J1 8lr3015 CF HB 772

By: Senator Mathias Senators Mathias, Astle, Benson, Feldman, Hershey, Jennings, Klausmeier, Middleton, Reilly, and Rosapepe

Introduced and read first time: February 5, 2018

Assigned to: Finance

Committee Report: Favorable with amendments

Senate action: Adopted

Read second time: March 16, 2018

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1 AN ACT concerning

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Maryland Medical Assistance Program Department of Health - Clinical
Reimbursement for Services Provided by Certified Peer Recovery Specialists Workgroup and Report

5 FOR the purpose of authorizing the Maryland Medical Assistance Program to provide, 6 subject to certain limitations, clinical services provided by certified peer recovery 7 specialists to individuals with substance use disorders or mental health disorders; requiring the Secretary of Health, under certain circumstances, to develop certain 8 9 regulations with input from certain entities; and generally relating to Maryland 10 Medical Assistance Program services provided by requiring the Secretary of Health to convene a stakeholder workgroup to make findings and recommendations on 11 issues related to the reimbursement of certified peer recovery specialists; requiring 12 the workgroup to include representatives of certain persons; requiring the Secretary 13 to submit a certain report to the Governor and the General Assembly on or before a 14 15 certain date; providing for the termination of this Act; and generally relating to a workgroup to study and report on the reimbursement of certified peer recovery 16 17 specialists.

18 BY repealing and reenacting, with amendments,

19 Article - Health - General

20 Section 15-103(a)

21 Annotated Code of Maryland

(2015 Replacement Volume and 2017 Supplement)

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	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:					
3 4 5	findings and recommendations on issues related to the reimbursement of certified peer					
6	(1) whether statutory or regulatory changes are required; and					
7 8	(2) whether an amendment to the State plan or waiver under the federal Social Security Act is required.					
9 10 11 12	representatives of the Maryland Department of Health, behavioral health providers certified peer recovery specialists, advocacy organizations, and other interested					
13 14 15 16	on the findings and recommendations of the workgroup convened under subsection (a) of this section to the Governor and, in accordance with § 2–1246 of the State Government					
17	Article - Health - General					
18	15-103.					
19 20	$\stackrel{\hbox{\scriptsize (a)}}{}$ $\stackrel{\hbox{\scriptsize (1)}}{}$ The Secretary shall administer the Maryland Medical Assistance Program.					
21	(2) The Program:					
22 23 24	(i) Subject to the limitations of the State budget, shall provide medical and other health care services for indigent individuals or medically indigent individuals or both;					
25 26 27 28	(ii) Shall provide, subject to the limitations of the State budget, comprehensive medical and other health care services for all eligible pregnant women whose family income is at or below 250 percent of the poverty level, as permitted by the federal law;					
29 30	(iii) Shall provide, subject to the limitations of the State budget,					

1	(iv) Beginning on January 1, 2012, shall provide, subject to the
2	limitations of the State budget, family planning services to all women whose family income
3	is at or below 200 percent of the poverty level, as permitted by federal law;
4	(v) Shall provide, subject to the limitations of the State budget,
5	comprehensive medical and other health care services for all children from the age of 1 year
6	up through and including the age of 5 years whose family income falls below 133 percent of
7	the poverty level, as permitted by the federal law;
8	(vi) Beginning on January 1, 2014, shall provide, subject to the
9	limitations of the State budget, comprehensive medical care and other health care services
10	for all children who are at least 6 years of age but are under 19 years of age whose family
11	income falls below 133 percent of the poverty level, as permitted by federal law;
12	(vii) Shall provide, subject to the limitations of the State budget,
13	comprehensive medical care and other health care services for all legal immigrants who
14	meet Program eligibility standards and who arrived in the United States before August 22,
15	1996, the effective date of the federal Personal Responsibility and Work Opportunity
16	Reconciliation Act, as permitted by federal law;
17	(viii) Shall provide, subject to the limitations of the State budget and
18	any other requirements imposed by the State, comprehensive medical care and other health
19	care services for all legal immigrant children under the age of 18 years and pregnant women
20	who meet Program eligibility standards and who arrived in the United States on or after
21	August 22, 1996, the effective date of the federal Personal Responsibility and Work
22	Opportunity Reconciliation Act;
23	(ix) Beginning on January 1, 2014, shall provide, subject to the
24	limitations of the State budget, and as permitted by federal law, medical care and other
25	health care services for adults whose annual household income is at or below 133 percent
26	of the poverty level;
27	(x) Subject to the limitations of the State budget, and as permitted
28	by federal law:
29	1. Shall provide comprehensive medical care and other
30	health care services for former foster care adolescents who, on their 18th birthday, were in
31	foster care under the responsibility of the State and are not otherwise eligible for Program
32	benefits;
33	2. May provide comprehensive medical care and other health
34	care services for former foster care adolescents who, on their 18th birthday, were in foster
35	care under the responsibility of any other state or the District of Columbia; and

3. May provide comprehensive dental care for former foster care adolescents who, on their 18th birthday, were in foster care under the responsibility of the State;

$\frac{1}{2}$	[and]	(xi)	May include bedside nursing care for eligible Program recipients;
3 4		` /	Shall provide services in accordance with funding restrictions rate budget bill; AND
5		(XIII)	BEGINNING ON JANUARY 1, 2020, MAY PROVIDE, SUBJECT
6	TO THE LIMITATION	ONS O	F THE STATE BUDGET, AND AS ALLOWED BY FEDERAL LAW,
7	CLINICAL SERVIC	ES P	ROVIDED BY CERTIFIED PEER RECOVERY SPECIALISTS TO
8	INDIVIDUALS WIT	H SUE	STANCE USE DISORDERS OR MENTAL HEALTH DISORDERS.
9	(3)	Subje	et to restrictions in federal law or waivers, the Department may:
10		(i)	Impose cost-sharing on Program recipients; and
11		(ii)	For adults who do not meet requirements for a federal category
12	of eligibility for Me	` '	<u>.</u>
13			1. Cap enrollment; and
14			2. Limit the benefit package.
15	(4)	Subie	ct to the limitations of the State budget, the Department shall
16	* *	•	of Title II of the federal Patient Protection and Affordable Care
17	Act, as amended by	the f	ederal Health Care and Education Reconciliation Act of 2010, to
18	include:		
19		(i)	Parents and caretaker relatives who have a dependent child
20		` /	aretaker relatives' home; and
	0 1		
21		(ii)	Adults who do not meet requirements, such as age, disability, or
22			tive of a dependent child, for a federal category of eligibility for
23			ot enrolled in the federal Medicare program, as enacted by Title
24	XVII of the Social S	Securi	cy Act.
25	SECTION 2	AND	BE IT FURTHER ENACTED, That if the Secretary of Health
$\frac{26}{26}$			implement the provisions of § 15–103(a)(2)(xiii) of the
$\frac{27}{27}$			as enacted by Section 1 of this Act, the Secretary of Health shall
28			with input from the Behavioral Health Administration, the Health
29	2 0		of the Maryland Department of Health, community-based
30			ers, certified peer recovery specialists, and other stakeholders.
31	SECTION 2	. 2 ΔN	ND BE IT FURTHER ENACTED, That this Act shall take effect
32			shall remain effective for a period of 6 months and, at the end of

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December 31, 2018, this Act, with no further action required by the General Assembly, shall

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proved:	
	Governor.
	Governor.
	President of the Senate.