

Children's Behavioral Health Coalition

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Senate Bill 101 Maryland Medical Assistance Program – Collaborative Care Model Services – Implementation and Reimbursement Expansion

Senate Finance Committee

January 31, 2023

TESTIMONY IN SUPPORT

The Maryland Children's Behavioral Health Coalition is comprised of representatives from mental health, consumer, family and professional associations all working together to improve the quality and accessibility of behavioral health assessment, treatment and recovery services for children and youth in Maryland. We write in support of SB 101, which will improve the quality of behavioral health care delivered in primary care settings for Maryland Medicaid recipients by expanding their access to the proven Collaborative Care Model (CoCM).

Over the past 10 years, Maryland has seen a marked decline in availability of services and supports for youth with behavioral health needs, and the results have been devastating. In 2010, just 1 percent of children 12 and younger with mental health problems stayed in the emergency department for longer than a day. By 2020, more than 10 percent were getting stuck more than a day – and sometimes weeks. The percentage of teens aged 13 to 17 staying more than 24 hours also rose sharply, from less than 3 percent to more than 13 percent.¹ From 2020-2021, Maryland saw a 46% increase in suicide attempt visits to the emergency department among those ages 0-17.²

CBHC believes Maryland can prevent lengthy, unnecessary hospital stays for youth and reduce youth suicide by expanding access to behavioral health services and supports that support mental wellbeing and keep youth out of crisis. The Collaborative Care Model is a key piece in restoring our vital safety net of behavioral health services for Maryland's kids.

CoCM is a validated, patient-centered, evidence-based approach for integrating physical and behavioral health care in primary care settings, which is where most people with mild to moderate behavioral health conditions first seek care. The model uses a team-based approach to deliver (1) care coordination and management; (2) regular, systematic monitoring and treatment using a validated clinical rating scale; and (3) regular, systematic behavioral health caseload reviews and consultation for patients. CoCM has been validated in over 80 randomized controlled trials and shown to improve health outcomes and save money, mostly via a reduction in unnecessary hospitalization and higher intensity levels of care.

¹ Wan, W. (2022, October 20). An autistic teen needed mental health help. He spent weeks in an ER instead. Washington Post.

<https://www.washingtonpost.com/dc-md-va/2022/10/20/er-mental-health-teens-psychiatric-beds/>

² Behavioral Health Administration Update to Maryland Behavioral Health Advisory Council, November 16, 2021

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Commercial health insurers in Maryland and Medicare are already reimbursing providers for delivering this model. An ongoing CoCM pilot in the Maryland Medicaid program has demonstrated “clinically significant improvement” in depression and anxiety symptoms for more than 65 percent of participants. It is time to end the pilot and join the 20+ other states that are providing CoCM broadly to their Medicaid recipients.

This bill will improve behavioral health outcomes, save money, and keep people out of crisis. **For these reasons, the Children’s Behavioral Health Coalition urges this committee to pass SB 101.**