

## Testimony on HB 1326 Maryland Healthy Working Families Act – Revisions and Public Health Emergency Leave

House Economic Matters Committee
March 2, 2021
POSITION: OPPOSE

The Community Behavioral Health Association of Maryland (CBH) is the leading voice for community-based providers serving the mental health and addiction needs of vulnerable Marylanders. Our 95 members serve the majority of those accessing care through the public behavioral health system. CBH members provide outpatient and residential treatment for mental health and addiction-related disorders, day programs, case management, Assertive Community Treatment (ACT), employment supports, and crisis intervention.

While we appreciate the intent behind this legislation, we are extremely concerned about the impact of the required additional leave time on our ability to staff programs serving individuals with serious mental health disorders. Of particular concern is our residential programs, many of which are staffed 24 hours/day. Our members are already experiencing a long-standing workforce crisis that has been exacerbated by the COVID pandemic. Open staff positions stay vacant longer, and some lines of service have seen direct care turnover rates as high as 50%.

The inability to staff our programs not only causes concerns over violating regulated staffing ratios, but our members now report vacant residential program beds that can't be used for individuals ready to leave state psychiatric institutions. This backup costs the state – institutional care is much more expensive than community-based care and is not eligible for federal reimbursement through the Medicaid program for those aged 21-64. The greatest impact of course is on the individuals who are ready for community placement but languish in state hospitals simply because staffing shortages disallow providers from filling a vacant bed.

Cost is also a grave concern. Unless Medicaid raises our rates to offset the costs of complying with this bill, cuts will have to be taken elsewhere. The great majority of our providers' expenses is tied up in personnel, so cuts would likely be made to health insurance or other discretionary benefits or in actual program and service line closures.

We urge you to please consider the unintended impact of this bill on health and social safety net organizations that provide services to Maryland's Medicaid recipients. While we have an obligation to our employees, we must balance that against the obligation we have to the individuals we serve.

For these reasons we respectfully oppose HB 1326.

For more information please contact Lori Doyle, public policy director, at 410-456-1127.