

Testimony on HB 1169 Hospitals – Community Benefits

House Health and Government Operations Committee
March 2, 2020

POSITION: SUPPORT

The Community Behavioral Health Association of Maryland is the professional organization for providers of community-based mental health and substance use disorder treatment services. Our members serve the majority of the almost-300,000 children and adults who access care through the public behavioral health system. We provide outpatient treatment, residential and day programs, case management and assertive community treatment (ACT), employment supports, and crisis intervention.

We support this bill because it requires hospitals to consult with consumers, health care providers, and other community members when developing their Community Benefit Reports (CBRs), replacing the current language that allows but does not require input from community members. Input from local individuals and groups will help ensure that the assessments and subsequent investments reflect the true needs of each community.

As part of its CBR process Maryland law requires hospitals to provide an analysis of gaps in the availability of specialty providers to serve the uninsured who have received care from the hospital. The most recent community benefits report by the Health Services Cost Review Commission (dated April 3, 2019) identifies mental health and substance abuse/detoxification as the two most frequently reported gaps (37 and 22 hospitals, respectively, of the total of 48 hospitals that submitted a community benefits report in 2018). While this data is of grave concern, it also provides an important opportunity for hospitals to consult with community behavioral health providers on ways to meet the needs of uninsured individuals with behavioral health needs. As the Total Cost of Care requirements move the focus from strictly inpatient cost and quality to care that is provided outside the hospitals' walls, it is imperative that hospitals form partnerships with community-based organizations. The Maryland Hospital Association's own data show that four of the top five primary diagnoses for readmissions within 30 days were behavioral health-related, and that schizophrenia and alcohol-related disorders were within the top five primary diagnoses for hospital admissions.

HB 1169 will provide a starting point for hospitals and community-based behavioral health organizations to consult and partner in order to meet the needs of individuals with mental health and substance use disorders. We urge a favorable report.