The Honorable Martin O’Malley  
Governor  
State of Maryland  
Annapolis, MD 21401-1991

The Honorable Thomas V. Mike Miller, Jr.  
President of the Senate  
H-107 State House  
Annapolis, MD 21401-1991

The Honorable Michael E. Busch  
Speaker of the House  
H-101 State House  
Annapolis, MD 21401-1991

Re:  HB 1510 (Chapter 460 of the Acts of 2014) – Behavioral Health Administration – Establishment and Duties

Dear Governor O’Malley, President Miller and Speaker Busch:

Pursuant to Chapter 460 of the Acts of 2014, the Department of Health and Mental Hygiene respectfully submits this report on the Behavioral Health Administration’s Integration Stakeholder Workgroup. Specifically, the report includes recommendations on issues related to the integration of mental health and substance use disorder treatment and recovery services.

If you have any questions, please contact Allison Taylor, Director of Governmental Affairs, at (410) 767-6481.

Sincerely,

Joshua M. Sharfstein, M.D.  
Secretary

Enclosure

cc:  Gayle Jordan-Randolph, M.D.  
Brian Hepburn, M.D.  
Rianna Brown, J.D.  
Allison Taylor, J.D., M.P.P.
Behavioral Health Administration
Behavioral Health Integration Stakeholder Workgroup
House Bill 1510, Chapter 460 of the Acts of 2014

Statutory Requirements of House Bill 1510 – Behavioral Health Administration - Establishment and Duties

At the request of behavioral health stakeholders during the 2014 Legislative Session of the Maryland General Assembly, House Bill 1510 was amended to require the Department of Health and Mental Hygiene (the Department) to convene a stakeholder workgroup to:

- make recommendations on issues related to behavioral health, including statutory and regulatory changes to fully integrate mental health and substance-related disorder treatment and recovery support; and promote health services;
- include representatives of the Department, providers, consumers and advocacy organizations on the workgroup; and
- report the findings and recommendations of the workgroup to the Governor and General Assembly.

Among other things, House Bill 1510 1) established the Behavioral Health Administration (BHA), and 2) authorized the Secretary to license certain behavioral health programs, require accreditation as a condition of licensure, and require the adoption of regulations.

Process for Stakeholder Input & Selection of Workgroup Members

As House Bill 1510 did not include a membership list for the Behavioral Health Integration Stakeholder Workgroup (the Workgroup), BHA first invited those stakeholders who initially requested the workgroup during the 2014 Legislative Session. In finalizing membership, additional stakeholders were identified and invited to participate, including representatives from the Department, treatment providers, and statewide consumer and advocacy organizations. While the Department would have also liked to include local representatives as members of the workgroup, the membership would have been too large to effectively coordinate meetings.

Those members selected brought diverse perspectives, including that of family members of those in recovery from a mental health or substance-related disorder. A list of the organizations represented can be found in Appendix A.

In addition to the stakeholders who were invited to participate, the meeting schedule was widely distributed and posted on the Workgroup’s website, so members of the public could attend in person or by phone. During each meeting, twenty minutes was reserved for public comment, and
members of the public had the opportunity to send in any additional comments or questions to the workgroup’s email address.¹

Meeting Schedule

The Workgroup held seven meetings between June 13, 2014 and October 17, 2014. Of these, four were dedicated to discussing statute changes to better integrate Health - General Article, Title 8 – Substance Use Disorders, Title 10 – Mental Health Law, and Title 7.5 – Behavioral Health Administration. The remaining three meetings, held during September and October of 2014, were dedicated to reviewing and discussing the proposed community behavioral health program regulations under the Department. Meeting materials were sent out beforehand to those on the Workgroup’s email listserv and posted to the Workgroup’s website for reference.

Statute Review & Recommendations

It is anticipated that the Department will introduce legislation during the 2015 Legislative Session, outlining recommendations proposed by the Workgroup. Among the proposed changes are the following:

- making technical changes to eliminate inconsistencies between mental health and substance-related disorder services, including delineating the responsibilities of the Secretary of the Department and Director of BHA;
- removing antiquated language that is no longer commonly used in the behavioral health community;
- removing references to programming that is no longer administered by BHA; and
- repealing obsolete language identified during the drafting of the BHA community behavioral health program regulations, specifically with regard to program descriptions.

In addition, at the request of stakeholders, the Department also plans to include amendments:

- prohibiting public and private hospitals and community treatment programs from denying services or discriminating against someone solely by reason of the individual’s behavioral health disorder; and
- aligning the statute with the federal Fair Housing Act, including adding zoning protections for community substance-related disorder residential programs that currently exist in statute for community mental health residential programs.

¹The Workgroup’s web and email addresses are as follows: http://dhmh.maryland.gov/bhd/SitePages/Behavioral%20Health%20Integration%20Stakeholder%20Workgroup.aspx; and dhmh.bhiworkgroup@maryland.org.
Regulations Review & Recommendations

As stated previously, the final three meetings of the workgroup were prioritized to review the draft regulations for community behavioral health programs. Members of the workgroup, along with the public, had the opportunity during each meeting to ask questions and make recommendations on the proposed regulations.

In addition, the draft regulations were posted to the existing websites of the Alcohol and Drug Abuse Administration and the Mental Hygiene Administration, within the Department, from September 9, 2014 through October 3, 2014. This informal comment period was announced through multiple means, including through the email listservs of the Workgroup, the Maryland Advisory Council on Mental Hygiene, and the State Drug and Alcohol Abuse Council. During the informal comment period, BHA received 16 submissions from organizations and individuals with recommendations in writing.

As substantive changes were made to the regulation proposals during the informal comment period, workgroup members asked during the final meeting on October 17, 2014, that a second informal comment period be conducted. This would allow stakeholders to review changes that the Department has agreed to, and allow for a final review to resolve any outstanding concerns, prior to the regulations being posted in the Maryland Register for formal comment. After consideration of the implementation timeline, the Department decided to open a second informal comment period from November 24, 2014 through December 5, 2014. This opportunity will also be widely communicated to the Workgroup email listserv and greater behavioral health treatment and recovery community.

Next Steps

With the creation of BHA on July 1, 2014, there remains additional work to fully integrate the Alcohol and Drug Abuse Administration with the Mental Hygiene Administration. In addition to the proposed legislation and community behavioral health program regulations, BHA is also working with the Department’s Maryland Medical Assistance Program to fully implement the roll-out of the new Administrative Services Organization contract. Through these initiatives, next steps for the Department include:

- coordinating the implementation of the new Administrative Services Organization contract for January 1, 2015, including the integration of substance-related disorder services under a performance-based carve-out;
- providing technical assistance to providers through January 1, 2017 on the requirements and effective dates for accreditation; and
- reviewing Subtitles 21 and 47 under the Title 10 regulations to determine which regulations will be repealed on December 31, 2016, with the implementation of new community behavioral health program regulations requiring accreditation.
Appendix A

Behavioral Health Administration
Behavioral Health Integration Stakeholder Workgroup
House Bill 1510, Chapter 460 of the Acts of 2014

DHMH Agencies:
- Behavioral Health Administration
- Office of the Attorney General
- Office of Health Care Quality
- Office of Health Services
- Office of Inspector General

Stakeholder Organizations:
- ADAA Provider Advisory Board
- Community Behavioral Health Association of Maryland
- Drug Policy and Public Health Strategies Clinic
- Maryland Addictions Directors Council
- Maryland Association for Treatment of Opioid Dependence
- Maryland Association of Core Service Agencies
- Maryland Coalition of Families for Children’s Mental Health
- Maryland Community Health System
- Maryland Disability Law Center
- Maryland Recovery Organization Connecting Communities
- Maryland Society of Addiction Medicine
- Mental Health Association of Maryland
- National Alliance on Mental Illness – Maryland
- National Council on Alcoholism and Drug Dependence of Maryland Chapter
- On Our Own of Maryland