

March 4, 2020

House Bill 1140 - Health - Mobile Response and Stabilization System for Children and Families in Maryland – Study - SUPPORT

Chair Pendergrass, Vice Chair Pena-Melnyk, and members of the Health and Government Operations Committee,

The National Alliance on Mental Illness, Maryland and our 11 local affiliates across the state represent a statewide network of more than 45,000 families, individuals, community-based organizations and service providers. NAMI Maryland is dedicated to providing education, support and advocacy for persons with mental illnesses, their families and the wider community.

NAMI Maryland strongly supports HB 1140, the first step in addressing an enormous gap in behavioral health services for the most vulnerable among us: children. This bill would require the Maryland Department of Health and the Governor's Commission to Study Mental Health and Behavioral Health in Maryland to jointly develop a comprehensive mobile response and stabilization system for children and families.

Many of NAMI Maryland's members are family members, meaning they find NAMI when they're looking for education, resources, and ways to support their loved ones on their treatment path.

We have many first-hand accounts about how the lack of a comprehensive continuum of care for kids in Maryland means a struggle to find help in times of crisis. Emergency department wait times continue to grow for our children and adolescents while they wait for transfer to a more appropriate care setting.

Across the state, there are 29 acute care general hospitals that provide inpatient psychiatric services for adults 18 and older. Only five of those hospitals provide acute care for adolescents between 13 and 17, and only two provide care for children from 0 to 12 years of age.

In 2018, there were 12,304 juvenile visits to emergency departments. Close to 1,200 of them lasted anywhere from over 24 hours to 20 or more days in the emergency department, waiting for a bed elsewhere.

These alarming statistics help highlight the need for better community crisis services and interventions. A system like Mobile Response and Stabilization Services (MRSS) - an upstream intervention that is primarily used to divert youth from the higher intensity of services such as inpatient and residential care.



We need a model that's child and family focused, works with crisis as defined by the family, avoids law enforcement, provides 'round the clock access to face-to-face provider services, and is no-cost. MRSS may sound like a lot, but it's the minimum of what our kids deserve.

And we know that the earlier the intervention, the greater the potential for successful outcomes and local and statewide cost savings on both the public safety and health care front.

HB 1140 would ensure Maryland is a leader on caring for our children facing tough behavioral health needs. The lack of services is so great and the need is so high. A plan like the one proposed in HB 1140 would build a strong foundation to help support our kids in crisis.

For these reasons, NAMI Maryland asks for a favorable report on HB 1140.

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