SENATE BILL 460

By: Senator Augustine Senators Augustine and Hester

Introduced and read first time: January 27, 2022
Assigned to: Finance

Committee Report: Favorable with amendments
Senate action: Adopted
Read second time: March 14, 2022

CHAPTER _____

AN ACT concerning

Consumer Health Access Program for Mental Health and Addiction Care—Establishment
Health – Insurance Coverage Information

FOR the purpose of establishing that the Health Education Advocacy Unit in the Office of the Attorney General is the State’s office of consumer assistance under a certain federal law; establishing the Consumer Health Access Program for Mental Health and Addiction Care to assist State residents in accessing mental health and substance use disorder services under public and private health insurance and address insurance–related barriers to mental health and substance use disorder services; establishing certain requirements on the Program relating to consumer medical records and other information; establishing the Consumer Health Access Program for Mental Health and Addiction Care Fund as a special, nonlapsing fund; requiring interest earnings of the Fund to be credited to the Fund; establishing the Consumer Health Access Program Advisory Council for certain purposes; and generally relating to the Consumer Health Access Program for Mental Health and Addiction Care health insurance coverage information.

BY repealing and reenacting, with amendments,

Article – Commercial Law
Section 13–4A–01
Annotated Code of Maryland
(2013 Replacement Volume and 2021 Supplement)

BY adding to

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.
[Brackets] indicate matter deleted from existing law.
Underlining indicates amendments to bill.
Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.
Article – Health – General
Section 13–4401 through 13–4410 to be under the new subtitle “Subtitle 44. Consumer Health Access Program for Mental Health and Addiction Care”

BY repealing and reenacting, without amendments,
Article – State Finance and Procurement
Section 6–226(a)(2)(i)
Annotated Code of Maryland
(2019 Replacement Volume and 2021 Supplement)

BY repealing and reenacting, with amendments,
Article – State Finance and Procurement
Section 6–226(a)(2)(ii)144. and 145.
Annotated Code of Maryland
(2021 Replacement Volume)

BY adding to
Article – State Finance and Procurement
Section 6–226(a)(2)(ii)146.
Annotated Code of Maryland
(2021 Replacement Volume)

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

Article – Commercial Law

13–4A–01.

(A) There is a Health Education and Advocacy Unit in the Division.

(B) The Health Education and Advocacy Unit is the State’s Office of Health Insurance Consumer Assistance Under § 1002 of the Federal Patient Protection and Affordable Care Act.

Article – Health – General

Subtitle 44. Consumer Health Access Program for Mental Health and Addiction Care.

13–4401.

(A) In this section the following words have the meanings indicated.
(B) “Connector entity regions” means the eight geographical regions in Maryland that have been designated by the Maryland Health Benefit Exchange for purposes of insurance–related outreach, education, and enrollment under the Patient Protection and Affordable Care Act.

(C) “Consumer assistance services” means services with the purposes of:

1. Providing administrative assistance to Program participants to enroll in health coverage plans for which the participants qualify;

2. Assisting Program participants to access treatment for mental health and substance use disorders;

3. Communicating and coordinating with health coverage plans on behalf of Program participants and their providers regarding coverage for mental health and substance use disorder treatment under the terms of the health coverage plan in which the Program participant is enrolled;

4. Offering to connect Program participants to federal and state governmental agencies or authorities that provide assistance to consumers in pursuing contractual or administrative appeals, grievances, or complaints against or related to health coverage plans with respect to mental health and substance use disorder benefit claims;

5. Assisting Program participants to pursue contractual, administrative, or judicial complaints against health coverage plans for failure to provide mental health or substance use disorder benefits required by contract or under federal or state law, including providing legal representation;

6. Providing outreach and education to Program participants and consumers regarding access to mental health and substance use disorder treatment services under health coverage plans; and

7. Providing consumer education materials regarding accessing coverage for mental health and substance use disorders under health coverage plans and rights under federal and state law.
OTHER THAN CONSUMER EDUCATION INFORMATION PROVIDED UNDER § 2–303.1 OF THE INSURANCE ARTICLE.

(D) “Fund” means the Consumer Health Access Program for Mental Health and Addiction Care Fund.

(E) “Health coverage plan” means health insurance coverage for mental health and substance use disorder benefits offered by any payer of health care services, including state-regulated individual and group plans, fully insured and self-insured employer-sponsored plans, the State Employee Health and Welfare Benefits Program:

(1) A health benefit plan as defined in § 2–112.2 of the Insurance Article;

(2) A self-funded health plan;

(3) The Maryland Medical Assistance Program;

(4) The Maryland Children’s Health Program, Medicare, Tricare, and;

(5) Medicare;

(6) Tricare; and

(7) Veterans Administration health benefits.

(F) “Hub entity” means the private, community-based, nonprofit corporation or organization with offices located in the State or a public university in the State selected by the incubator entity and responsible for operating the Program.

(G) “Incubator entity” means the University of Maryland Baltimore School of Social Work Center for Addiction Research, Education, and Services.

(H) “Mental Health Parity and Addiction Equity Act” or “Parity Act” means the Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008 and implementing regulations 45 C.F.R. § 146.136 and 29 C.F.R. § 2590.712.
(H) (1) “Program” means the Consumer Health Access Program for Mental Health and Addiction Care.

(I) (J) “Provider” means:

(1) A licensed or certified practitioner whose scope of practice includes the provision of mental health or substance use disorder treatment;

(2) A facility licensed to provide mental health or substance use disorder treatment; or

(3) A certified peer counselor who provides support services to patients with mental health or substance use disorders a physician, facility, including a hospital, or other person that is licensed, certified, or otherwise authorized to provide mental health care or substance use disorder treatment services or services provided in connection with mental health care or substance use disorder treatment.

(K) (L) “Specialty entity” means a private, community-based, nonprofit corporation or organization with offices located in the State that enters into a contract with the hub entity to assist in the delivery of consumer assistance services.

(H) (L) “Spoke entity” means the private, community-based, nonprofit corporation or organization with offices located in the State that enters into a contract with the hub entity to provide consumer assistance services in one of the eight connector entity regions.

13-4402.

(A) There is a Consumer Health Access Program for Mental Health and Addiction Care.

(B) The purposes of the Program are to:

(1) assist state residents in accessing mental health and substance use disorder services under public and private health insurance; provide consumer assistance services; and

(2) address insurance-related barriers to mental health and substance use disorder services through consumer outreach and
EDUCATION, CLIENT ASSISTANCE AND REPRESENTATION, DATA COLLECTION AND
ANALYSIS, AND RESOLUTION OF SYSTEM-WIDE BARRIERS COLLECT AND ANALYZE
DATA FROM PROGRAM PARTICIPANTS AND PROVIDERS TO IDENTIFY AND HELP
RESOLVE BARRIERS TO MENTAL HEALTH AND SUBSTANCE USE DISORDER
TREATMENT.

(C) THE PROGRAM SHALL BE ADMINISTERED BY THE INCUBATOR ENTITY
AND A HUB ENTITY SELECTED BY THE INCUBATOR ENTITY.

13–4403.

(A) THERE IS A CONSUMER HEALTH ACCESS PROGRAM FOR MENTAL
HEALTH AND ADDICTION CARE FUND.

(B) THE PURPOSE OF THE FUND IS TO PROVIDE FUNDING TO THE
INCUBATOR ENTITY, HUB ENTITY, AND SPOKE AND SPECIALTY ENTITIES TO CARRY
OUT THE RESPONSIBILITIES OF THE PROGRAM.

(C) THE INCUBATOR ENTITY AND THE HUB ENTITY SELECTED BY THE
INCUBATOR ENTITY SHALL ADMINISTER THE FUND.

(D) (1) THE FUND IS A SPECIAL, NONLAPSING FUND THAT IS NOT
SUBJECT TO § 7–302 OF THE STATE FINANCE AND PROCUREMENT ARTICLE.

(2) THE STATE TREASURER SHALL HOLD THE FUND SEPARATELY,
AND THE COMPTROLLER SHALL ACCOUNT FOR THE FUND.

(E) THE FUND CONSISTS OF:

(1) MONEY APPROPRIATED IN THE STATE BUDGET TO THE FUND;

(2) INTEREST EARNINGS CREDITED TO THE FUND UNDER
SUBSECTION (F)(2) OF THIS SECTION; AND

(3) ANY OTHER MONEY FROM ANY OTHER SOURCE ACCEPTED FOR
THE BENEFIT OF THE FUND.

(F) (1) THE STATE TREASURER SHALL INVEST THE MONEY OF THE FUND
IN THE SAME MANNER AS OTHER STATE MONEY MAY BE INVESTED.

(2) ANY INTEREST EARNINGS OF THE FUND SHALL BE CREDITED TO
THE FUND.

(G) EXPENDITURES FROM THE FUND MAY BE MADE ONLY IN:
(I) To carry out the purpose and activities of the Program; and

(II) In accordance with the State budget.

(H) Money expended from the Fund for the Program is supplemental to and is not intended to take the place of funding that otherwise would be appropriated for the Program.

13–4404.

Contingent on the receipt of State funding for the Program, the incubator entity shall implement the Program by:

(1) On or before July 1, 2023, conducting and completing an application process to select a Hub Entity for the Program that meets criteria established by the incubator entity that shall include that the Hub Entity have issuing a request for proposals for a Hub Entity;

(2) On or before July 1, 2023, selecting an entity to serve as the Hub Entity that has:

(I) A public interest mission;

(II) Qualified staff staff who represent the racial, ethnic, and gender diversity of residents of the State and include individuals with personal experience in accessing treatment for mental health and substance use disorders;

(III) Staff who are qualified by education, training, experience, and, if applicable, licensure, certification, or registration to provide consumer assistance services;

(III) Organizational expertise or demonstrated capacity to develop expertise in:

1. Mental health and substance use disorder services;

2. Insurance coverage of mental health and substance use disorder services;
3. **Public Outreach and Education on Insurance Coverage and Substance Use Disorder Treatment;**

4. **Client Assistance and Representation to Resolve Insurance Disputes;**

5. **The Mental Health Parity and Addiction Equity Act Standards; and**

6. **Data Gathering and Analysis;**

   (IV) **No Direct Involvement in the Licensing, Certification, or Accreditation of a Mental Health or Substance Use Disorder Facility or a Health Coverage Plan;**

   (V) **No Direct Ownership or Investment in a Mental Health or Substance Use Disorder Facility or Health Coverage Plan;**

   (VI) **No Participation in the Management of a Mental Health or Substance Use Disorder Facility or Health Coverage Plan;**

   (VII) **No Agreement or Arrangement with an Owner or Operator of a Mental Health or Substance Use Disorder Facility or a Health Coverage Plan that Could Directly or Indirectly Result in Remuneration, in Cash or in Kind, to the Entity; and**

   (VIII) **1. No Agreement or Arrangement with an Owner or Operator of a Mental Health or Substance Use Disorder Facility That Could Directly or Indirectly Result in Remuneration, in Cash or in Kind, to the Entity; or**

   **2. A Policy That Addresses Any Potential Conflict of Interest Related to the Delivery of Program Services and the Delivery of Mental Health and Substance Use Disorder Services; and**

   (IX) **Adopted and Maintains a Health Information Security System Program That Meets the Health Insurance Portability and Accountability Act of 1996 Criteria as Applicable;**

   (2) **Assisting the Hub Entity in Selecting and Entering into an Agreement Agreements, Directly or Through a Hub Entity, to Deliver Consumer Assistance Services with One Spoke Entity in Each of the Eight Connector Entity Regions That Meets the Criteria Established by the Hub Entity Listed in Item (2) of This Section;**
(3) (4) Assisting the Hub entity in selecting and entering into agreements, directly or through a Hub entity, to deliver Consumer assistance services with one or more Specialty entities, as needed, that meet the criteria established by the Hub entity listed in item (2) of this section; and

(4) (5) Offering technical assistance to the Hub entity under an agreement for a 3-year pilot period.

13–4405.

(A) The Program shall be composed of the Hub entity, eight spoke entities, a Specialty entity, as needed, and Volunteers with appropriate training and supervision to assist with Program activities.

(B) The Program shall operate a 3-year pilot program to help consumers, including individuals who are uninsured or have private or public health plans, and providers navigate and resolve issues related to:

(1) Health plan enrollment and coverage;

(2) Consumer access to mental health and substance use disorder services; and

(3) Enforcement of rights under the Mental Health Parity and Addiction Equity Act and state and federal insurance laws provide consumer assistance services.

(C) Within 1 year after the receipt of State funding for the Program funds, the Program shall:

(1) Conduct in-person and other outreach and education for residents of the State to improve health literacy regarding:

(i) Mental health and substance use disorder health benefit coverage and available services;

(ii) Enrollment in health plans;

(iii) Access to mental health and substance use disorder treatment; and
(iv) Rights under the Mental Health Parity and Addiction Equity Act begin providing consumer assistance services;

(2) Establish and operate a toll-free helpline and an on-line assistance portal to allow consumers, providers who are acting on behalf of consumers, and individuals within the State’s behavioral health crisis response system access to the consumer assistance services of the Program;

(3) Assist consumers and providers who are acting on behalf of consumers in resolving issues related to health plan enrollment and service coverage and access by working with appropriate regulatory agencies and health plan representatives;

(4) Assist and represent consumers in the filing of complaints, grievances, and appeals, including:

(i) Complaints through the internal grievance and external review process under Title 15, Subtitle 10A of the Insurance Article;

(ii) Appeals of coverage decisions under Title 15, Subtitle 10D of the Insurance Article;

(iii) Employer-sponsored plan internal and external appeal procedures;

(iv) Medicaid fair hearings; and

(v) Medicare appeals;

(5) As appropriate, work jointly with State agencies, including the Department, the Maryland Insurance Administration, and the Maryland Health Benefit Exchange to promote greater access to mental health and substance use disorder services and resolution of consumer complaints;

(6) Enter into a memorandum of understanding with the Health Education and Advocacy Unit of the Office of the Attorney General to coordinate consumer assistance services and ensure effective and nonduplicative assistance in addressing health plan complaints and appeals related to mental health and substance use disorder services;
(7) Collect and analyze data on all consumer assistance services provided by the Program, including de-identified demographic information about consumers Program participants who sought and received assistance, the types of services provided, and outcomes of the assistance provided;

(8) Based on data acquired from Program participants and Program participants’ providers and health coverage plans:

(I) Identify trends and gaps in coverage of and access to mental health and substance use disorder services;

(II) Identify trends in violations of the Mental Health Parity and Addiction Equity Act; and

(III) Recommend policies and practices to resolve deficiencies in coverage and access to services;

(9) Make data, trend analyses, and recommendations available to:

(I) Members of the public;

(II) Government agencies;

(III) The Office of the Attorney General;

(IV) The General Assembly; and

(V) Any other entity that the Program determines appropriate;

(10) Conduct advocacy work with government agencies in the State and the General Assembly to address systemic gaps in access to mental health and substance use disorder services and violations of the Mental Health Parity and Addiction Equity Act; and

(11) Issue an annual report that includes:

(I) An accounting of all Program activities;

(II) An evaluation of the performance of the Program;

(III) A complete fiscal accounting;
(IV) Identification of insurance gaps and issues affecting consumers and providers; and

(V) Recommendations to improve access to mental health and substance use disorder treatment and enforcement of the Mental Health Parity and Addiction Equity Act.

13–4406.

The Program shall promote equity in access to mental health and substance use disorder services by:

(1) Ensuring that all consumer assistance services include and represent the diversity of the population of the State with respect to race, ethnicity, language, religion, gender diversity, sexual orientation, socioeconomic status, and disability status;

(2) Entering agreements with spoke and specialty entities that are led by and serve black, Hispanic, Asian, Indigenous, disability, and gender diverse communities and seeking input from diverse communities in consumer assistance service development;

(3) Employing individuals with lived experience in mental health and substance use disorder treatment, including individuals engaged in peer service delivery;

(4) Delivering culturally competent services that are responsive to the diverse needs of residents of the State and providing services in multiple languages;

(5) Promoting access by offering services through multiple modalities, including in–person, telephone, and Internet services; and

(6) Collecting, requesting, collecting, and analyzing demographic data from Program participants to address disparities in accessing mental health and substance use disorder services by race, ethnicity, gender, and gender identity.

13–4407.

(A) The Program:
(1) May request, obtain, and use the medical or other records of a consumer in the possession of a health plan or mental health or substance use disorder provider if the Program receives the appropriate consent from the individual or the legal representative of the individual, develop consent forms that authorize one or more specifically identified, hub, spoke, or specialty entities conducting consumer assistance services to request, obtain, and use the medical records of a Program participant;

(2) Shall use and disclose an individual’s records in compliance with the federal Confidentiality of Alcohol and Drug Abuse Patient Records Regulation, 42 C.F.R. Part 2, the Health Insurance Portability and Accountability Act, 45 C.F.R. §§ 160 and Parts 160, 164, and 170, as applicable, and State health privacy standards; and

(3) May not disclose personal identifying information about a consumer in any form other than aggregate data in any public document unless the individual or legal representative of the individual has provided the appropriate consent for release of information.

(B) The Program shall request and promptly receive, with reasonable notice and the appropriate authorization, the cooperation, assistance, information, and records from State agencies specifically related to a Program participant’s complaint, as necessary, to enable the Program to investigate a consumer’s Program participant’s complaint.

13–4408.

The Program shall publish a notice concerning the services offered by the Program that shall be posted in a conspicuous location and included in written materials by disseminate the notice to:

(1) Each employer Employers in the State that provides provide health insurance or a health coverage plan;

(2) Mental health and substance use disorder providers and crisis services; and

(3) Other entities on reasonable request identified by the Program.
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THE GOVERNOR SHALL INCLUDE IN THE ANNUAL BUDGET BILL THE FOLLOWING AMOUNTS TO THE FUND:

1. $1,000,000 FOR FISCAL YEAR 2024;
2. $1,000,000 FOR FISCAL YEAR 2025; AND
3. $1,000,000 FOR FISCAL YEAR 2026.

THE APPROPRIATION TO THE FUND FOR FISCAL YEAR 2024 UNDER SUBSECTION (A)(1) OF THIS SECTION SHALL BE USED TO FUND THE INCUBATOR ENTITY TO CARRY OUT THE ACTIVITIES SPECIFIED UNDER § 13–4404 OF THIS SUBTITLE.

THE APPROPRIATIONS FOR FISCAL YEARS 2025 AND 2026 UNDER SUBSECTION (A)(2) AND (3) OF THIS SECTION SHALL BE USED TO FUND THE HUB ENTITY, ANY SPOKE AND SPECIALTY ENTITIES CONTRACTED BY THE HUB ENTITY TO CARRY OUT THE ACTIVITIES SPECIFIED UNDER § 13–4405 OF THIS SUBTITLE, AND ANY ACTIVITIES CONDUCTED BY THE INCUBATOR ENTITY IN FISCAL YEARS 2025 AND 2026.

EXCEPT AS PROVIDED IN PARAGRAPH (2) OF THIS SUBSECTION, THE PROGRAM MAY APPLY FOR AND ACCEPT GRANTS, GIFTS, AND OTHER FUNDS FROM FEDERAL AND STATE PROGRAMS AND FOUNDATIONS AND PRIVATE DONATIONS FOR THE PURPOSE OF CARRYING OUT THE PROGRAM’S RESPONSIBILITIES.

ONLY THE HEALTH EDUCATION AND ADVOCACY UNIT OF THE OFFICE OF THE ATTORNEY GENERAL MAY APPLY FOR GRANTS UNDER § 1002 OF THE FEDERAL PATIENT PROTECTION AND AFFORDABLE CARE ACT FOR FEDERAL CONSUMER ASSISTANCE PROGRAM FUNDING PURPOSES.

THE PROGRAM SHALL USE THE FULL NAME OF THE PROGRAM IN ANY ADVERTISING AND IN ANY WRITTEN COMMUNICATIONS.

Article – State Finance and Procurement

(a) (2) (i) Notwithstanding any other provision of law, and unless inconsistent with a federal law, grant agreement, or other federal requirement or with the
terms of a gift or settlement agreement, net interest on all State money allocated by the
State Treasurer under this section to special funds or accounts, and otherwise entitled to
receive interest earnings, as accounted for by the Comptroller, shall accrue to the General
Fund of the State.

(ii) The provisions of subparagraph (i) of this paragraph do not apply
to the following funds:

144. the Health Equity Resource Community Reserve Fund;
[and]

145. the Access to Counsel in Evictions Special Fund; AND

146. THE CONSUMER HEALTH ACCESS PROGRAM FOR
MENTAL HEALTH AND ADDICTION CARE FUND.

SECTION 2. AND BE IT FURTHER ENACTED, That:

(a) There is a Consumer Health Access Program Advisory Council.

(b) The Council consists of not more than 15 members, including:

(1) one representative of the Maryland Insurance Administration,
designated by the Maryland Insurance Commissioner;

(2) one representative of the Behavioral Health Administration,
designated by the Secretary of Health;

(3) one representative of the Maryland Medicaid Administration,
designated by the Secretary of Health;

(4) one representative of the Health Education and Advocacy Unit of the
Office of the Attorney General, designated by the head of the Unit;

(5) one representative of the Maryland Health Benefit Exchange,
designated by the Executive Director of the Exchange; and

(6) one representative of the following persons, designated by the
University of Maryland Baltimore School of Social Work Center for Addiction Research,
Education, and Services:

(i) consumers of mental health and substance use disorder services;

(ii) an organization that works with peer coaches or is a peer
association;

(iii) an association that represents mental health providers;
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(iv) an association that represents substance use disorder providers;
(v) an organization that conducts crisis services;
(vi) an organization that works on behalf of marginalized individuals to achieve health equity;
(vii) an organization with expertise in the Mental Health Parity and Addiction Equity Act;
(viii) an organization that conducts outreach to individuals with mental health and substance use disorders; and
(ix) a county health department.

(c) The Council shall meet quarterly to perform the following functions:

(1) advise the University of Maryland Baltimore School of Social Work Center for Addiction Research, Education, and Services on design and operations of the Consumer Health Access Program for Mental Health and Addiction Care;
(2) recommend improvements for the Consumer Health Access Program for Mental Health and Addiction Care; and
(3) review data on cases handled by the Consumer Health Access Program for Mental Health and Addiction Care and make recommendations based on the data.

SECTION 3. AND BE IT FURTHER ENACTED, That:

(a) Section 2 of this Act shall terminate contingent on the termination of the pilot program operated by the Consumer Health Access Program for Mental Health and Addiction Care under § 13–4405(b) of the Health – General Article, as enacted by Section 1 of this Act.

(b) If the pilot program terminates, Section 2 of this Act, with no further action required by the General Assembly, shall be abrogated and of no further force and effect.

(c) The Consumer Health Access Program for Mental Health and Addiction Care established under § 13–4402 of the Health – General Article, as enacted by Section 1 of this Act, shall notify the Department of Legislative Services within 5 days after the pilot program terminates.

SECTION 4. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2022.