# MAINE STATE LEGISLATURE

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## 130th MAINE LEGISLATURE

### FIRST REGULAR SESSION-2021

**Legislative Document** 

No. 693

H.P. 505

House of Representatives, March 4, 2021

An Act To Make the Pilot Program Providing Mental Health Case Management Services to Veterans a Permanent Program

(EMERGENCY)

Received by the Clerk of the House on March 2, 2021. Referred to the Committee on Veterans and Legal Affairs pursuant to Joint Rule 308.2 and ordered printed pursuant to Joint Rule 401.

ROBERT B. HUNT

R(+ B. Hunt

Clerk

Presented by Representative ROBERTS of South Berwick.

Cosponsored by Representatives: CAIAZZO of Scarborough, Speaker FECTEAU of Biddeford, McCREIGHT of Harpswell, PIERCE of Falmouth, RIELLY of Westbrook, WHITE of Waterville, Senators: President JACKSON of Aroostook, LUCHINI of Hancock.

**Emergency preamble.** Whereas, acts and resolves of the Legislature do not become effective until 90 days after adjournment unless enacted as emergencies; and

**Whereas,** this legislation makes permanent the pilot program to provide case management services to veterans for mental health care established by Resolve 2017, chapter 24; and

Whereas, this legislation must take effect before the expiration of the 90-day period to ensure continued case management services are provided without interruption after the pilot program ends; and

Whereas, in the judgment of the Legislature, these facts create an emergency within the meaning of the Constitution of Maine and require the following legislation as immediately necessary for the preservation of the public peace, health and safety; now, therefore,

#### Be it enacted by the People of the State of Maine as follows:

#### Sec. 1. 22 MRSA §1833 is enacted to read:

#### §1833. Mental health care services for veterans

- 1. Screening. A hospital licensed under this chapter shall screen all patients presenting for emergency care at the hospital's emergency department regarding whether or not the patient has prior service in the military. This information must be added to the hospital's patient data management system.
- 2. Reporting. A hospital licensed under this chapter shall compile data regarding the number of patients who identify as having prior service in the military who reported or presented a behavioral or mental health emergency when seeking care from the hospital emergency department, including the number who were admitted or referred for inpatient treatment for psychiatric care. The data collected in accordance with this subsection may not include information that would disclose the identity of the patient. A hospital licensed under this chapter shall report the data to the department twice per year, for the period from January 1st to June 30th and for the period from July 1st to December 31st. The department shall establish the date by which the data for each period must be reported.
- 3. Waiver. The department may grant a waiver of the screening and data collection requirements under subsections 1 and 2 to a hospital that demonstrates that the requirements constitute an excessive burden that will substantially affect the operation of the hospital. The department may not grant a waiver under this subsection to more than 4 hospitals.
- 4. Certain hospitals. If a report submitted to the department pursuant to Resolve 2017, chapter 24, Part A, section 2 or pursuant to subsection 2 shows that a hospital identifies 95% or more of the patients who presented for emergency care as having prior service in the military by the fact that they are enrolled and receive health care benefits from the United States Department of Veterans Affairs, the hospital is no longer required to screen patients and collect data as required by this section.
- 5. Annual department report. The department shall work with the Department of Defense, Veterans and Emergency Management, Maine Bureau of Veterans' Services to analyze the data submitted by hospitals in accordance with subsection 2 to quantify the

unmet need for mental health care services, particularly inpatient mental health care services, and to identify gaps in mental health care services provided by the United States Department of Veterans Affairs. The department and the bureau shall submit a report on the analysis to the joint standing committee of the Legislature having jurisdiction over veterans affairs no later than February 1st annually.

6. Costs mitigated. The department shall distribute an annual stipend from the Veterans Mental Health Case Management and Services Fund under Title 34-B, section 3912 to each hospital that screened for military service and collected data in accordance with subsections 1 and 2. The department shall adopt routine technical rules in accordance with Title 5, chapter 375, subchapter 2-A to set the amount of the annual stipend.

Sec. 2. 34-B MRSA c. 3, sub-c. 7 is enacted to read:

#### SUBCHAPTER 7

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#### MENTAL HEALTH CASE MANAGEMENT SERVICES FOR VETERANS

#### §3911. Mental health case management services for veterans

The department shall provide contracted case management services to provide necessary mental health treatment to veterans who are residents of the State. Case management services must include assisting veterans in accessing a range of mental and behavioral health services, which must include inpatient mental health care services as clinically required. The department, with the assistance of the Department of Defense, Veterans and Emergency Management, Maine Bureau of Veterans' Services, referred to in this subchapter as "the bureau," shall identify regions of the State where case management services are most needed and identify veterans seeking case management services who are enrolled with the United States Department of Veterans Affairs and those who would likely be eligible to be enrolled.

- 1. Coordination. The department, with the assistance of the bureau, shall seek to coordinate services with the United States Department of Veterans Affairs and state agencies that offer mental health care services or provide assistance to veterans.
- 2. Regional contracts. The department may enter into regional contracts, including a contract with a provider that has experience providing services in the northern part of the State, for the purpose of ensuring a statewide network of case management that provides coordinated mental health care services for veterans living in the State, including, but not limited to, inpatient treatment as clinically required.
- 3. Eligibility. An individual who served in the Armed Forces of the United States and meets the definition of "veteran" under 38 Code of Federal Regulations, Section 3.1 or is currently serving in the Maine Army National Guard or Air National Guard or the Reserves of the Armed Forces of the United States is eligible to receive services under this subchapter. The character of a veteran's discharge from service is not a disqualifying eligibility criterion to receive services under this subchapter. A veteran who has received a mental health diagnosis or mental health disability rating from the United States Department of Veterans Affairs is eligible to receive services under this subchapter. A veteran who is not enrolled with the United States Department of Veterans Affairs who is determined to require mental health care services by a licensed mental health professional

- may be considered eligible for case management and other behavioral health services under this subchapter based on the individual needs of the veteran. The department, with the assistance of the bureau, shall establish criteria to determine eligibility for case management services to be provided under this subchapter.
- 4. Enrollment. The bureau shall work to assist veterans receiving case management services under this subchapter who are not enrolled with the United States Department of Veterans Affairs to determine eligibility and to assist with those veterans' enrollment and with filing claims to the United States Department of Veterans Affairs.
- <u>5. Cultural competency.</u> Case management and mental health professionals selected to provide services pursuant to this subchapter must demonstrate familiarity with military and veteran culture.
- 6. Data collection. All veterans receiving case management and mental health services under this subchapter must be accounted for in department and bureau data collections.
- 7. Department report. The department, in consultation with the bureau, shall prepare a written report of the services provided under this subchapter and make any recommendations regarding its provision of services under this subchapter to the joint standing committee of the Legislature having jurisdiction over veterans affairs by February 1st annually.

#### §3912. Veterans Mental Health Case Management and Services Fund

The Veterans Mental Health Case Management and Services Fund, referred to in this section as "the fund," is established as a dedicated, nonlapsing Other Special Revenue Funds account in the department. The fund is administered by the department for the purposes of reimbursing hospitals for the costs of screening and data collection conducted pursuant to Title 22, section 1833, subsection 6 and to support the provision of case management services for veterans under this subchapter.

**Emergency clause.** In view of the emergency cited in the preamble, this legislation takes effect when approved.

29 SUMMARY

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This bill makes permanent the pilot program to provide case management services to veterans for mental health care established by Resolve 2017, chapter 24.