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HOUSE HEALTH AND GOVERNMENT OPERATIONS COMMITTEE

HOUSE APPROPRIATIONS COMMITTEE

HOUSE BILL 322: PUBLIC HEALTH—HOME-AND COMMUNITY-BASED SERVICES FOR CHILDREN AND YOUTH

DATE: FEBRUARY 21, 2023

POSITION: SUPPORT

Disability Rights Maryland (DRM) is the protection and advocacy organization for the state of Maryland; the mission of the organization, part of a national network of similar agencies, is to advocate for the legal rights of people with disabilities throughout the state. One of the mandated purposes of DRM's legal work is to ensure that people with disabilities are included in their communities and that they have access to the supports and services that will make living and participating in community life possible. Over the years, DRM has represented thousands of children with developmental disabilities, mental health and behavioral disabilities or dual developmental and mental health disabilities in special education and mental health matters and, for more than 20 years, in foster care proceedings in juvenile court. DRM has advocated vigorously in individual cases and systemically for wraparound services and other community-based services that, if implemented with fidelity, are shown by evidence to enable children to remain with or near their families instead of in residential placements.

These findings are particularly notable but problematic for Maryland, as the state has failed to invest in high-quality wraparound and other community services that can help children remain at home or near their families. Rather, Maryland has tended to invest in group care and institutional placements for children, approving payment for those services only when the need for care becomes so critical that the child cannot be maintained at home. However, because the number of in-state residential programs has decreased, more Maryland children are being sent to out-of-state placements, often to for-profit entities as far away as Utah and Florida. For example, at the January 25, 2023 Board of Public Works meeting, the Board approved the emergency placement of four Maryland foster children at Youth Opportunities Investment, LLC, doing business as Brooksville Youth Academy in Florida; the contract is a six month contract for \$297,675. The Board also approved a two year contract for a foster youth at Benchmark Behavior Health Systems, Inc. in Utah for \$450,624, and continuing placement of two youth at an out-of-state Devereux Foundation facility for a two year contract totaling \$758,352. Senate Bill 255 addresses this issue in part by reinstating Maryland's intensive in-home and wraparound services program.

In 2016, the Maryland Department of Health dissolved the wraparound services program, which served 300-400 children per year. The Department instead implemented care

coordination programs through Targeted Case Management and the 1915(i) waiver, a Medicaid program designed to serve children with the most significant mental health needs, in order to divert them from emergency rooms, hospitalization, and other higher levels of care. In 2014, the Medicaid Administration had projected that at least 200 children a year would be served by the 1915(i) waiver. However, between FY 2019 and FY 2021, the 1915(i) waiver served only between 10 and 40 children a year while more than 3000 Maryland children received inpatient or higher levels of care during this time.

There are several reasons for this dismal situation: First, reimbursement rates are low, making it difficult for providers to continue to provide services; a number of organizations and providers have stopped providing services since 2016. Additionally, there has been less training and supervision of care coordinators and lack of fidelity to the wraparound model. Also, the program eligibility requirements have been set so high that many children who need services are excluded from the program.

House Bill 322 will address these problems by, among other provisions, expanding eligibility for 1915(i) services to all youth on Medicaid, not just those whose families make below 300% of the federal poverty level. Additionally, the bill requires the Maryland Department of Health to address the barriers to use of the 1915(i) waiver, fund high-fidelity wraparound and evidence-based services at a rate commensurate with industry standards, and expand targeted case management services.

DRM has heard from numerous families during the past few years whose children have waited months in emergency rooms or in overstay status in hospitals or who have cycled repeatedly from home to hospital and back who could have been stabilized and remained at home instead of needing out-of-home placement if intensive, in-home wraparound services had been available after the crisis had passed. It takes an enormous amount of work to try to secure services that will keep an individual client in-state and near their family, if not at home with their family. Sometimes, we are not successful and our clients are placed in out of state programs far from their families and communities with little opportunity for visits. IT should be the norm, not the exception, for children with intensive needs to remain in Maryland and to remain in the community with an array of services and supports that will enable them to remain with their families or as close to their families as possible. House Bill 322 will help to shift that balance. For these reasons, DRM strongly supports passage of House Bill 322.

For more information or if questions, please contact Luciene Parsley, Litigation Counsel, at lucienep@disabilityrightsmd.org or 443-692-2494 or Leslie Seid Margolis, Managing Attorney, at lesliem@disabilityrightsmd.org or 443-692-2505.