J1 6lr1146 CF HB 595

By: Senators Guzzone, Astle, Benson, Conway, Currie, Feldman, Ferguson, Kagan, Kelley, King, Klausmeier, Lee, Madaleno, Manno, Mathias, McFadden, Middleton, Nathan-Pulliam, Peters, Pinsky, Pugh, Ramirez, Raskin, Rosapepe, Waugh, Young, and Zirkin Zirkin, and Zucker

Introduced and read first time: February 3, 2016 Assigned to: Finance and Budget and Taxation

Committee Report: Favorable with amendments

Senate action: Adopted

Read second time: March 18, 2016

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1 AN ACT concerning

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Behavioral Health Community Providers - Keep the Door Open Act

3 FOR the purpose of requiring, except under certain circumstances, the Department of 4 Health and Mental Hygiene to adjust the rate of reimbursement for certain 5 community providers each fiscal year by the rate adjustment included in a certain 6 State budget; requiring that the Governor's proposed budget for a certain fiscal year, 7 and for each fiscal year thereafter, include rate adjustments for certain community 8 providers based on the funding provided in certain legislative appropriations; 9 requiring that a certain rate of adjustment equal the average annual percentage 10 change in a certain Consumer Price Index for a certain period; requiring, under 11 certain circumstances, managed care organizations to pay a certain rate for a certain 12 time period for services provided by community providers and to adjust the rate of 13 reimbursement for community providers each fiscal year by at least a certain 14 amount; defining certain terms; providing for the application of this Act; requiring 15 the Department to submit a certain report to the Governor and the General 16 Assembly on or before a certain date each year, beginning on or before a certain date; 17 authorizing the Department to require certain community providers to submit 18 certain information to the Department in the form and manner required by the 19 Department; and generally relating to the rate of reimbursement for behavioral 20 health community providers.

21 BY adding to

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

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

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



- 1 Article – Health – General
- 2 Section 16–201.3
- Annotated Code of Maryland 3
- 4 (2015 Replacement Volume)
- SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND. 5
- 6 That the Laws of Maryland read as follows:

7 Article - Health - General

- 16-201.3. 8
- 9 (A) **(1)** IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS
- 10 INDICATED.
- "COMMUNITY PROVIDER" MEANS A COMMUNITY-BASED AGENCY 11
- OR PROGRAM FUNDED BY THE BEHAVIORAL HEALTH ADMINISTRATION OR THE 12
- 13 MEDICAL CARE PROGRAMS ADMINISTRATION TO SERVE INDIVIDUALS WITH
- 14 MENTAL DISORDERS, SUBSTANCE-RELATED DISORDERS, OR A COMBINATION OF
- 15 THESE DISORDERS.
- 16 (3) "CONSUMER PRICE INDEX" MEANS THE CONSUMER PRICE INDEX
- 17 **FOR** ALL Urban CONSUMERS FOR MEDICAL CARE **FOR** THE
- 18 WASHINGTON-BALTIMORE REGION.
- "RATE" MEANS THE REIMBURSEMENT RATE PAID BY THE 19 **(4)**
- DEPARTMENT TO A COMMUNITY PROVIDER FROM THE STATE GENERAL FUND, 20
- MARYLAND MEDICAL ASSISTANCE PROGRAM FUNDS, OTHER STATE OR FEDERAL 21
- 22 FUNDS, OR A COMBINATION OF THESE FUNDS.
- 23 (B) THIS SECTION DOES NOT APPLY TO REIMBURSEMENT FOR ANY SERVICE
- 24PROVIDED BY A COMMUNITY PROVIDER WHOSE RATES ARE REGULATED BY THE
- HEALTH SERVICES COST REVIEW COMMISSION. 25
- 26 SUBJECT TO PARAGRAPH (2) OF THIS SUBSECTION AND EXCEPT (C)
- 27 AS PROVIDED IN SUBSECTION (D) OF THIS SECTION, THE DEPARTMENT SHALL
- 28 ADJUST THE RATE OF REIMBURSEMENT FOR COMMUNITY PROVIDERS EACH FISCAL
- 29 YEAR BY THE RATE ADJUSTMENT INCLUDED IN THE STATE BUDGET FOR THAT
- 30 FISCAL YEAR.
- THE GOVERNOR'S PROPOSED BUDGET FOR FISCAL YEAR 31 **(2)** (I)
- 322018, AND FOR EACH FISCAL YEAR THEREAFTER, SHALL INCLUDE RATE
- ADJUSTMENTS FOR COMMUNITY PROVIDERS BASED ON THE FUNDING PROVIDED IN 33
- THE LEGISLATIVE APPROPRIATION FOR THE IMMEDIATELY PRECEDING FISCAL 34
- 35 YEAR FOR EACH OF THE FOLLOWING:

- 1. OBJECT 08 CONTRACTUAL SERVICES IN PROGRAM 2 M00Q01.10 MEDICAID BEHAVIORAL HEALTH PROVIDER REIMBURSEMENT
- 3 MEDICAL CARE PROGRAMS ADMINISTRATION;
- 2. OBJECT 08 CONTRACTUAL SERVICES IN PROGRAM 5 M00L01.02 COMMUNITY SERVICES BEHAVIORAL HEALTH ADMINISTRATION; AND
- 3. OBJECT 08 CONTRACTUAL SERVICES IN PROGRAM
 7 M00L01.03 COMMUNITY SERVICES FOR MEDICAID STATE FUND RECIPIENTS
 8 BEHAVIORAL HEALTH ADMINISTRATION.
- 9 (II) A RATE ADJUSTMENT REQUIRED TO BE INCLUDED IN THE
 10 GOVERNOR'S PROPOSED BUDGET UNDER SUBPARAGRAPH (I) OF THIS PARAGRAPH
 11 SHALL EQUAL THE AVERAGE ANNUAL PERCENTAGE CHANGE IN THE CONSUMER
 12 PRICE INDEX FOR THE 3-YEAR PERIOD ENDING IN JULY OF THE IMMEDIATELY
- 13 PRECEDING FISCAL YEAR.
- 14 (3) THE GOVERNOR'S PROPOSED BUDGET FOR FISCAL YEAR 2018, 15 AND FOR EACH FISCAL YEAR THEREAFTER, FOR COMMUNITY PROVIDERS SHALL BE 16 PRESENTED IN THE SAME MANNER, INCLUDING OBJECT AND PROGRAM 17 INFORMATION, AS IN THE FISCAL YEAR 2017 BUDGET.
- 18 **(D)** IF SERVICES PROVIDED BY COMMUNITY PROVIDERS ARE PROVIDED 19 THROUGH MANAGED CARE ORGANIZATIONS, THE MANAGED CARE ORGANIZATIONS 20 SHALL:
- 21 (1) PAY THE RATE IN EFFECT DURING THE IMMEDIATELY PRECEDING 22 FISCAL YEAR FOR THE FIRST FISCAL YEAR THE MANAGED CARE ORGANIZATIONS 23 PROVIDE THE SERVICES; AND
- 24 (2) ADJUST THE RATE OF REIMBURSEMENT FOR COMMUNITY 25 PROVIDERS EACH FISCAL YEAR BY AT LEAST THE SAME AMOUNT THAT OTHERWISE WOULD HAVE BEEN REQUIRED UNDER SUBSECTION (C)(2)(II) OF THIS SECTION.
- 27 (E) (1) ON OR BEFORE DECEMBER 1, 2018, AND ON OR BEFORE
 28 DECEMBER 1 OF EACH YEAR THEREAFTER, THE DEPARTMENT SHALL SUBMIT A
 29 REPORT TO THE GOVERNOR AND, IN ACCORDANCE WITH § 2–1246 OF THE STATE
 30 GOVERNMENT ARTICLE, THE GENERAL ASSEMBLY ON THE IMPACT OF THE
 31 REIMBURSEMENT RATE ADJUSTMENT REQUIRED UNDER THIS SECTION ON
- 32 COMMUNITY PROVIDERS, INCLUDING THE IMPACT ON:

1	(I) THE WAGES AND SALARIES PAID AND THE BENEFITS
2 3	PROVIDED TO DIRECT CARE STAFF AND LICENSED CLINICIANS EMPLOYED BY COMMUNITY PROVIDERS;
$\frac{4}{5}$	(II) THE TENURE AND TURNOVER OF DIRECT CARE STAFF AND LICENSED CLINICIANS EMPLOYED BY COMMUNITY PROVIDERS; AND
6	(III) THE ABILITY OF COMMUNITY PROVIDERS TO RECRUIT
7	QUALIFIED DIRECT CARE STAFF AND LICENSED CLINICIANS.
8 9	(2) THE DEPARTMENT MAY REQUIRE A COMMUNITY PROVIDER TO SUBMIT, IN THE FORM AND MANNER REQUIRED BY THE DEPARTMENT.
10 11	INFORMATION THAT THE DEPARTMENT DEEMS NECESSARY FOR COMPLETION OF THE REPORT REQUIRED UNDER PARAGRAPH (1) OF THIS SUBSECTION.
12 13	SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect June 1, 2016.
	Approved:
	Governor.
	President of the Senate.
	Speaker of the House of Delegates.