



Statement of Maryland Rural Health Association (MRHA)

To the Senate Budget and Taxation Committee

Chair: Senator Guy Guzzone

To House Government Operations Committee

Chair: Delegate Joseline Pena-Melnyk

March 17, 2023

Senate Bill 283: Mental Health - Workforce Development - Fund Established

POSITION: SUPPORT

Dear Chair Delegate Joseline Pena-Melnyk and Committee, *Maryland is in the midst of a behavioral health workforce crisis. Federal data¹ released just this month found that Maryland has 63 federally designated mental health professional shortage areas (HPSAs)² including 11 entire counties. These shortage areas, in which less than 20% of residents are getting their mental health needs met, impact over 1.7 million Marylanders. Another indicator found that 17 of Maryland's 24 jurisdictions come in below the national average (350:1) in terms of population to mental health providers, with a number that are considerably lower.³*

This is unsustainable. There are simply not enough behavioral health professionals to meet the mental health and substance use needs of all Marylanders. There are many positive ideas and strategies for growing the behavioral health workforce – stipends and scholarships, enhanced training programs, loan repayment, paid internships, etc. The question, however, is how much funding do we put into these different initiatives and how do we target efforts to ensure we are properly resourcing all behavioral health professionals and paraprofessionals? SB 283 is the answer.

The bill establishes a Behavioral Health Workforce Investment Fund to reimburse for costs associated with educating, training, certifying, recruiting, placing, and retaining behavioral health professionals and paraprofessionals. Funding is left discretionary initially to allow for a required workforce needs assessment that will (1) determine the immediate, intermediate, and long-term unmet need and capacity of Maryland's behavioral health workforce; (2) calculate the total number of behavioral health professionals and paraprofessionals needed over the next 5 years, 10 years, and 20 years; and (3) make very specific findings and recommendations regarding the types of workforce assistance programs and funding necessary to meet the need across all sectors of the behavioral health workforce.

As we know rural communities are experiencing significant challenges with the recruitment and retention of mental health providers and the services for mental health often require residents to travel great distances, or not receive treatment at all for their conditions. This bill will expand and stabilize Maryland's behavioral health workforce. For these reasons, Maryland Rural Health Association urges this committee to pass SB 283.

Sincerely,

Jonathan Dayton, MS, NREMT, CNE, Executive Director
jdayton@mdruralhealth.org

¹ <https://data.hrsa.gov/Default/GenerateHPSAQuarterlyReport>

² A HPSA is a geographic area, population group, or health care facility that has been designated by the US Health Resources and Services Administration (HRSA) as having a shortage of health professionals in one of three categories – primary care, dental health, and mental health

³ <https://www.countyhealthrankings.org/explore-health-rankings/maryland?year=2022&measure=Mental+Health+Providers&tab=1>