MGA_CoryMcCray_FAV_SB519 Uploaded by: Senator McCray, Senator McCray

Position: FAV

CORY V. McCray Legislative District 45 Baltimore City

Assistant Deputy Majority Leader

Budget and Taxation Committee

Capital Budget Subcommittee Health and Human Services Subcommittee Pensions Subcommittee



THE SENATE OF MARYLAND Annapolis, Maryland 21401

James Senate Office Building 11 Bladen Street, Room 221 Annapolis, Maryland 21401 410-841-3165 · 301-858-3165 800-492-7122 Ext. 3165 Cory.Mccray@senate.state.md.us

Vote Yes on Senate Bill SB 519

Bill Title: Public Health - Behavioral Health Programs and Health Care Facilities - Safety Plan

Hearing Date: February 18, 2020 at 1:00 p.m.

Chair: Delores G. Kelley, Vice Chair: Brian J. Feldman

I write to you today in **support** of Senate Bill SB 519. This bill is important because it will require that in order for behavioral health programs to receive licensing, they must first create and implement a safety plan in order to ensure the safety of the individuals served at the facility. This safety plan will also ensure the safety of the community residents surrounding the behavioral health program.

The purpose of this bill is to require that the regulations adopted by the Behavioral Health Administration under certain provisions of law governing requirements for the licensure of behavioral health programs include a requirement that a behavioral health program is to establish and implement a safety plan in order to ensure the safety of the individuals served by the health facility as well as the residents who live near the facility.

In efforts to ensure the safety and well being of behavioral health program participants and community residents, we hope that you will move for a **favorable** report of Senate Bill 519.

Respectfully,

Cory V. McCray State Senator



Zeke Cohen

Councilmember First District

513 City Hall • Baltimore, MD 21202 • 410-396-4821 • ZEKE.COHEN@BALTIMORECITY.GOV

February 14, 2020

Finance Committee
Miller Senate Office Building, 3 East Wing
11 Bladen St
Annapolis, MD 21401-1991

RE: Support of Senate Bill 519: Public Health – Behavioral Health Programs and Health Care Facilities – Safety Plan

Chair Delores G.Kelley and Vice-Chair Brian J. Feldman,

I write to you today in <u>support</u> of Senate Bill 519. This bill is important because it will require that in order for behavioral health programs to receive licensing, they must first create and implement a safety plan in order to ensure the safety of the individuals served at the facility. This safety plan will also ensure the safety of the community residents surrounding the behavioral health program.

The purpose of this bill is to require that the regulations adopted by the Behavioral Health Administration under certain provisions of law governing requirements for the licensure of behavioral health programs include a requirement that a behavioral health program is to establish and implement a safety plan in order to ensure the safety of the individuals served by the health facility as well as the residents who live near the facility.

In efforts to ensure the safety and well-being of behavioral health program participants and community residents, we hope that you will move for a **favorable** report of Senate Bill 519.

Sincerely,

Councilmember Zeke Cohen

BALTIMORE CITY COUNCIL



City Hall, Room 550 100 N. Holliday St. Baltimore, Md 21202 410-396-4814 410-545-7585 fax marypat.clarke@baltimorecity.gov February 16, 2020

Chairwoman Delores Kelley, Vice Chairman Brian Feldman and Members Finance Committee
Maryland State Senate
3 East Miller Senate Building, 11 Bladen Street
Annapolis, Maryland 21401-1991

Re: Support for Senate Bills 519, 520, 521, 522, lead sponsor Senator Cory McCray

Distinguished Chairwoman Kelley, Vice Chairman Feldman, and Members, Finance Committee: Senator Cory McCray and I represent portions of the same neighborhood and understand that, despite a crucial public need for services, various State health and social service programs compromise their missions by cropping-up without advance notice to surrounding neighbors, a frequent and disrespectful occurrence in our most disadvantaged communities.

Many of such programs actually "victimize" the very persons they are designed to help through inadequate attention and lack of professional oversight. Meanwhile, for lack of notice and discussion, programs are frequently regarded as intrusions and disruptions of neighborhood security.

These four bills address specific improvements which contribute to better treatments for patients and more respectful partnerships with affected neighbors. I urge your support and thank you for your consideration.

<u>Senate Bill 0519. Public Health–Behavioral Health Programs and Health Care Facilities – Safety Plan</u>

Bill 519 prohibits licensure until a proposed facility provides a safety plan for its patients and for "the community surrounding the behavioral health program." This ensures that the community has the chance to negotiate on behalf of itself and on behalf of patients yet to be identified, a process that rarely occurs in my experience. "Earning" licensure in such circumstances is the ideal safeguard for achieving the safety and respect due all parties.

Vote "Yes" on Senate Bill 519

Bill Title: Public Health - Behavioral Health Programs and Healthcare Facilities - Safety Plan

Hearing Date: February 18, 2020 at 1 p.m.

Chair: Delores G. Kelly, Vice Chair: Brian J. Feldman

Dr. Angela Jancius 3022 Christopher Avenue Baltimore, MD 21214 wniapresident@gmail.com

Honorable Representatives,

I am sending written testimony in support of Senate Bill SB 519. I am the President of the Westfield Neighborhood Improvement Association (WNIA). I have a doctorate in Social Anthropology, and am writing today as a community advocate and resident of Baltimore City.

SB Bill 519 would require behavioral health programs to have a safety plan in place before a license to operate is granted (both for individuals served by the facility, and for residents in the surrounding community). There are many behavioral health programs in Northeast Baltimore, and residents recognize the importance of facilities that are well-run, and have oversight and planning. Individuals overcoming substance abuse and mental health problems are vulnerable. They may try and fail, several times, in their process of receiving treatment. A behavioral health facility that accepts the responsibility of helping an individual should also feel responsible for their safety, and the safety of the community. If an individual abandons treatment, and is in need of assistance, but does not have a permanent residence in the area, how should the community respond? How would a facility deal with populations that might take advantage of the individuals they serve? And what measures have they set in place to deal with safety issues in the community that arise from their facility? I thank you for supporting Senate Bill SB 519. Safety plans are good for everyone, and they hold behavioral health facilities accountable.

Sincerely,

Angela Jancius, Ph.D.

President, Westfield Neighborhood Improvement Association (WNIA)

BALTIMORE CITY COUNCIL



Councilwoman Danielle McCray Second District

ROOM 525, CITY HALL 100 N. HOLLIDAY STREET, BALTIMORE, MARYLAND 21202 TELEPHONE, 410-396-4808 danielle mccray@baltimorecity.gov

VICE-CHAIR
TAXATION, FINANCE & ECONOMIC
DEVELOPMENT COMMITTEE
LEGISLATIVE INVESTIGATIONS COMMITTEE

MEMBER
BUDGET & APPROPRIATIONS COMMITTEE
LABOR COMMITTEE
PUBLIC SAFETY COMMITTEE

February 18, 2020

The Honorable Delores G. Kelley The Honorable Brian J. Feldman Miller Senate Office Building Annapolis, Maryland 21401

Chairwoman Delores Kelley, Vice Chairman Brian Feldman, and Members of the Committee:

I write to you in support of Senate Bill 519-BHP - Safety Plan. The purpose of this bill is to require that the regulations adopted by the behavioral health administration under the certain provisions of law governing requirements for the licensure of behavioral health programs, include a requirement that a behavioral health program is to establish and implement a safety plan in order to ensure the safety of the individuals served by the health facility as well as the residents who live near the facility.

This bill ensures that there is a contingency plan in the event of an emergency, and provides a procedure for participants and management to follow to avoid additional accidents from occurring. This safety plan will also ensure the safety of the community residents surrounding the behavioral health program.

In efforts to ensure the safety and well-being of Behavioral Health Program participants and community residents, I support a favorable report of Senate Bill 519.

Sincerely.

Danielle McCray

Baltimore City Councilwoman - 2nd District

Chairman, Budget & Appropriations Committee Chairman, Judiciary & Legislative Investigations Committee Chairman, Biennial Audits Oversight Commission Chairman, Stormwater Remediation Oversight Committee

Land Use & Transportation Committee Taxation, Finance, & Economic Development Committee



Eric T. Costello

City Hall, Room 527 100 N Holliday Street Baltimore, MD 21202

(o) 410-396-4816 (m) 443-813-1457 (e) eric.costello@baltimorecity.gov

Baltimore City Council, 11th District

February 18, 2020

The Honorable Senator Delores G. Kelley The Honorable Senator Brian J. Feldman

RE: Senate Bill 519

I write to you today in support of Senate Bill SB 519. This bill is important because it will require that in order for behavioral health programs to receive licensing, they must first create and implement a safety plan in order to ensure the safety of the individuals served at the facility. This safety plan will also ensure the safety of the community residents surrounding the behavioral health program.

The purpose of this bill is to require that the regulations adopted by the Behavioral Health Administration under certain provisions of law governing requirements for the licensure of behavioral health programs include a requirement that a behavioral health program is to establish and implement a safety plan in order to ensure the safety of the individuals served by the health facility as well as the residents who live near the facility.

In efforts to ensure the safety and well being of behavioral health program participants and community residents, we hope that you will move for a favorable report of Senate Bill 519.

Should you have questions, please feel free to contact me directly at eric.costello@baltimorecity.gov or 410-396-4816.

Sincerely,

Eric. T. Costello

C. V. Cost

Baltimore City Council, 11th District



Room 521, City Hall 100 N. Holliday Street Baltimore, Maryland 21202 Office: 410-396-4818 Fax: 410-396-4828

BILL NO:

Senate Bill 0519

TITLE:

Public Health - Behavioral Health Programs and Health Care

Facilities - Safety Plan

COMMITTEE:

Finance

POSITION:

SUPPORT

This bill requires that as part of the licensure plan a behavioral health program seeking licensure have a safety plan for its residents and those in the surrounding community.

The safety of both the individuals served and the community at large is paramount to a safe and successful behavioral health program. I am fully in support of this bill.

Kristerfer Burnett City Councilmen District 8 **Baltimore City**



Brandon M. Scott President

Baltimore City Council

100 Holliday Street, Suite 400 \cdot Baltimore, Maryland 21202 410-396-4804 · Fax: 410-539-0647

e-mail: councilpresident@baltimorecity.gov

SB 519

February 18, 2020

TO:

The Honorable Members of the Senate Finance Committee

FROM:

The Honorable Brandon M. Scott, President of the Baltimore City

Council

RE:

SENATE BILL 519 – Public Health – Behavioral Health Programs

and Health Care Facilities - Safety Plan

POSITION: SUPPORT

To Chair Kelley,

I write to you in support of Senate Bill 519. I want to ensure that everyone that accesses needed behavioral health programs is able to do so in a safe and secure facility. That is why this bill, which ensures that behavioral health programs have a safety plan in order to receive licensing, is important for the well-being of our residents and communities. This bill takes an important proactive step to keep participants and surrounding communities safe by having clear protocols in place for how to handle emergencies. Ensuring patients' safety is very important to me, and I believe that SB 519 is an effective step to prioritize their safety.

In efforts to ensure the safety and well-being of behavioral heal program clients and community residents, I hope that you will move for a **favorable** report on Senate Bill 519.

Sincerely.

Brandon M.

Brandon M. Scott

President, Baltimore City Council

MPS_FAV_SB519
Uploaded by: Tompsett, Tommy

Position: FAV



February 18, 2020

The Honorable Delores G. Kelley Senate Finance Committee 3 East, Miller Senate Office Building Annapolis, MD 21401

RE: Support – SB 519: Public Health - Behavioral Health Programs and Health Care Facilities - Safety Plan

Dear Chairman Kelley and Honorable Members of the Committee:

The Maryland Psychiatric Society (MPS) is a state medical organization whose physician members specialize in the diagnosis, treatment, and prevention of mental illnesses including substance use disorders. Formed more than sixty years ago to support the needs of psychiatrists and their patients, MPS works to ensure available, accessible and comprehensive quality mental health resources for all Maryland citizens; and strives through public education to dispel the stigma and discrimination of those suffering from a mental illness. As the district branch of the American Psychiatric Association covering the state of Maryland excluding the D.C. suburbs, MPS represents over 700 psychiatrists as well as physicians currently in psychiatric training.

MPS opposes Senate Bill 519 (SB 519) as this bill reinforces stigma and unwarranted fear of individuals presenting with mental or other forms of illness by suggesting that every facility which treats these individuals must protect the community from them. In actuality, people with mental illness are at increased risk of violence and victimization from the community. Therefore, portraying a behavioral health treatment program as a source of danger will deter people from seeking treatment at that program. In addition, SB 519 may inadvertently create liability issues for the clinic for circumstances that are beyond their control and thus drive up the cost of mental health and substance use disorder treatment.

For these reasons, MPS respectfully asks the committee for an unfavorable report on SB 519. If you have any questions with regard to this testimony, please feel free to contact Thomas Tompsett, Jr. at tommy.tompsett@mdlobbyist.com.

Respectfully submitted, The Legislative Action Committee for the Maryland Psychiatric Society

BHSB_Adrienne Breidenstine_FWA_SB0519 Uploaded by: Breidenstine, Adrienne

Position: FWA



February 18, 2020

Senate Finance Committee TESTIMONY IN SUPPORT WITH AMENDMENTS

SB 519 Public Health - Behavioral Health Programs and Health Care Facilities - Safety Plan

Behavioral Health System Baltimore (BHSB) is a nonprofit organization that serves as the local behavioral health authority (LBHA) for Baltimore City. BHSB works to increase access to a full range of quality behavioral health (mental health and substance use disorder) services and advocates for innovative approaches to prevention, early intervention, treatment and recovery for individuals, families, and communities. Baltimore City represents nearly 35 percent of the public behavioral health system in Maryland, serving nearly 75,000 people with behavioral health service needs.

BHSB supports SB 519 Public Health - Behavioral Health Programs and Health Care Facilities - Safety Plan with the sponsor's amendment to have "any behavioral health program that is required by its accreditation organization to create a community relations plan shall submit it to the state."

<u>COMAR 10.63</u> outlines the licensing and accreditation requirements for community based behavioral health programs. All providers are required to be accredited from a national accreditation organization in order to be licensed in the State of Maryland. Certain accreditation organizations require behavioral health programs to have community relations plans in order to receive accreditation.

The amendment for SB 519 would align the bill with current national accreditation standards for community-based behavioral health programs and ensure that community relations plans are made available to the State. As such, BHSB urges the Senate Finance Committee to support SB 519 with the sponsors amendment.

MDDCSAM_FWA_SB 519 Uploaded by: Ciekot, Ann

Position: FWA



SB 519 Public Health – Behavioral Health Programs and Health Care Facilities – Safety Plan
Senate Finance Committee February 18, 2020

SUPPORT WITH AMENDMENTS

MDDCSAM is the Maryland state chapter of the American Society of Addiction Medicine whose members are physicians and other health providers who treat people with substance use disorders.

MDDCSAM appreciates the goals of the legislation and the opportunity to work with the sponsor.

We support SB 519 with an amendment indicating that the required safety plan is for the individuals served and not for the surrounding community per se. And that any behavioral health program that is required by its accreditation organization to create a community relations plan shall submit the plan to the state. Also, that before the Department of Health approves a facility and grants a license, it shall require the facility to establish and implement a safety plan for the safety of the individuals served, and a community relations plan if required by its accreditation organization.

We ask for a favorable report with the sponsor's amendments.

NCADD_FWA_SB 519 Uploaded by: Ciekot, Ann

Position: FWA



Senate Finance Committee February 18, 2020

Senate Bill 519 Public Health - Behavioral Health Programs and Health Care Facilities Safety Plan

Support with Amendments

NCADD-Maryland supports Senate Bill 519 with the amendments offered by the sponsor. With the amendments, the bill requires that substance use and mental health treatment programs have safety plans for their clients and employees, and requires the plans be filed with the State in order to obtain a license to operate. Similarly, if a program is required by an accreditation organization to have a community relations plan, the program must file it with the State in order to receive a license.

The State of Maryland adopted policy just a few years ago mandating that all substance use disorder and mental health programs receive accreditation from one of several national accrediting organizations. These organizations require treatment programs to have numerous policies and plans regarding all aspects of their operations. Safety or emergency preparedness plans are required. In addition, some programs are required to have community relations plans by their accreditation organizations. Having all of these plans filed with the Behavioral Health Administration is appropriate.

We ask for the adoption of the sponsor's amendments and a favorable report.

The Maryland Affiliate of the National Council on Alcoholism and Drug Dependence (NCADD-Maryland) is a statewide organization that works to influence public and private policies on addiction, treatment, and recovery, reduce the stigma associated with the disease, and improve the understanding of addictions and the recovery process. We advocate for and with individuals and families who are affected by alcoholism and drug addiction.

CBH_FWA_SB519Uploaded by: Doyle, Lori

Position: FWA



Testimony on SB 519

Public Health - Behavioral Health Programs and Health Care Facilities - Safety Plan

Senate Finance Committee February 18, 2020

POSITION: SUPPORT WITH AMENDMENTS

The Community Behavioral Health Association of Maryland is the professional organization for providers of community-based mental health and substance use disorder treatment services. Our members serve the majority of the almost-300,000 children and adults who access care through the public behavioral health system. We provide outpatient treatment, residential and day programs, case management and assertive community treatment (ACT), employment supports, and crisis intervention.

We are concerned about the overall message that SB 519 conveys; that somehow behavioral health care facilities are inherently more dangerous than other businesses or healthcare providers. We have seen no data to support that presumption, and fear that it is a remnant of the stigma still unfortunately attached to mental health and substance use disorders.

We do acknowledge the growing threat of aggression and violence in all healthcare settings, including hospitals and other non-behavioral health-oriented facilities. CBH member organizations are required to be nationally accredited by organizations such as the Commission on Accreditation of Rehab Facilities (CARF) or the Joint Commission on Accreditation of Healthcare Organizations (JCAHO), and as such must have numerous internal safety plans in place so as to quickly respond in emergencies, such as floods and other weather events, and workplace violence. These plans are readily available to the Maryland Department of Health.

Our main concern with this bill – beyond the issue of stigma – is the requirement for our programs to have a safety plan for the surrounding community. Our organizations strive to be good neighbors and often go above and beyond regulatory or statutory requirements to provide services and supports. However, we cannot and should not be held responsible for the safety of our surrounding communities. Many of our outpatient clinics operate in impoverished neighborhoods that are challenged by violent crime. Like all neighbors, we alert law enforcement to any issues that could compromise the safety of our communities but have no way of stopping behavior that is beyond our control.

We therefore ask that lines 3 through 6 on page 2 be amended as follows:

(1) The requirements for licensure of a behavioral health program, INCLUDING A REQUIREMENT THAT THE BEHAVIORAL HEALTH PROGRAM ESTABLISH AND IMPLEMENT A SAFETY PLAN FOR THE SAFETY OF THE INDIVIDUALS SERVED BY AND THE COMMUNITY SURROUNDING THE BEHAVIORAL HEALTH PROGRAM;

And lines 7 through 11 on p. 3 as follows:

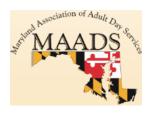
(A) BEFORE THE DEPARTMENT APPROVES A FACILITY UNDER THIS TITLE, INCLUDING BY GRANTING A LICENSE TO THE FACILITY, THE DEPARTMENT SHALL REQUIRE THE FACILITY TO ESTABLISH AND IMPLEMENT A SAFETY PLAN FOR THE SAFETY OF THE INDIVIDUALS SERVED BY AND THE COMMUNITY SURROUNDING THE FACILITY.

We urge a favorable report on SB 519 with these suggested amendments.

LifeSpan, MAADS, MNCHA, HPCNMD_Kauffman_UNF_SB0519Uploaded by: Kauffman, Danna

Position: UNF









TO: The Honorable Delores G. Kelley, Chair

Members, Senate Finance Committee The Honorable Cory V. McCray

FROM: Danna L. Kauffman

Pamela Metz Kasemeyer

DATE: February 18, 2020

RE: **OPPOSE** – Senate Bill 519 – *Public Health – Behavioral Health Programs and Health Care*

Facilities – Safety Plan

On behalf of the LifeSpan Network, the Maryland Association of Adult Day Services, the Maryland-National Capital Homecare Association, and the Hospice & Palliative Care Network of Maryland we **oppose** Senate Bill 519.

This bill requires, as a condition of licensure, any entity licensed under Title 19 of the Health-General Article to have a safety plan for the safety of the individuals served by and the community surrounding the facility. Because of the reference to Title 19, this bill applies to nursing facilities, assisted living communities, medical adult day centers, home health organizations, and residential service agencies. Each of these named entities is already required to have either under State and/or federal law an emergency and disaster plan. While Senate Bill 519 provides that an existing plan may qualify as the safety plan, there are no standards provided as to what would need to be included in a safety plan to determine whether this would create a new mandate or an existing plan would satisfy the requirement.

Therefore, we respectfully oppose Senate Bill 519 and urge an unfavorable vote.

For more information call:

Danna L. Kauffman Pamela Metz Kasemeyer 410-244-7000

MHAMD_UNF_SB519 Uploaded by: Martin, Dan

Position: UNF



Heaver Plaza 1301 York Road, #505 Lutherville, MD 21093 phone 443.901.1550 fax 443.901.0038 www.mhamd.org

SB 519 Public Health – Behavioral Health Programs and Health Care Facilities – Safety Plan
SB 520 Behavioral Health Programs – Opioid Treatment Services – Limitation on Licenses
SB 521 Behavioral Health – Opioid Treatment Services Programs – Medical Director
SB 522 Behavioral Health Programs – Licensing and Fees

Finance Committee February 18, 2020 Position: OPPOSE

The Mental Health Association of Maryland is a nonprofit education and advocacy organization that brings together consumers, families, clinicians, advocates and concerned citizens for unified action in all aspects of mental health, mental illness and substance use. We appreciate this opportunity to present this **testimony in opposition to these four bills**.

The Maryland General Assembly has taken several important steps in recent years to address a behavioral health crisis that is devastating families across the state. We are making progress, but we are not out of the woods yet. Unmet need persists, resources are scarce, and it remains increasingly difficult for Marylanders to access affordable and efficient mental health and substance use treatment services when and where needed.

People with behavioral health needs must contend with longstanding and pervasive barriers that limit access to care. At a time when Maryland should be looking to increase service availability, these stigmatizing and discriminatory measures would do just the opposite – they would create **new barriers** that would **reduce access** to timely and effective mental health and substance use treatment.

SB 519 would require behavioral health programs to establish and implement *safety plans for* the surrounding community as a requirement of licensure, the implication being that somehow these facilities are inherently more dangerous than other businesses or health care providers. This is a presumption that perpetuates a stigma against individuals living with mental health and substance use disorders, and it is not supported by any data.

In fact, a comparative analysis by the Johns Hopkins School of Public Health¹ found just the opposite was true. The research determined that drug treatment centers in Baltimore City were not associated with violent crime in excess of the violence happening around other commercial businesses, concluding that these facilities "have an unfairly poor reputation as being magnets for crime and a threat to community safety that is not backed up by empirical evidence."

-

¹ Furr-Holden, Debra C., et al. *Not in My Back Yard: A Comparative Analysis of Crime Around Publicly Funded Drug Treatment Centers, Liquor Stores, Convenience Stores, and Corner Stores in One Mid-Atlantic City.* Bloomberg School of Public Health, Johns Hopkins University. July 2015.

SB 520 would prohibit the Behavioral Health Administration from approving more than five licenses per 100,000 individuals in a county for opioid treatment programs. No other type of health care is subject to a population-based limit of this type. This form of discriminatory differential treatment is clearly violative of the Americans with Disabilities Act.

SB 521 would require medical directors at opioid treatment programs (OTPs) to be on-site at least 20 hours each week, and it would prohibit OTPs from using telehealth to satisfy that requirement. The bill would exacerbate an existing shortage of qualified medical directors and decrease access to opioid use treatment across the state.

OTP medical directors in Maryland are already subject to regulations that go beyond federal requirements. This limits the availability of qualified medical directors and forces many to split their time among several programs, serving a role that is primarily administrative in nature. While medical directors can provide direct clinical care, most of the medical care is provided by program physicians and advanced practice providers, such as certified nurse practitioners and physician assistants.

The on-site requirements of SB 521 would be unattainable for many smaller OTPs, forcing these facilities out of business and eliminating treatment options for Marylanders living with opioid use disorders.

SB 522 would impose new licensure fees on mental health and substance use treatment providers on top of the already significant cost of national accreditation currently required for licensure of behavioral health programs in Maryland. Funds collected must be distributed to local health departments and used to enhance safety at behavioral health programs and make "improvements to the community in which a behavioral health program is located."

Again, this perpetuates a stigma that presumes behavioral health providers and the people they serve are dangerous and detrimental to their communities. But in reality, communities suffer when there is inadequate access to mental health and substance use treatment.

These four bills are stigmatizing, discriminatory measures that would reduce access to critical behavioral health care. For these reasons, MHAMD urges an unfavorable report on SB 519, SB 520, SB 521, and SB 522.

MHCC_INFO_SB519 Uploaded by: Renfrew, Megan

Position: INFO

STATE OF MARYLAND



Andrew N. Pollak CHAIR Ben Steffen EXECUTIVE DIRECTOR

MARYLAND HEALTH CARE COMMISSION

4160 PATTERSON AVENUE – BALTIMORE, MARYLAND 21215 TELEPHONE: 410-764-3460 FAX: 410-358-1236

February 17, 2020

The Honorable Delores G. Kelley Chair, Finance Committee 3 East, Miller Senate Office Building Annapolis, MD 21401

RE: SB 519 – Public Health – Behavioral Health Programs and Health Care Facilities – Safety Plan - INFORMATION

Dear Chair Kelley:

The Maryland Health Care Commission (the "Commission") would like to provide the Senate Finance Committee with information related to Senate Bill 519 (SB 519).

SB 519 adds a new section 19-150 to the subtitle 1 of title 19 of the Health General Article. Subtitle 1 of Title 19 of the Health General Article pertains to the Commission, which is an independent regulatory commission. The language of the proposed new section 19-150 directs the Maryland Department of Health (the "Department) to take certain actions, including actions related to licensure of facilities. The Commission does not grant licenses.¹ The Commission recommends that that these directions to the Department should be placed in a subtitle of the Maryland code that directly applies to the relevant component of the Department that would execute the responsibility required in this bill, including granting licenses, rather than making an amendment to subtitle 1 of title 19 of Health General.

Through the Certificates of Need program, the Commission regulates the establishment of certain new "health care facilities" (as such term is defined in Health General § 19-114(d)), certain changes in those health care facilities, and specified medical services. Once a health care facility is built or a Commission-approved project is completed, the Commission has no ongoing oversight over most facilities and health programs. Licensure is a more appropriate tool for monitoring ongoing operational activities of health programs. The Commission encourages the Committee to consider whether safety plans are more appropriately regulated through licensure and accreditation or Certificate of Need.

Note: The Maryland Health Care Commission is an independent State agency. The position of the Commission may differ from the Maryland Department of Health

¹ The Commission does grant Certificates of Need.

² The Commission does provide ongoing oversight over certain cardiac services, as specified in statute.

The Honorable Delores Kelley February 17, 2020 Page 2

In addition to the general concern about the statutory placement of the proposed amendment to subtitle 1 of title 19 of Health General, the Commission has some specific concerns with the terms used in that amendment. SB 519 uses the term "facility" but does not define that term. With no definition of 'facility', SB 519 is overly broad and vague. As noted above, there is a definition of "health care facility" in Health General § 19-114(d) that is used by the Commission for State Health Planning activities and Certificate of Need reviews. The statutory definition of "health care facility" applies to specified types of health care facilities, including hospitals, nursing homes, ambulatory surgery facilities, intermediate care facilities, home health agencies, hospices, and free standing medical facilities. This definition is not limited to behavioral health facilities. The Commission does not believe the sponsors intended SB 519 to impact all of the facility types defined in Health General § 19-114(d). The sponsors may have also intended to cover other types of behavioral health programs that are not regulated by the Commission, including most outpatient behavioral health programs. The Commission recommends that the sponsors clarify the types of facilities impacted by this bill.

Additionally, the term "safety plan" is not defined in this bill. It is unclear what the meaning of this term is, and what the impact of a fully implemented safety plan would be.

The Commission is not offering an amendment because we are unclear about the intended scope of SB 519. The Commission staff will be pleased to work with the sponsors on crafting amendment language and the appropriate placement of an amendment in Health General.

I hope you find this information useful. Please feel free to contact me at (410) 764-3566 or <u>Ben.Steffen@maryland.gov</u>, or Megan Renfrew, Government Affairs and Special Projects, at (410) 764-3483 or Megan.Renfrew@maryland.gov if you have any questions.

Sincerely,

Ben Steffen Executive Director

Maryland Health Care Commission

MDH_INFO_SB0519 Uploaded by: Ye, Webster

Position: INFO



Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Robert R. Neall, Secretary

February 18, 2020

The Honorable Dolores G. Kelley, Chair Senate Finance Committee 3 East, Miller Senate Office Building Annapolis, Maryland 21401

RE: SB 519 – Public Health – Behavioral Health Programs and Health Care Facilities – Safety Plan – Letter of Information

Dear Chair Kelley and Committee Members:

The Maryland Department of Health (Department) submits this letter of information for SB 519 – Public Health — Behavioral Health Programs and Health Care Facilities — Safety Plan. SB 519 requires licensed behavioral health programs to establish and implement a plan for the safety of individuals served by the program and the community surrounding the program.

Safety plans that protect the individuals served are already required for behavioral health programs, including opioid treatment programs (OTP). Programs require an accreditation-based license to operate in the state and are therefore subject to federal, state, and accreditation standards. For example, the Commission on Accreditation of Rehabilitation Facilities (CARF), which accredits the majority of community programs, requires that its programs maintain healthy, safe, and clean environments that support quality services and minimize the risk of harm to persons served, personnel, and other stakeholders.

The Department believes that the safety of the community that surrounds a licensed program is essential and encourages programs to work with appropriate law enforcement agencies, stakeholders, and community members to address safety concerns.

I hope this information is useful. If you have additional questions, please contact the Director of Governmental Affairs, Weber Ye at (410) 260-3190 or webster.ye@maryland.gov.

Sincerely,

Robert R. Neall Secretary