

HOUSE BILL 800

F1

6lr0740

By: **Delegate Wolek**

Introduced and read first time: February 4, 2026

Assigned to: Ways and Means

A BILL ENTITLED

1 AN ACT concerning

2 **Education – Behavioral Health and Student Well-Being and Human Flourishing**
3 **(Maryland Student Well-Being and Flourishing Act)**

4 FOR the purpose of updating certain provisions of the Blueprint for Maryland’s Future that
5 refer to “behavioral health” to be inclusive of “student well-being and human
6 flourishing”; amending the purposes, membership, and duties of the Maryland
7 Consortium on Coordinated Community Supports to include the furtherance of
8 student well-being and human flourishing; and generally relating to student
9 well-being and human flourishing.

10 BY repealing and reenacting, with amendments,
11 Article – Education
12 Section 5–212(a), 5–411(f)(2), 6–122(a), 7–447(a) and (d)(4), and 7–447.1(a), (c),
13 (d)(3), (k), (l), (p), and (r)
14 Annotated Code of Maryland
15 (2025 Replacement Volume and 2025 Supplement)

16 BY repealing and reenacting, without amendments,
17 Article – Education
18 Section 5–411(a), 7–447(b), and 7–447.1(q)
19 Annotated Code of Maryland
20 (2025 Replacement Volume and 2025 Supplement)

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

23 **Article – Education**

24 5–212.

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



(a) The target per pupil foundation amount includes costs associated with implementing the Blueprint for Maryland's Future including:

(1) Increasing salaries;

(2) Additional teachers to provide professional learning and collaborative time for teachers;

(3) Career counseling;

(4) Behavioral health **AND STUDENT WELL-BEING AND HUMAN FLOURISHING**;

(5) Instructional opportunities for students who are college and career ready and those who are not;

(6) Maintenance and operation of schools;

(7) Supplies and materials for teachers; and

(8) Educational technology including digital devices, broadband connectivity, and information technology staff.

5-411.

(a) In this section, "Program" means the Expert Review Team Program.

(f) (2) An Expert Review Team may, in the course of its work under paragraph (1) of this subsection:

(i) Perform evaluations of behavioral health services provided in a school **AND OVERALL STUDENT WELL-BEING AND HUMAN FLOURISHING, AS DEFINED IN § 7-447 OF THIS ARTICLE**; and

(ii) If the Team determines that poor student performance is due, in part, to missing or inadequate behavioral health services **OR IMPEDIMENTS TO STUDENT WELL-BEING AND HUMAN FLOURISHING, AS DEFINED IN § 7-447 OF THIS ARTICLE**, make recommendations to the appropriate entities to correct the identified problems.

6-122.

(a) Except as provided in § 6-704.1 of this title and beginning on or before July 1, 2018, the State Board shall require all certificated school personnel who have direct contact with students on a regular basis to complete training on or before December 1 each year, by a method determined by each county board, in the skills required to:

(1) Understand and respond to youth suicide risk;

(2) Identify professional resources to help students in crisis;

(3) Recognize student behavioral health issues, **INCLUDING THOSE ARISING OUT OF PROBLEMS WITH STUDENT WELL-BEING AND HUMAN FLOURISHING, AS DEFINED IN § 7-447 OF THIS ARTICLE;**

(4) Recognize students experiencing trauma or violence out of school and refer students to behavioral health services; and

(5) If the school is a community school, support any students needing the services at a community school.

7-447.

(a) (1) In this section the following words have the meanings indicated.

(2) “Behavioral health services” means trauma-informed prevention, intervention, and treatment services for the social-emotional, psychological, and behavioral health of students, including mental health and substance use disorders.

(3) “Coordinated community supports partnership” has the meaning stated in § 7-447.1 of this subtitle.

(4) **“STUDENT WELL-BEING AND HUMAN FLOURISHING” MEANS A STUDENT’S PROGRESS AND SUCCESS ALONG EACH OF THE FOLLOWING EIGHT DIMENSIONS OF WELL-BEING IDENTIFIED BY THE FEDERAL SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION:**

(I) **SOCIAL WELL-BEING;**

(II) **ENVIRONMENTAL WELL-BEING;**

(III) **PHYSICAL WELL-BEING;**

(IV) **EMOTIONAL WELL-BEING;**

(V) **SPIRITUAL WELL-BEING;**

(VI) **OCCUPATIONAL WELL-BEING;**

(VII) **INTELLECTUAL WELL-BEING; AND**

(VIII) **FINANCIAL WELL-BEING.**

(b) Each local school system shall appoint a behavioral health services coordinator.

(d) (4) The staff in the Department will be responsible for close collaboration with other youth-serving agencies, the Maryland Consortium of Coordinated Community Supports, and the Maryland Longitudinal Data System Center to establish:

(i) Shared goals;

(ii) Processes to collect and share data; and

(iii) Ways to leverage and blend funding to support behavioral health **AND OVERALL STUDENT WELL-BEING AND HUMAN FLOURISHING** in schools and community-based settings.

7–447.1.

(a) (1) In this section the following words have the meanings indicated.

(2) “Behavioral health services” has the meaning stated in § 7–447 of this subtitle.

(3) “Commission” means the Maryland Community Health Resources Commission.

(4) “Consortium” means the Maryland Consortium on Coordinated Community Supports established under subsection (b) of this section.

(5) “Coordinated community supports” means a holistic, nonstigmatized, and coordinated approach, including among the following persons, to meeting students’ behavioral health needs, addressing related challenges, and providing community services and supports to the students:

(i) Teachers, school leadership, and student instructional support personnel;

(ii) Local school systems;

(iii) Local community schools;

(iv) Behavioral health coordinators appointed under § 7–447 of this subtitle;

(v) Local health departments;

(vi) Nonprofit hospitals;

- (vii) Other youth–serving governmental entities;
- (viii) Other local youth–serving community entities;
- (ix) Community behavioral health providers;
- (x) Telemedicine providers;
- (xi) Federally qualified health centers; and
- (xii) Students, parents, and guardians.

(6) “Coordinated community supports partnership” means an entity formed to deliver coordinated community supports.

(7) “National Center for School Mental Health” means the National Center for School Mental Health at the University of Maryland, Baltimore Campus.

(8) “STUDENT WELL–BEING AND HUMAN FLOURISHING” HAS THE MEANING STATED IN § 7–447 OF THIS SUBTITLE.

(c) The purposes of the Consortium are to:

(1) Support the development of coordinated community supports partnerships to meet student behavioral health needs and other related challenges, **INCLUDING IMPROVING STUDENT WELL–BEING AND HUMAN FLOURISHING**, in a holistic, nonstigmatized, and coordinated manner;

(2) Provide expertise for the development of best practices [in the] **FOR:**

(I) THE delivery of student behavioral health services, supports, and wraparound services; and

(II) INCREASING STUDENT WELL–BEING AND HUMAN FLOURISHING; AND

(3) Provide technical assistance to local school systems to support positive classroom environments and the closing of achievement gaps so that all students can succeed.

(d) The Consortium consists of:

(3) The following members appointed by the Governor:

(i) One representative of the behavioral health community with expertise in telehealth;

(ii) One representative of local departments of social services; [and]

(iii) One representative of local departments of health; and

(IV) ONE INDIVIDUAL WITH EXPERTISE IN STUDENT WELL-BEING AND HUMAN FLOURISHING; AND

(k) The Consortium shall:

(1) Develop a statewide framework for the creation of coordinated community supports partnerships;

(2) Ensure that community supports partnerships are structured in a manner that provides community services and supports in a holistic and nonstigmatized manner that meets behavioral health, **STUDENT WELL-BEING AND HUMAN FLOURISHING**, and other wraparound needs of students and is coordinated with any other youth-serving government agencies interacting with the students;

(3) Develop a model for expanding available behavioral health services and supports to all students in each local school system through:

(i) The maximization of public funding through the Maryland Medical Assistance Program, including billing for Program administrative costs, or other public sources;

(ii) Commercial insurance participation;

(iii) The implementation of a sliding scale for services based on family income; and

(iv) The participation of nonprofit hospitals through community benefit requirements;

(4) Provide guidance and support to the Commission for the purpose of developing and implementing a grant program to award grants to coordinated community supports partnerships with funding necessary to deliver services and supports to meet the holistic behavioral health needs, **STUDENT WELL-BEING AND HUMAN FLOURISHING NEEDS**, and other related challenges facing the students proposed to be served by the coordinated community supports partnership and that sets reasonable administrative costs for the coordinated community supports partnership;

(5) Evaluate how a reimbursement system could be developed through the Maryland Department of Health or a private contractor to reimburse providers

1 participating in a coordinated community supports partnership and providing services and
2 supports to students who are uninsured and for the difference in commercial insurance
3 payments and Maryland Medical Assistance Program fee-for-service payments;

4 (6) In consultation with the Department, develop best practices for the
5 implementation of and related to the creation of a positive classroom environment for all
6 students using evidence-based methods that recognize the disproportionality of classroom
7 management referrals, including by:

8 (i) Creating a list of programs and classroom management practices
9 that are evidence-based best practices to address student behavioral health issues in a
10 classroom environment;

11 (ii) Evaluating relevant regulations and making recommendations
12 for any necessary clarifications, as well as developing a plan to provide technical assistance
13 in the implementation of the regulations by local school systems to create a positive
14 classroom environment; and

15 (iii) Developing a mechanism to ensure that all local school systems
16 implement relevant regulations in a consistent manner; and

17 (7) Develop a geographically diverse plan that uses both school-based
18 behavioral health services and coordinated community supports partnerships to ensure
19 that each student in each local school system has access to services and supports that meet
20 the student's behavioral health needs and related challenges within a 1-hour drive of a
21 student's residence.

22 (l) A coordinated community supports partnership shall provide systemic
23 services to students in a manner that [is]:

24 (1) **[Community-based] IS COMMUNITY-BASED;**

25 (2) **[Family-driven] IS FAMILY-DRIVEN** and youth-guided; [and]

26 (3) **[Culturally] IS CULTURALLY** competent and that provides access to
27 high-quality, acceptable services for culturally diverse populations; **AND**

28 **(4) INCLUDES AT LEAST ONE EXTRACURRICULAR PROGRAM THAT**
29 **PROMOTES STUDENT WELL-BEING AND HUMAN FLOURISHING.**

30 (p) (1) In this subsection, "Fund" means the Coordinated Community Supports
31 Partnership Fund.

32 (2) There is a Coordinated Community Supports Partnership Fund.

(3) The purpose of the Fund is to support the delivery of services and supports provided to students to meet their holistic behavioral health needs and address other related challenges.

(4) The Commission shall administer the Fund and the provision of grants and reimbursements under the Fund.

(5) (i) The Fund is a special, nonlapsing fund that is not subject to § 7-302 of the State Finance and Procurement Article.

(ii) The State Treasurer shall hold the Fund separately, and the Comptroller shall account for the Fund.

(6) The Fund consists of:

(i) Money appropriated in the State budget to the Fund;

(ii) Interest earnings; and

(iii) Any other money from any other source accepted for the benefit of the Fund.

(7) Except as provided in paragraph (8) of this subsection, the Fund may be used by the Commission only for:

(i) Providing reimbursement, under a memorandum of understanding, to the National Center for School Mental Health and other technical assistance providers to support the work of the Consortium;

(ii) Providing grants to coordinated community supports partnerships to deliver services and supports to meet students' holistic behavioral health needs, **INCLUDING EXTRACURRICULAR ACTIVITIES THAT PROMOTE STUDENT WELL-BEING AND HUMAN FLOURISHING**, and to address other related challenges; and

(iii) Paying any associated administrative costs.

(8) For fiscal year 2025 only, the Fund may be used to:

(i) Provide school-based behavioral health services; and

(ii) Reimburse the Medical Care Programs Administration for school-based behavioral health services provided on a fee-for-service basis through a Medicaid waiver.

(9) The Governor shall include in the annual budget bill the following appropriations for the Fund:

- (i) \$25,000,000 in fiscal year 2022;
- (ii) \$50,000,000 in fiscal year 2023;
- (iii) \$85,000,000 in fiscal year 2024;
- (iv) \$40,000,000 in fiscal year 2025;
- (v) \$70,000,000 in fiscal year 2026; and
- (vi) \$100,000,000 in fiscal year 2027 and each fiscal year thereafter.

(10) (i) The State Treasurer shall invest the money of the Fund in the same manner as other State money may be invested.

(ii) Any interest earnings of the Fund shall be credited to the Fund.

(11) Expenditures from the Fund may be made only in accordance with the State budget.

(q) (1) Any grant funding or local school system implementation assistance provided under this section through the Commission and coordinated community supports partnerships shall be supplemental to, and may not supplant, existing funding provided as of fiscal year 2022 to local school systems through local government expenditures or local school system expenditures, or other funding sources, for school-based behavioral health personnel, services, supports, or other school-based behavioral health purposes.

(2) The State funding provided under the Fund is supplemental to and not intended to take the place of funding that would otherwise be appropriated to the Maryland Community Health Resources Commission Fund in the State budget.

(r) Beginning on July 1, 2022, and each July 1 thereafter, the Consortium shall submit to the Accountability and Implementation Board, the Governor, and, in accordance with § 2-1257 of the State Government Article, the General Assembly, a report on:

(1) The activities of the Consortium;

(2) The creation of coordinated community supports partnerships and the area served by each partnership;

(3) Grants awarded to coordinated community supports partnerships;
[and]

**(4) THE USE OF GRANTS TO SUPPORT EXTRACURRICULAR ACTIVITIES
THAT PROMOTE STUDENT WELL-BEING AND HUMAN FLOURISHING;**

1 **(5) TRAINING AND TECHNICAL ASSISTANCE PROVIDED BY THE**
2 **CONSORTIUM TO SUPPORT STUDENT WELL-BEING AND HUMAN FLOURISHING; AND**

3 **[(4)] (6)** All other activities of the Consortium to carry out the
4 requirements of this section.

5 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect July
6 1, 2026.