



# 126th MAINE LEGISLATURE

## FIRST REGULAR SESSION-2013

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Legislative Document

No. 1367

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H.P. 975

House of Representatives, April 9, 2013

**An Act To Require Health Insurance Carriers and the MaineCare Program To Cover the Cost of Transition Services To Bridge the Gap between High School and Independence**

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Reference to the Committee on Insurance and Financial Services suggested and ordered printed.

*Millicent M. MacFarland*  
MILLICENT M. MacFARLAND  
Clerk

Presented by Representative GRAHAM of North Yarmouth.  
Cosponsored by President ALFOND of Cumberland and  
Representatives: BEAUDOIN of Biddeford, BEAVERS of South Berwick, BRIGGS of Mexico, CASSIDY of Lubec, CHIPMAN of Portland, COOPER of Yarmouth, DAUGHTRY of Brunswick, EVANGELOS of Friendship, FARNSWORTH of Portland, GATTINE of Westbrook, GILBERT of Jay, GRANT of Gardiner, KORNFIELD of Bangor, LONGSTAFF of Waterville, MASTRACCIO of Sanford, McLEAN of Gorham, MONAGHAN-DERRIG of Cape Elizabeth, PEASE of Morrill, PRINGLE of Windham, RYKERSON of Kittery, SCHNECK of Bangor, TREAT of Hallowell, Senators: CRAVEN of Androscoggin, KATZ of Kennebec.

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

2 **Sec. 1. 22 MRSA §3174-WW** is enacted to read:

3 **§3174-WW. Transitional behavioral and mental health services for students after**  
4 **graduation**

5 For the purpose of easing the transition to independence of children receiving  
6 behavioral and mental health services in high school after graduation, the department  
7 shall provide reimbursement under the MaineCare program for outreach to and case  
8 management for patients who are graduating from high school or have recently graduated  
9 from high school and who are having difficulty complying with treatment, including  
10 coverage for clinic visits and for behavioral and mental health services for prevention of  
11 and continuation of treatment for mental health conditions and the avoidance of  
12 hospitalization.

13 **Sec. 2. 24-A MRSA §4320-I** is enacted to read:

14 **§4320-I. Transitional behavioral and mental health services for students after**  
15 **graduation**

16 For the purpose of easing the transition to independence of children receiving  
17 behavioral and mental health services in high school after graduation, a carrier shall  
18 provide coverage for outreach to and case management for patients who are graduating  
19 from high school or have recently graduated from high school and who are having  
20 difficulty complying with treatment, including coverage for clinic visits and for  
21 behavioral and mental health services for prevention of and continuation of treatment for  
22 mental health conditions and the avoidance of hospitalization.

23 **Sec. 3. Transition services.** The Department of Health and Human Services shall  
24 require each provider of behavioral and mental health services for children to establish or  
25 participate in so-called bridge teams for the purpose of ensuring continuity of care for  
26 students receiving behavioral and mental health services who graduate from high school.  
27 The bridge teams shall conduct outreach and identify students prior to graduation who are  
28 likely to be in need of behavioral and mental health services after graduation, develop  
29 plans to meet those students' needs after graduation, facilitate access to services and  
30 coordinate the continuance of care for those students after graduation. When developing  
31 plans for students, the bridge teams shall focus on prevention, continuity of treatment and  
32 avoidance of hospitalization.

33 **SUMMARY**

34 This bill requires the Department of Health and Human Services to require providers  
35 of behavioral and mental health services for children to establish or participate in so-  
36 called bridge teams for the purpose of ensuring continuity of care for students receiving  
37 behavioral and mental health services who graduate from high school and are likely to be  
38 in need of such services following graduation. The bill also requires MaineCare and  
39 private health insurance carriers to provide coverage for such services.