

BONNIE CULLISON
Legislative District 19
Montgomery County

Health and Government
Operations Committee

Chair, Insurance and Pharmaceuticals
Subcommittee



The Maryland House of Delegates
6 Bladen Street, Room 312
Annapolis, Maryland 21401
410-841-3883 · 301-858-3883
800-492-7122 Ext. 3883
Fax 410-841-3882 · 301-858-3882
Bonnie.Cullison@house.state.md.us

THE MARYLAND HOUSE OF DELEGATES
ANNAPOLIS, MARYLAND 21401

**Testimony in Support of HB 669
Health and Human Services Referral Systems - Modifications**

Good afternoon, Chairman Pendergrass, Vice Chairman Peña-Melnyk and honorable members of the committee. Thank you for this opportunity to present **HB 669 Health and Human Services Referral Systems – Modifications**. This bill eliminates the statutory cap on the number of call centers that can be included in the 2-1-1 network, transitions the oversight and guidance functions from the Health and Human Services Referral Board to the 2-1-1 Board in consultation with the Maryland Department of Health. In addition, you have an amendment that requires the Department to study the cost of providing the call in services.

Maryland 2-1-1 is a public-private partnership that really works for our constituents when they have individual needs—sometimes they are in crisis and sometimes they just need information. It is accessible 24/7, 365 days a year, both on the phone and on the internet. Most of the time, people who call can get connected directly to the resources they need at that moment.

The amount of State funds committed to the 2-1-1 program remained consistent at about \$3M annually until 2018 when we committed funding from the Behavioral Health budget to use the 2-1-1 services to address the opioid crisis. In meetings with that agency over the summer of 2019, I learned that this has been a great resource to many Marylanders. However, the use of those funds were restricted and could not be used to support the other kinds of calls received, such as for housing support, finding food sources and paying utility bills to name a few. That is why we are amending this bill to ask for a study of how much this service actually costs. It is definitely a service that our residents need and we need to make sure it can be sustained.

Over the summer I participated in a work group to study the outreach of 2-1-1 among state agencies. The findings of that workgroup are included in the Annual Report, which you should have all received. Essentially, the 2-1-1 program is underutilized by the state agencies. Given that all of the agencies providing human services have separate call lines, which are expensive, there is the opportunity for the State to save funds by aligning better with the 2-1-1 program. This requirement is actually in statute, but has never been enforced. There is considerable unlocked potential in the program, which if tapped could meet the increasing needs of our constituents.

Health – General §24–1203

(d) If a unit of the State that provides health and human services establishes a public information telephone line or hotline, the unit shall consult with 2–1–1 Maryland about using the 2–1–1 system to provide public access to information

Maryland 2-1-1 was established in statute in 2010 and has served millions of Marylanders since then. The Health and Human Services Referral Board (HHSRB) was created statutorially and charged with providing guidance and oversight to the program. However, the overall governance structure of the public-private partnership is unclear about where the authority lies. In the seven years I have served on the Board, there has been much transition among the membership and there are currently four vacancies on a 12-person Board. Initially we made efforts to have in-person meetings, but it was very difficult to schedule given the roles and responsibilities of the very busy volunteers serving. In the last two years we have resorted to bi-monthly conference calls, but there are often members absent. Let me be clear, I am not casting judgement on the members of the Board, all appointed by their respective organizations; I know that they are all committed to the 2-1-1 program and the people it serves. However, when there is no clear purpose or authority, it is harder to take time out of the work day to participate.

In spite of the Board's challenges, the 2-1-1 program has served more Marylanders every year, has a real on-line and text presence and has significantly increased services to those seeking support for mental health and substance abuse disorders. ALL of this progress has been under the leadership of the 2-1-1-program Board of Directors. This Board is comprised of community members and leaders and non-profit leaders. It is that Board, through the President/CEO of Maryland 2-1-1, that produces the annual report required for the General Assembly. It would be just as productive and more efficient to have that report come to us from the 2-1-1 Board through the Department. That is why we are recommending a repeal of the HHSR Board.

Thank you for your consideration of this opportunity to provide better resources to our residents in need. I respectfully request a favorable report for HB 669.