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WRITTEN TESTIMONY IN SUPPORT
Senate Bill 637 - Health & Health Insurance - Behavioral Health Services - Expansion
(Behavioral Health System Modernization Act)
Finance Committee - Senate - February 23, 2022

Thank you Chair Kelley, Vice-Chair Feldman, and committee members for your time, work, and care to improve the quality and accessibility of healthcare services for Marylanders of all ages. On Our Own of Maryland is a statewide behavioral health education and advocacy organization, in operation for 30 years by and for people with lived experience of mental health and substance use challenges. Our network of 20+ affiliated peer-operated Wellness & Recovery Centers throughout Maryland offer free recovery support services to 5,000+ community members with mental health and substance use challenges. Each center in our network is funded through Behavioral Health Administration grant contracts.

We support Senate Bill 637, which invests in modern models and proven practices across clinical, crisis, and community behavioral health services. Together, these enhancements equip our system to meet the increasing demand for high-quality mental health and substance use care as Maryland's needs are at an all-time high:

- 7th highest in the country for overdose deaths last year (April 20-21), with nearly 3,000 lives lost.¹
- 188,000 adults reported experiencing thoughts of suicide, and 650 Marylanders lost their lives due to suicide in 2021.²
- 40% of Marylanders reported symptoms of anxiety or depression last year, with nearly a third unable to access counseling or therapy.³
- 16 Maryland counties are federally designated as mental health professional shortage areas.^{4,5}

Peer Support is an essential component of behavioral health care. Peers use their own lived behavioral health experience and specific training to support others with navigating treatment systems and practicing self-management strategies. Maryland's Certified Peer Recovery Specialist credential requires 46 CEUs, 500 practicum hours, a written application and exam, supervision requirements, and recertification every 2 years. Peers can work in diverse service settings (clinical, community, crisis), and the On Our Own network provides technical training, values-based experiential learning, and supportive mentoring that prepare Peer Recovery Specialists to be engaged and effective professionals.

Peer-run community programs provide essential recovery support services. On Our Own of Maryland's affiliated network of peer-run Wellness & Recovery Centers offer practical assistance in accessing support services and a safe, welcoming community environment for people living with mental health and substance use challenges. We have great success connecting with individuals who are uninsured, unhoused, and/or labeled 'hard to reach' or 'difficult to serve' because they are navigating multiple personal challenges, traumatic prior experiences with systems involvement, and socioeconomic

¹ Keating, Dan; Bernstein, Lenny. "100,000 Americans died of drug overdoses in 12 months during the pandemic." Washington Post, November 17, 2021. <https://www.washingtonpost.com/health/2021/11/17/overdose-deaths-pandemic-fentanyl/>

² <https://www.nami.org/NAMI/media/NAMI-Media/StateFactSheets/MarylandStateFactSheet.pdf>

³ Ibid

⁴ Health Resources & Services Administration, <https://data.hrsa.gov/tools/shortage-area/hpsa-find>

⁵ Rural Health Information Hub, <https://www.ruralhealthinfo.org/charts/7?state=MD>

barriers. Each Center in our network responds to the unique needs of its members and the local community; some recent examples include:

- On the Lower Eastern Shore, our center partnered with the local food bank to distribute meals and toiletries to 150 people directly to their homes during the worst of the COVID pandemic.
- In Washington County, our center has supported 200 individuals with reconnecting to the community after coming out of correctional facilities by providing re-entry and transitional services such as housing and benefits assistance, vocational support, and service navigation.
- In rural Calvert County, our center has helped 7 individuals obtain stable housing over the last year.
- In Howard County, daily phone calls help members proactively solve problems, access resources, use self-help tools, and feel that caring connection that can literally mean the difference between life and death.

Peer-run programs are a cost-effective investment. Peer services are effective, inexpensive and cost-saving, shown by research to decrease utilization of high-cost health services and increase capacity for self-management. However, the current median annual operating budget of a Wellness & Recovery Center is inadequate at less than \$150,000 per year, resulting in many being under-staffed, unable to appropriately pay and retain hardworking employees, and overly reliant on volunteers. The funding for Wellness and Recovery Centers, Recovery Community Centers, and Peer Recovery Services provided through this bill ensures Maryland's peer-run programs can better realize our full potential with appropriate staffing, extended hours, and more services.

Peer-run community programs require predictable, annualized funding. Grassroots programs like our centers dedicate every available dollar to delivering direct services in the community, with a minimum of administrative overhead beyond the basics of responsible organizational management. Innovation, flexibility, and responsiveness are hallmarks of peer-driven programs, and require predictable, annualized funding through grants and contracts. The appropriations for Wellness & Recovery Centers, Recovery Community Centers, and Peer Recovery Services provided through this bill must be firewalled from any requirement or expectation of billing through the fee-for-service system.

Peers inspire hope and prove recovery is real. Maryland faces an escalating behavioral health crisis alongside the continuing pandemic. Depression, anxiety, substance use, overdose, and suicide are very real outcomes of sustained stress, grief, and trauma. Our network of peers show that recovery is real and wellness is achievable, but we must have adequate resources and funding to continue meeting increasing community needs.

Now is the time to invest in peer-run programs, not only for the essential support we provide to everyone who walks through our doors, but because we are preparing the next generation of peer specialists, community leaders, and change agents in behavioral healthcare system transformation.

OOOMD strongly urges the committee to pass SB 637. Thank you!