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Re: SUPPORT -SB 0988- Maryland Medical Assistance Program -Self-directed Mental Health Services-Pilot Program

Dear Madame Chair and Members of the Senate Finance Committee:

I am submitting this testimony in strong support of SB 0988, which would establish a self-directed mental health care pilot program for Maryland Medical Assistance beneficiaries and facilitate access to appropriate care in the most integrated setting available. I am a licensed psychologist providing individual psychotherapy in Baltimore City. I have over 20 years of experience working with individuals who have some of the most complex mental health needs and who could greatly benefit from a program like this one.

Many of my clients have spent years in the mental health system and have experienced significant harm due to the lack of choice and deprivation of access to the social and material resources they needed to achieve recovery. In fact, many of my clients have experienced unnecessary institutionalization, trauma, and harm due to program requirements that coerced compliance with standardized treatment models while failing to consider their unique clinical, social, and cultural needs. The mental health system's inability to adapt to their needs often caused more harm than good, as many were kicked out of programs or labeled as "hopeless" because the system failed to meet their needs. As a result, many were left feeling demoralized, humiliated, and reluctant to engage in continued mental health treatment. Most, at some point, were told that they were to blame for 'not getting better' and were called treatment failures when, in reality, it was the mental health system that failed them.

Due to this ongoing lack of appropriate clinical, social, and material support in our communities, many people with complex mental health needs routinely experience unnecessary emergency room visits and hospitalization. As a result, too many of my clients have been robbed of years of their lives, deprived of opportunities to maintain meaningful employment, and are excluded from meaningful engagement in their communities. This could easily change if they were offered access to a self-directed mental health care program that holistically addressed their needs, while prioritizing their voice in the support planning process.

As mental health providers, we are ethically obligated to treat everyone with respect and dignity, and for individuals seeking treatment to be included in all aspects of the treatment planning process. In addition, we must ensure individuals can access appropriate care from specialized clinical mental health providers, along with non-clinical goods and services that can holistically support them in meeting their recovery goals. Self-directed mental health care, like the program described in SB 0988, would allow private practice providers like me to better serve people with complex social needs, that I simply can't address as a solo provider. I would like to be able to serve more people with complex needs, but without a program such as self-directed mental health care, my clients don't have access to the interdisciplinary and non-clinical support that

would allow me to support them as much as they may need, forcing them to choose between appropriate clinical care or more intensive, but clinically inappropriate services in the public behavioral health system.

In order to receive any benefit from mental health treatment, it is vital that individuals are being listened to, treated with compassion and care, and provided the social and material support necessary to engage in treatment. Only, in meeting individuals where they are and providing holistic support, can trust and safety be established. This is especially true for individuals with more complex mental health and physical needs as they are often the very individuals who aren't getting their needs met and who don't qualify for the one-size fits all programs that currently exist in the public behavioral health system because of their high need for individualized support. These disparities disproportionately impact the same individuals who are already most marginalized and vulnerable: Black and Brown people, transgender and gender non-conforming people, and disabled people, and those who are already targeted in other systems for mistreatment, abuse and misunderstanding. These individuals deserve access to choice-based mental health supports, and to be included in decisions about what care they need and receive, and with whom they receive it, and provided the resources they need to thrive in our communities. If we put financial and systemic resources into mental health programming that values self-determination, informed consent, cultural competence, trauma-informed care, and meeting social needs, we are much more likely to sustainably engage people in mental health treatment. And that is the approach our ethical obligations require.

A self-directed program such as this one could be life changing for the very individuals who most need and deserve this integrated, interdisciplinary support; those who have been neglected and mistreated in the current public mental health sector. Not only do these individuals tend to have the least access to care, but they also experience the most barriers trying to navigate antiquated and difficult systems without support while in their most vulnerable of states. Having access to a support broker who can help them identify and access the resources they need, with ongoing support in obtaining these resources, and having a say in what needs are most important to them would be incredibly life changing and help individuals begin to have the quality of life they deserve.

Offering self-directed mental health support to my clients would also allow me to serve more clients with complex needs, as I could devote more of my time doing what I do best, providing clinical psychotherapy, and my clients could have additional support from someone with expertise in navigating the mental health system along with the resources to access the goods and services needed to holistically support their recovery. Self-directed mental health care would be a win-win-win solution that would benefit patients, providers, and enhance the capacity of our public behavioral health system.

I strongly urge you to issue a favorable report on SB 0988, so that people with mental health disabilities can choose and access the resources they need to thrive in our communities.

If you have any questions, please don't hesitate to contact me at (443) 377-6440 or KimberlyBrenninkmeyerPhD@gmail.com.

Sincerely,

Kimberly Brenninkmeyer, PhD