

TO: The Honorable Pamela Beidle, Chair Members, Senate  
Finance Committee  
The Honorable Joanne C. Benson

FROM:

DATE: February 12 , 2024

RE: **SUPPORT** – Senate Bill 204 - Interstate Social Work Licensure Compact  
Dear Chairperson Beidle and Distinguished Members of the Finance Committee:

RE: **SUPPORT** – Senate Bill 204 - Interstate Social Work Licensure Compact

Dear Chairperson Beidle and Distinguished Members of the Finance Committee:

I sincerely thank you for considering my written statement supporting Senate Bill 204 on the " Interstate Social Work Licensure Compact" for inclusion in the public hearing record. I am Andrea Creel, a Licensed Master Social Worker (LMSW) residing and practicing in Montgomery County, Maryland.

The significance of the Social Work Interstate Licensure Compact resonates deeply with me due to the substantial gap between the demand for mental health services and the limited number of licensed providers available to deliver ethical and safe care, **along with the need for continuity of care for patients with chronic mental health needs.**

The ability to practice across state lines is pivotal in addressing disparities in access to culturally competent mental and behavioral health services. Doing so can alleviate inequities related to socioeconomic status, (dis)ability status, gender diversity, sexuality, and other barriers that impede individuals from receiving adequate care. Clearing barriers holds particular importance in advocating for marginalized communities, ensuring they receive treatment and support, especially when in-person appointments may be challenging or finding a suitable clinician becomes a hurdle, such as during a pandemic.

**Additionally, allowing/forming an interstate compact would allow for continuity of care for patients, which has been proven to improve patient mental health outcomes.** Currently, when a patient leaves the state, whether temporarily or permanently, the patient must either go without their regular mental health treatment or find a new mental health clinician who is licensed in the new state. Even if a client goes on a temporary trip out of state, they cannot be seen by their regular mental health provider over telehealth during an out-of-state trip. **We**

**wouldn't allow or recommend people stop taking their life-saving medications when they have to go out-of-state; we shouldn't allow this to be the case for non-pharmacologic mental health treatment.**

Under current law, a client with significant, ongoing mental health needs may not be able to see their provider for weeks at a time when they are out-of-state temporarily and/or they may have to wait weeks or months on a waitlist to find a new mental health provider in their new state when they relocate permanently to a new state and thus may be without a mental health provider and regular mental health treatment for extended periods of time. **This can lead to worsening clinical outcomes for patients including increased rates of suicide, depression, and other serious mental health concerns due to lack of care.**

In my clinical practice, I have had clients who I have had to stop seeing me for therapy because they have gone to college in another state, had to leave the state temporarily to find safety from a domestic violence situation, and have had to stop being seen due to employment in another state or military deployment. These are all situations where having continuity of care is especially important, and where **due to current licensing laws, patients are being left without mental health care during critical time periods and life transitions. We know that in order for therapy to be effective, consistency in appointments as well as the therapeutic relationship between patient and provider developed over a period of time are two essential components to positive treatment outcomes.** Passing this bill is the first step towards ensuring continuity of care for Maryland residents, and ensuring uninterrupted mental health services which is essential not just for residents of Maryland but for the health and safety of all people in the United States.

Drawing inspiration from existing licensure compacts for various healthcare professions, including nurses, physical therapists, physicians, psychologists, and counselors, the Social Work Compact enhances licensure portability for practitioners. Simultaneously, it empowers state regulatory boards to better protect consumers by facilitating the seamless sharing of licensure information.

The Social Work Compact brings numerous benefits, impacting those needing critical mental health support and social workers. It achieves this by:

1. Facilitating mobility for social workers meeting uniform licensure requirements.
2. Expanding access to care for clients.

3. Ensuring continuity of care for clients and social workers during relocations or travel across state lines.
4. Simplifying the maintenance of certifications for military personnel and their spouses during relocations.
5. Safeguarding and strengthening the existing system of state licensure.

Notably, the Interstate Social Work Licensure Compact preserves each state's authority to regulate the profession. It does not alter the scope of practice or affect state practice laws. Social workers operating under the Compact must adhere to the laws and rules of the state where they practice, including compliance with the state's scope of practice.

I passionately urge you to lend your support to the Interstate Social Work Licensure Compact, recognizing its potential to make a transformative impact on mental health service accessibility and continuity of care for residents of Maryland.

I appreciate your consideration.

Sincerely,

Andrea Creel

Licensed Master Social Worker (LMSW)

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