# **SENATE BILL 994**

#### J1

## By: Senator Eckardt Senators Eckardt, Augustine, Beidle, Benson, Feldman, Hershey, Jennings, Kelley, Klausmeier, Kramer, and Ready

Introduced and read first time: February 22, 2022 Assigned to: Rules Re–referred to: Finance, February 28, 2022

Committee Report: Favorable with amendments Senate action: Adopted Read second time: March 14, 2022

## CHAPTER \_\_\_\_\_

#### 1 AN ACT concerning

# Public Health – Mental Health Advance Directives – Awareness and Statewide Database

FOR the purpose of requiring the Maryland Department of Health to develop and
implement a public awareness campaign to encourage the use of mental health
advance directives in the State; requiring the Maryland Behavioral Health Crisis
Response System in the Behavioral Health Administration to establish a database
of mental health advance directives Behavioral Health Administration to study the
feasibility and cost of establishing a centralized statewide database of mental health

- 10 <u>advance directives</u>; and generally relating to mental health advance directives.
- 11 BY repealing and reenacting, without amendments,
- 12 Article Health General
- 13 Section 5–602.1
- 14 Annotated Code of Maryland
- 15 (2019 Replacement Volume and 2021 Supplement)
- 16 BY adding to
- 17 Article Health General
- 18 Section 5–615.2
- 19 Annotated Code of Maryland
- 20 (2019 Replacement Volume and 2021 Supplement)

#### EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

<u>Underlining</u> indicates amendments to bill.

Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.



 $\mathbf{2}$ **SENATE BILL 994** BY repealing and reenacting, with amendments, Article - Health - General Section 10-1402 Annotated Code of Maryland (2019 Replacement Volume and 2021 Supplement) SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows: Article - Health - General 5 - 602.1.In this section, "mental health services" has the meaning stated in § (a) 4-301(k)(1) of this article. (b) An individual who is competent may make an advance directive to outline the mental health services which may be provided to the individual if the individual becomes incompetent and has a need for mental health services either during, or as a result of, the incompetency. An individual making an advance directive for mental health services (c) (1)shall follow the procedures for making an advance directive provided under § 5–602 of this subtitle. The procedures provided under § 5-604 of this subtitle for the (2)revocation of an advance directive shall apply to the revocation of an advance directive for mental health services. (d) An advance directive for mental health services may include: The designation of an agent to make mental health services decisions (1)for the declarant; (2) The identification of mental health professionals, programs, and facilities that the declarant would prefer to provide mental health services; A statement of medications preferred by the declarant for psychiatric (3)treatment; and Instruction regarding the notification of third parties and the release of (4)information to third parties about mental health services provided to the declarant. 5-615.2.

 $\frac{1}{2}$ 

3

4

 $\mathbf{5}$ 

 $\frac{6}{7}$ 

8

9

10

11

12

13

14

15

16

17 18

19

20

21

22

23

24

25

26

27

28

29

30

31

1 (A) THE DEPARTMENT SHALL DEVELOP AND IMPLEMENT A PUBLIC 2 AWARENESS CAMPAIGN TO ENCOURAGE THE USE OF MENTAL HEALTH ADVANCE 3 DIRECTIVES IN THE STATE.

4 (B) THE PUBLIC AWARENESS CAMPAIGN SHALL INCLUDE AWARENESS 5 INITIATIVES TO ENCOURAGE AND SUPPORT OUTREACH EFFORTS BY THE 6 FOLLOWING PERSONS AND GOVERNMENTAL AGENCIES TO INFORM PRESENT OR 7 FUTURE RECIPIENTS OF MENTAL HEALTH SERVICES AND MEMBERS OF THEIR 8 FAMILIES, HEALTH CARE PROVIDERS, AND OTHER BEHAVIORAL HEALTH CARE 9 PARTNERS ABOUT MENTAL HEALTH ADVANCE DIRECTIVES:

10 (1) THE DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONAL 11 SERVICES;

- 12 (2) THE DEPARTMENT OF STATE POLICE;
- 13 (3) THE DEPARTMENT OF VETERANS AFFAIRS;
- 14 (4) LOCAL HEALTH DEPARTMENTS;
- 15 (5) LOCAL BEHAVIORAL HEALTH AUTHORITIES;
- 16 (6) BEHAVIORAL HEALTH PROGRAMS;
- 17 (7) PRACTICING PSYCHIATRISTS, PSYCHOLOGISTS, PROFESSIONAL 18 COUNSELORS AND THERAPISTS, AND SOCIAL WORKERS;
- 19 (8) HEALTH CARE FACILITIES;
- 20 (9) ACADEMIC INSTITUTIONS;
- 21 (10) **Religious organizations; and**

## 22 (11) OTHER PERSONS WHO ENCOUNTER PRESENT OR FUTURE 23 RECIPIENTS OF MENTAL HEALTH SERVICES.

- 24 <del>10-1402.</del>
- 25 (a) There is a Maryland Behavioral Health Crisis Response System in the
   26 Behavioral Health Administration.
- 27 (b) The Crisis Response System shall:

#### SENATE BILL 994

1	(1) Operate a statewide network utilizing existing resources and
2	coordinating interjurisdictional services to develop efficient and effective crisis response
3	<del>systems to serve all individuals in the State, 24 hours a day and 7 days a week;</del>
4	(2) Provide skilled clinical intervention to help prevent suicides, homicides,
<b>5</b>	unnecessary hospitalizations, and arrests or detention, and to reduce dangerous or
6	threatening situations involving individuals in need of behavioral health services; [and]
7	(3) <b>Develop and maintain a centralized statewide database</b>
8	OF MENTAL HEALTH ADVANCE DIRECTIVES THAT CAN BE READILY ACCESSED TO
9	ASSIST RESPONSES TO BEHAVIORAL HEALTH CRISES AND THE PROVISION OF
10	MENTAL HEALTH SERVICES BY FIRST RESPONDERS, HEALTH CARE PROVIDERS,
11	CRISIS COMMUNICATION CENTERS, CRISIS TREATMENT CENTERS, AND ANY OTHER
12	PARTNERS DESIGNATED BY THE ADMINISTRATION; AND
13	(4) Respond quickly and effectively to community crisis situations.
14	(c) The Administration shall consult with consumers of behavioral health
15	<del>services, family members, and behavioral health advocates in the development of the Crisis</del>
16	Response System.
17	SECTION 2. AND BE IT FURTHER ENACTED, That:
18 19 20 21 22 23	(a) (1) The Behavioral Health Administration shall study the feasibility and cost of establishing a centralized statewide database of mental health advance directives that can be readily accessed to assist responses to behavioral health crises and the provision of mental health services by first responders, health care providers, crisis communication centers, crisis treatment centers, and any other partners designated by the Behavioral Health Administration.
$\begin{array}{c} 24 \\ 25 \end{array}$	(2) The study shall include an assessment of the feasibility and costs associated with:
$\frac{26}{27}$	(i) incorporating mental health advance directives into the State's current advance directive registry;
28 29	(ii) <u>developing</u> and <u>maintaining</u> an <u>independent</u> , <u>centralized</u> <u>statewide database of mental health advance directives; and</u>
30 31	(iii) incorporating mental health advance directives directly into the State-designated health information exchange.
32 33 34 35	(b) On or before December 1, 2022, the Behavioral Health Administration shall report to the Senate Finance Committee and the House Health and Government Operations Committee, in accordance with § 2–1257 of the State Government Article, on the findings of the study required under subsection (a) of this section.

4

SECTION 2. 3. AND BE IT FURTHER ENACTED, That this Act shall take effect
 October July 1, 2022.

Approved:

Governor.

President of the Senate.

Speaker of the House of Delegates.