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Date: (Filing No. H-)

HEALTH AND HUMAN SERVICES

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**STATE OF MAINE
HOUSE OF REPRESENTATIVES
131ST LEGISLATURE
FIRST SPECIAL SESSION**

COMMITTEE AMENDMENT “ ” to H.P. 152, L.D. 231, “An Act to Support the Maine Pediatric and Behavioral Health Partnership Program”

Amend the bill by inserting after the title and before the enacting clause 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, youth in Maine are experiencing increased behavioral and mental health challenges as evidenced by increased rates of depression, suicidal ideation and suicide attempts; and

Whereas, the Department of Health and Human Services, Office of Child and Family Services' 2022 annual report on children's behavioral health services acknowledged that service availability and accessibility are a significant issue; and

Whereas, programs featuring child psychiatry telehealth consultation services for primary care physicians support diagnosis, care coordination and medication management and have demonstrated increased access for child and adolescent populations to mental health services; and

Whereas, the United States Department of Health and Human Services, Health Resources and Services Administration funded the establishment of these programs in over 50 states and territories to support child and adolescent mental health, and Maine's Department of Health and Human Services, along with private partners, developed the Maine Pediatric and Behavioral Health Partnership Program as the State's child psychiatry telehealth consultation service; and

Whereas, this legislation must take effect before the expiration of the 90-day period to timely address the expiration of funding for these programs; 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,'

COMMITTEE AMENDMENT

1 Amend the bill by striking out everything after the enacting clause and inserting the
2 following:

3 **'Sec. 1. 34-B MRSA §15003, sub-§11** is enacted to read:

4 **11. Statewide child psychiatry telehealth consultation service.** The department
5 shall, to the extent funding allows, establish a statewide child psychiatry telehealth
6 consultation service known as the Maine Pediatric and Behavioral Health Partnership
7 Program, referred to in this subsection as "the program," to support primary care physicians
8 who are treating children and adolescent patients and need assistance with diagnosis, care
9 coordination, medication management and any other necessary behavioral health questions
10 to serve their patients. The program must include the following:

11 A. Oversight by a team consisting of at least one primary care provider and one child
12 and adolescent psychiatrist serving part-time as medical directors to provide assistance
13 to primary care physicians with questions regarding behavioral health services when
14 treating children and adolescents;

15 B. Regional community teams that use all of the State's child and adolescent
16 psychiatric and behavioral health resources and disseminate resources across the State
17 to primary care physicians with child and adolescent patients;

18 C. An advisory board of key stakeholders, appointed by the department. The advisory
19 board shall meet at least 4 times a year to assist the medical directors under paragraph
20 A and continually review and evaluate the need for the program;

21 D. Working agreements with other social service and educational agencies that support
22 primary care physicians; and

23 E. A system for the appropriate collection and sharing of data as required by the
24 relevant state and federal laws, rules and regulations and as determined appropriate by
25 the medical directors' team under paragraph A.

26 The department shall seek funding, including public and private grant funds and federal
27 funds, to support the program.

28 **Sec. 2. Funding; reports.** The Department of Health and Human Services shall
29 report to the Joint Standing Committee on Health and Human Services no later than January
30 31, 2024 on the funding sources and financial sustainability of the Maine Pediatric and
31 Behavioral Health Partnership Program established pursuant to the Maine Revised Statutes,
32 Title 34-B, section 15003, subsection 11. The committee is authorized to report out
33 legislation related to the program to the Second Regular Session of the 131st Legislature.

34 **Sec. 3. Appropriations and allocations.** The following appropriations and
35 allocations are made.

36 **HEALTH AND HUMAN SERVICES, DEPARTMENT OF**
37 **Mental Health Services - Children Z206**

38 Initiative: Provides allocations to establish a statewide child psychiatry telehealth
39 consultation service to support primary care physicians who are treating children and
40 adolescent patients and need assistance with diagnosis, care coordination and medication
41 management or other necessary behavioral health questions to serve their patients.

42 **FEDERAL EXPENDITURES FUND** **2023-24** **2024-25**

1	All Other	\$525,000	\$700,000
2			
3	FEDERAL EXPENDITURES FUND TOTAL	<u>\$525,000</u>	<u>\$700,000</u>

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

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

9

SUMMARY

10 This amendment replaces the bill, which is a concept draft. It provides in statute for
11 the establishment by the Department of Health and Human Services of a currently existing
12 statewide child psychiatry telehealth consultation service known as the Maine Pediatric and
13 Behavioral Health Partnership Program to support primary care physicians who are treating
14 children and adolescent patients and need assistance with diagnosis, care coordination and
15 medication management or other necessary behavioral health questions to serve their
16 patients. The amendment requires the department to fund the program as necessary to
17 supplement existing federal funds. The current program was funded by the United States
18 Department of Health and Human Services, Health Resources and Services Administration
19 in 2018, and the funding is due to expire in 2023. The program provides clinical support
20 to primary care physicians treating children and adolescents in need of behavioral health
21 services. The amendment requires the department to report to the Joint Standing
22 Committee on Health and Human Services on the program's funding sources and financial
23 sustainability no later than January 31, 2024.

24

FISCAL NOTE REQUIRED

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(See attached)