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**Testimony of Elyssa Glickstein, MPH
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**HB 665: Maryland Medical Assistance Program and Health Insurance - Annual Behavioral Health
Wellness Visits - Coverage and Reimbursement
Position: FAVORABLE with AMENDMENT
February 6, 2025
House Health and Government Operations Committee**

Chair Peña-Melnyk, Vice Chair Cullison and members of the committee, thank you for the opportunity to provide written testimony in favor of House Bill 665 with an amendment. My name is Elyssa Glickstein, and I am a Policy Associate within the Community Mental Health CORE at Children's National Hospital. The Community Mental Health CORE aims to improve access to and utilization of high-quality behavioral health services for children and families, advance racial and health equity, and promote sustainability and system-level change through research, policy, advocacy, and community engagement.¹ Children's National has been serving the nation's children since 1870. Nearly 60% of our patients are residents of Maryland, and we maintain a network of community-based pediatric practices, surgery centers and regional outpatient centers in Maryland. We also provide a comprehensive range of behavioral health services for Maryland children and youth.

Children's National Hospital is in strong support of HB 665, which would require the Maryland Medical Assistance Program and certain health insurers, nonprofit health service plans, and health maintenance organizations to provide coverage and reimbursement for annual behavioral health wellness visits. Physical health annual wellness visits with a health care provider are a routine, financed component of our health care systems. Proactive guidance and information can be conveyed in a structured visit while screening for potential conditions and concerns that warrant follow-up. These preventive checkups are a covered benefit and generally well-attended. Our systems should do the same for behavioral health care, and HB 665 is a strong component in advancing behavioral health parity. Providing annual preventive behavioral health checkups for children, adolescents, and adults offers the same benefits for

¹ For more information on the Community Mental health CORE, see <https://childrensnational.org/advocacy-and-outreach/child-health-advocacy-institute/community-mental-health>.

both patients and providers. Routine visits are more likely to be socially accepted and provide access to important screening and follow-up for patients at risk for conditions. Routine behavioral health visits also build structure and predictability into provider schedules, allowing for appropriate screening protocols, staffing and specialization.

On a grand scale, mental illness can pose a huge economic burden on state and local municipalities to ensure people are receiving the treatment, services, and medication they need to lessen their symptoms. Preventive and early intervention measures, especially beginning in childhood and adolescence, have been proven to reduce incidence of severe mental illness later in life.² Further, the National Academies of Science, Engineering, and Medicine jointly reported in 2009 that every dollar spent on mental health prevention and early identification of youth behavioral health disorders can save \$2 to \$10 on local and state education, juvenile justice, and healthcare costs.³ Therefore, financing preventive approaches for children and adolescents can lead to millions of dollars in savings for the State of Maryland. We strongly believe that, when enacted, HB 665 will provide a strong preventive element to Maryland's continuum of behavioral health care and will reduce the occurrence of serious mental illness across the state.

While we urge passage of HB 665, Children's National offers the following recommendation to strengthen the bill, especially for children and adolescents:

- **Explicitly State that Coverage is Included for Children and Adolescents Ages 0-21**
 - All children have behavioral health needs, including infants and toddlers. The American Academy of Pediatrics recommends behavioral/social/emotional screening from newborn to 21 years of age.⁴ Therefore, it is critical to explicitly state the full age range, and that all children and adolescents, from birth to young adulthood, are entitled to a covered behavioral health wellness visit.

I applaud Delegate Woods for introducing this important legislation, which will have life-long benefits for our state's youngest residents and their families and respectfully request a favorable report with the proposed amendment on House Bill 665. Thank you for the opportunity to submit testimony. I am happy to respond to any questions you may have.

² [Mental Health Promotion and Prevention | Youth.gov](https://www.aap.org/periodicityschedule)

³ National Research Council and Institute of Medicine. (2009). Preventing Mental, Emotional, and Behavioral Disorders Among Young People: Progress and Possibilities [Online]. In *National Academies Press eBooks*. National Academies of Science, Engineering, and Medicine Committee on the Prevention of Mental Disorders and Substance Abuse Among Children, Youth, and Young Adults: Research Advances and Promising Interventions. <https://doi.org/10.17226/12480>

⁴ For more information, please see: <https://www.aap.org/periodicityschedule>

BY: Children's National Hospital

AMENDMENT TO HOUSE BILL 665

(First Reading File Bill)

AMENDMENT NO. 1

On page 3, after line 14, add "(3) CHILDREN AGES 0-21".

For more information, please contact:

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