

SENATE BILL 561

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By: **Senator Sydnor**

Introduced and read first time: February 4, 2026

Assigned to: Finance

A BILL ENTITLED

1 AN ACT concerning

2 **Maryland Medical Assistance Program – Community Violence Prevention**
3 **Services – Reimbursement and Provision of Services**

4 FOR the purpose of establishing requirements and prohibitions governing the provision of
5 community violence prevention services through telehealth under the Maryland
6 Medical Assistance Program; requiring the Program to reimburse community
7 violence prevention services that are provided in–person regardless of the location
8 at which the services were provided; altering the minimum number of training and
9 certification programs for certified violence prevention professionals that the
10 Maryland Department of Health is required to approve; prohibiting certain entities
11 that employ or contract with a certified violence prevention professional from being
12 required to maintain an affiliation with a hospital or trauma center; and generally
13 relating to community violence prevention services provided under the Maryland
14 Medical Assistance Program.

15 BY repealing and reenacting, with amendments,
16 Article – Health – General
17 Section 15–141.3
18 Annotated Code of Maryland
19 (2023 Replacement Volume and 2025 Supplement)

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

22 **Article – Health – General**

23 15–141.3.

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

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



(2) “Certified violence prevention professional” means a prevention professional who meets the requirements of subsection (c) of this section.

(3) “Community violence” means intentional acts of interpersonal violence committed in public areas by individuals who are not family members or intimate partners of the victim.

(4) (i) “Community violence prevention services” means evidence-based, trauma-informed, supportive, and nonpsychotherapeutic services provided by a certified violence prevention professional, within or outside a clinical setting, for the purpose of promoting improved health outcomes and positive behavioral change, preventing injury recidivism, and reducing the likelihood that an individual who is the victim of community violence will commit or promote violence.

(ii) “Community violence prevention services” includes peer support and counseling, mentorship, conflict mediation, crisis intervention, targeted case management referrals to certified or licensed health care professionals or social services providers, patient education, and screening services to victims of violence.

(5) “DISTANT SITE PROVIDER” MEANS THE CERTIFIED VIOLENCE PREVENTION SPECIALIST WHO PROVIDES COMMUNITY VIOLENCE PREVENTION SERVICES TO A PROGRAM RECIPIENT AT AN ORIGINATING SITE FROM A DIFFERENT PHYSICAL LOCATION THAN THE LOCATION OF THE PROGRAM RECIPIENT.

~~[(5)]~~ (6) “Interpersonal violence” means the intentional use of physical force or power against another individual by an individual or a small group of individuals.

(7) “ORIGINATING SITE” MEANS THE LOCATION OF THE PROGRAM RECIPIENT DURING THE PROVISION OF COMMUNITY VIOLENCE PREVENTION SERVICES THROUGH TELEHEALTH.

~~[(6)]~~ (8) “Prevention professional” has the meaning provided by the National Uniform Claim Committee, or its successor, under Code Number 405300000X.

(9) (I) “TELEHEALTH” MEANS THE DELIVERY OF COMMUNITY VIOLENCE PREVENTION SERVICES TO A PROGRAM RECIPIENT AT AN ORIGINATING SITE BY A CERTIFIED VIOLENCE PREVENTION PROFESSIONAL THROUGH THE USE OF TECHNOLOGY-ASSISTED COMMUNICATION.

(II) “TELEHEALTH” INCLUDES:

1. SYNCHRONOUS AND ASYNCHRONOUS INTERACTIONS;

AND

1 **2. AN AUDIO-ONLY TELEPHONE CONVERSATION**
2 **BETWEEN A CERTIFIED VIOLENCE PREVENTION PROFESSIONAL AND A PROGRAM**
3 **RECIPIENT THAT RESULTS IN THE DELIVERY OF BILLABLE, COVERED COMMUNITY**
4 **VIOLENCE PREVENTION SERVICES.**

5 **(III) “TELEHEALTH” DOES NOT INCLUDE THE PROVISION OF**
6 **COMMUNITY VIOLENCE PREVENTION SERVICES SOLELY THROUGH:**

7 **1. AN E-MAIL MESSAGE; OR**

8 **2. A FACSIMILE TRANSMISSION.**

9 (b) The Program [shall]:

10 **(1) SHALL** provide community violence prevention services to Program
11 recipients who have:

12 [(1)] (i) **1.** Been exposed to community violence; or

13 [(ii)] **2.** A personal history of injury sustained as a result of an act
14 of community violence; and

15 [(2)] **(II)** Been referred by a certified or licensed health care provider or
16 social services provider to a certified violence prevention professional to receive community
17 violence prevention services after the provider makes a determination that the Program
18 recipient is at an elevated risk of violent injury or retaliation resulting from another act of
19 community violence;

20 **(2) SHALL REIMBURSE FOR COMMUNITY VIOLENCE PREVENTION**
21 **SERVICES PROVIDED UNDER ITEM (1) OF THIS SUBSECTION THAT ARE PROVIDED IN**
22 **PERSON, REGARDLESS OF THE LOCATION AT WHICH THE SERVICES WERE**
23 **PROVIDED;**

24 **(3) SHALL:**

25 **(I) PROVIDE COMMUNITY VIOLENCE PREVENTION SERVICES**
26 **APPROPRIATELY DELIVERED THROUGH TELEHEALTH TO PROGRAM RECIPIENTS**
27 **REGARDLESS OF THE LOCATION OF THE PROGRAM RECIPIENT AT THE TIME**
28 **TELEHEALTH SERVICES ARE PROVIDED; AND**

29 **(II) ALLOW A DISTANT SITE PROVIDER TO PROVIDE COMMUNITY**
30 **VIOLENCE PREVENTION SERVICES TO A PROGRAM RECIPIENT FROM ANY LOCATION**
31 **AT WHICH THE COMMUNITY VIOLENCE PREVENTION SERVICES MAY BE**
32 **APPROPRIATELY DELIVERED THROUGH TELEHEALTH; AND**

1 **(4) MAY NOT EXCLUDE FROM COVERAGE A COMMUNITY VIOLENCE**
2 **PREVENTION SERVICE:**

3 **(I) SOLELY BECAUSE IT IS PROVIDED THROUGH TELEHEALTH**
4 **AND IS NOT PROVIDED THROUGH AN IN-PERSON CONSULTATION OR CONTACT**
5 **BETWEEN A CERTIFIED VIOLENCE PREVENTION PROFESSIONAL AND A PROGRAM**
6 **RECIPIENT; OR**

7 **(II) PROVIDED TO A PROGRAM RECIPIENT IN PERSON SOLELY**
8 **BECAUSE THE COMMUNITY VIOLENCE PREVENTION SERVICE MAY ALSO BE**
9 **PROVIDED THROUGH TELEHEALTH.**

10 (c) A prevention professional seeking certification as a certified violence
11 prevention professional shall:

12 (1) Complete [an accredited] A training and certification program for
13 certified violence prevention professionals, approved in accordance with subsection (d) of
14 this section; and

15 (2) Maintain the certification completed under item (1) of this subsection.

16 (d) [On or before January 1, 2023, the] **THE** Department shall approve at least
17 [one accredited] **THREE** training and certification [program] **PROGRAMS** for certified
18 violence prevention professionals, which shall include:

19 (1) At least 35 hours of initial training, addressing the following:

20 (i) The profound effects of trauma and violence and the basics of
21 trauma-informed care;

22 (ii) Community violence prevention strategies, including conflict
23 mediation and retaliation prevention related to community violence;

24 (iii) Case management and advocacy practices; and

25 (iv) Patient privacy and the federal Health Insurance Portability and
26 Accountability Act of 1996; and

27 (2) At least 6 hours of continuing education every 2 years.

28 (e) An entity that employs or contracts with a certified violence prevention
29 professional to provide community violence prevention services [shall]:

1 (1) ~~[Maintain]~~ **SHALL MAINTAIN** documentation that the certified
2 violence prevention professional has met the requirements of subsection (c) of this section;
3 ~~[and]~~

4 (2) ~~[Ensure]~~ **SHALL ENSURE** that the certified violence prevention
5 professional is providing community violence prevention services in compliance with any
6 applicable standard of care, rule, regulation, and State or federal law; **AND**

7 (3) **MAY NOT BE REQUIRED TO MAINTAIN AN AFFILIATION WITH A**
8 **HOSPITAL OR TRAUMA CENTER.**

9 (f) This section may not be construed to alter the scope of practice for any health
10 care professional.

11 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
12 October 1, 2026.