

**Bill Number:** SB 746, HB 580**Recommended Position:** Support**Title:** Keep the Door Open Act**Issues Area:** Health**Lead Sponsors:** Senator Guzzone, Delegate Hayes**House Cosponsors:** Barron, Hill, Anderson, Angel, Atterbeary, Barkley, D. Barnes, Bromwell, Brooks, Carr, Conway, Cullison, Gaines, Gilchrist, Haynes, Healey, Hettleman, C. Howard, Jackson, Kelly, Knotts, Korman, Lafferty, Lam, Lierman, Luedtke, McCray, McIntosh, McMillan, Moon, Morales, Morhaim, Oaks, Patterson, Pena-Melnyk, Platt, Queen, Reznik, Robinson, Rosenberg, Sample-Hughes, Sanchez, Stein, Syndor, Tarlau, Waldstreicher, M. Washington, West, K. Young, P. Young, and Lewis**Senate Cosponsors:** Zucker, Astle, Benson, Conway, Currie, DeGrange, Eckardt, Feldman, Ferguson, Kagan, Kasemeyer, Kelley, King, Klausmeier, Lee, Madaleno, Manno, Mathais, McFadden, Middleton, Muse, Nathan-Pulliam, Peters, Pinsky, Ramierez, Robinson, Rosapepe, Serafini, Smith, Waugh, Young, and Zirkin.**Summary:**

The bill would require, except under specified circumstances, the Department of Health and Mental Hygiene to adjust the rate of reimbursement for community providers each fiscal year by the rate adjustment included in the State budget for that fiscal year. This would require the Department to submit a report to the Governor and General Assembly on the impact of the reimbursement rate adjustment on community providers and other specified outcomes requiring on or before December 1, 2019, and on or before December 1 annually thereafter.

**Reason for the Bill:**

Fundamentally this bill is about parity between somatic and behavioral health, by making provider reimbursement rates the same in order to provide greater access to behavioral health care. Marylanders depend on community health care providers to receive the vital mental health and substance use treatment that they need, with a 65% increase in demand for public behavioral health services since 2008. Without this necessary funding, Marylanders lose critical access to behavioral health services. Community health providers divert costly hospital and emergency room admissions and help people experiencing homelessness access permanent housing and necessary supports.

**Legislative History:**

2016	Passed third reading in the Senate and House, the differences between the versions could not be reconciled before the end of session.
2/3/2017	First reading in Judicial Proceedings

**Support:**

- Behavioral Health Care Coalition

**Opposition:**

No strong opposition.

**Strategic Considerations:**

The Behavioral Health Coalition is prioritizing this bill, thus ensuring that it will be pushed by many partners. The Keep the Door Open Act of 2017 is also a part of a package of various behavioral health bill advocates are pursuing. The companion legislation to this bill includes SB 747 and HB 541 that would

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establish a new revenue stream through the Cigarette Restitution Fund to help pay for substance use treatment services, including residential treatment, recovery support housing, and specified crisis response services, as well as rate adjustments for specified agencies or programs. A third bill in the 2017 Keep the Door Open Platform addresses commercial health insurance coverage of behavioral health crisis services but has not yet been introduced. All three bills in the Keep the Door Open package have been rolled into the leadership package in both chambers, indicating a strong likelihood of passage.

**Why Health Care for the Homeless should support this bill:**

Behavioral health services are vital to the holistic health care provided at Health Care for the Homeless and we support initiatives that ensure their adequate funding. The Keep the Door Open Act would ensure that behavioral health treatment is continually prioritized which is crucial to our work to prevent and end homelessness.