

Chapter 324

(Senate Bill 765)

AN ACT concerning

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

FOR the purpose of ~~authorizing the Maryland Medical Assistance Program to provide, subject to certain limitations, clinical services provided by certified peer recovery specialists to individuals with substance use disorders or mental health disorders; requiring the Secretary of Health, under certain circumstances, to develop certain regulations with input from certain entities; and generally relating to Maryland Medical Assistance Program services provided by~~ requiring the Secretary of Health to convene a stakeholder workgroup to make findings and recommendations on issues related to the reimbursement of certified peer recovery specialists; requiring the workgroup to include representatives of certain persons; requiring the Secretary to submit a certain report to the Governor and the General Assembly on or before a 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 specialists.

~~BY repealing and reenacting, with amendments,
Article – Health – General
Section 15-103(a)
Annotated Code of Maryland
(2015 Replacement Volume and 2017 Supplement)~~

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
That ~~the Laws of Maryland read as follows:~~

(a) The Secretary of Health shall convene a stakeholder workgroup to make findings and recommendations on issues related to the reimbursement of certified peer recovery specialists, including:

- (1) whether statutory or regulatory changes are required; and
- (2) whether an amendment to the State plan or waiver under the federal Social Security Act is required.

(b) The workgroup convened under subsection (a) of this section shall include representatives of the Maryland Department of Health, behavioral health providers, certified peer recovery specialists, advocacy organizations, and other interested stakeholders.

(c) On or before December 1, 2018, the Secretary of Health shall submit a report 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 Article, the General Assembly.

~~Article — Health — General~~

~~15-103.~~

~~(a) (1) The Secretary shall administer the Maryland Medical Assistance Program.~~

~~(2) The Program:~~

~~(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;~~

~~(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;~~

~~(iii) Shall provide, subject to the limitations of the State budget, comprehensive medical and other health care services for all eligible children currently under the age of 1 whose family income falls below 185 percent of the poverty level, as permitted by federal law;~~

~~(iv) Beginning on January 1, 2012, shall provide, subject to the limitations of the State budget, family planning services to all women whose family income is at or below 200 percent of the poverty level, as permitted by federal law;~~

~~(v) Shall provide, subject to the limitations of the State budget, comprehensive medical and other health care services for all children from the age of 1 year up through and including the age of 5 years whose family income falls below 133 percent of the poverty level, as permitted by the federal law;~~

~~(vi) Beginning on January 1, 2014, shall provide, subject to the limitations of the State budget, comprehensive medical care and other health care services for all children who are at least 6 years of age but are under 19 years of age whose family income falls below 133 percent of the poverty level, as permitted by federal law;~~

~~(vii) Shall provide, subject to the limitations of the State budget, comprehensive medical care and other health care services for all legal immigrants who meet Program eligibility standards and who arrived in the United States before August 22,~~

~~1996, the effective date of the federal Personal Responsibility and Work Opportunity Reconciliation Act, as permitted by federal law;~~

~~(viii) Shall provide, subject to the limitations of the State budget and any other requirements imposed by the State, comprehensive medical care and other health care services for all legal immigrant children under the age of 18 years and pregnant women who meet Program eligibility standards and who arrived in the United States on or after August 22, 1996, the effective date of the federal Personal Responsibility and Work Opportunity Reconciliation Act;~~

~~(ix) Beginning on January 1, 2014, shall provide, subject to the limitations of the State budget, and as permitted by federal law, medical care and other health care services for adults whose annual household income is at or below 133 percent of the poverty level;~~

~~(x) Subject to the limitations of the State budget, and as permitted by federal law:~~

~~1. Shall provide comprehensive medical care and other health care services for former foster care adolescents who, on their 18th birthday, were in foster care under the responsibility of the State and are not otherwise eligible for Program benefits;~~

~~2. May provide comprehensive medical care and other health care services for former foster care adolescents who, on their 18th birthday, were in foster 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;~~

~~(xi) May include bedside nursing care for eligible Program recipients;~~
~~[and]~~

~~(xii) Shall provide services in accordance with funding restrictions included in the annual State budget bill; AND~~

~~(XIII) BEGINNING ON JANUARY 1, 2020, MAY PROVIDE, SUBJECT TO THE LIMITATIONS OF THE STATE BUDGET, AND AS ALLOWED BY FEDERAL LAW, CLINICAL SERVICES PROVIDED BY CERTIFIED PEER RECOVERY SPECIALISTS TO INDIVIDUALS WITH SUBSTANCE USE DISORDERS OR MENTAL HEALTH DISORDERS.~~

~~(3) Subject to restrictions in federal law or waivers, the Department may:~~

~~(i) Impose cost sharing on Program recipients; and~~

~~(ii) For adults who do not meet requirements for a federal category of eligibility for Medicaid:~~

~~1. Cap enrollment; and~~

~~2. Limit the benefit package.~~

~~(4) Subject to the limitations of the State budget, the Department shall implement the provisions of Title II of the federal Patient Protection and Affordable Care Act, as amended by the federal Health Care and Education Reconciliation Act of 2010, to include:~~

~~(i) Parents and caretaker relatives who have a dependent child living in the parents' or caretaker relatives' home; and~~

~~(ii) Adults who do not meet requirements, such as age, disability, or parent or caretaker relative of a dependent child, for a federal category of eligibility for Medicaid and who are not enrolled in the federal Medicare program, as enacted by Title XVII of the Social Security Act.~~

~~SECTION 2. AND BE IT FURTHER ENACTED, That if the Secretary of Health adopts regulations to implement the provisions of § 15-103(a)(2)(xiii) of the Health General Article, as enacted by Section 1 of this Act, the Secretary of Health shall develop the regulations with input from the Behavioral Health Administration, the Health Care Financing division of the Maryland Department of Health, community-based behavioral health providers, certified peer recovery specialists, and other stakeholders.~~

~~SECTION 3. 2. AND BE IT FURTHER ENACTED, That this Act shall take effect ~~October~~ July 1, 2018. It shall remain effective for a period of 6 months and, at the end of December 31, 2018, this Act, with no further action required by the General Assembly, shall be abrogated and of no further force and effect.~~

Approved by the Governor, April 24, 2018.