Dear Delegate Kelly and HGO committee members,

Thank you again for hearing our testimony and concerns regarding HB 1461, medical directors of outpatient mental health clinics . I have included a copy of my testimony below. You can contact the Maryland Psychiatric Society if you would like a list of psychiatrists who are willing to cover OMHCs in rural areas.

If you have any questions for me, you can contact me at this email address or cell phone number. My email is: <u>kimjonesfearing@gmail.com</u>. My Cell Phone number is 410 419-3769. Please feel free to text me prior to cell phone calls due to the large volume of calls lately.

Kim Jones-Fearing MD D.F.A.P.A. Diplomate of the American Board of Psychiatry and Neurology

Psychiatrist and Maryland psychiatric society member Kim Jones-Fearing, MD LLC 10320 Little Patuxent Pkwy suite 200 Columbia, MD 21044 **Subject: Written and oral testimony**

HB 1461

Individual: Kim Jones-Fearing, MD DFAPA LLC Position of Individual: Support

File name : HB1461_individual_Jonesfearing.pdf

HGO committee

The purpose of HB 1461 is to correct the law passed in 2019 which made it possible for Nurse practitioners to become medical directors of outpatient mental health clinics.

My concerns with last years legislation are as follows:

1. Purportedly, last years law served to correct a severe shortage of psychiatrists in Maryland. However, the statistics do not support that Maryland has a relative shortage

of psychiatrists compared to other states. In fact, the state of Maryland is 10th in the United States regarding the number of psychiatrists per capita and overall.

2. The so-called shortage of psychiatrists is really an artificially created shortage and obstacles to affordable quality care caused by several known factors including:

- lack of enforcement of federal mental health parity laws

-years of continued inaccurate listings of providers on insurance panels

-and other business of medicine factors .

These facts can be referenced in the Millman report dated 2019 <u>https://www.mhamd.org/news/2019-millman-report-press-release/</u>

3. Psychiatric Patients referred to outpatient mental health clinics tend to be complex with multiple medical comorbidities including encephalopathies, sleep apnea, developmental syndromes, genetic syndromes, surreptitious opioid abuse, and other conditions that masquerade as mental illness. These patients are among the most vulnerable in the state.

4. NP are an important part of a team delivering integrated care. However, integrated care is not the same as interchangeable care. Interchangeable care creates a 2 tiered system of care. One system for underserved and publicly-insured and one for economically-privileged patients with private insurance, resources and choices.

In closing, I have been enjoying my work as a psychiatrist doing telemedicine in 4 counties 2 of which are rural and underserved. My Psychiatrist colleagues who also love working with these populations and many of them would be interested in doing coverage in Eastern Shore. We have developed a list of these psychiatrists I would be happy to make this list available to you upon request.

Kim Jones-Fearing, MD LLC 10320 Little Patuxent Pkwy suite 200 Columbia, MD 21044 Sent from my iPad