

March 25, 2025

**House Appropriations Committee  
TESTIMONY IN SUPPORT**

*SB 599 - Behavioral Health Crisis Response Grant Program - Funding*

**I am Crystal Reeves, a Montgomery County resident living in District 15. I strongly support SB 599 - Behavioral Health Crisis Response Grant Program – Funding.** This bill would provide level funding to the Behavioral Health Crisis Response Grant Program for the next three years to maintain critical behavioral health care services.

The Behavioral Health Crisis Response Grant Program was established in 2019 to build a more robust behavioral health crisis response system. These types of services provide immediate support when someone is experiencing a behavioral health crisis. Crisis services such as mobile crisis teams, urgent care clinics, and crisis residential beds are essential components of the behavioral health care continuum and provide an important alternative to calling 911 or going to the hospital Emergency Department.

The General Assembly mandated \$5 million for the last four years and the Behavioral Health Administration indicated that they plan to maintain it at this level for FY26. This stable funding has been used effectively to serve thousands of children and adults experiencing a crisis. It is also a smart investment that saves the state money in the long run by preventing higher hospital and criminal justice costs. The services funded by this program must be maintained to divert people away from these more expensive settings, especially considering the struggles the state continues to have with pediatric hospital overstays and lengthy ED wait times.

My mother has lived with schizophrenia since she was 17 years old. For many years, it was a family secret. As a child, I knew something was wrong, but it was not until I graduated from high school and moved to New York City to live with my father (after my parents divorced when I was seven) that the full extent of her illness became clear.

In September of 1997, while I was building a life, going to school, and starting a family, my mother knocked furiously on my door. When I opened it, I was confronted by a terrifying sight: she was emaciated, her body frail and thin, her eyes filled with fear. She was hallucinating and in the midst of a severe mental episode. That moment marked a turning point in our lives. I immediately left New York and took my mother to the hospital.

At that time, mental illness carried a heavy stigma, not only in our community but also within my own family. My mother was one of nine children, and yet no one was willing to help. Fortunately, I took it upon myself to research her condition, learn about schizophrenia, and use the court system to get her the involuntary treatment she so desperately needed. This process took nine years, and by 2006, she was well enough to care for herself again. She was able to manage her condition, take medication regularly, find a job, secure her own apartment, and live independently.

However, when changes to Medicaid laws meant that she could no longer afford her medication, the stability she had worked so hard to maintain unraveled. In 2019, I received a call from her apartment complex, notifying me that my mother had disturbed the neighbors and was a danger to them. They threatened eviction if the situation was not resolved. I rushed to her apartment, fearing it might mirror the terrifying episode from 1997. But this time, there was a significant difference: I was able to call a non-emergency number, and a Clinical Crisis Social Worker arrived at our door, accompanied by two police officers waiting in the parking lot.

The social worker assessed my mother, confirmed that she needed care, and despite her resistance, worked with the police officers to calmly convince her to go with them. She was escorted to the Crisis Center for immediate care. This experience was night and day compared to what I had gone through as a 20-year-old, struggling to navigate my mother's illness with no support system. Now, there was someone to advocate for me as a caregiver, and there was no stigma—only assistance.

Without the Behavioral Health Crisis Response services, I am not sure where I would be today. These services allowed my mother to get the care she needed and helped me achieve things I once thought impossible earning a college degree, starting a family, raising two thriving children, and now enjoying two grandchildren.

**Continued funding for the Behavioral Health Crisis Response Grant Program is not just necessary; it is a smart investment in the well-being of our communities. I urge the House Appropriations Committee to support the Senate bill and pass SB 599.**