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**HB 317 Mental Health - Involuntary Admissions – Procedures
SUPPORT
Health and Committee
February 12, 2020**

Good Afternoon Chairwoman Pendergrass and Members of the Health and Government Operations Committee. I am Tammy Bresnahan; I am the Associate State Director for Advocacy for AARP Maryland. AARP Maryland has over 900,000 members in Maryland and its members overwhelmingly support **HB 317 Mental Health - Involuntary Admissions – Procedures**. We thank Senator Eckardt for sponsoring this bill.

This bill authorizes a facility or Veterans' Administration (VA) hospital to take an individual admitted into confinement on observation status. The individual must be examined by a physician, psychologist, or psychiatric nurse practitioner within 24 hours. If the individual does not meet the requirements for involuntary admission, the individual must either be voluntarily admitted or released with an aftercare plan. An individual confined on observation status is entitled to the same rights as other mentally ill individuals in facilities and the same protections for the confidentiality of medical records. Regulations adopted by the Secretary of Health regarding hearing procedures must require that the hearing officer at a hearing for involuntary admission receive testimony from the physician, psychologist, or psychiatric nurse practitioner who examined the confined individual.

It is not unreasonable but AARP members want and expect reliable access to quality health care and they want to know it is a top priority for lawmakers. That is why we continue to support efforts to modernize state nursing laws so as to adopt full practice authority.

With the shortage of Mental Health Providers, the inability of Advanced Practice Registered Nurses (APRNs) and Psychiatric Mental Health (PMH)-APRNs to perform the same evaluations as other providers creates an unnecessary delay in services to those in need of mental health services and increases the total cost of these services.

Further improvements in access to care and a significant reduction in cost could be realized with the addition of APRNs to the list of providers who are eligible to perform:

- Capability/Capacity Evaluations
- Evaluations for a Certificate of Competency: Guardianship of a Disabled Person
- Involuntary Admission Assessments.

Real Possibilities

AARP Maryland advocates to break down the barriers that prevent nurse practitioners from using all their expertise in caring for patients. These barriers often delay care to consumers, especially in rural and urban undeserved areas where few physicians are available.

AARP is closely following the issue of full practice authority on the national as well as state level. We know Marylanders would benefit from this policy because we have watched patients and seniors and other states benefit from the same policy. Likewise, we know the most commonly cited concerns on removing contractual agreements simply have not materialized in other states that have adopted it.

The status quo is failing too many Marylanders to be considered a viable option. In light of the evidence, national recommendations, expert health policy and health care endorsements, and the patient and health system benefits, the only question left is: why not take every opportunity to put patients first and remove red tape for Maryland.

AARP believes that high-quality, patient-centered health care for all will require remodeling many aspects of the health care system, especially nursing. Nurses should be able to practice to full extent of their education and training.

AARP members demand policy solutions and legislation that would fully realize nurses' potential contribution to a patient-centered, transformed health care system in the following areas:

- **Removing Barriers to Practice and Care:** Modernize outdated policies (public and private) and change state and federal laws and regulations to allow nurses to practice to the full extent of their education and training.
- **Patient-Centered Transformed Health Care System:** Advances and contributions to the research, advocacy and communications strategies through the national network of professional and health care related stakeholders.

For these reasons AARP Maryland respectfully request a favorable report on HB 317. For questions or additional information, please feel free to contact Tammy Bresnahan, Director of Advocacy at tbresnahan@aarp.org or by calling 410-302-8451.