

# SENATE BILL 469

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CF HB 367

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By: **Senators Madaleno, Benson, Feldman, Klausmeier, ~~and Pugh~~ Pugh, Mathias, and Middleton**

Introduced and read first time: February 6, 2015

Assigned to: Finance

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Committee Report: Favorable with amendments

Senate action: Adopted

Read second time: March 20, 2015

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## CHAPTER \_\_\_\_\_

1 AN ACT concerning

2 **Public Health – Maryland Behavioral Health Crisis Response System**

3 FOR the purpose of altering the name of the Maryland Mental Health Crisis Response  
4 System to be the Maryland Behavioral Health Crisis Response System; establishing  
5 the Crisis Response System in the Behavioral Health Administration; ~~requiring~~  
6 authorizing certain services to be provided by the Crisis Response System; ~~requiring~~  
7 authorizing the Crisis Response System to include an evaluation of outcomes of  
8 services through the annual collection of certain data; ~~requiring the Administration~~  
9 ~~to maintain a certain bed registry~~; requiring the Administration to implement the  
10 Crisis Response System in collaboration with the core service agency serving each  
11 jurisdiction; repealing a prohibition against the State spending more than a certain  
12 amount of State general funds in each fiscal year to implement the Crisis Response  
13 System; providing that community benefit includes certain support of the Crisis  
14 Response System; making certain conforming changes; defining a certain term;  
15 repealing a certain provision of law that makes the Crisis Response System  
16 contingent on the receipt of certain funding; and generally relating to a behavioral  
17 health crisis response system.

18 BY repealing and reenacting, with amendments,

19 Article – Health – General

20 Section 10–1401 through 10–1405 to be under the amended subtitle “Subtitle 14.  
21 Maryland Behavioral Health Crisis Response System”

22 Annotated Code of Maryland

23 (2009 Replacement Volume and 2014 Supplement)

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EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

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



1 (As enacted by Chapter 371 of the Acts of the General Assembly of 2002)

2 BY repealing and reenacting, with amendments,  
3 Article – Health – General  
4 Section 19–303(a)(3)  
5 Annotated Code of Maryland  
6 (2009 Replacement Volume and 2014 Supplement)

7 BY repealing  
8 Chapter 371 of the Acts of the General Assembly of 2002  
9 Section 2

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

12 **Article – Health – General**

13 Subtitle 14. Maryland [Mental] **BEHAVIORAL** Health Crisis Response System.  
14 10–1401.

15 (a) In this subtitle the following words have the meanings indicated.

16 **(B) “ADMINISTRATION” MEANS THE BEHAVIORAL HEALTH**  
17 **ADMINISTRATION.**

18 **[(b)] (C)** “Core service agency” has the meaning stated in § 10–1201 of this title.

19 **[(c)] (D)** “Crisis Response System” means the Maryland [Mental] **BEHAVIORAL**  
20 Health Crisis Response System.

21 10–1402.

22 (a) There is a Maryland [Mental] **BEHAVIORAL** Health Crisis Response System  
23 in the Behavioral Health Administration.

24 (b) The Crisis Response System shall:

25 (1) Operate a statewide network utilizing existing resources and  
26 coordinating interjurisdictional services to develop efficient and effective crisis response  
27 systems to serve all individuals in the State, 24 hours a day and 7 days a week;

28 (2) Provide skilled clinical intervention to help prevent suicides, homicides,  
29 unnecessary hospitalizations, and arrests or detention, and to reduce dangerous or  
30 threatening situations involving individuals in need of [mental] **BEHAVIORAL** health  
31 services; and

1 (3) Respond quickly and effectively to community crisis situations.

2 (c) The Administration shall consult with consumers of [mental] **BEHAVIORAL**  
3 health services, family members, and [mental] **BEHAVIORAL** health advocates in the  
4 development of the Crisis Response System.

5 10–1403.

6 (a) The Crisis Response System shall include:

7 (1) A ~~WALK-IN~~ crisis communication center ~~THAT IS OPEN 24 HOURS A~~  
8 ~~DAY AND 7 DAYS A WEEK~~ in each jurisdiction or region to provide:

9 (i) A single point of entry to the Crisis Response System;

10 (ii) Coordination with the local core service agency, police,  
11 emergency medical service personnel, and [mental] **BEHAVIORAL** health providers; ~~{and}~~

12 ~~(iii) TRANSPORTATION COORDINATION TO ACCESS SERVICES,~~  
13 ~~INCLUDING TRANSPORTATION TO URGENT APPOINTMENTS OR TO EMERGENCY~~  
14 ~~PSYCHIATRIC FACILITIES; AND~~

15 ~~{(iii)}~~ ~~(iv)~~ [Services] **PROGRAMS** that ~~{may}~~ ~~SHALL~~ include:

16 1. A [hotline] **CLINICAL CRISIS TELEPHONE LINE** for  
17 suicide prevention and crisis intervention;

18 2. A [telephone service] **HOTLINE** for [mental]  
19 **BEHAVIORAL** health information, referral, and assistance;

20 3. [Triage for initial assessment and referral;

21 4. Referral to treatment, family and peer support groups,  
22 and other services as needed;

23 5. Follow-up for up to 1 month] **CLINICAL CRISIS**  
24 **WALK-IN SERVICES, INCLUDING:**

25 **A. TRIAGE FOR INITIAL ASSESSMENT;**

26 **B. CRISIS STABILIZATION UNTIL ADDITIONAL SERVICES**  
27 **ARE AVAILABLE;**

1                                   **C.    LINKAGE TO TREATMENT SERVICES AND FAMILY AND**  
2 **PEER SUPPORT GROUPS; AND**

3                                   **D.    LINKAGE TO OTHER HEALTH AND HUMAN SERVICES**  
4 **PROGRAMS;**

5                                   [6.]**4. [Coordination of] CRITICAL INCIDENT STRESS**  
6 **MANAGEMENT TEAMS, PROVIDING** disaster [mental] **BEHAVIORAL** health [teams]  
7 **SERVICES**, critical incident stress management, and [maintenance of] an on-call system  
8 for these services;

9                                   **5.    CRISIS RESIDENTIAL BEDS TO SERVE AS AN**  
10 **ALTERNATIVE TO HOSPITALIZATION;**

11                                  ~~7.~~ **6.** A community crisis bed and hospital bed registry,  
12 including a daily tally of empty beds;

13                                  ~~8.~~ **7.** Transportation coordination, ensuring transportation of  
14 patients to urgent appointments or to emergency psychiatric facilities; ~~and~~

15                                  ~~9.~~ ~~Linkage to 911 emergency systems and other telephone~~  
16 ~~systems providing public or social services;~~

17                                  ~~(2)~~ ~~Emergency services including:~~

18                                  ~~(i)~~ ~~6.~~ **8.** Mobile crisis teams **OPERATING 24 HOURS A DAY AND 7**  
19 **DAYS A WEEK** to provide assessments, crisis intervention, [treatment] **STABILIZATION**,  
20 follow-up, and referral to urgent care, and to arrange appointments for individuals to  
21 obtain [public mental] **BEHAVIORAL** health services;

22                                   (ii) Urgent care; and

23                                   (iii) Emergency psychiatric services;

24                                  (3) Follow-up services including:

25                                   (i) Mobile treatment teams to provide outreach services on  
26 location;]

27                                  ~~7.~~ **9.**                   **23-HOUR HOLDING BEDS;**

28                                  ~~8.~~ **10.**               **EMERGENCY PSYCHIATRIC SERVICES;**

29                                  ~~9.~~ **11.**               **URGENT CARE CAPACITY;**

1                                    ~~10.~~ 12.        **EXPANDED CAPACITY FOR ASSERTIVE**  
2 **COMMUNITY TREATMENT;**

3                                    ~~11.~~ 13.        **CRISIS INTERVENTION TEAMS WITH CAPACITY**  
4 **TO RESPOND IN EACH JURISDICTION 24 HOURS A DAY AND 7 DAYS A WEEK; AND**

5                                    [(ii)] ~~12.~~ 14.        Individualized family intervention teams; [and  
6                                    (iii) Residential crisis services;]

7                                    [(4)] **(2)**        Community awareness promotion and training programs; and

8                                    [(5)] **(3)**        An evaluation of outcomes of services through:

9                                    **(I)**        [an] **AN** annual survey by the Administration of consumers and  
10 family members who have received services from the Crisis Response System; **AND**

11                                    **(II)**        **ANNUAL DATA COLLECTION ON THE NUMBER OF**  
12 **BEHAVIORAL HEALTH CALLS RECEIVED BY POLICE, ATTEMPTED AND COMPLETED**  
13 **SUICIDES, UNNECESSARY HOSPITALIZATIONS, HOSPITAL DIVERSIONS, ARRESTS**  
14 **AND DETENTIONS OF INDIVIDUALS WITH BEHAVIORAL HEALTH DIAGNOSES, AND**  
15 **DIVERSION OF ARRESTS AND DETENTIONS OF INDIVIDUALS WITH BEHAVIORAL**  
16 **HEALTH DIAGNOSES.**

17                                    ~~**(B)**        **THE ADMINISTRATION SHALL MAINTAIN A COMMUNITY CRISIS BED AND**~~  
18 ~~**HOSPITAL BED REGISTRY, INCLUDING A DAILY TALLY OF EMPTY BEDS.**~~

19                                    ~~[(b)]~~ **(C)**        The Crisis Response System services shall be implemented as  
20 determined by **THE ADMINISTRATION IN COLLABORATION WITH** the core service agency  
21 serving each jurisdiction.

22                                    ~~[(c)]~~ **(D)**        An advance directive for mental health services under § 5–602.1 of this  
23 article shall apply to the delivery of services under this subtitle.

24                                    ~~[(d)]~~ **(E)**        This subtitle may not be construed to affect petitions for emergency  
25 evaluations under § 10–622 of this title.

26 10–1404.

27                                    [(a)]        The State may not expend more than \$250,000 in State general funds in each  
28 fiscal year to implement the Maryland Mental Health Crisis Response System.

29                                    (b)]        The Administration shall implement the Crisis Response System, in  
30 collaboration with core service agencies, on a regional or jurisdictional basis as federal  
31 funding or funding from other sources becomes available.

1 10-1405.

2 The Crisis Response System providers shall contract with service providers who  
3 employ individuals who use or have used [mental] BEHAVIORAL health services.

4 19-303.

5 (a) (3) "Community benefit" means an activity that is intended to address  
6 community needs and priorities primarily through disease prevention and improvement of  
7 health status, including:

8 (i) Health services provided to vulnerable or underserved  
9 populations such as Medicaid, Medicare, or Maryland Children's Health Program enrollees;

10 (ii) Financial or in-kind support of public health programs;

11 (iii) Donations of funds, property, or other resources that contribute  
12 to a community priority;

13 (iv) Health care cost containment activities; [and]

14 (v) Health education, screening, and prevention services; AND

15 (VI) FINANCIAL OR IN-KIND SUPPORT OF THE MARYLAND  
16 BEHAVIORAL HEALTH CRISIS RESPONSE SYSTEM.

17 **Chapter 371 of the Acts of 2002**

18 [SECTION 2. AND BE IT FURTHER ENACTED, That Section 1 of this Act is  
19 contingent on the receipt of federal funding or funding from any other private or public  
20 source to implement the Maryland Mental Health Crisis Response System established  
21 under Section 1 of this Act. The Mental Hygiene Administration, within 15 days after the  
22 receipt of federal funding or other sources of funding for the Maryland Mental Health Crisis  
23 Response System, shall give written notice to the Department of Legislative Services, 90  
24 State Circle, Annapolis, Maryland, of the receipt of funding. Section 1 of this Act shall take  
25 effect 5 days after the date of the written notice from the Administration.]

26 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect  
27 October 1, 2015.