

Disability Rights Maryland

Testimony before the Senate Finance Committee
February 18, 2020

Senate Bill 624 – Health Response and Stabilization System for Children and Families in Maryland – Study - Requiring the Maryland Department of Health and the Governor’s Commission to Study Mental and Behavioral Health to jointly develop a comprehensive mobile response and stabilization program.

POSITION: SUPPORT

Disability Rights Maryland (DRM) is the federally-mandated Protection and Advocacy agency for the State of Maryland, charged with defending and advancing the rights of persons with disabilities. DRM advocates for systemic reforms and policies that improve services and supports for persons with psychiatric disabilities, and ensures that their rights are protected. DRM is here today to support Senate Bill 624, which would require the Department of Health and the Governor’s Commission to jointly develop a comprehensive mobile response and stabilization program for children and youth. Maryland’s mental health system for children and youth is in crisis.

DRM maintains a presence in Maryland’s public and private residential treatment centers and investigates complaints of abuse, neglect and rights violations on behalf of children with emotional and behavioral disabilities and their families. In DRM’s experience, families are being forced to relinquish custody, as they did twenty years ago, to obtain appropriate mental health care for their children. Because crisis and low-level mental health treatment is largely unavailable, situations often escalates to crisis levels before families can obtain services. At that point, the child is often hospitalized, sometime for extended periods of time, children are sent to out-of-home placements, if they can get them, or children go into the juvenile justice system. We are especially concerned about the incidence of this happening to children who are dually diagnosed with developmental disabilities, such as autism or intellectual disabilities, and youth with substance abuse disorders. We receive calls on a weekly basis from families seeking help getting their children admitted to residential treatment centers or out-of-state residential placements. Parents and guardians have received the message that crisis services are largely unavailable and that a Voluntary Placement Agreement is needed to obtain Residential Treatment Center services. Unfortunately, when these parents go to their local Department of Human Services office to apply for a VPA, they are most often turned away or discouraged from applying. Parents then have nowhere to turn, so when their child is finally hospitalized with a psychiatric admission or emergency petition, sometimes parents will refuse to take the child home, as it is unsafe. This cannot be allowed to continue. Mental health services for children need to be significantly and substantially increased. Preventive services, including wraparound mental health services like the 1915i Waiver, need to be put in place. Under the Americans with Disabilities Act, children and youth with disabilities have the right to receive services in the most integrated

setting appropriate to their needs. For most children and youth, this will be in the family home and in their communities. Failing to provide services until the child is in crisis is costly and may violate the ADA as well as other federal laws, such as the Early Periodic Screening, Diagnosis and Treatment (EPSDT), which covers Medicaid-eligible children and youth to age 21. Maryland has a 1915i waiver, but it is underutilized and ineffective. It is our understanding that Maryland began negotiating with CMS to improve the waiver but there has not been substantial progress. Creating a plan for a comprehensive mobile response and stabilization program would be a good start to give Maryland's children and youth the mental health treatment they deserve.

For these reasons, DRM recommends that Senate Bill 624 be given a favorable report.