

SB 154_Maryland Coalition of Families_Fav.pdf

Uploaded by: Ann Geddes

Position: FAV



SB 154 – Public Health – Mental Health Advance Directives – Awareness and Statewide Database

Committee: Senate Finance

Date: February 7, 2023

POSITION: Support

The Maryland Coalition of Families: Maryland Coalition of Families (MCF) helps families who care for a loved one with behavioral health needs. Using personal experience, our staff provide one-to-one peer support and navigation services to family members with a child, youth or adult with a mental health, substance use or gambling challenge.

MCF enthusiastically supports SB 154.

For people with Serious Mental Illness, a psychiatric advance directive is an empowering tool that allows them to state their wishes in the event that they be deemed incapable of making sound decisions themselves. Psychiatric advance directives can prevent involuntary commitment, for an individual can feel safe knowing that they will not be subject to forced treatments contrary to their will should they be hospitalized, and therefore be more willing to consent to treatment voluntarily.

Families too benefit from having a loved one complete a psychiatric advance directive, for when a person with serious mental illness is well, they can name a family member as a health care agent, thereby allowing a family member to participate in their loved one's treatment. So often, because of HIPPA requirements, family members are kept in the dark as to what's happening with their loved one in a psychiatric crisis, much less be able to help make good decisions as to the person's care. At MCF, we strongly encourage family members to encourage their loved one to complete an advance directive that names a family member as their health care agent.

Despite their many benefits, few people know about psychiatric advance directives. On Our Own of Maryland promotes their use to people who access OOO's support and services, as does the Mental Health Association of Maryland. As previously stated, at MCF we encourage family members to have their loved on complete a psychiatric advance directive. Nonetheless, their use has remained disappointingly low, and there has been little concerted effort in Maryland to educate the public about the existence of, benefits of, and procedures for creating a psychiatric

advance directive. SB 154 would address this issue, by requiring the Department of Health to develop and implement a public awareness campaign.

An impediment to the benefit of having a psychiatric advance directive is that frequently, an individual who has completed one doesn't have it filed with appropriate treating professionals or hospitals where they might be admitted. A psychiatric advance directive does little good if no one knows about it. People with serious mental illness can be advised to disseminate their psychiatric advance directive to loved ones and to hospitals where they've been a patient before, but often do not take this step. Moreover, even if they do, they may end up in a hospital where they have not been a patient before, and the treating professionals may not know who to contact to inquire about the existence of a psychiatric advance directive. SB 154 addresses this problem by requiring that a statewide database be maintained where psychiatric advance directives are filed. A treating professional need simply search the database to find the individual's advance directive and the name of any health care agent that had been appointed.

Therefore we urge an favorable report on SB 154.

Contact: Ann Geddes
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SB0154_FAV_MdCSWC_PH - MH Advance Directives - Awa

Uploaded by: Christine Krone

Position: FAV



The Maryland Clinical Social Work Coalition

The MdcSWC, sponsored by the Greater Washington Society for Clinical Social Work, represents the interests of more than 9,300 licensed clinical social workers in Maryland.

TO: The Honorable Melony Griffith, Chair
Members, Senate Finance Committee
The Honorable Pamela Beidle

FROM: Judith Gallant, LCSW-C, Chair, Maryland Clinical Social Work Coalition

DATE: February 7, 2023

RE: **SUPPORT** – Senate Bill 154 – *Public Health – Mental Health Advance Directives – Awareness and Statewide Database*

The Maryland Clinical Social Work Coalition (MdcSWC), sponsored by the Greater Washington Society for Clinical Social Work, represents the interests of more than 9,300 licensed clinical social workers in Maryland. On behalf of MdcSWC, we **support** Senate Bill 154.

Senate Bill 154 requires the Maryland Department of Health (MDH) to develop and implement a public awareness campaign to encourage the use of mental health advance directives (MHADs) in the State. The Behavioral Health Administration must conduct a study to determine the feasibility and cost of establishing a centralized statewide database of MHADs, with a reporting requirement to the General Assembly.

MHADs are a legal document that give guidelines on a patient's future mental health care. The document can outline preferred facilities, medications, or therapies the patient is willing to undergo, designate a representative who is entrusted to make healthcare decisions on their behalf, etc. MHADs support patient-centered care and may help deescalate a crisis faster while not causing further trauma.

MdcSWC is very supportive of the development and implementation of a public awareness campaign around the use of MHADs. Despite the advantages of having this type of document in place prior to a mental health crisis, they are not widely used. Depending on the level of exposure and frequency in which the message is given, a public awareness campaign will likely increase the utilization of MHADs. Accessibility to a centralized database could help inform all providers involved in caring for a patient in a mental health crisis of the patient's desired care, creating better health outcomes. For these reasons, MdcSWC supports Senate Bill 154.

For more information call:

Christine K. Krone
Pamela Metz Kasemeyer
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Greater Washington Society for Clinical Social Work: www.gwscsw.org

Contacts: Coalition Chair: Judy Gallant, LCSW-C; email: jg708@columbia.edu; mobile (301) 717-1004
Legislative Consultants: Pamela Metz Kasemeyer and Christine Krone, Schwartz, Metz, Wise & Kauffman, PA
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SB 154_MH Advance Directives - BHSB_FAVORABLE.pdf

Uploaded by: Dan Rabbitt

Position: FAV



February 7, 2023

**Senate Finance Committee
TESTIMONY IN SUPPORT**

SB 154 – Public Health - Mental Health Advance Directives - Awareness and Statewide Database

Behavioral Health System Baltimore (BHSB) is a nonprofit organization that serves as the local behavioral health authority (LBHA) for Baltimore City. BHSB works to increase access to a full range of quality behavioral health (mental health and substance use) services and advocates for innovative approaches to prevention, early intervention, treatment and recovery for individuals, families, and communities. Baltimore City represents nearly 35 percent of the public behavioral health system in Maryland, serving over 78,000 people with mental illness and substance use disorders (collectively referred to as “behavioral health”) annually.

Behavioral Health System Baltimore supports SB 154 – Public Health - Mental Health Advance Directives - Awareness and Statewide Database. This bill would direct the Maryland Department of Health to develop and implement a mental health advance directive (MHAD) public awareness campaign and study the feasibility of a statewide MHAD database.

Much like other types of advance directives, MHADs are legal documents providing instructions on an individual’s treatment preferences. These plans are developed when an individual is stable and provide direction on preferred medications, preferred providers, and treatments to avoid if a person experiences a behavioral health crisis and is unable to direct their own care. Individuals who draft MHADs tend to experience significant improvement in their working alliance with their clinicians, fewer coercive crisis interventions, better correspondence about preferred and prescribed medications over time, and increased perception that their personal needs for mental health services are being met.¹

Despite the benefits of MHADs, these tools are not widely used. A public awareness campaign conducted by the state could help promote the use of these tools and improve the care of those experiencing a mental health crisis. Coercive treatment or treatments that an individual has had poor experiences only add to the trauma of a mental health crisis and should be avoided if possible. MHADs are an important tool to avoid such undesirable outcomes.

A statewide database would also help to improve provider access to these documents. The legislation directs the Behavioral Health Association to study the feasibility and cost of such a database. The state should consider how MHADs are added to the database, how providers access the documents, and what privacy safeguards must be put in place.

MHADs are critical to support person-centered care but more consumers need to be made aware of their value. SB154 is an important step towards doing so. **We urge a favorable report on SB 154.**

For more information, please contact BHSB Policy Director Dan Rabbitt at 443-401-6142

Endnotes:

¹ SAMHSA. *A Practical Guide to Psychiatric Advance Directives*. Available at https://www.samhsa.gov/sites/default/files/a_practical_guide_to_psychiatric_advance_directives.pdf.

Testimony for SB 154 Mental Health Advance Directi

Uploaded by: Lisa Shore

Position: FAV

Lisa Shore
604 Kent Avenue
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Testimony for SB 154 Mental Health Advance Directives

Honorable Senators:

Thank you for sponsoring Senate Bill 154 on Mental Health Advance Directives. Mental health issues are quite scary for the person experiencing the issue and for their family and friends. Stigma, handcuffs, and lack of resources add additional trauma. Many mental health issues are temporary and cyclical – just like physical health issues. This is why a psychiatric or mental health advance directive is such an important legal tool. It allows a person with mental illness to state their preferences for treatment in advance of a crisis. It also protects a person's autonomy and supports their ability to direct their care.

Psychiatric advance directives are similar to living wills and other medical advance planning documents. They support appropriate care and prevent involuntary and inappropriate treatment. They also provide a framework for open conversations with family members and medical professionals. According to the National Alliance on Mental Illness, people who complete psychiatric advance directives are more likely to work collaboratively with their clinicians, experience fewer coercive crisis interventions, and feel that their personal needs for mental health services are being met. Many mental health groups support mental health advance directives – including SAMHSA (Substance Abuse and Mental Health Services Administration), National Alliance on Mental Illness, and Mental Health America. Maryland's Behavioral Health Administration even has a sample psychiatric advance directive on their website.

However, psychiatric advance directives can't work if people don't know they exist! In our family's mental health journey, we have had contact with many mental health professionals, facilities, and families. We can attest to the fact that the medical profession and clients don't know about these advance directives. SB 154 addresses this issue by publicizing psychiatric advance directives and encouraging their use. I urge you to pass this bill so that all individuals and families can have access to the most supportive, least traumatic mental health care possible. Thank you.

References:

https://www.samhsa.gov/sites/default/files/a_practical_guide_to_psychiatric_advance_directives.pdf

<https://www.nami.org/Advocacy/Policy-Priorities/Responding-to-Crises/Psychiatric-Advance-Directives>

<https://nrc-pad.org/states/maryland-resources/>

SB0154 MH Advance Directives MHAMD Support.pdf

Uploaded by: Margo Quinlan

Position: FAV

**Senate Bill 154 Public Health - Mental Health Advance Directives –
Awareness and Statewide Database
Finance Committee
February 7, 2023
Position: SUPPORT**

The Mental Health Association of Maryland is a nonprofit education and advocacy organization that brings together consumers, families, clinicians, advocates and concerned citizens for unified action in all aspects of mental health, mental illness and substance use. We appreciate this opportunity to present testimony in support of Senate Bill 154.

SB 154 requires the Maryland Department of Health to develop and implement a public awareness campaign to encourage the use of mental health advance directives. It also requires the establishment of a readily accessible centralized database of mental health advance directives to assist providers in responding to individuals experiencing a behavioral health crisis.

A mental health advance directive (MHAD) is a legal document that allows a person with a mental illness to state their wishes and preferences in advance of a mental health crisis. These documents provide for more patient-centered care and can help resolve crises more quickly, appropriately, and without coercion. They allow individuals to clarify treatment preferences and crisis planning and often include and involve family members and social support networks. MHADs may include specific wishes regarding treatment; preferred hospitals and service providers; persons authorized to make health decisions and with whom information may be shared; alerts to allergies, adverse reactions, and medication issues; desired visitors; and more.

Mental Health Association of Maryland offers a number of resources and tools on its website to assist individuals in learning about and effectuating an MHAD. This includes FAQs, instructions, and a downloadable MHAD template that was developed in consultation with the Maryland Department of Health, providers, consumers, and advocacy groups.¹

Despite the benefits of MHADs, widespread support for their use, and a variety of studies recommending that clinicians facilitate the completion of these documents, the rate of usage remains frustratingly low.² SB 154 will help by increasing awareness of the availability and benefits of MHADs and by making it easier for clinicians to access them. The bill promotes patient autonomy and patient-centered care, and it will facilitate a more informed and open dialogue between patients and their treatment providers.

For these reasons, Mental Health Association of Maryland supports Senate Bill 154 and urges a favorable report.

¹ <https://www.mhamd.org/information-and-help/adults/advance-directives/#:~:text=A%20Mental%20Health%20Advance%20Directive,of%20a%20mental%20health%20crisis>

² Table B, Thomas J, Brown VA. Psychiatric Advance Directives as an Ethical Communication Tool: An Analysis of Definitions. J Clin Ethics. 2020 Winter;31(4):353-363. PMID: 33259340.

For more information contact:

Margo Quinlan, Director of Youth & Older Adult Policy: 410-236-5488 / mquinlan@mhamd.org

SB 154 Mental Health Advance Directives_MICUA_FAV.

Uploaded by: Matt Power

Position: FAV



Maryland Independent College
and University Association

Written Support

Senate Finance Committee

Senate Bill 154 (Beidle and Augustine) Public Health – Mental Health Advance Directives – Awareness and Statewide

Matt Power, President

mpower@micua.org

February 7, 2023

On behalf of Maryland’s independent colleges and universities and the 56,000 students we serve, thank you for the opportunity to provide this testimony in support of [Senate Bill 154 – Public Health – Mental Health Advance Directives – Awareness and Statewide](#). The bill requires academic institutions to assist with the public awareness campaign to encourage and support outreach efforts to inform present or future recipients of mental health services and members of their families about mental health advance directives.

Colleges and universities are increasingly prioritizing mental health services and programs on their campuses as the demand grows for students and faculty. The coronavirus pandemic shifted the scales for many students and university employees who experienced changes, economic hardship, emotional imbalances, and a myriad of other mental health needs. Many students are showing signs of increased anxiety and depression as they struggle to navigate a college experience starkly different from what they had envisioned or understood. Faculty are teaching in environments without a roadmap and adjusting to new workplace dynamics and requirements. MICUA member institutions offer a wide array of services to support and promote student mental health, emotional growth, and well-being through our wellness and health centers. SB 154 creates another mechanism to provide individuals with pathways to obtain additional mental health resources and information using existing platforms.

We appreciate the effort that the sponsors intend for university students and others in the campus community to access mental health advance directives. If you have any questions or would like additional information, please contact Irnande Altema, Associate Vice President for Government and Business Affairs, ialtema@micua.org.

For all of these reasons, MICUA requests a favorable Committee report for Senate Bill 154.

2023 - SB 154 - FAV - MHADs (OOOMD).pdf

Uploaded by: Michelle Livshin

Position: FAV



ON OUR OWN
OF MARYLAND

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WRITTEN TESTIMONY IN SUPPORT OF SB 154 - Mental Health Advance Directives

Thank you Chair Griffith, Vice Chair Klausmeier, and committee members for improving the quality and accessibility of healthcare services for Marylanders. On Our Own of Maryland (OOOMD) is a statewide behavioral health (BH) education and advocacy organization, operating for 30 years by and for people with lived experience of mental health and substance use challenges. Our network of 20+ affiliated peer-operated Wellness & Recovery Centers throughout the state offer free, voluntary recovery support services to nearly 6,500 community members.

OOOMD is in strong support of SB 154, which would require the Maryland Department of Health to create a public awareness campaign to promote the use of Mental Health Advance Directives (MHADs), and task the administration with studying the feasibility and cost associated with establishing a centralized database of MHADs to improve efficient access to these vital documents.

Maryland law states that individuals have the right to make decisions regarding treatment in advance, including mental health treatment decisions, through the process of creating an advance directive.¹ MHADs include important medical history, specific guidance on acceptance/refusal of certain types of treatment (e.g. medication, modalities, treatment settings), and appointment of a health care agent to legally make treatment decisions on their behalf. MHADs may also include helpful support information, such as effective self-help practices and delegated responsibilities for the care of family members or household management.

MHADs protect autonomy and prevent unintended harm by empowering individuals to thoughtfully plan and express what works, what should be avoided, and who to contact in an emergency. MHADs have been shown to increase treatment adherence and even improve the patient-provider relationship.²

Unfortunately, there are significant current barriers to effectively and efficiently completing and utilizing MHADs stemming from lack of awareness. Even within behavioral health service environments, professionals may not understand the requirements for appropriate use or have access to MHADs, especially in time-sensitive or emergency circumstances.³

¹ Maryland Department of Health & Mental Hygiene. Advance Directive for Mental Health Treatment. <https://www.wmhs.com/wp-content/uploads/2018/04/md-mental-health-advance-directive.pdf>

² Elbogen EB, Van Dorn R, Swanson JW, Swartz MS, Ferron J, Wagner HR, Wilder C (2007). Effectively Implementing Psychiatric Advance Directives to Promote Self-Determination of Treatment Among People with Mental Illness. Psychol Public Policy Law. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3816514/>

³ Shields LS, Pathare S, van der Ham AJ, Bunders J. A review of barriers to using psychiatric advance directives in clinical practice. Adm Policy Ment Health. 2014 Nov;41(6):753-66. <https://link.springer.com/article/10.1007/s10488-013-0523-3>



In Maryland, there is currently no centralized or standardized process for making MHADs available to any relevant treatment provider who may be involved in responding to a mental health-related emergency. Instead, contact must somehow be made with a loved one or other provider in possession of the MHAD. This lack of ready access means MHADs are more likely to be ignored, or critical time and resources may be lost in the attempt to obtain the MHAD.

We support the proposal for the administration to study the feasibility and cost of implementing a centralized statewide database for MHADs. However, we strongly recommend robust stakeholder involvement in the feasibility study, especially people with lived experience of a mental health crisis in which a MHAD was or could have been used. Stigmatizing attitudes about mental and behavioral health conditions can create very real harms and barriers to quality care in all healthcare settings, and so the protection of this confidential medical information must be scrupulously maintained. Additionally, we hope that the Department will seek to study not only the feasibility of implementing a centralized database, but will consider the need for adequate training on implementation and use for relevant stakeholders.

MHADs help to protect individuals' safety, honor their choices, and avoid preventable harm and traumas. The public awareness campaign proposed through this bill would increase awareness and subsequent use of MHADs. We urge you to vote in favor of SB 154.

SB0154_FAV_MedChi_PH - MH Advance Directives - Awa

Uploaded by: Pam Kasemeyer

Position: FAV

MedChi

The Maryland State Medical Society

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TO: The Honorable Melony Griffith, Chair
Members, Senate Finance Committee
The Honorable Pamela Beidle

FROM: Pamela Metz Kasemeyer
J. Steven Wise
Danna L. Kauffman
Andrew G. Vetter
Christine K. Krone
410-244-7000

DATE: February 7, 2023

RE: **SUPPORT** – Senate Bill 154 – *Public Health – Mental Health Advance Directives – Awareness and Statewide Database*

The Maryland State Medical Society (MedChi), the largest physician organization in Maryland, **supports** Senate Bill 154.

A Mental Health Advance Directive (MHAD) is a legal document that enables an individual to provide their preferences/decisions for any future mental health care services they may need. A MHAD can outline preferred facilities, medications, or therapies the patient is willing to undergo and also an individual can designate a representative who is entrusted to make healthcare decisions on their behalf. Maryland created a statutory framework for MHADs because they support patient-centered care and have been proven to help deescalate a crisis faster while not causing further trauma and/or prevent a crisis altogether.

Senate Bill 154 requires the development of an awareness campaign to educate the public on what a MHAD is and to encourage the use of MHADs in the State. Despite the advantages of having this type of document in place prior to a mental health crisis, they are not widely used. In addition, the Behavioral Health Administration must conduct a study to determine the feasibility and cost of establishing a centralized statewide database of MHADs. Accessibility to a centralized database could help inform all providers involved in caring for a patient in a mental health crisis of the patient's desired care, creating better health outcomes. Passage of Senate Bill 154 will advance the benefits of MHADs and improve response to behavioral health crises. A favorable report is requested.

SB154 MH Directives.pdf

Uploaded by: Pamela Beidle

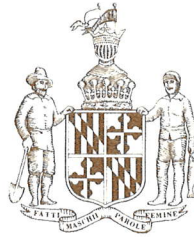
Position: FAV

PAMELA G. BEIDLE
Legislative District 32
Anne Arundel County

Finance Committee

Vice Chair

Executive Nominations Committee



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THE SENATE OF MARYLAND
ANNAPOLIS, MARYLAND 21401

February 7, 2023

SB 154

Public Health – Mental Health Advance Directives – Awareness and Statewide Database

Good Afternoon Chair Griffith, Vice Chair Klausmeier and Members of Finance;

Thank you for the opportunity to present SB 154, Mental Health Advance Directives – Awareness and Statewide Database. SB 154 requires the Department of Health to develop and implement a public awareness campaign to encourage the use of mental health advance directives.

It also requires the Behavioral Health Administration to study the feasibility and cost of establishing a centralized, statewide database of mental health advance directives.

This bill was previously filed as SB 994, in 2022 by Senator Addie Eckardt. It passed the Senate 44-0, however there was not enough time for it to pass the House

I respectfully request a favorable report on SB 154.

SB 154 testimony.pdf

Uploaded by: Robert Phillips

Position: FAV

MARYLAND STATE FIREMEN'S ASSOCIATION

REPRESENTING THE VOLUNTEER FIRE, RESCUE, AND EMS PERSONNEL OF MARYLAND.



Robert P. Phillips

Chairman

Legislative Committee

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SB 154: Public Health – Mental Health Advance Directives – Awareness and Statewide Database

My name is Robert Phillips and I am the Legislative Committee Chairman for the Maryland State Firefighters Association (MSFA)

I wish to present testimony in favor of **Senate Bill 154: Public Health – Mental Health Advance Directives – Awareness and Statewide Database**

This bill mandates that the Maryland Department of Health develop a public awareness campaign to encourage people to create an advance directive while they are compliment and able to. The fire service has seen and felt the effects of mental health issues within our members. While the person affected with these issues is of sound mind and body they should be educated as to the merits of an advance directive and encouraged to make use of one while they still can.

I thank the committee for their time and attention to this important bill and ask that you vote favorable on Senate Bill 154.

My contact information is listed above and welcome any further inquiries you might have.

SB 154 - Support - MPS WPS.pdf

Uploaded by: Thomas Tompsett

Position: FAV

February 5, 2023

The Honorable Melony Griffith
Finance Committee
3 East - Miller Senate Office Building
Annapolis, MD 21401

RE: Support – SB 154: Public Health – Mental Health Advance Directives – Awareness and Statewide Database

Dear Chair Griffith and Honorable Members of the Committee:

The Maryland Psychiatric Society (MPS) and the Washington Psychiatric Society (WPS) are state medical organizations whose physician members specialize in diagnosing, treating, and preventing mental illnesses, including substance use disorders. Formed more than sixty-five years ago to support the needs of psychiatrists and their patients, both organizations work to ensure available, accessible, and comprehensive quality mental health resources for all Maryland citizens; and strive through public education to dispel the stigma and discrimination of those suffering from a mental illness. As the district branches of the American Psychiatric Association covering the state of Maryland, MPS and WPS represent over 1000 psychiatrists and physicians currently in psychiatric training.

MPS/WPS support Senate Bill 154: Public Health – Mental Health Advance Directives – Awareness and Statewide Database (SB 154). Mental health advance directives (MHADs) are legal documents that allow individuals to specify their preferences for mental health treatment in the event that they become unable to make decisions for themselves in the future. MHADs typically include a statement of an individual's values and beliefs and specific instructions for the type of treatment they would like to receive in the event of a mental health crisis. MHADs can be essential for ensuring that an individual's rights and preferences are respected and that they receive the most appropriate treatment possible.

MHADs are sometimes called "psychiatric advance directives" or "behavioral health advance directives." A person of sound mind can create them at a time when they are not in the midst of a mental health crisis. MHADs typically include information about an individual's past experiences with mental health treatment and their preferences for specific types of treatment or medications. They may also include instructions for who should be notified during a crisis and who should be involved in making treatment decisions.

A member of MPW/WPS provided the following anecdotal story about MHADs.

After one of my outpatients was hospitalized and his family was inappropriately brought into care, we worked to create an MHAD that would disclose who in his family could or should be contacted, which medications that he has used before that yielded poor outcomes, some of the symptoms of his illness that he typically experiences, history prior

treatment, etc. in case he is unable to verbalize them at the time and the team doesn't contact me (which they didn't, at his last hospitalization despite me calling numerous times). I think MH ADs can be really useful when completed with your mental health team, especially if a patient lives alone and does not have the ability to share family contact information.

In closing, MHADs can help reduce the stress and uncertainty associated with mental health crises and can be a valuable tool for empowering individuals to take control of their mental health care. They are also highly instructional and informative to those attempting to diagnose and provide treatment to an individual experiencing a mental health crisis. Such information will prevent unnecessary delays in treatment.

For the reasons stated above, MPS/WPS ask this committee for a favorable report on SB 154. If you have any questions with regard to this testimony, please feel free to contact Thomas Tompsett Jr. at tommy.tompsett@mdlobbyist.com.

Respectfully submitted,
The Maryland Psychiatric Society and the Washington Psychiatric Society
Legislative Action Committee

2023 Legislation - SB 154 - Advance Directives (Be

Uploaded by: Ben Steffen

Position: INFO



February 7, 2023

The Honorable Melony Griffith
Chair, Finance Committee
3 East, Miller Senate Office Building
Annapolis, Maryland 21401

RE: SB 154 - Public Health - Mental Health Advance Directives - Awareness and Statewide Database

Dear Chair Griffith:

The Maryland Health Care Commission (“MHCC”) is submitting this letter of information on SB 154 - *Public Health - Mental Health Advance Directives - Awareness and Statewide Database* (“SB 154”).

SB 154 requires the Maryland Department of Health to develop and implement a public awareness campaign to encourage the use of mental health advance directives in the State. The campaign must include awareness initiatives to encourage and support outreach efforts by specified persons and agencies to inform present or future recipients of mental health services and members of their families, health care providers, and other behavioral health care partners regarding mental health advance directives. The Behavioral Health Administration (BHA) must study the feasibility and cost of establishing a centralized statewide database and report to Senate Finance and House Health and Government Operations committees of the General Assembly by December 1, 2023.

SB 154 is well-intentioned but misaligned with the legislation that passed during the 2022 legislative session (SB 824/HB1073). The legislation that passed last session was comprehensive in nature and required action by health care facilities, nursing homes, assisted living facilities, carriers, managed care organizations, ambulatory providers, and select State agencies. These activities will lead to an increase in the number of provider-patient discussions about advance directives, improve documentation rates, and the ability for providers to retrieve documented patient preferences, including a identifying their health care agent.

The legislation passed last year was the result of the work of the Advance Directives Workgroup (Workgroup) that met over the 2021 interim. The MHCC formed this workgroup at the request of the Chair of the Health and Government Operations Committee Chair. The workgroup developed consensus recommendations for legislation that was considered in the 2022 legislative session. The workgroup was comprised of over 40 stakeholders representing consumers, providers, nursing homes, hospice and palliative care, carriers, technology vendors, the Maryland Insurance Administration, Maryland Department of Transportation, and the

legislature. The workgroup met from late summer through the early winter. HB 1073/SB 824 included recommendations contained in the workgroup report.¹

Members of the workgroup endorsed the principle that advance care planning, including the creation of an advance directive, is an important responsibility for all adults, regardless of their current health status and this included behavioral health. No workgroup member, but especially the experts on emergency and end-of-life care, accepted the idea that advance care planning should be directed only at individuals with a particular health condition.

During this past interim the MHCC worked on the implementation of the requirements in HB 1073/SB 824. We think the actions taken to implement last session's legislation will increase adoption and use of advance directives statewide. We worked in consultation with the Office of the Attorney General (OAG) and the Maryland Department of Health (MDH) to update the advance directive information sheet to include written statements that an advance directive: (1) can be updated or revoked by the individual at any time; (2) is a useful, legal, and well established way for an individual to communicate the preferences of the individual for medical care, including the designation of a health care agent; (3) if completed, should be copied for an individual's family members, physicians, and legal advisors and, at the discretion of the individual, be uploaded or saved to the electronic platform; (4) is most effective if it is uploaded or saved to the electronic platform; and (5) is not required to be completed by the individual. Additionally, the information sheet was updated to include information about creating an advance directive for behavioral health care and treatment.

Additionally, we worked to coordinate the accessibility of electronic advance care planning documents in the State with the State-designated HIE to develop a process through which individuals can upload, save, and update their advance care planning documents and health care providers can access electronic advance care planning documents as appropriate. We worked to identify options that meet cybersecurity standards that may be taken by carriers, MCOs, and health care providers to encourage and make tools available for members, enrollees, and patients allowing them to create, upload, or save and update electronic advance care planning documents. We are working on the development and implementation of quality measures endorsed or designated for testing by a national quality measurement organization to measure the effectiveness of the options specified above on advance directives. Additionally, these measures work for the development of advance directives specific to behavioral health.

¹ *Advance Directives Workgroup Report*, Maryland Health Care Commission, January 2022. Available at: www.mhcc.maryland.gov/mhcc/pages/hit/hit_advancedirectives/documents/hit_adv_directives_wkgrp.pdf.

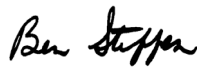


We do not think there needs to be a separate advance directive data repository for behavioral health and somatic care. In fact, we met with representatives from the Maryland Mental Health Association who asked if we could include behavioral health in our efforts on advance care planning and we did. One commonality among the various stakeholders to last session’s legislation was that all stakeholders have a role to play if advance care planning is to be embedded in what are routine and expected health care discussions regardless of whether addressing somatic care issues or behavioral health issues. Most important, is to encourage all adults to do advance care planning.

SB 154 will further stigmatize people with mental illness. Stigmas, prejudice, and discrimination against people with mental illness still exist and are well-documented in research literature and clinical practice.² A standalone advance directives database for people with mental illness will prolong stigmas about individuals and families impacted by mental illness.³ Advocacy organizations may view SB 154 as continuing longstanding biases and misconceptions about mental illness even among EMS and health care providers. Also, SB 154 creates redundancies where processes have been established and can be used to easily incorporate behavioral health without recreating the wheel in another place.

I hope this information is useful. If you would like to discuss this further, please contact Ben Steffen at ben.steffen@maryland.gov.

Sincerely,



Ben Steffen
Executive Director, MHCC

cc: Tracey DeShields, Director, Policy Development and External Affairs, MHCC

² Stigma, Prejudice and Discrimination Against People with Mental Illness, American Psychiatric Association. Available at: www.psychiatry.org/patients-families/stigma-and-discrimination.

³ *Psychiatry’s myopia—reclaiming the social, cultural, and psychological in the psychiatric gaze*. Braslow JT, Brekke JS, Levenson J. JAMA Psychiatry. 2020;78(4):349-350. Available at: www.jamanetwork.com/journals/jamapsychiatry/article-abstract/2770563.



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Uploaded by: State of Maryland (MD)

Position: INFO



February 7, 2023

The Honorable Melony Griffith
Chair, Finance Committee
3 East, Miller Senate Office Building
Annapolis, Maryland 21401

RE: SB 154 - Public Health - Mental Health Advance Directives - Awareness and Statewide Database

Dear Chair Griffith:

The Maryland Health Care Commission (“MHCC”) is submitting this letter of information on SB 154 - *Public Health - Mental Health Advance Directives - Awareness and Statewide Database* (“SB 154”).

SB 154 requires the Maryland Department of Health to develop and implement a public awareness campaign to encourage the use of mental health advance directives in the State. The campaign must include awareness initiatives to encourage and support outreach efforts by specified persons and agencies to inform present or future recipients of mental health services and members of their families, health care providers, and other behavioral health care partners regarding mental health advance directives. The Behavioral Health Administration (BHA) must study the feasibility and cost of establishing a centralized statewide database and report to Senate Finance and House Health and Government Operations committees of the General Assembly by December 1, 2023.

SB 154 is well-intentioned but misaligned with the legislation that passed during the 2022 legislative session (SB 824/HB1073). The legislation that passed last session was comprehensive in nature and required action by health care facilities, nursing homes, assisted living facilities, carriers, managed care organizations, ambulatory providers, and select State agencies. These activities will lead to an increase in the number of provider-patient discussions about advance directives, improve documentation rates, and the ability for providers to retrieve documented patient preferences, including a identifying their health care agent.

The legislation passed last year was the result of the work of the Advance Directives Workgroup (Workgroup) that met over the 2021 interim. The MHCC formed this workgroup at the request of the Chair of the Health and Government Operations Committee Chair. The workgroup developed consensus recommendations for legislation that was considered in the 2022 legislative session. The workgroup was comprised of over 40 stakeholders representing consumers, providers, nursing homes, hospice and palliative care, carriers, technology vendors, the Maryland Insurance Administration, Maryland Department of Transportation, and the

legislature. The workgroup met from late summer through the early winter. HB 1073/SB 824 included recommendations contained in the workgroup report.¹

Members of the workgroup endorsed the principle that advance care planning, including the creation of an advance directive, is an important responsibility for all adults, regardless of their current health status and this included behavioral health. No workgroup member, but especially the experts on emergency and end-of-life care, accepted the idea that advance care planning should be directed only at individuals with a particular health condition.

During this past interim the MHCC worked on the implementation of the requirements in HB 1073/SB 824. We think the actions taken to implement last session's legislation will increase adoption and use of advance directives statewide. We worked in consultation with the Office of the Attorney General (OAG) and the Maryland Department of Health (MDH) to update the advance directive information sheet to include written statements that an advance directive: (1) can be updated or revoked by the individual at any time; (2) is a useful, legal, and well established way for an individual to communicate the preferences of the individual for medical care, including the designation of a health care agent; (3) if completed, should be copied for an individual's family members, physicians, and legal advisors and, at the discretion of the individual, be uploaded or saved to the electronic platform; (4) is most effective if it is uploaded or saved to the electronic platform; and (5) is not required to be completed by the individual. Additionally, the information sheet was updated to include information about creating an advance directive for behavioral health care and treatment.

Additionally, we worked to coordinate the accessibility of electronic advance care planning documents in the State with the State-designated HIE to develop a process through which individuals can upload, save, and update their advance care planning documents and health care providers can access electronic advance care planning documents as appropriate. We worked to identify options that meet cybersecurity standards that may be taken by carriers, MCOs, and health care providers to encourage and make tools available for members, enrollees, and patients allowing them to create, upload, or save and update electronic advance care planning documents. We are working on the development and implementation of quality measures endorsed or designated for testing by a national quality measurement organization to measure the effectiveness of the options specified above on advance directives. Additionally, these measures work for the development of advance directives specific to behavioral health.

¹ *Advance Directives Workgroup Report*, Maryland Health Care Commission, January 2022. Available at: www.mhcc.maryland.gov/mhcc/pages/hit/hit_advancedirectives/documents/hit_adv_directives_wkgrp.pdf.

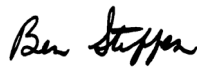


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