



February 14, 2023

**Senate Finance Committee
TESTIMONY IN SUPPORT**

SB362 – Certified Community Behavioral Health Clinics – Established

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 strongly supports SB 362 – Certified Community Behavioral Health Clinics – Established. SB 362 will increase access to comprehensive behavioral health care by expanding Maryland’s network of Certified Community Behavioral Health Clinics (CCBHCS). Expanding the CCBHC network will increase access to high quality behavioral health care at a time when the state needs more behavioral health capacity than ever.

CCBHCS are federally designated clinics that provide a comprehensive range of outpatient mental health and substance use treatment, care coordination with other providers and services, and connection to other systems and supports. They are based on the federally qualified health center (FQHC) model, providing services regardless of insurance status or ability to pay.

CCBHCS must provide nine core services, including services for children and youth, 24/7 crisis intervention, peer supports, substance use treatment, and primary health screening and monitoring. States that have implemented the model broadly have seen increased access to care, reductions in emergency department and inpatient utilization, a mitigation of behavioral health workforce challenges, higher engagement post discharge from hospitals, improved utilization of medication assisted treatment for opioid use disorders, and improved integration with physical care.

We have seen similar success in the Baltimore area Sheppard Pratt CCBHC demonstration projects. These programs have reduced the average time spent in the hospital by program participants by half and cut related hospital costs by over 80%. They also provide a wider array of services than most outpatient behavioral health programs.

The CCBHC model has shown that it can improve care, increase access, and lower state health care costs. It should expand beyond the current demonstration phase and be incorporated into the state’s Medicaid program. **We urge a favorable report on SB 362.**

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