

# HOUSE BILL 367

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CF 51r0620

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By: **Delegates Rosenberg, Bromwell, Carr, Carter, Cullison, Hill, Kelly, Reznik,  
and Sample–Hughes**

Introduced and read first time: February 6, 2015

Assigned to: Health and Government Operations

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## A BILL ENTITLED

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

17 BY repealing and reenacting, with amendments,

18 Article – Health – General

19 Section 10–1401 through 10–1405 to be under the amended subtitle “Subtitle 14.

20 Maryland Behavioral Health Crisis Response System”

21 Annotated Code of Maryland

22 (2009 Replacement Volume and 2014 Supplement)

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

24 BY repealing and reenacting, with amendments,

25 Article – Health – General

26 Section 19–303(a)(3)

27 Annotated Code of Maryland

28 (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.



1 BY repealing  
2 Chapter 371 of the Acts of the General Assembly of 2002  
3 Section 2

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

6 **Article – Health – General**

7 Subtitle 14. Maryland **[Mental] BEHAVIORAL** Health Crisis Response System.  
8 10–1401.

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

10 **(B) “ADMINISTRATION” MEANS THE BEHAVIORAL HEALTH**  
11 **ADMINISTRATION.**

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

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

15 10–1402.

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

18 (b) The Crisis Response System shall:

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

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

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

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

1 10-1403.

2 (a) The Crisis Response System shall include:

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

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

6 (ii) Coordination with the local core service agency, police,  
7 emergency medical service personnel, and [mental] **BEHAVIORAL** health providers; [and]

8 **(III) TRANSPORTATION COORDINATION TO ACCESS SERVICES,**  
9 **INCLUDING TRANSPORTATION TO URGENT APPOINTMENTS OR TO EMERGENCY**  
10 **PSYCHIATRIC FACILITIES; AND**

11 [(iii)] **(IV) [Services] PROGRAMS** that [may] **SHALL** include:

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

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

16 3. [Triage for initial assessment and referral];

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

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

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

22 **B. CRISIS STABILIZATION UNTIL ADDITIONAL SERVICES**  
23 **ARE AVAILABLE;**

24 **C. LINKAGE TO TREATMENT SERVICES AND FAMILY AND**  
25 **PEER SUPPORT GROUPS; AND**

26 **D. LINKAGE TO OTHER HEALTH AND HUMAN SERVICES**  
27 **PROGRAMS;**

28 [6.] 4. [Coordination of] **CRITICAL INCIDENT STRESS**  
29 **MANAGEMENT TEAMS, PROVIDING** disaster [mental] **BEHAVIORAL** health [teams]

1 **SERVICES**, critical incident stress management, and [maintenance of] an on-call system  
2 for these services;

3 **5. CRISIS RESIDENTIAL BEDS TO SERVE AS AN**  
4 **ALTERNATIVE TO HOSPITALIZATION;**

5 [7. A community crisis bed and hospital bed registry,  
6 including a daily tally of empty beds;

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

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

11 (2) Emergency services including:

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

16 [(ii) Urgent care; and

17 (iii) Emergency psychiatric services;

18 (3) Follow-up services including:

19 (i) Mobile treatment teams to provide outreach services on  
20 location;]

21 **7. 23-HOUR HOLDING BEDS;**

22 **8. EMERGENCY PSYCHIATRIC SERVICES;**

23 **9. URGENT CARE CAPACITY;**

24 **10. EXPANDED CAPACITY FOR ASSERTIVE COMMUNITY**  
25 **TREATMENT;**

26 **11. CRISIS INTERVENTION TEAMS WITH CAPACITY TO**  
27 **RESPOND IN EACH JURISDICTION 24 HOURS A DAY AND 7 DAYS A WEEK; AND**

28 [(ii) **12. Individualized family intervention teams; [and**

1 (iii) Residential crisis services;]

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

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

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

6 (II) ANNUAL DATA COLLECTION ON THE NUMBER OF  
7 BEHAVIORAL HEALTH CALLS RECEIVED BY POLICE, ATTEMPTED AND COMPLETED  
8 SUICIDES, UNNECESSARY HOSPITALIZATIONS, HOSPITAL DIVERSIONS, ARRESTS  
9 AND DETENTIONS OF INDIVIDUALS WITH BEHAVIORAL HEALTH DIAGNOSES, AND  
10 DIVERSION OF ARRESTS AND DETENTIONS OF INDIVIDUALS WITH BEHAVIORAL  
11 HEALTH DIAGNOSES.

12 (B) THE ADMINISTRATION SHALL MAINTAIN A COMMUNITY CRISIS BED AND  
13 HOSPITAL BED REGISTRY, INCLUDING A DAILY TALLY OF EMPTY BEDS.

14 [(b)] (C) The Crisis Response System services shall be implemented as  
15 determined by THE ADMINISTRATION IN COLLABORATION WITH the core service agency  
16 serving each jurisdiction.

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

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

21 10–1404.

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

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

27 10–1405.

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

30 19–303.

1 (a) (3) “Community benefit” means an activity that is intended to address  
2 community needs and priorities primarily through disease prevention and improvement of  
3 health status, including:

4 (i) Health services provided to vulnerable or underserved  
5 populations such as Medicaid, Medicare, or Maryland Children’s Health Program enrollees;

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

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

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

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

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

13 **Chapter 371 of the Acts of 2002**

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

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