Department of Legislative Services

Maryland General Assembly 2025 Session

FISCAL AND POLICY NOTE Third Reader - Revised

Senate Bill 790

(Senator Augustine)

Finance

Health and Government Operations

Behavioral Health Advisory Council and the Commission on Behavioral Health Care Treatment and Access - Plan to Implement Early and Periodic Screening, Diagnostic, and Treatment Requirements

This bill requires the Behavioral Health Advisory Council and the Commission on Behavioral Health Care Treatment and Access (through its workgroup on youth behavioral health, individuals with developmental disabilities, and individuals with complex behavioral health needs) to provide recommendations to implement the federal Centers for Medicare and Medicaid Services' (CMS) State Health Official (SHO) letter #24-005: Best Practices for Adhering to Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Requirements. By January 1, 2026, the Maryland Department of Health (MDH) must submit a report of its findings and recommendations to the General Assembly. **The bill takes effect July 1, 2025.**

Fiscal Summary

State Effect: The advisory council and commission can provide recommendations and MDH can submit the associated report with existing budgeted resources. Revenues are not affected.

Local Effect: None.

Small Business Effect: None.

Analysis

Bill Summary: The recommendations must address (1) screening and assessment of behavioral health conditions; (2) the feasibility of implementing a specified diagnostic tool

for patients younger than age five; (3) community-based services to correct and ameliorate behavioral health conditions; and (4) services to ensure children's behavioral health, early symptoms of concern (with or without a diagnosis), and urgent and crisis needs.

In making the recommendations, the advisory council and commission must consult with specified stakeholders.

Current Law:

Early and Periodic Screening, Diagnostic, and Treatment Program

The EPSDT Program is a federal requirement that mandates that states cover certain benefits for Medicaid recipients from birth through age 20 — benefits that are not necessarily covered for recipients who are aged 21 and older. Maryland's EPSDT Program promotes access to, and ensures availability of, quality health care for Medicaid-eligible children, teens, and adults younger than 21. The program provides appropriate, practice-based performance improvement assessments and targeted interventions to enhance the quality of health services delivered by Medicaid providers.

The preventive care component of EPSDT is known as the Healthy Kids Program. Preventive health care services allow for early identification and treatment of health problems before they become medically complex and costly to treat. Standards for the Healthy Kids Program are developed through collaboration with key stakeholders.

The federal Bipartisan Safer Communities Act requires the U.S. Secretary of Health and Human Services to issue guidance to states on EPSDT Medicaid coverage requirements that includes best practices for ensuring children have access to comprehensive health care services, including children without a mental health or substance use disorder diagnosis. In September 2024, CMS issued guidance via SHO # 24-005 that is intended to provide an overview of EPSDT requirements and how states can meet the goal of EPSDT – the right care, to the right child, at the right time, in the right setting. The guidance discusses policies, strategies, and best practices to maximize health care access and utilization for EPSDT-eligible children.

Behavioral Health Advisory Council

Chapter 328 of 2015 established the council to promote and advocate for the enhancement of behavioral health services across the State for individuals who have behavioral health disorders and their family members. The council must meet at least six times a year and submit an annual report by December 31 each year.

Commission on Behavioral Health Care Treatment and Access

Chapters 290 and 291 of 2023 established the commission to make recommendations to provide appropriate, accessible, and comprehensive behavioral health services that are available on demand to individuals in the State across the behavioral health continuum. The commission is statutorily mandated to establish particular workgroups that must meet at least twice a year and include members of the commission.

Additional Information

Recent Prior Introductions: Similar legislation has not been introduced within the last three years.

Designated Cross File: HB 1083 (Delegate Woods, *et al.*) - Health and Government Operations.

Information Source(s): Maryland Department of Health; Department of Legislative Services

Fiscal Note History: First Reader - February 28, 2025 caw/ljm Third Reader - March 20, 2025

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Analysis by: Jennifer B. Chasse Direct Inquiries to: (410) 946-5510 (301) 970-5510