J1, J3

(3lr0450)

ENROLLED BILL

- Health and Government Operations/Finance -

Introduced by Delegate Charkoudian Delegates Charkoudian, Pena-Melnyk, Cullison, Alston, Bagnall, Bhandari, Guzzone, Hill, S. Johnson, Kaiser, Kerr, Kipke, R. Lewis, Lopez, Martinez, Taveras, White, and Woods

Read and Examined by Proofreaders:

		Proofreader.
		Proofreader.
Sealed with the Great Sea	eal and presented to the	Governor, for his approval this
day of	at	o'clock,M.
		Speaker.
	CHAPTER	

1 AN ACT concerning

Mental Health – Treatment Plans for Individuals in Facilities – Requirements and Resident Grievance System

4 FOR the purpose of requiring that a plan of treatment for an individual with a mental $\mathbf{5}$ disorder admitted to a certain health care facility include a certain discharge goal 6 and an estimate of the probable length of inpatient stay the individual requires 7 before transfer to a certain setting; requiring certain facility staff to review and 8 reassess a plan of treatment within certain time periods; establishing certain rights 9 and requirements relating to the participation of certain family members and other 10individuals in the development, review, and reassessment of a plan of treatment; 11 establishing an appeals process for individuals admitted to a State facility relating 12to the review and reassessment of a plan of treatment; requiring the Maryland 13 Department of Health to adopt certain regulations relating to the appeals process;

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.

Italics indicate opposite chamber/conference committee amendments.



requiring a certain <u>State</u> health care facility to take certain actions if the facility is unable to address certain needs under a plan of treatment; <u>requiring the Department</u> to report certain information related to the Resident Grievance System to the <u>General Assembly on or before a certain date each year</u>; and generally relating to treatment plans for individuals with mental disorders admitted to <u>mental</u> health care facilities.

7 BY repealing and reenacting, with amendments,

- 8 Article Health General
- 9 Section 10–706
- 10 Annotated Code of Maryland
- 11 (2019 Replacement Volume and 2022 Supplement)
- 12 BY adding to
- 13 <u>Article Health General</u>
- 14 <u>Section 10–908 to be under the new part "Part II. Resident Grievance System Report"</u>
- 15 <u>Annotated Code of Maryland</u>
- 16 (2019 Replacement Volume and 2022 Supplement)

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

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Article – Health – General

20 10–706.

(a) (1) Except as provided by paragraph (2) of this subsection, promptly after
 admission of an individual, a facility shall make and periodically update a written plan of
 treatment for the individual in the facility, in accordance with the provisions of this
 subtitle.

25 (2) Promptly after admission of an individual to a psychosocial center, the 26 center shall make and periodically update a written plan of rehabilitation for the individual 27 in the facility, in accordance with the provisions of this subtitle.

- 28 (b) The Director shall adopt rules and regulations under this section that include:
- 29 (1) [A] SUBJECT TO SUBSECTION (D) OF THIS SECTION, A description 30 of the nature and content of plans of treatment; and

31 (2) [Appropriate] SUBJECT TO SUBSECTION (E) OF THIS SECTION,
 32 APPROPRIATE time periods for the development, implementation, and review of each plan.

33 (c) An individual shall:

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1 (1)Participate, in a manner appropriate to the individual's condition, in $\mathbf{2}$ the development and periodic updating of the plan of treatment; and 3 (2)Be told, in appropriate terms and language, of: 4 (i) The content and objectives of the plan of treatment; The nature and significant possible adverse effects of $\mathbf{5}$ (ii) 6 recommended treatments: 7 (iiii) The name, title, and role of personnel directly responsible for carrying out the treatment for the individual; and 8 9 When appropriate, other available alternative treatments, (iv) 10 services, or providers of mental health services. 11 **(**D**)** A PLAN OF TREATMENT SHALL INCLUDE: 12(1) A LONG-RANGE DISCHARGE GOAL; AND 13AN ESTIMATE OF THE PROBABLE LENGTH OF INPATIENT STAY (2) 14THE INDIVIDUAL REQUIRES BEFORE TRANSFER TO A LESS RESTRICTIVE OR INTENSIVE TREATMENT SETTING. 1516 **(E)** FACILITY STAFF WHO WORK DIRECTLY WITH AND PROVIDE TREATMENT 17TO AN INDIVIDUAL SHALL REVIEW AND REASSESS THE PLAN OF TREATMENT FOR THE INDIVIDUAL TO DETERMINE THE INDIVIDUAL'S PROGRESS AND ANY NEED FOR 18 19 ADJUSTMENTS TO THE PLAN NOT LESS THAN: 20**ONCE EVERY 15 DAYS FOR THE FIRST 2 MONTHS AFTER** (1) 21ADMISSION OF THE INDIVIDUAL TO THE FACILITY; AND 22**ONCE EVERY 60 DAYS FOR THE REMAINDER OF THE INPATIENT** (2) STAY OF THE INDIVIDUAL IN THE FACILITY. 23**(F)** (1) 24ON THE ADMISSION OF AN INDIVIDUAL TO A FACILITY AND AT 25EACH REVIEW AND REASSESSMENT OF THE INDIVIDUAL'S PLAN OF TREATMENT, THE 26FACILITY SHALL ASK: 27**(I)** ASK THE **INDIVIDUAL WHETHER** THE **INDIVIDUAL** 28CONSENTS TO THE INCLUSION OF FAMILY MEMBERS OR ANY OTHER INDIVIDUALS IN 29BEING INFORMED OF AND GIVEN THE OPPORTUNITY TO PARTICIPATE IN MEETINGS WITH THE TREATMENT TEAM REGARDING THE DEVELOPMENT, REVIEW, AND 30 **REASSESSMENT OF THE PLAN OF TREATMENT OF THE INDIVIDUAL; AND** 31

$ \begin{array}{c} 1 \\ 2 \\ 3 \\ 4 \\ 5 \end{array} $	(II) IF CONSENT IS GIVEN UNDER ITEM (I) OF THIS PARAGRAPH, AT LEAST EVERY 7 DAYS AFTER CONSENT IS GIVEN, RECONFIRM THE CONSENT AND PROVIDE THE INDIVIDUAL AT A CLINICAL VISIT WITH AN OPPORTUNITY TO CONSENT TO ADDITIONAL INDIVIDUALS BEING INFORMED OF AND GIVEN THE OPPORTUNITY TO PARTICIPATE IN MEETINGS WITH THE TREATMENT TEAM.
6 7 8	(2) IF AN INDIVIDUAL AGREES TO HAVE FAMILY MEMBERS OR OTHER INDIVIDUALS PARTICIPATE IN THE DEVELOPMENT, REVIEW, AND REASSESSMENT OF THE INDIVIDUAL'S PLAN OF TREATMENT, THE FACILITY SHALL:
9 10	(I) Include the family members and other individuals Authorized by the individual in:
$\begin{array}{c} 11 \\ 12 \end{array}$	1. EACH STAGE OF THE DEVELOPMENT OF THE PLAN OF TREATMENT;
13 14	2. Any review and reassessment of the plan of the
$15 \\ 16 \\ 17 \\ 18$	3. Any meeting of facility staff that has a purpose of developing, reviewing, or reassessing the plan of treatment; and Provide a schedule of routine treatment team meetings where the plan of treatment is discussed;
19 20	(II) Provide notice to the family members and other INDIVIDUALS OF A TREATMENT TEAM MEETING:
21	1. AT LEAST 7 DAYS IN ADVANCE OF THE MEETING; OR
$22 \\ 23 \\ 24 \\ 25$	2. If the treatment team meeting is being held due to an emergency, as soon as the meeting is scheduled Establish a process for the authorized individuals to participate in treatment team meetings;
26 27 28	(III) IF THE TREATMENT TEAM MEETING IS BEING HELD OUTSIDE THE REGULAR SCHEDULE, INFORM THE AUTHORIZED INDIVIDUALS AS SOON AS THE MEETING IS SCHEDULED; AND
29 30 31	(IV) IF THE TREATMENT TEAM MEETING IS BEING HELD DUE TO AN EMERGENCY, INFORM THE AUTHORIZED INDIVIDUALS OF THE OUTCOME OF THE MEETING AS SOON AS PRACTICABLE.
32 33	(3) THE INDIVIDUAL MAY WITHDRAW THE CONSENT GIVEN UNDER PARAGRAPH (1) OF THIS SUBSECTION AT ANY TIME ORALLY OR IN WRITING.

A TREATING PROVIDER MAY WITHHOLD INFORMATION ON AN

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(4)

 $\mathbf{2}$ INDIVIDUAL PLAN OF TREATMENT FROM A FAMILY MEMBER OR OTHER AUTHORIZED 3 **INDIVIDUAL IF:** 4 **(I)** IN THE TREATING PROVIDER'S CLINICAL JUDGMENT, THE CONSENT GIVEN UNDER PARAGRAPH (1) OF THIS SUBSECTION WAS PROVIDED $\mathbf{5}$ 6 **THROUGH COERCIVE MEANS:** 7 **(II)** THE TREATING PROVIDER BELIEVES IT IS IN THE BEST 8 CLINICAL INTEREST OF THE INDIVIDUAL; OR 9 (III) THE INDIVIDUAL REQUESTS THAT A SPECIFIC PIECE OF THE 10 PLAN OF TREATMENT BE WITHHELD. (G) IF AN INDIVIDUAL ADMITTED TO A FACILITY OR ANY FAMILY 11 (1) 12 MEMBER OR OTHER INDIVIDUAL AUTHORIZED BY THE INDIVIDUAL TO PARTICIPATE 13 IN THE REVIEW AND REASSESSMENT OF THE PLAN OF TREATMENT FOR THE 14 INDIVIDUAL UNDER SUBSECTION (F) OF THIS SECTION BELIEVES THAT THE PLAN OF TREATMENT IS NOT MEETING THE NEEDS OF THE INDIVIDUAL, THE INDIVIDUAL, 1516 FAMILY MEMBER, OR OTHER AUTHORIZED INDIVIDUAL HAS THE RIGHT TO REQUEST THAT THE FACILITY REVIEW AND REASSESS THE PLAN OF TREATMENT. 17 ON RECEIPT OF A REQUEST UNDER PARAGRAPH (1) OF THIS 18 (2) 19 SUBSECTION, THE FACILITY STAFF WHO WORK DIRECTLY WITH AND PROVIDE 20 TREATMENT TO THE INDIVIDUAL SHALL CONDUCT: 21**(I) CONDUCT A REVIEW AND REASSESSMENT OF THE PLAN OF** 22TREATMENT THAT INCLUDES A WRITTEN EXPLANATION OF HOWALL ISSUES RAISED 23IN THE REQUEST WERE CONSIDERED IN THE REVIEW AND REASSESSMENT OF THE 24**PLAN OF TREATMENT**:

25(II)COMMUNICATETHERESULTSOFTHEREVIEWAND26REASSESSMENT OF THEPLAN OF TREATMENT TO THE PATIENT AND INDIVIDUAL27WHO REQUESTED THE REVIEW AND REASSESSMENT, INCLUDING AN EXPLANATION28OF HOW ALL ISSUES RAISED IN THE REQUEST WERE CONSIDERED; AND

29(III)INCLUDETHEREQUESTFORTHEREVIEWAND30REASSESSMENT OF THE PLAN OF TREATMENT AND THE OUTCOME OF THE REVIEW31AND ASSESSMENT, INCLUDING THE EXPLANATION OF THE OUTCOME, IN THE32MEDICAL RECORDS OF THE INDIVIDUAL.

33 (3) IF THE FACILITY DOES NOT MAKE ANY CHANGES TO THE PLAN OF
 34 TREATMENT FOR THE INDIVIDUAL, THE FACILITY SHALL;

1(I)**PROVIDE A DETAILED WRITTEN EXPLANATION FOR THE**2**DECISION TO THE INDIVIDUAL AND ANY FAMILY MEMBER AND INDIVIDUAL**3**AUTHORIZED BY THE INDIVIDUAL TO PARTICIPATE IN THE REVIEW AND**4**REASSESSMENT OF THE PLAN OF TREATMENT; AND**

5 (II) INCLUDE THE EXPLANATION IN THE MEDICAL RECORDS OF 6 THE INDIVIDUAL IF A STATE FACILITY DOES NOT MAKE ANY CHANGES TO THE PLAN 7 OF TREATMENT FOR THE INDIVIDUAL, THE STATE FACILITY SHALL PROVIDE 8 REFERRAL INFORMATION FOR THE RESIDENT GRIEVANCE SYSTEM ESTABLISHED 9 UNDER COMAR 10.21.14.

10(H)(1)AN INDIVIDUAL ADMITTED TO A STATE FACILITY MAY REQUEST11AN ADMINISTRATIVE HEARING FOR A RECONSIDERATION OF THE REVIEW AND12REASSESSMENT COMPLETED UNDER SUBSECTION (G) OF THIS SECTION BY FILING A13REQUEST FOR HEARING WITH THE CHIEF EXECUTIVE OFFICER OF THE STATE14FACILITY OR THE CHIEF EXECUTIVE OFFICER'S DESIGNEE WITHIN 7 DAYS AFTER15RECEIPT OF THE WRITTEN EXPLANATION OF THE REVIEW AND REASSESSMENT.

16 (2) WITHIN 72 HOURS AFTER RECEIPT OF A REQUEST FOR A
 17 HEARING, THE CHIEF EXECUTIVE OFFICER OF THE STATE FACILITY OR THE CHIEF
 18 EXECUTIVE OFFICER'S DESIGNEE SHALL FORWARD THE REQUEST TO THE OFFICE
 19 OF ADMINISTRATIVE HEARINGS.

(3) SUBJECT TO PARAGRAPH (5) OF THIS SUBSECTION, THE OFFICE
 OF ADMINISTRATIVE HEARINGS SHALL CONDUCT A HEARING AND ISSUE A DECISION
 WITHIN 15 CALENDAR DAYS AFTER THE RECEIPT OF THE REQUEST FORWARDED
 UNDER PARAGRAPH (2) OF THIS SUBSECTION.

24(4)The individual admitted to a State facility is entitled to25BE REPRESENTED BY COUNSEL AT THE ADMINISTRATIVE HEARING.

26 (5) THE ADMINISTRATIVE HEARING MAY BE POSTPONED BY 27 ACREEMENT OF THE PARTIES OR FOR GOOD CAUSE SHOWN.

28(6)The administrative law judge shall conduct a de novo29HEARING TO DETERMINE WHETHER THE PLAN OF TREATMENT IS MEETING THE30NEEDS OF THE INDIVIDUAL.

31 (7) AT THE HEARING, THE INDIVIDUAL REPRESENTING THE STATE 32 FACILITY:

33 (1) MAY INTRODUCE THE WRITTEN EXPLANATION RELATING 34 TO THE PLAN OF TREATMENT AS EVIDENCE; AND

1 (III) SHALL PROVE. BY CLEAR AND CONVINCING EVIDENCE. 2 THAT THE PLAN OF TREATMENT IS MEETING THE NEEDS OF THE INDIVIDUAL 3 (8) (1) THE ADMINISTRATIVE LAW JUDGE SHALL STATE ON THE 4 RECORD THE FINDINGS OF FACT AND CONCLUSIONS OF LAW. 5411 THE ADMINISTRATIVE LAW JUDGE SHALL DETERMINE 6 THAT: 7 BY CLEAR AND CONVINCING EVIDENCE. THE PLAN OF 1 8 TREATMENT IS MEETING THE NEEDS OF THE INDIVIDUAL: OR 9 2 THE PLAN OF TREATMENT IS NOT MEETING THE 10 **NEEDS OF THE INDIVIDUAL.** (III) IF THE ADMINISTRATIVE LAW JUDGE DETERMINES THAT 11 12 THE PLAN OF TREATMENT IS NOT MEETING THE NEEDS OF THE INDIVIDUAL. THE 13 ADMINISTRATIVE LAW JUDGE SHALL ORDER THE STATE FACILITY TO MAKE 14 ARRANGEMENTS FOR THE INDIVIDUAL TO RECEIVE NECESSARY TREATMENT, WHICH 15 MAY INCLUDE TREATMENT FROM ANOTHER FACILITY OR ANOTHER HEALTH CARE 16 PROVIDER OUTSIDE THE STATE FACILITY. 17(9) THE DETERMINATION OF THE ADMINISTRATIVE LAW JUDGE IS A 18 FINAL DECISION FOR THE PURPOSE OF JUDICIAL REVIEW OF A FINAL DECISION 19 UNDER THE ADMINISTRATIVE PROCEDURE ACT. 20(1) WITHIN 14 CALENDAR DAYS AFTER THE ADMINISTRATIVE LAW (I) JUDGE ISSUES A DECISION UNDER SUBSECTION (II) OF THIS SECTION, THE 2122INDIVIDUAL OR THE STATE FACILITY MAY APPEAL THE DECISION TO THE CIRCUIT COURT ON THE RECORD FROM THE HEARING CONDUCTED BY THE OFFICE OF 23**ADMINISTRATIVE HEARINGS.** 2425(2) THE SCOPE OF REVIEW SHALL BE AS A CONTESTED CASE UNDER THE ADMINISTRATIVE PROCEDURE ACT. 2627**REVIEW SHALL BE ON THE RECORD MADE BEFORE THE** (3) (1) 28**OFFICE OF ADMINISTRATIVE HEARINGS. UNLESS EITHER PARTY TO THE APPEAL** 29**REQUESTS TRANSCRIPTION OF THE TAPE.** 30 (II) A REQUEST FOR TRANSCRIPTION OF THE TAPE SHALL BE 31 MADE AT THE TIME THE APPEAL IS FILED.

	8 HOUSE BILL 121	
1	(III) 1. THE OFFICE OF ADMINISTRATIVE HEARINGS SHALL	
$\frac{1}{2}$	(III) 1. THE OFFICE OF ADMINISTRATIVE HEARINGS SHALL PREPARE THE TRANSCRIPTION BEFORE THE APPEAL HEARING.	
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3	2. The party requesting the transcription shall	
4	BEAR THE COST OF TRANSCRIPTION.	
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$5 \\ 6$	(4) THE CIRCUIT COURT SHALL HEAR AND ISSUE A DECISION ON AN APPEAL WITHIN 30 CALENDAR DAYS AFTER THE DATE THE APPEAL WAS FILED AN	
6 7	-	
8	AUTHORIZED BY THE ADMITTED INDIVIDUAL MAY REQUEST A RECONSIDERATION OF	
9	THE REVIEW AND REASSESSMENT COMPLETED UNDER SUBSECTION (G) OF THIS	
10	SECTION BY FILING A GRIEVANCE WITH THE RESIDENT GRIEVANCE SYSTEM UNDER	
11	<u>COMAR 12.21.14 10.21.14</u> .	
12	(I) (1) AN INDIVIDUAL ADMITTED TO A STATE FACILITY OR ANOTHER	
$\frac{13}{14}$	INDIVIDUAL AUTHORIZED BY THE ADMITTED INDIVIDUAL MAY APPEAL THE RECONSIDERATION OF THE REVIEW AND REASSESSMENT COMPLETED UNDER	
14 15	SUBSECTION (H) OF THIS SECTION BY FILING A REQUEST WITH THE DEPARTMENT'S	
16	HEALTHCARE SYSTEM'S CHIEF MEDICAL OFFICER.	
17	(2) <u>The Department shall adopt regulations to establish a</u>	
18	PROCESS FOR THE APPEAL OF THE RECONSIDERATION OF THE REVIEW AND	
19	<u>REASSESSMENT UNDER PARAGRAPH (1) OF THIS SUBSECTION</u> .	
20	(J) IF \mathbf{A} AN INDIVIDUAL IS ADMITTED TO A STATE FACILITY AND THE STATE	
$\frac{20}{21}$	(J) IF # AN INDIVIDUAL IS ADMITTED TO A STATE FACILITY AND THE STATE FACILITY IS UNABLE TO PROVIDE THE TREATMENT NECESSARY TO ADDRESS THE	
22	REHABILITATION NEEDS OF AN INDIVIDUAL UNDER A PLAN OF TREATMENT FOR THE	
23	INDIVIDUAL, THE STATE FACILITY SHALL:	
	· · · · · · · · · · · · · · · · · · ·	
24	(1) MAKE ARRANGEMENTS FOR THE INDIVIDUAL TO RECEIVE	
25	NECESSARY TREATMENT FROM ANOTHER FACILITY OR OTHER HEALTH CARE	
26	PROVIDER OUTSIDE THE <u>STATE</u> FACILITY; AND	
27	(2) Ensure that treatment for the individual is	
21 28	COORDINATED BETWEEN THE STATE FACILITY AND THE OTHER FACILITY OR	
$\frac{20}{29}$	HEALTH CARE PROVIDER.	
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30	PART II. RESIDENT GRIEVANCE SYSTEM REPORT.	
31	<u>10–908.</u>	
32	ON OR BEFORE JANUARY 1 EACH YEAR, BEGINNING IN 2024, THE	
33	DEPARTMENT SHALL REPORT TO THE GENERAL ASSEMBLY, IN ACCORDANCE WITH	
34	§ 2–1257 OF THE STATE GOVERNMENT ARTICLE, ON:	

1 (1) THE RESIDENT GRIEVANCE SYSTEM ESTABLISHED UNDER 2 COMAR 12.21.14 10.21.14; AND

3 (2) The grievances that were received by the Resident 4 GRIEVANCE SYSTEM RELATED TO STATE FACILITIES DURING THE IMMEDIATELY 5 PRECEDING FISCAL YEAR.

6 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect 7 October 1, 2023.

Approved:

Governor.

Speaker of the House of Delegates.

President of the Senate.