

**MGA\_CoryMcCray\_FAV\_SB522**

Uploaded by: Senator McCray, Senator McCray

Position: FAV

CORY V. McCRAY  
Legislative District 45  
Baltimore City

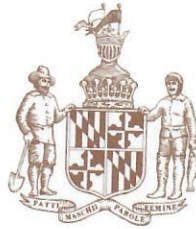
ASSISTANT DEPUTY MAJORITY LEADER

Budget and Taxation Committee

Capital Budget Subcommittee

Health and Human Services Subcommittee

Pensions Subcommittee



James Senate Office Building  
11 Bladen Street, Room 221  
Annapolis, Maryland 21401  
410-841-3165 • 301-858-3165  
800-492-7122 Ext. 3165  
Cory.Mccray@senate.state.md.us

THE SENATE OF MARYLAND  
ANNAPOLIS, MARYLAND 21401

## **Vote Yes on Senate Bill SB 522**

**Bill Title: Behavioral Health Programs - Licensing and Fees**

**Hearing Date: February 18, 2020 at 1:00 p.m.**

**Chair: Delores G. Kelley, Vice Chair: Brian J. Feldman**

I write to you today in **support** of Senate Bill 522. This bill will add a minimal fee to the initial, modification and renewal of licenses for Behavioral Health Programs.

The safety, cosmetics and the partners in the community are vitally important. The longevity depends on the community and partners working together. As with any partnership, there are moments across the state of Maryland where there becomes challenges. At the moment it becomes challenging, it's important for the community to step up and have the resources to ensure the longevity of the community.

This bill will provide neighborhoods where Behavioral Health Programs are located in, with the ability to ensure that their communities are safe and clean.

In an effort to advance the goals of the community which include safety and beautification, we hope that you will move for a **favorable** report of Senate Bill 522.

Respectfully,

Cory V. McCray  
State Senator



**Zeke Cohen**

Councilmember

*First District*

513 City Hall • Baltimore, MD 21202 • 410-396-4821 • [ZEKE.COHEN@BALTIMORECITY.GOV](mailto:ZEKE.COHEN@BALTIMORECITY.GOV)

February 14, 2020

Finance Committee  
Miller Senate Office Building, 3 East Wing  
11 Bladen St  
Annapolis, MD 21401-1991

RE: Support of Senate Bill 522: Behavioral Health Programs – Licensing and Fees

Chair Delores G.Kelley and Vice-Chair Brian J. Feldman,

I write to you today in **support** of Senate Bill 522. This bill will add a minimal fee to the initial, modification, and renewal of licenses for Behavioral Health Programs.

The safety, cosmetics and the partners in the community are vitally important. The longevity depends on the community and partners working together. As with any partnership, there are moments across the state of Maryland where challenges arise. At the moment these challenges arise, it's important for the community to step up and have the resources to ensure the longevity of the community.

This bill will provide neighborhoods where Behavioral Health Programs are located in, with the ability to ensure that their communities are safe and clean.

In an effort to advance the goals of the community which include safety and beautification, we hope that you will move for a **favorable** report of Senate Bill 522.

Sincerely,

A handwritten signature in black ink that reads "Zeke Cohen".

Councilmember Zeke Cohen

---

**CHAIR: EDUCATION AND YOUTH COMMITTEE**



# BALTIMORE CITY COUNCIL



**MARY PAT CLARKE**  
14<sup>th</sup> District

City Hall, Room 550  
100 N. Holliday St.  
Baltimore, Md 21202  
410-396-4814  
410-545-7585 fax

[marypat.clarke@baltimorecity.gov](mailto:marypat.clarke@baltimorecity.gov)

February 16, 2020

Chairwoman Delores Kelley, Vice Chairman Brian Feldman and Members

Finance Committee

Maryland State Senate

3 East Miller Senate Building, 11 Bladen Street

Annapolis, Maryland 21401-1991

Re: Support for Senate Bills 519, 520, 521, 522, lead sponsor Senator Cory McCray

Distinguished Chairwoman Kelley, Vice Chairman Feldman, and Members, Finance Committee: Senator Cory McCray and I represent portions of the same neighborhood and understand that, despite a crucial public need for services, various State health and social service programs compromise their missions by cropping-up without advance notice to surrounding neighbors, a frequent and disrespectful occurrence in our most disadvantaged communities.

Many of such programs actually “victimize” the very persons they are designed to help through inadequate attention and lack of professional oversight. Meanwhile, for lack of notice and discussion, programs are frequently regarded as intrusions and disruptions of neighborhood security.

These four bills address specific improvements which contribute to better treatments for patients and more respectful partnerships with affected neighbors. I urge your support and thank you for your consideration.

Senate Bill 0519. Public Health–Behavioral Health Programs and Health Care Facilities – Safety Plan

Bill 519 prohibits licensure until a proposed facility provides a safety plan for its patients and for “the community surrounding the behavioral health program.” This ensures that the community has the chance to negotiate on behalf of itself and on behalf of patients yet to be identified, a process that rarely occurs in my experience. “Earning” licensure in such circumstances is the ideal safeguard for achieving the safety and respect due all parties.



## Vote "Yes" on Senate Bill 522

**Bill Title: Public Health – Behavioral Health Programs – Licenses and Fees**

Hearing Date: February 18, 2020 at 1 p.m.

Chair: Delores G. Kelly, Vice Chair: Brian J. Feldman

Dr. Angela Jancius  
3022 Christopher Avenue  
Baltimore, MD 21214  
wniapresident@gmail.com

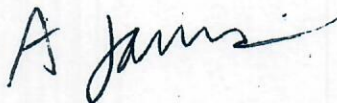
Honorable Representatives,

I am sending written testimony in support of Senate Bill 522. I am the President of the Westfield Neighborhood Improvement Association (WNIA). I have a doctorate in Social Anthropology, and am writing today as a community advocate and resident of Baltimore City, in the 45<sup>th</sup> District

In our communities of northeast Baltimore, we are experiencing a rapid influx of opioid treatment services. In the last year alone, several new substance abuse treatment centers have opened within a one-mile radius, along our neighborhood's portion of the Harford Road commercial corridor. When behavioral health programs are poor neighbors this has an effect on local demographics and criminal activity, and an overall negative social and economic impact.

We would like behavioral health programs in our community to be good neighbors. I support SB 522 because it takes measures to ensure that this is the case. Facilities are more successful in communities that are viable. While substance abuse treatment is important and necessary, communities are impacted by treatment centers. Senate Bill 522 adds a minimal fee to the initial licensing, and to the licensing renewal process, for behavioral health programs. This is used to invest in the communities in which facilities are located – to ensure a viable partnership. This worthy and practical bill gives support to communities that host programs - helping them to stay safe and clean. A stable community will improve the success rate of a treatment program. Thank you for supporting SB 522. This is a bill that makes perfect sense.

Sincerely,



Angela Jancius, Ph.D.

President, Westfield Neighborhood Improvement Association (WNIA)

BALTIMORE CITY COUNCIL



**Councilwoman Danielle McCray**  
**Second District**

ROOM 525, CITY HALL  
100 N. HOLLIDAY STREET, BALTIMORE, MARYLAND 21202  
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danielle.mccray@baltimorecity.gov

VICE-CHAIR  
TAXATION, FINANCE & ECONOMIC  
DEVELOPMENT COMMITTEE  
LEGISLATIVE INVESTIGATIONS COMMITTEE

MEMBER  
BUDGET & APPROPRIATIONS COMMITTEE  
LABOR COMMITTEE  
PUBLIC SAFETY COMMITTEE

February 18, 2020

The Honorable Delores G. Kelley  
The Honorable Brian J. Feldman  
Miller Senate Office Building  
Annapolis, Maryland 21401

Chairwoman Delores Kelley, Vice Chairman Brian Feldman, and Members of the Committee:

I write to you today in support of Senate Bill 522 Behavioral Health Programs - Licensing and Fees. This bill will add a minimal fee to the initial, modification and renewal of licenses for Behavioral Health Programs.

The safety, cosmetics and the partners of our communities are vitally important, and the upkeep relies on the community and the partners working together. As with any partnership, there are moments across the state of Maryland where challenges occur between the two entities. At the moment it becomes challenging, it's important for the community to step up and have the resources to ensure the longevity of the community.

This bill will provide neighborhoods where Behavioral Health Programs are located in, with the ability to ensure that their communities remain safe and clean.

In an effort to advance the goals of the community which include safety and beautification, I support a favorable report of Senate Bill 522.

Sincerely,

Danielle McCray

Baltimore City Councilwoman - 2nd District



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Recycled Paper



Chairman, Budget & Appropriations Committee  
Chairman, Judiciary & Legislative Investigations Committee  
Chairman, Biennial Audits Oversight Commission  
Chairman, Stormwater Remediation Oversight Committee

Land Use & Transportation Committee  
Taxation, Finance, & Economic Development Committee



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Eric T. Costello

Baltimore City Council, 11<sup>th</sup> District

February 18, 2020

The Honorable Senator Delores G. Kelley  
The Honorable Senator Brian J. Feldman

RE: Senate Bill 522

I write to you today in support of Senate Bill 522. This bill will add a minimal fee to the initial, modification and renewal of licenses for Behavioral Health Programs.

The safety, cosmetics and the partners in the community are vitally important. The longevity depends on the community and partners working together. As with any partnership, there are moments across the state of Maryland where there becomes challenges. At the moment it becomes challenging, it's important for the community to step up and have the resources to ensure the longevity of the community.

This bill will provide neighborhoods where Behavioral Health Programs are located in, with the ability to ensure that their communities are safe and clean.

In an effort to advance the goals of the community which include safety and beautification, we hope that you will move for a favorable report of Senate Bill 522.

Should you have questions, please feel free to contact me directly at [eric.costello@baltimorecity.gov](mailto:eric.costello@baltimorecity.gov) or 410-396-4816.

Sincerely,

A handwritten signature in black ink that reads "Eric T. Costello".

Eric. T. Costello  
Baltimore City Council, 11th District



**BALTIMORE CITY COUNCIL**  
**KRISTERFER BURNETT, 8<sup>th</sup> District**

Committees: Executive Appointments, Housing and Urban Affairs,  
Public Safety, Education and Youth

Room 521, City Hall  
100 N. Holliday Street  
Baltimore, Maryland 21202  
Office: 410-396-4818  
Fax: 410-396-4828

**BILL NO:** Senate Bill 0522  
**TITLE:** Behavioral Health Programs - Licensing and Fees  
**COMMITTEE:** Finance  
**POSITION:** SUPPORT

This bill requires that a Behavioral Health Program be licensed for a maximum of three years and renewal must be made by reapplication only. The bill also established a Behavioral Health Grant Program that provides financial support to local areas to improve and expand their behavioral health programs. I fully support this bill.

A handwritten signature in black ink, appearing to read "K. Burnett".

Kristerfer Burnett  
City Councilmen District 8  
Baltimore City



**CBH\_UNF\_SB522**

Uploaded by: Doyle, Lori

Position: UNF



**Testimony on SB 522**  
**Behavioral Health Programs – Licensing and Fees**  
Senate Finance Committee  
February 18, 2020  
**POSITION: OPPOSE**

The Community Behavioral Health Association of Maryland is the professional organization for providers of community-based mental health and substance use disorder treatment services. Our members serve the majority of the almost-300,000 children and adults who access care through the public behavioral health system. We provide outpatient treatment, residential and day programs, case management and assertive community treatment (ACT), employment supports, and crisis intervention .

We oppose SB 522 for three reasons: it applies licensure fees in an inequitable manner; it provides no parameters or safeguards for the use of money collected, and may actually result in the unintended consequence of keeping substandard providers in business, and; it falsely presumes that providers of behavioral health services are detrimental to the communities they serve.

Unlike other behavioral health providers who may have one or two licensed facilities, mental health organizations most often provide multiple service lines, all of which would be subject to a separate and distinct licensure fee under this legislation. Many of our members have developed hundreds of thousands of dollars' worth of low-income housing which they use to provide residential rehabilitation program (RRP) services to those with psychiatric disabilities. Each RRP location – regardless of the number of clients it houses – would be subject to this licensure fee, as would apartments leased by our members for the same purpose. There are CBH members with over 60 distinct licenses, covering the various service lines and locations of programs. Clearly mental health providers would be subject to a much larger amount of licensure fees than other behavioral health programs that operate only a handful of facilities and service lines. And this is on top of the significant cost of national accreditation now required for licensure of behavioral health organizations.

We also object to the idea of having organizations pony up license fees that may go to providing improvements to other organizations they compete with – and which may have the unintended consequence of propping up substandard providers at the expense of quality providers. Communities have the right to expect providers to be good neighbors, and our member organizations often invest in personnel and activities that benefit their surrounding communities. If an organization is not acting as a good neighbor, then steps should be taken to sanction or close that provider, depending on the nature and severity of the problems. It should not be incumbent on private organizations to financially offset the practices of organizations that have no regard for the quality of their services or of the well being of the communities in which they operate.



Finally, we are concerned that behavioral health programs are singled out as the only entities subject to the requirements of SB 522. Those with mental health and substance use disorders have long been stigmatized. The underlying assumption of this bill is that organizations serving this population are detrimental to their communities. The reality is that communities suffer when there isn't adequate access to behavioral health treatment and services.

We urge an unfavorable report on SB 522.

# **MHAMD\_UNF\_SB522**

Uploaded by: Martin, Dan

Position: UNF



**SB 519** *Public Health – Behavioral Health Programs and Health Care Facilities – Safety Plan*

**SB 520** *Behavioral Health Programs – Opioid Treatment Services – Limitation on Licenses*

**SB 521** *Behavioral Health – Opioid Treatment Services Programs – Medical Director*

**SB 522** *Behavioral Health Programs – Licensing and Fees*

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Finance Committee

February 18, 2020

**Position: OPPOSE**

The Mental Health Association of Maryland is a nonprofit education and advocacy organization that brings together consumers, families, clinicians, advocates and concerned citizens for unified action in all aspects of mental health, mental illness and substance use. We appreciate this opportunity to present this **testimony in opposition to these four bills**.

The Maryland General Assembly has taken several important steps in recent years to address a behavioral health crisis that is devastating families across the state. We are making progress, but we are not out of the woods yet. Unmet need persists, resources are scarce, and it remains increasingly difficult for Marylanders to access affordable and efficient mental health and substance use treatment services when and where needed.

People with behavioral health needs must contend with longstanding and pervasive barriers that limit access to care. At a time when Maryland should be looking to increase service availability, these stigmatizing and discriminatory measures would do just the opposite – they would create **new barriers** that would **reduce access** to timely and effective mental health and substance use treatment.

**SB 519** would require behavioral health programs to establish and implement *safety plans for the surrounding community* as a requirement of licensure, the implication being that somehow these facilities are inherently more dangerous than other businesses or health care providers. This is a presumption that perpetuates a stigma against individuals living with mental health and substance use disorders, and it is not supported by any data.

In fact, a comparative analysis by the Johns Hopkins School of Public Health<sup>1</sup> found just the opposite was true. The research determined that drug treatment centers in Baltimore City were not associated with violent crime in excess of the violence happening around other commercial businesses, concluding that these facilities “have an unfairly poor reputation as being magnets for crime and a threat to community safety that is not backed up by empirical evidence.”

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<sup>1</sup> Furr-Holden, Debra C., et al. *Not in My Back Yard: A Comparative Analysis of Crime Around Publicly Funded Drug Treatment Centers, Liquor Stores, Convenience Stores, and Corner Stores in One Mid-Atlantic City*. Bloomberg School of Public Health, Johns Hopkins University. July 2015.

*For more information, please contact Dan Martin at (410) 978-8865*

**SB 520** would prohibit the Behavioral Health Administration from approving more than five licenses per 100,000 individuals in a county for opioid treatment programs. No other type of health care is subject to a population-based limit of this type. This form of discriminatory differential treatment is clearly violative of the Americans with Disabilities Act.

**SB 521** would require medical directors at opioid treatment programs (OTPs) to be on-site at least 20 hours each week, and it would prohibit OTPs from using telehealth to satisfy that requirement. The bill would exacerbate an existing shortage of qualified medical directors and decrease access to opioid use treatment across the state.

OTP medical directors in Maryland are already subject to regulations that go beyond federal requirements. This limits the availability of qualified medical directors and forces many to split their time among several programs, serving a role that is primarily administrative in nature. While medical directors can provide direct clinical care, most of the medical care is provided by program physicians and advanced practice providers, such as certified nurse practitioners and physician assistants.

The on-site requirements of SB 521 would be unattainable for many smaller OTPs, forcing these facilities out of business and eliminating treatment options for Marylanders living with opioid use disorders.

**SB 522** would impose new licensure fees on mental health and substance use treatment providers on top of the already significant cost of national accreditation currently required for licensure of behavioral health programs in Maryland. Funds collected must be distributed to local health departments and used to enhance safety at behavioral health programs and make *“improvements to the community in which a behavioral health program is located.”*

Again, this perpetuates a stigma that presumes behavioral health providers and the people they serve are dangerous and detrimental to their communities. But in reality, communities suffer when there is inadequate access to mental health and substance use treatment.

These four bills are stigmatizing, discriminatory measures that would reduce access to critical behavioral health care. **For these reasons, MHAMD urges an unfavorable report on SB 519, SB 520, SB 521, and SB 522.**



**MACo\_UNF\_SB522**

Uploaded by: Mehu, Natasha

Position: UNF



## **Senate Bill 522**

### *Behavioral Health Programs - Licensing and Fees*

MACo Position: **OPPOSE**

To: Finance Committee

Date: February 18, 2020

From: Natasha Mehu

The Maryland Association of Counties (MACo) **OPPOSES** SB 522. The bill, as drafted, risks the unintended consequence of hurting the behavioral health programs it seeks to help.

SB 522 would establish a framework for licensing fees and renewals for behavioral health programs. The fees are at least \$1,000 for an initial license, \$750 for a renewal, and \$250 for a license change. Behavioral health programs that serve more people can be charged higher fees. Additionally, the bill creates a Behavioral Health Program Grant Program funded by the licensing fees to award grants to local health departments. These grants may be used to enhance local health department behavioral health programs or be distributed to nonprofit organizations who provide services within the county.

Local health departments and nonprofit community providers largely serve low-income populations. The licensing fees would be a substantial strain on their programs and may lead to cuts or reductions on the services they provide. There is already a shortage of providers in rural areas that an imposition of additional licensing fees may exacerbate.

Additionally, as some local health departments also operate behavioral health programs, counties are concerned that these local health departments would be forced into an untenable position as being the funding source of grants they are expected to receive to enhance their programs. Local health departments are also not structured to function as grant administrators and would incur additional costs to monitor and administer the grants. It would be an inefficient use of already limited resources.

While well intentioned, the bill is unworkable for local health departments and potentially detrimental to communities that lack behavioral health providers. For these reasons, MACo urges an **UNFAVORABLE** report on SB 522.