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Date: (Filing No. H-)

HEALTH AND HUMAN SERVICES

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**STATE OF MAINE
HOUSE OF REPRESENTATIVES
130TH LEGISLATURE
FIRST SPECIAL SESSION**

COMMITTEE AMENDMENT “ ” to H.P. 84, L.D. 118, “An Act To Address Maine’s Shortage of Behavioral Health Services for Minors”

Amend the bill by striking out everything after the enacting clause and inserting the following:

‘Sec. 1. 34-B MRSA §15003, sub-§9, as amended by PL 2019, c. 343, Pt. DDD, §7, is further amended to read:

9. Reports. The department shall report by ~~August~~ January 1st of each year to the joint standing committee of the Legislature having jurisdiction over health and human services matters on the following matters:

A. ~~The operation of the program, including fiscal status of the accounts and funds from all sources, including blended, pooled and flexible funding, related to children’s mental health care in the departments; numbers of children and families served and their residences by county; numbers of children transferred to care in this State and the types of care to which they were transferred; any waiting lists; delays in delivering services; the progress of the departments department in developing new resources implementing improvement strategies; and appeals procedures requested, held and decided; including the results of decided appeals and audits; and evaluations done on the program;~~

B. ~~The experiences of the departments in coordinating program administration and care delivery, including, but not limited to, progress on management information systems; uniform application forms, procedures and assessment tools; case coordination and case management; the use of pooled and blended funding; and initiatives Initiatives in acquiring and using federal and state funds grant funding; and~~

C. ~~Barriers to improved delivery of care to children and their families and the progress of the departments department in overcoming those barriers; and~~

D. The number of children served by crisis providers and the number of children who waited for the appropriate level of behavioral health treatment in a hospital emergency room during the preceding year. The department shall make a reasonable effort to

COMMITTEE AMENDMENT

1 obtain information from providers, including implementing a standardized system for
2 the reporting of data. Data collected pursuant to this paragraph must protect the
3 confidentiality of all persons involved to the same extent as otherwise required by state
4 or federal law or rule.

5 **Sec. 2. 34-B MRSA §15003, sub-§10**, as amended by PL 2019, c. 343, Pt. DDD,
6 §8, is repealed.

7 **Sec. 3. Standardized data.** The Department of Health and Human Services shall
8 work with hospitals to develop a consistent and reliable system of data definitions and data
9 collection to identify the number of children with behavioral needs who remain in hospital
10 emergency rooms after they no longer need a medical hospital level of care pursuant to the
11 Maine Revised Statutes, Title 34-B, section 15003, subsection 9, paragraph D. The data
12 must include the length of stay of a child in hospital beyond 48 hours after the child no
13 longer needs a hospital level of care and the reasons for the extended stay, including, but
14 not limited to, the lack of an appropriate hospital or residential bed or lack of community
15 services. In the department’s annual report due to the Legislature pursuant to Title 34-B,
16 section 15003, subsection 9, for January 1, 2022, the annual report must include a
17 description of the progress in developing standardized data pursuant to this section.'

18 Amend the bill by relettering or renumbering any nonconsecutive Part letter or section
19 number to read consecutively.

20

SUMMARY

21 This amendment replaces the bill. It requires the Department of Health and Human
22 Services to work with hospitals to develop a consistent and reliable system of data
23 definitions and data collection to identify the number of children with behavioral needs
24 who remain in hospital emergency rooms after they no longer need a medical hospital level
25 of care. The amendment changes the requirements for annual reports on the children's
26 mental health program that are submitted to the Legislature and includes data on the number
27 of children served by crisis providers and the number of children who waited for the
28 appropriate level of behavioral health treatment in a hospital emergency room for the
29 preceding year. It requires the annual report that is due on January 1, 2022 to include
30 progress on developing standardized data. The amendment also removes the requirement
31 for the department to provide monthly reports on the status of children's crisis services.