



Leading
By Example

SB 637

Health and Health Insurance - Behavioral Health Services - Expansion (Behavioral Health System Modernization Act)

Finance Committee

February 23, 2022

POSITION: FAVORABLE

Leading By Example is a mental health provider serving children, adults, and families in Baltimore City, Baltimore County, and Harford County. We have been working to improve the quality of life for these individuals since 2009, and have helped thousands of individuals and families dealing with significant mental health needs, across our five service lines.

The need for quality mental health and substance use care has never been higher, and SB637 includes a variety of reforms and enhancements designed to meet the increasing demand for high quality mental health and substance use care, all of which will help bring Maryland's system into the 21st century. There are 2 pieces of this bill that are especially important to our organization.

Children's Intensive In-Home Services

As a child and family-serving organization, the most essential piece of this bill addresses the alarming access barriers to intensive in-home services for children.

In Maryland, the youth mental health crisis is reflected in a sharp rise in emergency visits for suicide attempts among children, as well as a growing number of children seeking services. The pandemic has disrupted traditional referrals from schools and pediatricians, as well as complicating the use of telehealth in an era of virtual schooling. On top of these challenges, Maryland has made a series of policy changes that have restricted access to services that offer in-home support to children with serious mental health conditions. Senate Bill 637 / House Bill 915 offers a series of policy reforms that will begin improving access to care for children with intensive behavioral health needs.

Leading By Example began the process for 1915i service approval in 2016, and began program implementation of intensive in-home services in 2017. But from 2017- March 2020, LBE was able to initiate service for only 4 clients. Statewide, this service has been plagued by both eligibility and program viability barriers leading to its stark underutilization. While some modifications to eligibility have changed, it does not appear to have increased accessibility. Due to these under-enrollment challenges, in combination with the very low reimbursement rate and high staffing requirements, we have been unable to operate this program at all in recent years. 1915i services are designed to help families in crisis prevent out-of-home placement for their children, but between access

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barriers for the clients as well as high cost for providers, the service is functionally impossible for our organization to provide.

Measurement-Based Care

Another important element of this bill is its requirement that Medicaid expand coverage of measurement-based care to behavioral health providers. You know what measurement-based care is because you experience it every time you go to the doctor. Your doctor takes your temperature, weight and blood pressure, and uses this data as a quick guidepost to decide if any changes to your care are needed. Your doctor gets paid for this.

Similar measurement-based care tools exist for mental health. Short, standardized assessments can be used to triage and categorize mental health symptoms in order to help a therapist decide if changes to treatment are needed. When used correctly, measurement-based care is demonstrated to improve client satisfaction with treatment, retention in treatment, and help clients get better. Clinicians and programs find it valuable for improving the quality of their care.

In the Maryland Medicaid program, doctors already get paid for doing measurement-based care for both somatic and mental health conditions. Unfortunately, mental health providers do not. This bill corrects this oversight by requiring reimbursement be available to behavioral health providers. Reimbursement will create sustainability and scale for the use of measurement-based care and its proven ability to increase the quality of care.

Leading By Example has used measurement-based care since 2019. It is used to guide treatment, motivate clients, and allows for more effective assessment of progress as individuals engage throughout treatment. MBC has had a positive impact on clients and has increased our ability to assess the effectiveness of treatment, allowing for treatment to be even more targeted and supportive of clients as they achieve their goals. MBC allows for individuals to see and quantify their progress, which inherently motivates and positively impacts outcomes. As a result, we see clients progress and maintain positive mental health outcomes.

We ask for a favorable report for SB637.