HOUSE BILL 1066

By: Delegates Ruth and Guzzone, Guzzone, Pena-Melnyk, Cullison, Alston, Bagnall, Hill, Hutchinson, S. Johnson, Kaiser, Kipke, Lopez, Martinez, Rosenberg, Taveras, Woods, Woorman, and Ross Introduced and read first time: February 5, 2025 Assigned to: Health and Government Operations Committee Report: Favorable with amendments House action: Adopted Read second time: March 3, 2025 CHAPTER AN ACT concerning Commission on Behavioral Health Care Treatment and Access - Membership and Workgroups FOR the purpose of altering the membership of the Commission on Behavioral Health Care Treatment and Access; requiring the Commission on Behavioral Health Care <u>Treatment and Access</u> to establish a workgroup on the improvement of health, social, and economic outcomes related to substance use; and generally relating to the Commission on Behavioral Health Care Treatment and Access. BY repealing and reenacting, without amendments, Article – Health – General Section 13–4802 Annotated Code of Maryland (2023 Replacement Volume and 2024 Supplement) BY repealing and reenacting, with amendments, Article – Health – General Section 13-4803 and 13-4806 Annotated Code of Maryland (2023 Replacement Volume and 2024 Supplement)

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

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

That the Laws of Maryland read as follows:

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

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,



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1			Article - Health - General
2	13–4802.		
3 4			Commission on Behavioral Health Care Treatment and Access, which with the Behavioral Health Advisory Council.
5	13-4803.		
6	(a)	The (Sommission consists of the following members:
7 8	the Senate;	(1)	One member of the Senate of Maryland, appointed by the President of
9 10	House;	(2)	One member of the House of Delegates, appointed by the Speaker of the
11		(3)	One representative of Maryland's Congressional Delegation;
12		(4)	The Secretary of Health, or the Secretary's designee;
13		(5)	The Secretary of Human Services, or the Secretary's designee;
14		(6)	The Secretary of Juvenile Services, or the Secretary's designee;
15 16	designee;	(7)	The Deputy Secretary for Behavioral Health, or the Deputy Secretary's
17 18	designee;	(8)	The Maryland Insurance Commissioner, or the Commissioner's
19 20	Commission	(9) , or th	The Executive Director of the Health Services Cost Review e Executive Director's designee;
21 22	the Executiv		The Executive Director of the Maryland Health Care Commission, or ector's designee;
23 24	Commission	, ,	The Executive Director of the Maryland Community Health Resources e Executive Director's designee;
25 26	exchange, or	. ,	The Executive Director of the State-designated health information Executive Director's designee;
27		(13)	The Executive Director of the Governor's Office of Crime Prevention

and Policy, or the Executive Director's designee;

$\begin{array}{c} 1 \\ 2 \end{array}$	(14) Secretary's design		Secretary of the Maryland Department of Disabilities, or the				
3 4	(15) Services, or the Se		Secretary of the Department of Public Safety and Correctional y's designee;				
5 6	(16) The Special Secretary of the Governor's Office for Children, or the Special Secretary's designee;						
7 8	(17) designee;	The f	Special Secretary of Opioid Response, or the Special Secretary's				
9	(18)	The S	Secretary of Aging, or the Secretary's designee; and				
10	(19)	The f	ollowing members appointed by the Governor:				
11 12	Maryland;	(i)	One representative of the Mental Health Association of				
13		(ii)	One representative of the National Alliance on Mental Illness;				
14 15	Association of Mar	(iii) yland;	One representative of the Community Behavioral Health				
16 17	services;	(iv)	One representative of a provider of residential behavioral health				
18		(v)	One representative of an acute care hospital;				
19		(vi)	One representative of an inpatient psychiatric hospital;				
20 21	health services;	(vii)	One individual with experience as a consumer of behavioral				
22 23	consumer of behav		One family member of an individual with experience as a realth services;				
$\begin{array}{c} 24 \\ 25 \end{array}$	services;	(ix)	One representative of a provider of substance use treatment				
26		(x)	One representative of a school-based health center;				
27		(xi)	One individual with expertise in social determinants of health;				
28		(xii)	One individual with expertise in health economics;				
29		(xiii)	One representative of a health insurance carrier;				

1	(xiv) One representative of a managed care organization;
2	(xv) One representative from the Office of the Public Defender;
3	(xvi) One representative of the Developmental Disability Coalition;
4 5	(xvii) One representative of the Maryland Chapter of the National Council on Alcoholism and Drug Dependence;
6	(xviii) One representative of the Maryland Psychological Association;
7	(xix) One representative of Disability Rights Maryland;
8	(xx) One representative of a Federally Qualified Health Center;
9	(xxi) One representative of a local behavioral health authority;
10 11	(xxii) One individual with an intellectual disability who uses self-directed behavioral health services; [and]
12 13	(xxiii) One representative of the Maryland State's Attorneys' Association;
14 15	(XXIV) ONE REPRESENTATIVE OF A PROVIDER OF HARM REDUCTION SERVICES;
16 17	(XXV) ONE INDIVIDUAL WITH EXPERTISE IN PROVIDING HOUSING OPTIONS FOR INDIVIDUALS WHO HAVE OR PREVIOUSLY HAD A SUBSTANCE USE
18 19 20	(XXVI) ONE INDIVIDUAL WITH EXPERTISE IN PROVIDING HEALTH CARE SERVICES TO INDIVIDUALS EXPERIENCING HOMELESSNESS;
21 22	(XXVII) ONE INDIVIDUAL WITH PRIOR LIVED EXPERIENCE WITH A SUBSTANCE USE DISORDER;
23 24	(XXVIII) ONE INDIVIDUAL WITH EXPERIENCE SEEKING OR RECEIVING TREATMENT FOR A SUBSTANCE USE DISORDER WHILE INCARCERATED;
25 26	(XXIX) ONE INDIVIDUAL WITH EXPERIENCE AS A PARTICIPANT IN A DRUG COURT PROGRAM; AND
27 28	(XXX) ONE INDIVIDUAL WITH EXPERTISE IN DRUG POLICY REFORM.

1	(b)	To the extent practicable, the membership of the Commission shall reflect the
2	geographic s	and ethnic diversity of the State.
3	(e)	The Governor, the President of the Senate, and the Speaker of the House
4	jointly shall	designate the chair of the Commission.
5	(d)	The Department shall provide staff for the Commission.
6	(e)	A member of the Commission:
7		(1) May not receive compensation as a member of the Commission; but
8		(2) Is entitled to reimbursement for expenses under the Standard State
9	Travel Regu	lations, as provided in the State budget.
10	(f)	The Commission shall meet at least three times per year at the times and
11	places deter	mined jointly by the Commission and the Behavioral Health Advisory Council.
12	13–4806.	
13	(a)	The Commission shall establish the following workgroups:
14		(1) Geriatric behavioral health;
15 16	and individu	(2) Youth behavioral health, individuals with developmental disabilities, als with complex behavioral health needs;
17		(3) Criminal justice—involved behavioral health; [and]
18 19	and financin	(4) Behavioral health workforce development, infrastructure, coordination,
10	and manch	ig, AND
20 21	RELATED T	(5) IMPROVEMENT OF HEALTH, SOCIAL, AND ECONOMIC OUTCOMES O SUBSTANCE USE.
00	(D)	The workshould beginned there are alleged to the first
22 23	(B) SECTION SI	THE WORKGROUP REQUIRED UNDER SUBSECTION (A)(5) OF THIS HALL:
24		(1) EVALUATE AND REVIEW:
25 26 27		(I) THE AVAILABILITY, AFFORDABILITY, AND ACCESSIBILITY MENT FOR SUBSTANCE USE DISORDER AND RECOVERY SUPPORT INCLUDING HOUSING AND EMPLOYMENT SERVICES, IN THE STATE;

- 1 (II) THE NUMBER AND PERCENTAGE OF INDIVIDUALS WHO ARE
- 2 DIRECTED TO SERVICES DESCRIBED IN ITEM (I) OF THIS ITEM BY THE CRIMINAL
- 3 JUSTICE SYSTEM OF THE STATE;
- 4 (III) THE HEALTH OUTCOMES AFTER RECEIVING SERVICES
- 5 DESCRIBED IN ITEM (I) OF THIS ITEM DISAGGREGATED BY WHETHER THE SERVICES
- 6 WERE SOUGHT VOLUNTARILY OR MANDATED BY THE CRIMINAL JUSTICE SYSTEM OF
- 7 THE STATE;
- 8 (IV) THE IMPACT OF CURRENT CRIMINAL JUSTICE
- 9 INVOLVEMENT RELATED TO SUBSTANCE USE IN THE STATE ON THE HEALTH AND
- 10 WELL-BEING OF INDIVIDUALS, FAMILIES, AND COMMUNITIES;
- 11 (V) THE COST TO THE STATE AND LOCAL GOVERNMENTS
- 12 RESULTING FROM CURRENT CRIMINAL JUSTICE INVOLVEMENT RELATED TO
- 13 SUBSTANCE USE IN THE STATE;
- 14 (VI) THE EQUITABLE APPLICATION OF CURRENT CRIMINAL
- 15 JUSTICE INVOLVEMENT RELATED TO SUBSTANCE USE IN THE STATE;
- 16 (VII) THE CURRENT RESEARCH ON THE EFFICACY OF
- 17 VOLUNTARY TREATMENT FOR SUBSTANCE USE DISORDER COMPARED TO
- 18 TREATMENT MANDATED BY CRIMINAL JUSTICE SYSTEMS, INCLUDING CRIMINAL
- 19 JUSTICE SYSTEMS OUTSIDE THE STATE; AND
- 20 (VIII) THE AVAILABILITY AND ACCESSIBILITY OF DATA ON THE
- 21 ISSUES ENUMERATED IN THIS ITEM; AND
- 22 (2) EVALUATE AND REVIEW THE DEPARTMENT'S REGULATIONS ON
- 23 THE STANDARDS FOR THE DISCHARGE OF PATIENTS FROM SUBSTANCE USE
- 24 TREATMENT PROGRAMS TO ASSESS WHETHER THE STANDARDS ADEQUATELY
- 25 CONSIDER THE PATIENT'S MENTAL HEALTH OR SUBSTANCE USE DISORDER
- 26 DIAGNOSIS AND THE IMPACT OF THE DISCHARGE STANDARDS ON THE PATIENT; AND
- 27 (2) (3) (I) MAKE RECOMMENDATIONS ON CHANGES TO STATE
- 28 LAWS, POLICIES, AND PRACTICES NEEDED TO MITIGATE THE HARMS RELATED TO
- 29 THE CRIMINALIZATION OF SUBSTANCE USE WITH THE GOAL OF IMPROVING THE
- 30 PUBLIC HEALTH AND SAFETY OF RESIDENTS OF THE STATE; AND
- 31 (II) MAKE RECOMMENDATIONS ON CHANGES TO STATE LAWS,
- 32 POLICIES, AND PRACTICES RELATED TO THE DISCHARGE OF PATIENTS FROM
- 33 SUBSTANCE USE TREATMENT PROGRAMS TO CONSIDER THE PATIENT'S MENTAL
- 34 HEALTH OR SUBSTANCE USE DISORDER DIAGNOSIS IN MAKING AN APPROPRIATE
- 35 PLACEMENT.

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[(b)] (C) The workgroups established under subsection (a) of this section shall meet at least two times per year at the times and places determined by the workgroup.
[(c)] (D) The workgroups established under subsection (a) of this section shall include members of the Commission and may include individuals invited by the Commission or the Behavioral Health Advisory Council to serve on the workgroup.
[(d)] (E) On or before July 1 each year, beginning in 2024, the workgroups established under subsection (a) of this section shall report and make recommendations to the Commission and the Behavioral Health Advisory Council.
SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2025 .
Approved:
Governor.
Speaker of the House of Delegates.
President of the Senate.