

Testimony Before the Senate Finance Committee

March 12, 2024

Senate Bill 876 – Maryland Medical Assistance Program – Limited Behavioral Health Services

TESTIMONY IN SUPPORT

The Maryland Chapter of the National Association represents social workers statewide. We urge your support for SB 876: Maryland Medical Assistance Program - Limited Behavioral Health Services. This bill would enable young people under the age of 18 who are enrolled in Maryland's Children's Health Insurance Program to receive limited behavioral health services without requiring the child be assigned a behavioral health diagnosis.

Behavioral health providers are required to render a diagnosis within 3 sessions to bill for their services. The reality is that behavioral health diagnoses are an inexact science without medical testing for corroboration. Over my decades of experience working with foster children, I've observed trendy diagnoses that came and went. Thirty years ago for example, dissociative identity disorder (DID) was very popular - not so much anymore. Moreover, it wasn't unusual when the youth changed providers to be assigned a new and/or different diagnosis.

In some respects, a behavioral health diagnosis is a box within which to understand a person's symptoms, a label to explain their behavior. Doesn't assessing symptoms and treating those symptoms make more sense? What's the rush to give the child a label?

To be clear, SB 876 doesn't prohibit a health care provider from formulating a diagnosis. There may be times when one may be important to access certain services and/or medications. But when it's not, the bill simply allows a healthcare provider the option to prioritize assessment and planning over eliciting information to attach a diagnosis.

I've been a social worker for a very long time and believe that when we know better, we do better. What we know is that diagnosis is still not an exact science, that labels can hurt children and may be an obstacle to pursuing care. As social workers, we support SB 876 as a strategy to avoid labeling children and eliminate barriers to behavioral health care. We urge a favorable report.

Respectfully,

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