

OFFICE OF POLICY AND LEGAL ANALYSIS

Date: March 24, 2021

To: Veterans and Legal Affairs Committee

From: Janet Stocco, Legislative Analyst

LD 693 **An Act To Make the Pilot Program Providing Mental Health Case Management Services to Veterans a Permanent Program** (*Rep. Roberts*)

SUMMARY

This emergency bill is designed to make permanent the pilot program established in Resolve 2017, chapter 24 to provide mental health case management services to Maine veterans.

Screening & data collection. Section 1 of the bill requires hospitals to:

1. Screen all emergency room patients for prior military service;
2. Report data to DHHS twice yearly on emergency room patients with prior military experience who:
 - Present a behavioral or mental health (“MH”) emergency;
 - Are referred or admitted for inpatient psychiatric care.

Hospitals may be exempted from these screening and data collection activities in one of two ways:

- The Commissioner of DHHS may waive the data-collection requirements for no more than 4 hospitals for whom the requirements constitute an excessive burden.
- If a hospital’s data collected under Resolve 2017, ch. 24 or the bill demonstrates that it identifies 95% of its emergency room patients’ prior military service based on the patients’ receipt of VA health care benefits, the hospital need not continue screening/collecting data.

Hospital stipend: DHHS must distribute an annual stipend from the Veterans Mental Health Case Management and Services Fund established on page 3 of the bill to each hospital that screens, collects and reports data, in an amount established by DHHS through routine technical rules.

MH Case Management Services. Section 2 of the bill requires DHHS to enter contracts for the provision of case management services to assist veterans in accessing a range of mental and behavioral health services, including inpatient services as clinically required.

- *Where:* DHHS must work with MBVS to identify regions of the State where these services are most needed and shall enter into regional contracts. One contract must be in northern Maine.
- *Coordination:* DHHS and MBVS must (1) identify veterans seeking case management services who are enrolled in the VA or who are likely eligible for enrollment; MBVS must assist the latter group of veterans with enrollment and (2) coordinate services under the program with the VA and with other state agencies that provide mental health services or other assistance to veterans.
- *Eligibility:* To be eligible for case management services, the individual must:
 - Be a resident of Maine;
 - Be a “veteran” — defined as “a person who served in the active military, naval, or air service,” *see* [38 C.F.R. §3.1](#), or who is currently serving in the Maine National Guard or Reserves— regardless of the character of the veteran’s discharge from service;

- Have received a mental health diagnosis or a mental health disability rating from the VA or, if the person is not enrolled with the VA, have been determined to require mental health services by a licensed mental health professional; and
- Meet the requirements established by DHHS and MBVS for case management services.
- *Cultural competency*: Case managers must demonstrate familiarity with military and veteran culture.
- *Data collection*: DHHS and MBVS must collect data on the provision of case management services.

Annual report: DHHS & MBVS must submit an annual report by Feb. 1st to the VLA Committee that:

- Based on the data submitted by hospitals, quantifies the unmet need for veteran mental health care services, including inpatient services, and identifies gaps in VA mental health services; and
- Describes the contracted mental health case management services provided to veterans and makes recommendations regarding the provision of those services.

Veterans Mental Health Case Management and Services Fund. The bill (p. 3, lines 20-21) establishes a nonlapsing fund, administered by DHHS, for purposes of (1) reimbursing hospitals for the costs of the screening and data collection and (2) funding for case management services for veterans.

ADDITIONAL INFORMATION:

Legislative History:

The 128th Legislature enacted [Resolve 2017, chapter 24](#), which:

1. Required hospitals to screen emergency room patients for military service and to collect data about the number of those individuals with a mental health emergency as well as the number who were admitted or referred for inpatient psychiatric care from January 1, 2018 through December 31, 2020. In return, each hospital that engaged in these activities was entitled to a \$4,500 stipend.
2. Established a pilot project to provide mental health case management services to veterans from January 1, 2018 through January 1, 2020. The language of the resolve was nearly identical to the language of LD 693, except that DHHS was not required to select a provider with experience providing services in the northern part of the State.
3. A total of \$850,000 was appropriated to fund the hospital stipends and case management services.

DHHS presented its report on Resolve 2017, chapter 24 to the VLA Committee in January 2020. *See* <https://legislature.maine.gov/testimony/resources/VLA20210322@DHHS132608916489995851.pdf>.

In the 129th Legislature, the VLA Committee proposed to amend Resolve 2017, chapter 24 through a [unanimous committee amendment to LD 835](#) (see attached). The amendment had not yet been reported out of committee when the Legislature adjourned due to COVID-19. This amendment would have:

1. Extended the end date of the pilot program from January 1, 2020 to June 30, 2021;
2. Required DHHS to contract with a provider experienced in providing services in Northern Maine;
3. Appropriated \$200,000 for the new contract for case management services for veterans in Aroostook and Washington Counties and \$118,056 to continue the 2 existing contracts through June 30, 2021.

AMENDMENTS PROPOSED AT PUBLIC HEARING

Maine Hospital Association & DHHS - Proposed Amendment: Remove the hospital screening and data-collection requirements as well as the hospital stipend. In her testimony, the Director of the Office

of Behavioral Health explained it is inefficient for hospitals to collect this data. Her office can obtain necessary data by requiring reporting on performance measures through the case management contracts established in section 2 of the bill as well as by examining data available from the Maine Health Data Organization to determine whether the program reduces veteran hospitalizations.

TECHNICAL ISSUES

“Veteran” eligibility. [LD 693](#) mirrors [Resolve 2017, ch. 24](#) by defining a “veteran” who is eligible for the case management program as an individual who meets the federal definition of veteran—*i.e.*, “a person who served in the *active* military, naval, or air service,” *see* [38 C.F.R. §3.1](#)—as well as an individual who is *currently serving* in the Maine National Guard or Reserves of the U.S. Armed Forces. Accordingly, if a former member of the National Guard or Reserves was never called to active service, that individual may not be eligible for case management services under LD 693. Does the committee wish to expand the definition of “veteran” in LD 693 to match the committee amendment to LD 835 last session (see attached), which included all former members of the Maine National Guard and Reserves?

REQUESTS FOR INFORMATION

➤ *To DHHS and DVEM:* Request a briefing on the outcomes of the pilot project conducted pursuant to Resolve 2017, ch. 24. Dr. Pollard and Director Richmond are scheduled to present the report today.

FISCAL IMPACT

Not yet determined.

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L.D. 835

Date: (Filing No. H-)

VETERANS AND LEGAL AFFAIRS

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**STATE OF MAINE
HOUSE OF REPRESENTATIVES
129TH LEGISLATURE
SECOND SPECIAL SESSION**

COMMITTEE AMENDMENT “ ” to H.P. 609, L.D. 835, Bill, “An Act To Increase Funding for Case Managers for Veterans”

Amend the bill by striking out the title and substituting the following:

'Resolve, To Extend the Pilot Program for Providing Mental Health Case Management Services to Veterans'

Amend the bill by striking out everything after the title and inserting the following:

'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 extends a crucial and highly successful pilot program that provides coordinated mental health care and case management services to veterans; and

Whereas, one of the 2 regional contracts for providing these services is scheduled to expire on July 1, 2020, which will likely occur before the 90-day period expires; 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

Sec. 1. Resolve 2017, c. 24, Pt. B, §1, amended. Resolved: That Resolve 2017, c. 24, Pt. B, §1 is amended to read:

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, referred to in this Part as "the commissioner," shall establish 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

Unanimous VLA Committee Amendment to LD 835 in the 129th Legislature:

COMMITTEE AMENDMENT “ ” to H.P. 609, L.D. 835

1 program, the commissioner shall consult with the Director of the Maine Bureau of ~~Maine~~
2 Veterans' Services within the Department of Defense, Veterans and Emergency
3 Management, referred to in this Part as "the director," to identify regions where case
4 management services are most needed and to identify veterans seeking case management
5 services who are enrolled with the United States Department of Veterans Affairs and
6 those who would likely be eligible to be enrolled. The pilot program described in this
7 section must continue until ~~January 1, 2020~~ June 30, 2021 or until the funds provided in
8 Part C are exhausted.

9 1. The commissioner, with the assistance of the director, shall seek to coordinate
10 services with the United States Department of Veterans Affairs and state agencies that
11 offer mental health care services or provide assistance to veterans.

12 2. The commissioner may enter into regional contracts, including a contract with a
13 provider that has experience providing services in northern Maine, for the purpose of
14 ensuring a statewide network of case management that provides coordinated mental
15 health care services for Maine veterans, including, but not limited to, inpatient treatment
16 as clinically required.

17 3. The commissioner, with the assistance of the director, shall establish criteria to
18 determine eligibility for case management services to be provided in accordance with this
19 section. A veteran who has received a mental health diagnosis or mental health disability
20 rating from the United States Department of Veterans Affairs must be considered eligible
21 for case management services. A veteran who is not enrolled with the United States
22 Department of Veterans Affairs who is determined to require mental health care services
23 by a licensed mental health professional may be considered eligible for case management
24 and other behavioral health services based on the individual needs of the veteran.

25 4. The director shall work to assist veterans receiving case management services
26 under the pilot program who are not enrolled with the United States Department of
27 Veterans Affairs to determine eligibility and to assist with those veterans' enrollment and
28 with filing claims to the United States Department of Veterans Affairs.

29 5. Case management and mental health professionals selected to participate in the
30 pilot program must demonstrate military and veteran cultural competency.

31 6. An individual who served in the United States Armed Forces and meets the
32 federal definition of veteran or who has served or is currently serving in the Maine Army
33 National Guard or Air National Guard or the Reserves of the United States Armed Forces
34 is eligible. Character of discharge is not a disqualifying eligibility criterion.

35 7. All veterans participating in the pilot program must be accounted for in the
36 Department of Defense, Veterans and Emergency Management, Maine Bureau of ~~Maine~~
37 Veterans' Services and the Department of Health and Human Services data collections.

38 8. ~~Upon conclusion of the pilot program~~ By February 1, 2021, the commissioner, in
39 consultation with the director, shall prepare a written report of the services provided and
40 make recommendations to the joint standing committee of the Legislature having
41 jurisdiction over veterans affairs if appropriate; and be it further

42 **Sec. 2. Resolve 2017, c. 24, Pt. C, §2, enacted. Resolved:** That Resolve 2017,
43 c. 24, Pt. C, §2 is enacted to read:

Unanimous VLA Committee Amendment to LD 835 in the 129th Legislature:

COMMITTEE AMENDMENT “ ” to H.P. 609, L.D. 835

1 **Sec. C-2. Appropriations and allocations. Resolved:** That the following
2 appropriations and allocations are made.

3 **HEALTH AND HUMAN SERVICES, DEPARTMENT OF**
4 **Veterans Mental Health Case Management and Services Fund Z261**

5 Initiative: Provides one-time funding for a new contract for case management services for
6 veterans in Aroostook and Washington counties through June 30, 2021.

7	GENERAL FUND	2019-20	2020-21
8	All Other	\$0	\$200,000
9			
10	GENERAL FUND TOTAL	<u>\$0</u>	<u>\$200,000</u>

11 **Veterans Mental Health Case Management and Services Fund Z261**

12 Initiative: Provides one-time funding to continue current contracts for case management
13 services for veterans through June 30, 2021.

14	GENERAL FUND	2019-20	2020-21
15	All Other	\$0	\$118,056
16			
17	GENERAL FUND TOTAL	<u>\$0</u>	<u>\$118,056</u>

18	HEALTH AND HUMAN SERVICES,		
19	DEPARTMENT OF		
20	DEPARTMENT TOTALS	2019-20	2020-21
21			
22	GENERAL FUND	\$0	\$318,056
23			
24	DEPARTMENT TOTAL - ALL FUNDS	<u>\$0</u>	<u>\$318,056</u>

25 **Sec. 3. Appropriations and allocations. Resolved:** That the following
26 appropriations and allocations are made.

27 **HEALTH AND HUMAN SERVICES, DEPARTMENT OF**
28 **Veterans Mental Health Case Management and Services Fund Z261**

29 Initiative: Provides one-time funding for a new contract for case management services for
30 veterans in Aroostook and Washington counties through June 30, 2021.

31	GENERAL FUND	2019-20	2020-21
32	All Other	\$0	\$200,000
33			
		<u> </u>	<u> </u>

Unanimous VLA Committee Amendment to LD 835 in the 129th Legislature:

COMMITTEE AMENDMENT “ ” to H.P. 609, L.D. 835

1 GENERAL FUND TOTAL \$0 \$200,000

2 **Veterans Mental Health Case Management and Services Fund Z261**

3 Initiative: Provides one-time funding to continue current contracts for case management
4 services for veterans through June 30, 2021.

5	GENERAL FUND	2019-20	2020-21
6	All Other	\$0	\$118,056
7			
8	GENERAL FUND TOTAL	<u>\$0</u>	<u>\$118,056</u>

9	HEALTH AND HUMAN SERVICES,		
10	DEPARTMENT OF		
11	DEPARTMENT TOTALS	2019-20	2020-21
12			
13	GENERAL FUND	\$0	\$318,056
14			
15	DEPARTMENT TOTAL - ALL FUNDS	<u>\$0</u>	<u>\$318,056</u>

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

18 Amend the bill by relettering or renumbering any nonconsecutive Part letter or
19 section number to read consecutively.

20 **SUMMARY**

21 This amendment, which is the unanimous report of the committee, replaces the bill,
22 which is a concept draft, with a resolve that extends until June 30, 2021 the pilot program
23 for providing mental health case management services to veterans established in Resolve
24 2017, chapter 24, Part B, section 1 and expands the pilot program to include a service
25 provider with experience in northern Maine. The amendment also adds an appropriations
26 and allocations section and an emergency preamble and emergency clause.

27 **FISCAL NOTE REQUIRED**

28 (See attached)



129th MAINE LEGISLATURE

LD 835

LR 1723(02)

An Act To Increase Funding for Case Managers for Veterans

Fiscal Note for Bill as Amended by Committee Amendment " "
Committee: Veterans and Legal Affairs
Fiscal Note Required: Yes

Fiscal Note

	FY 2019-20	FY 2020-21	Projections FY 2021-22	Projections FY 2022-23
Net Cost (Savings)				
General Fund	\$0	\$318,056	\$0	\$0
Appropriations/Allocations				
General Fund	\$0	\$318,056	\$0	\$0

Fiscal Detail and Notes

The bill includes a one-time General Fund appropriation to the Department of Health and Human Services of \$318,056 in fiscal year 2020-21 for a new contract for Aroostook and Washington counties and to continue the current contracts for case management services for veterans through June 30, 2021.

Additional costs to the Department of Defense, Veterans and Emergency Management associated with the pilot project can be absorbed within existing budgeted resources.