| 1  | L.D. 1231  |  |  |  |
|--|--|--|--|--|
| 2  | Date: (Filing No. H- )   |  |  |  |
| 3  | VETERANS AND LEGAL AFFAIRS   |  |  |  |
| 4  | Reproduced and distributed under the direction of the Clerk of the House.  |  |  |  |
| 5  | STATE OF MAINE   |  |  |  |
| 6  | HOUSE OF REPRESENTATIVES   |  |  |  |
| 7  | 128TH LEGISLATURE  |  |  |  |
| 8  | FIRST REGULAR SESSION  |  |  |  |
| 9<br>10  | COMMITTEE AMENDMENT " " to H.P. 853, L.D. 1231, Bill, "An Act Regarding Mental Health Care for Maine Veterans"   |  |  |  |
| 11   | Amend the bill by striking out the title and substituting the following:   |  |  |  |
| 12<br>13<br>14   | 'Resolve, To Assess the Need for Mental Health Care Services for Veterans in Maine and To Establish a Pilot Program To Provide Case Management Services to Veterans for Mental Health Care'  |  |  |  |
| 15<br>16   | Amend the bill by striking out everything after the title and before the summary and inserting the following:  |  |  |  |
| 17   | 'PART A  |  |  |  |
| 18<br>19<br>20<br>21<br>22<br>23<br>24                   | Sec. A-1. Hospitals to inquire about past military service of patients presenting for emergency care. Resolved: That, beginning no later than January 1, 2018 and until December 31, 2020, a hospital licensed under the Maine Revised Statutes, Title 22, chapter 405 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 into the hospital's patient data management system; and be it further   |  |  |  |
| 25<br>26<br>27<br>28<br>29<br>30<br>31<br>32<br>33<br>34 | Sec. A-2. Hospitals to report data to the Commissioner of Health and Human Services. Resolved: That, from January 1, 2018 to December 31, 2020, a hospital licensed under the Maine Revised Statutes, Title 22, chapter 405 shall compile data regarding the number of patients who identified as having served 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 must not include information that would disclose the identity of the patient. Hospitals shall report the data to the Commissioner of Health and Human Services twice per year, for the period from January 1st to June 30th and for the period from July 1st to |  |  |  |

 December 31st. The commissioner shall establish the date by which the data for each period must be reported; and be it further

- Sec. A-3. Commissioner may waive screening and data collection requirement. Resolved: That the Commissioner of Health and Human Services may grant a waiver of the screening and data collection requirements of this resolve to a hospital that demonstrates that the requirements constitute an excessive burden that will substantially affect the operation of the hospital. The commissioner may not grant a waiver described under this section to more than 4 hospitals; and be it further
- **Sec. A-4. Obligation to screen and collect data discontinued for certain hospitals. Resolved:** That, if reports submitted to the Commissioner of Health and Human Services show that a hospital, in the initial 6-month period of data collection, identified 95% or more of the patients who presented for emergency care as having prior military service 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 resolve; and be it further
- **Sec. A-5. Report required. Resolved:** That the Commissioner of Health and Human Services shall work with the Director of the Bureau of Maine Veterans' Services within the Department of Defense, Veterans and Emergency Management to analyze the data submitted by hospitals in accordance with section 2 of this Part 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 commissioner and the director shall submit a report on the analysis to the joint standing committee of the Legislature having jurisdiction over veterans affairs no later than February 1, 2020; and be it further
- Sec. A-6. Commissioner shall distribute funds to mitigate costs of compliance. Resolved: That, by July 15, 2018, the Commissioner of Health and Human Services shall distribute \$4,500 to each hospital that screened for military service and collected data in accordance with sections 2 and 3 of this Part.

29 PART B

Sec. B-1. Commissioner of Health and Human Services to establish pilot program to provide mental health case management services to veterans. Resolved: That, beginning January 1, 2018, the Commissioner of Health and Human Services shall establish and implement a pilot program to 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 gaining a range of mental and behavioral health services, which must include inpatient mental health care services. In establishing the pilot program, the commissioner shall consult with the Director of the Maine Bureau of Veterans' Services within the Department of Defense, Veterans and Emergency Management to identify regions where case management services are most needed and to identify veterans seeking case management who are enrolled with the United States Department of Veterans Affairs and those who would likely be eligible to be enrolled. The pilot program described in this

| 1 2                  | section must continue until January 1, 2020 or until the funds provided in Part C ar exhausted.  |                      |             |  |
|----------------------|--|----------------------|-------------|--|
| 3<br>4<br>5          | 1. The commissioner, with the assistance of the director, shall seek to coordina services with the United States Department of Veterans Affairs and state agencies who offer mental health care services or provide assistance to veterans.  |                      |             |  |
| 6<br>7<br>8          | 2. The commissioner may enter into regional contracts for the purpose of ensuring statewide network of case management that provides coordinated mental health car services for Maine veterans.  |                      |             |  |
| 9<br>10<br>11        | 3. The commissioner, with the assistance of the director, shall establish criteria to determine eligibility for case management services to be provided in accordance with this section.   |                      |             |  |
| 12<br>13<br>14<br>15 | 4. The director shall work to assist veterans receiving case management under the pilot program 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.    |                      |             |  |
| 16                   | PART C   |                      |             |  |
| 17<br>18             | Sec. C-1. Appropriations and allocation appropriations and allocations are made.   | s. Resolved: That th | e following |  |
| 19                   | HEALTH AND HUMAN SERVICES, DEPARTMENT OF (FORMERLY BDS)  |                      |             |  |
| 20                   | Office of Substance Abuse and Mental Health Services 0679  |                      |             |  |
| 21<br>22             | Initiative: Provides one-time funding for a pilot program to provide case management services to veterans requiring mental health care services.   |                      |             |  |
| 23                   | GENERAL FUND   | 2017-18              | 2018-19     |  |
| 24                   | All Other  | \$750,000            | \$0         |  |
| 25<br>26             | GENERAL FUND TOTAL   | \$750,000            | \$0         |  |
| 27                   | Office of Substance Abuse and Mental Health Serv   | vices 0679           |             |  |
| 28<br>29<br>30<br>31 | Initiative: Provides one-time funding of \$4,500 each for hospitals to configure electronic medical record systems for the purposes of screening emergency room patients for past military services and collecting data regarding the number of veterans seeking emergency room services for behavioral or mental health issues. |                      |             |  |
| 32                   | GENERAL FUND   | 2017-18              | 2018-19     |  |

\$125,000

\$125,000

\$0

\$0

33

34

35

All Other

GENERAL FUND TOTAL

2324

| 1<br>2<br>3<br>4   | HEALTH AND HUMAN SERVICES,<br>DEPARTMENT OF (FORMERLY BDS)<br>DEPARTMENT TOTALS  | 2017-18   | 2018-19 |
|--|--|-----------|---------|
| 5  | GENERAL FUND   | \$875,000 | \$0     |
| 6<br>7<br>8  | DEPARTMENT TOTAL - ALL FUNDS   | \$875,000 | \$0     |
| 9  | SUMMARY  |           |         |
| 10<br>11<br>12<br>13<br>14<br>15<br>16<br>17<br>18<br>19<br>20<br>21<br>22 | This amendment replaces the bill with a resolve. The amendment establishes a program for the collection of data by hospitals regarding the number of veterans presenting to the hospitals' emergency departments for mental or behavioral health care. The data must be analyzed by the Commissioner of Health and Human Services, in coordination with the Director of the Maine Bureau of Veterans' Services within the Department of Defense, Veterans and Emergency Management, to quantify the unmet need for mental health care services, particularly inpatient treatment, among veterans in the State and to identify gaps in mental health care services administered by the United States Department of Veterans Affairs. The amendment also establishes a 2-year pilot program to provide contracted case management services to veterans in need of mental health care services. The amendment provides funding to mitigate the costs to hospitals for collecting and reporting data and to pay for the contracted case management services program. |           |         |

## FISCAL NOTE REQUIRED

(See attached)