

THE COALITION TO PROTECT MARYLAND'S CHILDREN

Our Mission: To combine and amplify the power of organizations and citizens working together to keep children safe from abuse and neglect. We strive to secure the budgetary and public policy resources to make meaningful and measurable improvements in safety, permanence, and wellbeing.

Testimony before the House Health & Government Operations Committee
HB1100 Health – Child Advocacy Centers – Reporting Requirements and Investigations
March 13, 2024

Position: OPPOSE

The Coalition to Protect Maryland's Children (CPMC) is a consortium of Maryland organizations and individuals formed in 1996 to promote meaningful child welfare reform. CPMC urges an unfavorable committee report for House Bill 1100 – Health Child Advocacy Centers – Reporting Requirements and Investigations.¹

The bill broadly defines child advocacy centers (CACs) to include health care facilities that investigate, diagnose, and treat children who may have been abused or neglected. These may include law enforcement officers, local criminal prosecutors, and the local department of social services. Additionally, the definition may include child mental health service providers and other children and family service providers. This definition is incredibly broad and may create significant challenges in implementing the requirements of the bill.

HB1100 requires child advocacy centers (CACs) to report annually to the Behavioral Health Administration (1) the names and license numbers of the behavioral health care providers who are providing services in the CAC; (2) the scope of the behavioral health care services being provided by the CAC; and (3) the CAC's operating policies and guidelines for providing quality of care and continuity of care, including the transition of care between behavioral health providers.

CPMC is not aware of any systemic problem as it relates to quality of care or continuity of care in CACs including the transition between behavioral health providers. This bill is a solution in search of a problem. Further, it is the behavioral health provider's responsibility through licensure to ensure continuity of care between providers in the event that there is a transition of care. The data requested through CACs is already information available through behavioral health providers and licensing boards.

The bill also makes CACs subject to a \$5,000 civil fine in the event that there is a complaint against the CAC; however, it is unclear what the complaint process is or if there is any due process for a CAC to defend itself against the complaint. Further, it is unclear who might be held responsible for paying the fine.

House Bill 1100 is a bill that is overly broad and does not solve a problem that CPMC is aware exists. Continuity of care provisions are already provided through state licensure for various health care professionals. Finally, there is no due process available with regards to complaints and penalties. ***For these reasons, we ask for an unfavorable committee report on HB1100.***

¹ Members of CPMC in opposition to HB1100 include Center for Hope, Citizens Review Board for Children, Maryland Children's Alliance, Maryland Coalition Against Sexual Assault, National Association of Social Workers – Maryland, Tim Briceland-Betts (individual), and Diana Philip (individual).