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Health and Government Operations Committee

Subcommittees

Health Occupations and Long-Term Care

Public Health and Minority Health Disparities



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THE MARYLAND HOUSE OF DELEGATES Annapolis, Maryland 21401

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HB408 - Mental Health Law - County Mental Health Advisories - Membership

Good afternoon Madame Chair, Vice Chair, and members of the Health and Government Operations Committee. Thank you for the opportunity to present House Bill 408.

Veterans and current service members frequently suffer from a wide range of mental health issues, such as PTSD, anxiety, and depression, impacting not only the service member but their family, community, and quality of life. Nationally, we lose 22 veterans a day to suicide - one veteran every 65 minutes.

Providing effective behavioral health services for veterans and active service members is complicated by a myriad of factors; lack of providers with cultural competency to address the unique needs of veterans and service members, outsourcing of behavioral health services outside of the VA, and, despite much progress, remaining institutional stigma within the service community. Veterans, service members, and their families are accessing behavioral health services from community providers yet these groups are often overlooked in discussions that pertain to the provision and accessibility of mental health care and should have a voice with our local behavioral health authority. HB408 is an important step to including military voices in important conversations on a local level in line with the national effort to improve access and provision of behavioral and mental health care for service members and veterans.

Under Maryland law, each county in the state must have a mental health advisory committee made up of professionals in various mental healthcare fields that ensures that resources are available to those in need and is charged with advocacy on their behalf. Currently, counties are required to choose set numbers of mental health professionals and other stakeholders from various fields listed in the establishing statute. However, the consideration of a specialist who cares for veterans or current service members is not required. HB408 alters the required makeup of each county's committee to ensure the consideration of an individual who has experience in mental health care for veterans or current service members. In including these specialists, the military community will have a greater voice in decisions that will have a positive impact on its members.

Given that AACo has the 2nd largest veteran population in that state, including veterans and current service members in discussions regarding mental health policy choices is not simply an option - it is a necessity. I respectfully request a favorable report on HB408.