

SB0600/797378/1

BY: Finance Committee

AMENDMENTS TO SENATE BILL 600
(First Reading File Bill)

AMENDMENT NO. 1

On page 1, in the sponsor line, strike “Senator Feldman” and substitute “Senators Feldman, Astle, Benson, Hershey, Jennings, Klausmeier, Mathias, Middleton, Oaks, Reilly, and Rosapepe”; in line 10, strike “identify methods” and substitute “develop a plan”; in the same line, after “the” insert “Maryland”; in line 11, strike “Program” and substitute “(BHIPP) program”; in the same line, after “purpose;” insert “requiring the Department, in collaboration with certain affected stakeholders, to develop the plan; requiring the Department, in developing the plan, to identify and address certain issues; requiring the Department to submit the plan to certain committees of the General Assembly on or before a certain date;”; and in line 15, strike “through 20-1803” and substitute “and 20-1802”.

AMENDMENT NO. 2

On page 3, in line 18, before the first “**THE**” insert “**(A)**”; and after line 25, insert:

“(B) THE PROGRAMS DEVELOPED UNDER SUBSECTION (A) OF THIS SECTION SHALL INCLUDE CONTINUING MEDICAL EDUCATION PROGRAMS DEVELOPED BY ORGANIZATIONS THAT ARE ACCREDITED BY THE ACCREDITATION COUNCIL FOR CONTINUING MEDICAL EDUCATION.”

AMENDMENT NO. 3

On page 3, strike in their entirety lines 26 through 31, inclusive, and substitute:

“SECTION 2. AND BE IT FURTHER ENACTED, That:

(a) The Department of Health and Mental Hygiene, in collaboration with affected stakeholders, shall develop a statewide plan to expand the Maryland

(Over)

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Behavioral Health Integration in Pediatric Primary Care (BHIPP) program to assist obstetric, primary care, pediatric, and other health care providers in addressing the emotional and mental health needs of pregnant and postpartum women.

(b) The affected stakeholders with whom the Department collaborates under subsection (a) of this section shall include:

(1) the directors of the Maryland Behavioral Health Integration in Pediatric Primary Care (BHIPP) program; and

(2) any other public or private institution or organization with links to the targeted populations of providers and patients that the Department considers appropriate.

(c) In developing the plan required under subsection (a) of this section, the Department shall identify and address:

(1) the scope of emotional and mental health conditions to be included in the plan;

(2) methods to accomplish provider outreach and education;

(3) staffing requirements;

(4) consultation standards;

(5) clinical resources; and

(6) funding requirements and mechanisms.

(d) On or before December 1, 2017, the Department, in accordance with § 2-1246 of the State Government Article, shall submit the plan developed under this

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section to the Senate Finance Committee and the House Health and Government Operations Committee.”.

On page 4, in line 1, strike “2.” and substitute “3.”; and in line 2, strike “October” and substitute “July”.