INDIVIDUAL WHO MEETS THE REQUIREMENTS FOR INVOLUNTARY ADMISSION ON THE GROUNDS THAT THE EMERGENCY FACILITY DID NOT NOTIFY THE OFFICE OF THE PUBLIC DEFENDER OF THE CERTIFICATION OF THE EMERGENCY EVALUEE FOR INVOLUNTARY ADMISSION WITHIN 30 HOURS AFTER THE EMERGENCY FACILITY COMPLETES THE APPLICATION FOR INVOLUNTARY ADMISSION AS REQUIRED UNDER PARAGRAPH (1) OF THIS SUBSECTION.
8 9 10	(4) The notice required under paragraph (1) of this subsection does not apply to a patient who agrees to voluntary admission.
11 12 13	(2) Within 6 hours after an emergency evaluee is brought to an emergency facility, a physician shall examine the emergency evaluee, to determine whether the emergency evaluee meets the requirements for involuntary admission.
14 15	(3) Promptly after the examination, the emergency evaluee shall be released unless the emergency evaluee:
16	(i) Asks for voluntary admission; or
17	(ii) Meets the requirements for involuntary admission.
18 19	(4) An emergency evaluee may not be kept at an emergency facility for more than 30 hours.
20	10–631.
21 22	(a) The Administration shall prepare and provide each facility with standard forms that provide, in clear and simple words, at least the following information:
23	(1) Notice of the admission of the individual;
24 25	(2) The right of the individual to consult with a lawyer that the individual chooses;
26 27	(3) The availability of the services of the legal aid bureaus, lawyer referral services, and other agencies that exist for the referral of individuals who need legal counsel;
28 29	(4) The right of the individual to call or write a lawyer or a referral agency or to have someone do so on behalf of the individual; and
30	(5) In substance:
31 32	(i) Those provisions of this subtitle under which the individual is admitted;

1		(ii)	The provisions of this section; and
2		(iii)	The provisions of Subtitle 7 of this title.
3 4 5	(b) (1) or a Veterans' Adra and given to the in	ninistr	in 12 hours after initial confinement of an individual to any facility ration hospital, the form provided for in this section shall be readual.
6 7	(2) and its legal effect		individual does not understand the notice required by this section otice also shall be given to:
8		(i)	The parent, guardian, or next of kin of the individual;
9		(ii)	The applicant for an involuntary admission of the individual; and
10 11	of the individual.	(iii)	Any other individual who has a significant interest in the status
12 13	(3) parent, guardian, o		y event, if possible, notice of the admission shall be given to the tof kin of the individual.
14 15	possible. (4)	Notic	e of the admission of a minor shall be given as promptly as
16 17 18			WITHIN 24 HOURS AFTER THE ADMISSION OF THE F THE ADMISSION SHALL BE GIVEN TO THE MENTAL HEALTH CE OF THE PUBLIC DEFENDER.
19 20 21	PARAGRAPH SH ADMISSION.	(II) ALL	THE NOTICE REQUIRED UNDER SUBPARAGRAPH (I) OF THIS INCLUDE ANY LEGAL DOCUMENTS RELATING TO THE
22	10-632.		
23 24	(H) (1) MEANINGS INDIC		IN THIS SUBSECTION THE FOLLOWING WORDS HAVE THE
25 26 27 28	21111 01 00 01:1	Y HEA	"GERIATRIC EVALUATION SERVICES STAFF" MEANS THE LTH DEPARTMENTS WHO EVALUATE THE APPROPRIATENESS CILITIES OR VETERANS' ADMINISTRATION HOSPITALS OF '65 YEARS OLD.
29	SCHEDILLED DV	` /	"SEMIANNUAL HEARING" MEANS A SEMIANNUAL HEARING

DETERMINE WHETHER AN INDIVIDUAL WHO HAS BEEN ADMITTED INVOLUNTARILY

31

$1\\2$	TO THE FACILITY OR HOSPITAL CONTINUES TO MEET THE REQUIREMENTS FOR INVOLUNTARY ADMISSION UNDER § 10–617 OF THIS SUBTITLE.
3 4 5 6 7	(2) AN INDIVIDUAL WHO HAS BEEN ADMITTED INVOLUNTARILY UNDER PART III OF THIS SUBTITLE AND IS AT LEAST 65 YEARS OLD SHALL BE EVALUATED BY GERIATRIC EVALUATION SERVICES STAFF WITHIN 2 WEEKS BEFORE A SEMIANNUAL HEARING IS HELD BY THE FACILITY OR VETERANS' ADMINISTRATION HOSPITAL.
8	10–803.
9 10 11	(a) An individual who is admitted voluntarily to a facility, on an informal request, may leave the facility at any time between 9 a.m. and 4 p.m., unless the admission status of the individual has been changed to an involuntary admission.
12 13 14 15	(b) (1) An individual who has been admitted voluntarily, under a formal written application, may not be held for more than 3 days after the individual asks for release, unless the admission status of the individual has been changed to an involuntary admission.
16 17 18 19 20	(2) If the admission status of the individual is changed from a voluntary to an involuntary admission, the facility shall notify the Mental Health Division in the Office of the Public Defender, by e-mail or facsimile, of the involuntary admission within 24 hours after the change in admission status is made.
21 22 23 24	(c) A minor who has been admitted voluntarily, on the application of a parent or guardian of the minor, may not be held for more than 3 days after the applicant for the admission asks for release, unless the admission status of the minor has been changed to an involuntary admission.
25 26	SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2018.
	Approved:
	Governor.
	Speaker of the House of Delegates.

President of the Senate.