

SB 201 – Maryland Medical Assistance and Children’s Health Insurance Programs – School-Based Behavioral Health Services – Reimbursement

Senate Finance Committee

February 7, 2023

Position: Support

My son is ten years old and has Tourette Syndrome, Obsessive Compulsive Disorder and ADHD. He was diagnosed at 5 with ADHD and we were able to get a 504 plan at his school. We asked over the years if he needed an Individualized Education Plan (IEP) and were told that it was not necessary at the time. He eventually qualified for an IEP at the end of the school year last year, after a lot of effort.

In first grade he started having tics. Over the years, he oftentimes would face disciplinary actions from his blurting out or saying or doing inappropriate things. We paid out of pocket for an evaluation and we were told he had a tic disorder, but the school felt he was having impulse control challenges. Our psychologist told us they were automatic behaviors and he was having symptoms of a neurological disorder and not just impulse control challenges. He also started having debilitating intrusive thoughts shortly after and was diagnosed with OCD. He went from being a happy-go-lucky kid, to being terrified of leaving the house without his family. He also started refusing to attend school. During COVID, he participated in virtual school, had no disciplinary actions, and received straight A's. However, when he went back to school, his social emotional challenges made things very difficult.

At the age of 9, he received one disciplinary action referral for blurting out an inappropriate phrase, and then a second one for inappropriate actions when he was experiencing disinhibition from Tourette Syndrome. At school, he made a statement that he wanted to hurt himself. He felt that he could not continue to cope when he was not purposefully misbehaving.

He was able to maintain some friendships over the years, but many were strained due to his friends being pulled from class and interviewed during the disciplinary action process at school. Although the school psychologist now meets with him 15 minutes a week, he would greatly benefit from more services. Her time is limited as she is split between two schools and has many IEP meetings.

Our son would benefit greatly from longer meetings with the school psychologist. On our own, we can only afford for him to receive monthly therapy.

Providing my son with the right services continues to be the biggest, most exhausting and isolating challenge that our family faces. We would benefit from any legislation that would improve access to school-based mental health services

I urge you to pass SB 201.

Laura Kimmel
4110 Font Hill Drive Ellicott City, MD 21042
Layoung3@gmail.com
3017585687