

Hearing Date: February 2, 2021

Committee: Health and Government Operations

Bill: HB 029 - Health – Standards for Involuntary Admissions and Petitions for Emergency 3
Evaluation – Substance Use Disorder

Position: SUPPORT WITH AMENDMENT

This is a letter in Support with Amendments of House Bill 29, requesting inclusion of PHYSICIAN ASSISTANTS (PAs) as certifying providers and expressing concerns about the impact of including substance use disorders as a reason for involuntary commitment.

House Bill 29 is focused on the inclusion of substance use disorder in addition to a mental disorder as a reason for involuntary admission of an individual. As it is currently written, the involuntary admission must “be based on the personal examination of the physician, psychologist, or psychiatric nurse practitioner”.

There are three recognized providers of medical care in Maryland: physicians, nurse practitioners (NPs), and physician assistants (PAs). This bill currently omits an entire class of licensed healthcare providers. As PAs are often employed in emergency department settings, inpatient and outpatient psychiatric programs, substance abuse treatment programs, and other areas where crisis intervention services are being provided, they are readily available to examine, diagnose, and treat individuals suffering from mental health and substance use conditions. By not allowing PAs to be certifying clinicians, it is creating unnecessary delays in treatment and enacting barriers instead of eliminating them. This is particularly true in underserved and rural areas, where PAs are often the primary, and sometimes the only, medical provider an individual may be seeing for evaluation.

I would also have a concern regarding the inclusion of substance use disorder as a reason for involuntary psychiatric admission. The reasoning behind this proposed change is understandable: to protect individuals who are cognitively altered due to their active addiction and are often unable to engage in treatment decisions.

However, working in the emergency department, we are already struggling to care for individuals who are awaiting transfer to psychiatric facilities. It is not uncommon for patients to have wait times of several days, and even upwards of a week. If substance use disorder is added as a reason

for involuntary psychiatric admission without an increase in facilities available to treat substance use and dual diagnosis patients, the crisis of psychiatric boarding in the emergency department will turn into a catastrophe. Please think about delaying this part of the proposed legislation until there is expansion of available services for mental health and substance use disorders across the state.

Thank you for considering this request to include PHYSICIAN ASSISTANTS (PAs) in House Bill 29 as providers able to evaluate and sign certificates of involuntary admission for individuals who are at their most vulnerable and in greatest need of prompt referral for services. Please also consider this request to delay the addition of substance use disorder as a reason for involuntary commitment until there are more facilities available to treat individuals with substance use and/or mental health diagnoses.

Best,

A handwritten signature in black ink that reads "Deanna Bridge Najera". The signature is written in a cursive, flowing style.

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