MAINE STATE LEGISLATURE

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Amendment Name: Amendment CA (H-815) (LD 1418 2020)

Date: 8/5/2020

1	L.D. 1418
2	Date: (Filing No. H-)
3	HEALTH AND HUMAN SERVICES
4	Reproduced and distributed under the direction of the Clerk of the House.
5	STATE OF MAINE
6	HOUSE OF REPRESENTATIVES
7	129TH LEGISLATURE
8	SECOND SPECIAL SESSION
9 10	COMMITTEE AMENDMENT " " to H.P. 1031, L.D. 1418, Bill, "An Act To Address Maine's Shortage of Behavioral Health Services for Minors"
11 12	Amend the bill by striking out everything after the enacting clause and inserting the following:
13	'Sec. 1. 34-B MRSA §15001, sub-§1-A is enacted to read:
14 15 16	1-A. Behavioral health needs. "Behavioral health needs" means a wide range of mental health disorders and illnesses, substance use disorder, developmental disabilities and autism spectrum disorder.
17	Sec. 2. 34-B MRSA §15001, sub-§6-A is enacted to read:
18 19	6-A. Extended stay. "Extended stay" means a stay of a patient in a health care facility that is longer than 24 hours.
20	Sec. 3. 34-B MRSA §15001, sub-§7-A is enacted to read:
21 22 23 24	7-A. Hospital emergency department. "Hospital emergency department" means the department of a hospital responsible for the provision of medical and surgical care to patients arriving at the hospital with health conditions, including illnesses and trauma, requiring immediate care.
25	Sec. 4. 34-B MRSA §15005 is enacted to read:
26	§15005. Data collection regarding children in hospital emergency departments
27 28 29 30 31 32 33	1. Data collection; posted on website. A hospital shall provide data to the department in a mutually agreed upon format on the number of children with behavioral health needs remaining in hospital emergency departments for extended stays, the length of the extended stays and the reasons for the extended stays. The department shall post aggregated data on an annual basis on a publicly accessible website without any information, including health care information, that may directly identify any individual child or family.

- 2. Coordination by department. The department shall designate coordinators who have the responsibility to facilitate the provision of appropriate services as needed for a child with behavioral health needs who no longer requires medical or surgical care in a hospital emergency department but requires services to address behavioral health needs in another setting, including, but not limited to, a hospital or a setting in the community. The coordinator shall communicate between the department, the hospital emergency department and other providers of behavioral health services.
- 3. Report. Beginning January 1, 2022 and annually thereafter, the department shall submit a report to the joint standing committee of the Legislature having jurisdiction over health and human services matters that includes an annual compilation of the data collected by the department pursuant to subsection 1 and any relevant actions taken by the department, including by coordinators authorized in subsection 2, that affect the number of children with behavioral health needs remaining in hospital emergency departments for extended stays and the length of the extended stays.
- Sec. 5. Department of Health and Human Services to promote and improve use of children's behavioral health program coordinators. The Department of Health and Human Services, Office of Child and Family Services shall promote and improve the use of children's behavioral health program coordinators that are currently designated by the department to ensure children's emotional and behavioral challenges receive the most effective services in the least restrictive environment in order to assist hospital emergency departments to find appropriate behavioral health placements for children with behavioral health needs who no longer need medical or surgical care in a hospital emergency department. The department shall submit a report, no later than January 1, 2022, to the joint standing committee of the Legislature having jurisdiction over health and human services matters regarding its efforts to improve the use of behavioral health program coordinators to assist hospitals and children with behavioral health needs as described in this section.'

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

30 SUMMARY

This amendment replaces the bill. It requires the Department of Health and Human Services to collect data on the number of children with behavioral health needs remaining in hospital emergency departments for extended stays, the length of the extended stays and the reasons for the extended stays and post the data annually on a publicly accessible website without any information, including health care information, that may directly identify any individual child or family. The department is required to submit a report to the joint standing committee of the Legislature having jurisdiction over health and human services matters with annual data and any department efforts to reduce the number of children and lengths of stay. The department is also required to promote and improve the use of the current children's behavioral health program coordinators within the Office of Child and Family Services to assist hospitals to place children in more appropriate

COMMITTEE AMENDMENT " to H.P. 1031, L.D. 1418

1 2	behavioral health settings and report its efforts in a report to the joint standing committee of the Legislature having jurisdiction over health and human services matters.
3	FISCAL NOTE REQUIRED
4	(See attached)

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129th MAINE LEGISLATURE

LD 1418

LR 24(03)

An Act To Address Maine's Shortage of Behavioral Health Services for Minors

Fiscal Note for Bill as Amended by Conference Committee Amendment " "
Committee: Health and Human Services
Fiscal Note Required: Yes

Fiscal Note

Minor cost increase - General Fund

Fiscal Detail and Notes

Any additional costs to the Department of Health and Human Services from the provisions of this bill are expected to be minor and can be absorbed within existing budgeted resources.