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H.P. 84  House of Representatives, January 13, 2021

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

Received by the Clerk of the House on January 11, 2021. Referred to the Committee on Health and Human Services pursuant to Joint Rule 308.2 and ordered printed pursuant to Joint Rule 401.

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

Sec. 1. 34-B MRSA §15001, sub-§1-A is enacted to read:

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.

Sec. 2. 34-B MRSA §15001, sub-§6-A is enacted to read:

6-A. Extended stay. "Extended stay" means a stay of a patient in a health care facility that is longer than 24 hours.

Sec. 3. 34-B MRSA §15001, sub-§7-A is enacted to read:

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.

Sec. 4. 34-B MRSA §15005 is enacted to read:

§15005. Data collection regarding children in hospital emergency departments

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, 2023 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, 2023, 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.

SUMMARY

This bill 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 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.