

**Written Testimony on House Bill 772:  
Workgroup on Behavioral Health Rate Methodology Modernization - Establishment**  
House Health Committee  
Hearing Date: February 25, 2026  
**Position: SUPPORT**

My Name is Andrea Carroll, and I am the Director of Behavioral Health Services at Everstand. Our organization is based in Baltimore County and has sites across the state of Maryland which offer residential treatment, education, and community-based services to children and families with serious mental illness. We operate three Outpatient Mental Health Clinic (OMHC) programs, in Anne Arundel, Baltimore, and Caroline Counties.

I am submitting this written testimony on behalf of Everstand to **request your support of HB772**, which will ensure a robust rate-setting methodology for behavioral health programs like ours. **This bill will create a process that is independent, transparent, and inclusive of providers to determine the most effective and sustainable way to navigate increasing behavioral health costs and demand in a time of diminishing workforce capacity.**

Times are changing and we need our process for setting behavioral health rates to change too. The behavioral health workforce is shrinking, leading to vacancies and recruitment challenges as demand and compensation for providers increases. **Our organization currently experiences vacancies of 6 months or greater to fill open therapist positions.** This leads to caseload coverage, then burnout, then more turnover. **Gaps in provider coverage lead to limited access to care for kids and families with behavioral health challenges.**

Behavioral health needs for kids and youth are increasing. Costs of personnel, from competitive salaries to health care benefits, are increasing. Implementation of high-quality, evidence-based treatment models comes with increased costs. We have absorbed these costs, but current reimbursements do not reflect the full cost of delivering care. **Behavioral health programs for kids and families, like ours, are not sustainable under the current funding model.** We need a rate-setting methodology that reflects the actual cost of delivering services in Maryland communities.

Let's get this right. We urge you to vote favorably on HB772 to establish a comprehensive and balanced behavioral health rate study workgroup that will effectively evaluate and recommend the best way forward in this changing landscape.

Sincerely,



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