

SB0991_MHAMD_Fav.pdf

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Position: FAV

Senate Bill 991 Behavioral Health – Language Assistance Services Pilot Program

Senate Finance Committee

March 8, 2024

Position: SUPPORT

Mental Health Association of Maryland (MHAMD) 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 and substance use disorders (collectively referred to as behavioral health). We appreciate the opportunity to provide this testimony in support of SB 991.

SB 991 would establish a Language Assistance Services Pilot Program, to provide grants to select Local Behavioral Health Authorities to reimburse behavioral health providers for language assistance services for children with limited English proficiency and their families.

The Public Justice Center and Centro SOL studied the issue of interpretation services for behavioral health care in Maryland for children with limited English proficiency and their families and concluded that needed translation services were in short supply.¹

Providers sometimes refuse to serve children with limited English proficiency, or children are placed on lengthy waiting lists. Family members, who are untrained and can be biased, may be relied on to provide translation services. Or, in cases where a child or youth speaks English more fluently than their parents, they are used to translate for their parents. This is rife with potential pitfalls.

The Public Justice Center and Centro SOL report states that there are legal requirements for providers to offer interpretation services, since both the Civil Rights Act of 1964 and the Affordable Care Act of 2010 forbid discrimination against people from different nations of origin, and most people with limited English proficiency are immigrants.

Mental health providers in Maryland have reported multiple challenges to offering translation and interpretation services, including a large volume of patients with limited English proficiency and lack of funding.

To a limited extent, SB 991 will address the funding issue. By establishing a modest amount of grant funding in select jurisdictions to reimburse mental health providers, and requiring

¹ The Public Justice Center and Centro LOL. The Right to Interpretation and Translation Services for Children and Adolescents with Mental Health Needs in Maryland. November 2022. Accessed March 6, 2024.
<https://www.publicjustice.org/wp-content/uploads/2022/12/Speaking-the-Language-Report.pdf>

extensive data collection, SB 991 will help many children and families and at the same time allow Maryland to assess the extent of the problem and the cost to address it.

For these reasons MHAMD supports SB 991 and urges a favorable report.

SB 991_PJC_FAVORABLE_FIN.pdf

Uploaded by: Ashley Black

Position: FAV



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SB 991
Behavioral Health – Language Assistance Services Pilot Program
Hearing of The Senate Finance Committee
March 8, 2024
1:00 PM

FAVORABLE

The Public Justice Center (PJC) is a not-for-profit civil rights and anti-poverty legal services organization which seeks to advance social justice, economic and racial equity, and fundamental human rights in Maryland. Our Health and Benefits Equity Project advocates to protect and expand access to healthcare and safety net services for Marylanders struggling to make ends meet. We support policies and practices that are designed to eliminate economic and racial inequities and enable every Marylander to attain their highest level of health. **PJC strongly supports SB 991**, which establishes the Language Assistance Services Pilot Program in the Behavioral Health Administration to provide grants to local behavioral health authorities to reimburse behavioral health providers for language assistance services for children with limited English proficiency (LEP) accessing and receiving behavioral health services. It would also reimburse providers for providing language assistance services to parents and guardians with LEP coordinating the provision of behavioral health services and making health care decisions on behalf of a child.

Maryland is home to more than 416,000 individuals who identify as having limited English proficiency, according to the 2019 U.S. Census Bureau’s American Community Survey.¹

As part of PJC’s Health & Benefits Equity Project, we advocate to ensure that individuals with LEP are afforded timely and consistent access to language services, including interpretation and translation, in health care settings. In accordance with Section 1557 of the Affordable Care Act, entities that accept federal financial assistance (including Medicaid and certain parts of Medicare) must provide meaningful access to their programs and activities to individuals with LEP. This federal law, which covers Maryland’s behavioral health providers, requires health care providers to provide free interpretation and translation services to individuals with LEP, including children and parents or legal guardians that have the right to make medical decisions on their child’s behalf.

¹ Migration Policy Institute, *State Immigration Data Profiles* (last visited on March 6, 2023), <https://www.migrationpolicy.org/data/state-profiles/state/language/MD> (In 2019, 39.5% of Foreign-born residents (364,406) and 1.1% of U.S.-born residents (52,412) identified as speaking English less than “very well” (LEP) in Maryland).

Despite the explicit requirements of this mandate, PJC and our language access allies have observed numerous instances of children and families with LEP being denied access to an interpreter and translated documents, leading to the child ultimately being denied time sensitive behavioral health services. We have also received reports from both providers and parents over the years regarding certain behavioral health providers asking child-patients to interpret for their parents, in violation of federal law, instead of utilizing a qualified interpreter. Failing to provide language assistance services to children and parents/guardians with LEP is national origin discrimination and a clear violation of federal law.

Providing language assistance services to children and families with LEP to foster access to timely community-based behavioral health services enables children to stay in the community and avoid crisis and unnecessary hospitalization.

Our state has experienced growth not only in the diversity of spoken languages, but we have also seen a tremendous increase in the demand for mental health care following the COVID-19 pandemic. In fact, the American Academy of Pediatrics and the American Academy of Child and Adolescent Psychiatry declared a national emergency in 2021 in child and adolescent mental health.² When children and adolescents cannot access time sensitive behavioral health services, such as therapy and medication management, they are at risk for a behavioral health crisis which threatens their right to safely reside in the community and can lead to self-harm. Additionally, when community-based behavioral services are not available to children, parents often turn to the emergency room for crisis support. This in turn increases avoidable emergency room utilization in Maryland, which has the longest ER wait times in the country.

Many Maryland behavioral health providers cite the high cost of language assistance services as a barrier to compliance with federal law, and Maryland's Medicaid program does not cover language assistance services.

In 2022, PJC and Centro SOL co-authored a report, *Speaking the Language: The Right to Interpretation and Translation Services for Children and Adolescents with Mental Health Needs in Maryland*. The report describes the experiences of children and adolescents who were denied recommended mental health care due to their primary and preferred language as well as families who struggle to coordinate care for their young children when their request for interpretation and translation is denied. The report also highlights challenges to providing interpretation and translation from the perspective of mental health providers. During a listening session held with mental health providers, one of the most cited barriers to providing care to children and families with LEP was the overall costs of interpretation and translation. In fact, the average hourly rate for an interpreter and translator in Maryland is \$40.08.³ For a child that needs intensive behavioral health services, the cost of providing language assistance services can often exceed the reimbursement that the provider receives for the behavioral health service itself. Despite Section 1557's status as an unfunded mandate and availability of federal matching funds for Medicaid programs that choose to cover language assistance services, Maryland's Medicaid program still does not cover these vital services.

SB 991 would help close the gap in access to behavioral health care for children and their families with LEP.

² Public Justice Center & Centro SOL, Johns Hopkins University, *Speaking the Language: The Right to Interpretation & Translation Services for Children and Adolescents with Mental Health Needs in Maryland* (November 2022), <https://www.publicjustice.org/wp-content/uploads/2022/12/Speaking-the-Language-Report.pdf>.

³ Bureau of Labor Statistics, Occupational Employment and Wage Statistics May 2022, <https://www.bls.gov/oes/current/oes273091.htm> (last visited March 7, 2024).

SB 991 addresses linguistic barriers to accessing behavioral health care for children by providing financial support to behavioral health providers for language assistance services. SB 991 would create a competitive grant program through the Behavioral Health Administration to provide \$30,000 grants to three local behavioral health authorities for two years to reimburse providers for language assistance services for children with LEP in need of behavioral health care. It would also enable providers to cover the cost of language assistance services provided to parents and legal guardians who are coordinating their child's care and making medical decisions on their behalf. A standard 50% federal matching rate for interpretation and translation may be available to Maryland's Medicaid program through a state plan amendment to cover this small pilot program. Finally, SB 991 would provide much needed data on language assistance service utilization in grantee's jurisdictions, allowing policymakers to assess costs and pursue pathways to reimburse language assistance services. Ultimately, SB 991 would help our state improve health outcomes of children with behavioral health needs in families with LEP.

If passed, SB 991 would promote long-term recovery for children, reduce unnecessary emergency room utilization, and lay the foundation for reimbursement for language services in health care settings. For these reasons, the Public Justice Center urges the committee to issue a **FAVORABLE** report for **SB 991** to help safeguard the right of children and their families with LEP to access behavioral health care. If you have any questions about this testimony, please contact Ashley Woolard at 410-625-9409 ext. 224 or woolarda@publicjustice.org.

SB 991_LFAB_Support_FIN.pdf

Uploaded by: Baltimore Medical System/Johns Hopkins Pediatrics Latino Family Advisory Board

Position: FAV



March 7, 2024

Estimado Senador Clarence Lam:

Nosotros, los miembros de la Junta Asesora de Familias Latinas (LFAB) en el Sistema Médico de Baltimore/Práctica de Pediatría Johns Hopkins en Yard 56, nos dirigimos de manera conjunta para expresar nuestro completo apoyo al proyecto de ley propuesto, SB 991 Programa Piloto de Servicios de Asistencia Lingüística en Salud Mental. Creemos que esta iniciativa es crucial para abordar los desafíos únicos enfrentados por las familias inmigrantes latinas en nuestra comunidad.

A lo largo de la última década, nuestra colaboración con el Dr. Polk y la Sra. Isabel Abaunza nos ha permitido mejorar los servicios de la clínica y aportar ideas valiosas a diversos proyectos de investigación. Como inmigrantes provenientes de México, América Central y del Sur, estamos posicionados de manera única para abogar por las necesidades de las familias latinas que llevan a sus hijos a la clínica pediátrica Yard 56.


Muchos de nosotros hemos experimentado personalmente sentimientos de aislamiento y rechazo en nuestras comunidades, mientras que otros han obtenido beneficios de relaciones positivas con vecinos que ofrecieron apoyo cuando fue necesario. Ser inmigrantes en Baltimore, especialmente en ausencia de una población latina significativa, presenta desafíos que difieren de las ciudades más grandes. Por lo tanto, respaldamos de todo corazón el objetivo de incluir nuestras voces en la investigación para garantizar servicios más efectivos y culturalmente sensibles para nuestra comunidad.

Su estudio propuesto está en línea con nuestro compromiso de realizar contribuciones significativas a la comunidad. Agradecemos su dedicación para abordar las necesidades de nuestra comunidad y sus esfuerzos para avanzar en este proyecto importante. Esperamos con interés la oportunidad de colaborar con usted y contribuir al éxito del Programa Piloto de Servicios de Asistencia Lingüística en Salud Mental, SB 991.

Atentamente,

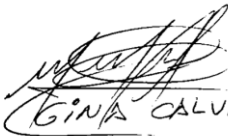
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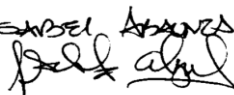
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GINA CALVA AVENA

Isabel Abaunza


Miembros de la Junta Asesora de Familias Latinas 2023-24
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March 7, 2024

Dear Senator Clarence Lam:

We, the members of the Latino Family Advisory Board (LFAB) at the Baltimore Medical System/Johns Hopkins Pediatrics practice at Yard 56, are collectively writing to express our wholehearted support for the proposed bill, SB 991 Behavioral Health – Language Assistance Services Pilot Program. We believe that this initiative is crucial in addressing the unique challenges faced by Latino immigrant families in our community.

Over the past decade, our collaboration with Dr. Polk and Ms. Isabel Abaunza has allowed us to enhance clinic services and contribute valuable insights to various research projects. As immigrants from Mexico, Central, and South America, we are uniquely positioned to advocate for the needs of Latino families who bring their children to the Yard 56 pediatric clinic.

Many of us have personally experienced feelings of isolation and rejection within our communities, while others have benefited from positive relationships with neighbors who offered support when needed. Being immigrants in Baltimore, especially in the absence of a significant Latino population, presents challenges that differ from larger cities. Thus, we wholeheartedly endorse the goal of including our voices in research to ensure more effective and culturally sensitive services for our community.

Your proposed study aligns with our commitment to making meaningful contributions to the community. Thank you for your dedication to addressing the needs of our community and your efforts in advancing this important project. We look forward to the opportunity to collaborate with you and contribute to the success of SB 991 Behavioral Health – Language Assistance Services Pilot Program.

Sincerely,

Members of the Latino Family Advisory Board 2023-24
Baltimore Medical System/Johns Hopkins Pediatrics Practice at Yard 56

SB 991_Language Pilot_FAVORABLE.pdf

Uploaded by: Dan Rabbitt

Position: FAV



March 8, 2024

**Senate Finance Committee
TESTIMONY IN SUPPORT**

SB 991 - Behavioral Health - Language Assistance Services Pilot Program

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 100,000 people with mental illness and substance use disorders (collectively referred to as “behavioral health”) annually.

Behavioral Health System Baltimore supports SB 991 – Behavioral Health - Language Assistance Services Pilot Program. This bill would create an important pilot program designed to provide improved access to behavioral health care to children with limited English proficiency. The bill provides a strong proposal to address this problem and ensure all children can access effective behavioral health care regardless of their background.

Language access is essential to effective behavioral health services. Effective counseling and therapy are predicated on communication and understanding. Describing symptoms, emotions, and coping skills requires nuance and clear terminology. This is exceedingly difficult if the language being spoken by the behavioral health professional is not well understood by the program participant.

Federal law requires access to accurate and effective language services for behavioral health care at no cost to children in immigrant families, but the quality of these services can be inconsistent. Most providers do not have bilingual staff and rely on a language line for interpretation. This service is done over the phone and can be difficult to follow. Much of the nuance and context crucial to behavioral health treatment may also be lost.¹

The state should seek to develop programs that provide higher-quality language access to children needing behavioral health care. Foreign born children have often experienced difficult events such as fleeing violence and may need services.

In Baltimore, 10% of residents do not speak English at home and 4% have limited English proficiency. As an LBHA, it would be great to have more resources to devote to serving this population better. **BHSB urges the Senate Finance Committee to support SB 991.**

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

References:

¹ Black, A; Polk, S; Ruiz, M; Sharfstein, J. “Speaking the Language: The Right to Interpretation & Translation Services for Children and Adolescents with Mental Health Needs in Maryland.” *The Public Justice Center; Centro SOL, Johns Hopkins University.* November 2022. Available at <https://www.publicjustice.org/wp-content/uploads/2022/12/Speaking-the-Language-Report.pdf>.

SB991_Language Assistance Services BH_KennedyKrieg

Uploaded by: Emily Arneson

Position: FAV



Kennedy Krieger Institute

DATE: March 8, 2024
BILL NO: Senate Bill 991
BILL TITLE: Behavioral Health - Language Assistance Services Pilot Program
POSITION: Support

COMMITTEE: Senate Finance

Kennedy Krieger Institute supports Senate Bill 991 - Behavioral Health - Language Assistance Services Pilot Program.

Bill Summary:

Senate Bill 991 would establish the Language Assistance Services Pilot Program in the Behavioral Health Administration. This program would provide grants to local behavioral health authorities to reimburse behavioral health providers for language assistance services for children with limited English proficiency.

Background:

Kennedy Krieger Institute is dedicated to improving the lives of children and young adults with developmental, behavioral, cognitive, and physical challenges. Kennedy Krieger's services include inpatient, outpatient, school-based, and community-based programs. Over 27,000 individuals receive services annually at Kennedy Krieger.

The vision for the Office for Health Equity Inclusion and Diversity (O-HEID) at Kennedy Krieger Institute is to promote the health and well-being of those who work and receive training and services at Kennedy Krieger Institute. The O-HEID uses evidence, culturally relevant, and equity-based approaches that assures diversity and inclusion. The O-HEID is working to establish collaboration, data, and metrics to address remediable disparities within our patient populations, policies, and practices.

Rationale:

In 2023, the Maryland State Department of Education reported that English-language learners made up a significant portion of the school population, representing about 1 in 8 children and a total of over 105,000 students.^{1,2} In the past fiscal year, Kennedy Krieger has provided more than 20,000 appointments for individuals who required the use of an interpreter. While most of these families reported speaking Spanish as their primary language (over 70%), the Institute had more than 40 unique languages represented across our patient population.

Nationwide, 1 out of 5 children has a mental, emotional, or behavioral disorder, although only about 20 percent of these children receive the mental health services they need.^{3,4} Additionally, there is an ongoing shortage of pediatric behavioral health clinicians, particularly those who can provide services in languages other than English.⁵ Serious consequences can result when families are not provided with access to medically trained interpreters, including negative impacts on patients' satisfaction, quality of care, and health outcomes.^{6,7} However, there is growing concern amongst the community that while there is an increase in the volume of patients with limited English proficiency (LEP), there are multiple reports of children being refused mental health services based on speaking a language other than English.⁸ This represents a critical inequity for children in Maryland.

In 2022, the Public Justice Center in conjunction with Centro SOL at Johns Hopkins University conducted a listening session with approximately 25 Maryland behavioral/mental health providers and organizations to identify the struggles they are facing with providing Maryland youth with interpretation and translation services.⁸ Many barriers were noted including a lack of guidance and funding for interpretation services. Suggested solutions included an increase in financial resources, training, and community partnerships, as well as clarity on available resources to build and maintain capacity to provide routine access to language services.

We strongly support the creation of the Language Assistance Services Pilot Program which would increase access to behavioral and mental health services for children and families with limited English proficiency by requiring

providers to 1) conduct self-assessments of the needs of this population and 2) develop written language access plans to meet these needs. As such, we are in full support of SB 991, as these efforts are critical for greater equity in behavioral and mental health service provision for Maryland children.

Kennedy Krieger Institute requests a favorable report on Senate Bill 991.

Contact information: Emily Arneson, AVP Government Affairs – 443.631.2188 or arneson@kennedykrieger.org

References

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Maryland Catholic Conference_FAV_SB991.pdf

Uploaded by: Jenny Kraska

Position: FAV



**MARYLAND
CATHOLIC
CONFERENCE**

March 8, 2024

SB 991

Behavioral Health – Language Assistance Services Pilot Program

Senate Finance Committee

Position: FAVORABLE

The Maryland Catholic Conference offers this testimony in support of Senate Bill 991. The Catholic Conference is the public policy representative of the three (arch)dioceses serving Maryland, which together encompass over one million Marylanders. Statewide, their parishes, schools, hospitals and numerous charities combine to form our state's second largest social service provider network, behind only our state government.

Senate Bill 991 would establish the Language Assistance Services Pilot Program in the Behavioral Health Administration. This bill is an important step towards ensuring equitable access to behavioral health services for children with limited English proficiency and their families.

Every individual is deserving of respect, dignity, and the opportunity to live a full and healthy life. However, language barriers can pose significant obstacles to accessing essential services, including behavioral health care, particularly for children and families who are not proficient in English. By establishing the Language Assistance Services Pilot Program, we affirm our commitment to ensuring that all children and families have access to the care and support they need to thrive.

The provision of grants to local behavioral health authorities to reimburse providers for language assistance services is a compassionate and practical response to the needs of children and families facing language barriers. These services play a crucial role in facilitating effective communication between providers and patients, ensuring that children and families can fully understand their treatment options, participate in care decisions, and access the support they need to address behavioral health concerns.

The MCC commends the focus of the pilot program on supporting parents and guardians who are coordinating the provision of behavioral health services and making health care decisions on behalf of their children. Parental involvement is essential for the well-being and success of children, and providing language assistance services to parents and guardians ensures that they can fully participate in their child's care and advocate for their needs effectively.

Accordingly, the Conference appreciates your consideration and, for these reasons, respectfully requests a favorable report on Senate Bill 991.

SB0991_CC_Martinez_FAV.pdf

Uploaded by: Madelin Martinez

Position: FAV

Senate Bill 991
Behavioral Health - Language Assistance Services Pilot Program
Finance Committee
March 8, 2024
Support

Catholic Charities of Baltimore supports SB 991, which establishes the Language Assistance Services Pilot Program within the Behavioral Health Administration, providing grants to local behavioral health authorities to reimburse providers for language assistance services for children with limited English proficiency accessing behavioral health services and for parents/guardians coordinating such services.

For over a century, Catholic Charities has been dedicated to improving the lives of Marylanders in need through a vast spectrum of care and services, including housing and shelter, health care, education, immigration, workforce training, senior services and more. **As the second-largest provider of behavioral health services in the state, we offer counseling services to children in more than 100 schools in four counties.** Additionally, we offer behavioral health and case management services to children and adults in eight outpatient clinics, along with providing residential treatment and education to youth in need at our campus in Timonium.

Building upon our longstanding dedication to improving the lives of Marylanders, our Villa Maria Behavioral Health program prioritizes accessibility and inclusivity by utilizing language lines at our expense and actively recruiting bilingual providers. At present, we have 3 therapists and 2 psychiatrists who are bilingual Spanish speakers, alongside one bilingual office staff member in our Millersville clinic. Despite our efforts to expand services to those with limited English proficiency, securing sustainable funding beyond Medicaid and grants has been difficult, putting a strain on our resources. Our capacity remains limited, highlighting the critical need for support such as the proposed grants under SB 991.

Considering our efforts at Villa Maria Behavioral Health, it's essential to recognize the broader challenges faced by immigrant families in accessing behavioral health care due to language barriers. The report "Speaking the Language" published by the Public Justice Center and Centro SOL at Johns Hopkins University found that federal law requires healthcare providers receiving federal funds to offer competent interpretation and translation services to patients with limited English proficiency at no cost.¹ However, behavioral health providers in Maryland report lacking the resources and guidance to consistently provide these legally mandated language assistance services.¹ The report highlights troubling cases where children were outright denied behavioral health treatment simply because they or their parents had limited English skills.¹ Failing to bridge this language gap puts already vulnerable young people at further risk, jeopardizing their health, development, and education outcomes.

SB 991 takes an important step towards ensuring language access for this population by establishing the Language Assistance Services Pilot Program. Providing grants to local behavioral health authorities to reimburse providers for interpretation and translation will help remove a major financial barrier that currently prevents many from offering these services. The bill appropriately targets children's behavioral health services, an area of acute need where communication is vital for proper diagnosis, treatment adherence, and family engagement. By investing in language assistance capacity, this pilot program can help behavioral health providers meet their legal obligations while improving the quality of care for children with limited English proficiency and their families. It represents a worthy effort by the state to uphold civil rights and address unmet behavioral health needs in immigrant communities. **For these reasons, Catholic Charities urges the committee to issue a favorable report on Senate Bill 991.**

Submitted By: Madelin Martinez, Assistant Director of Advocacy

1. The Public Justice Center and Centro SOL, Johns Hopkins University. New report: Maryland mental health providers' failure to provide interpretation and translation services denies care to children and adolescents with limited English proficiency. Centro SOL. Published December 7, 2022. Accessed March 7, 2024. <https://jhcentrosol.org/health-policy/report-speaking-the-language/>

SB991 FAV.pdf

Uploaded by: Morgan Mills

Position: FAV

March 8, 2024

Chair Beidle, Vice Chair Klausmeier, and distinguished members of the Finance Committee,

NAMI Maryland and our 11 local affiliates across the state represent a network of more than 58,000 families, individuals, community-based organizations, and service providers. NAMI Maryland is a 501(c)(3) non-profit dedicated to providing education, support, and advocacy for people living with mental illnesses, their families, and the wider community.

NAMI MD believes it is absolutely essential for culture, identity, and language to be a part of the conversation as we discuss both mental health and mental health care. Language barriers can make communicating with providers difficult, or even impossible, particularly when a person is seeking counseling for sensitive or uniquely personal issues. These topics can be difficult for anyone to put into words, but it is especially difficult for those who may not speak the same language as a potential provider.

Even when a person does speak English, it can be challenging for them to convey their feelings and experiences in English. Additionally, it can be frustrating when they don't understand the true meaning of what a provider is trying to say.

Culturally competent language assistance services are important when delivering and receiving mental care. A provider who understands a patient's culture and needs will know culturally specific information. For example, someone might describe what they are feeling with a phrase like "*Me duele el corazón.*" While this literally means "my heart hurts," it is an expression of emotional distress — not a sign of chest pain. A culturally sensitive doctor would be aware of this interpretation and would ask for more information instead of assuming the problem is purely physical.

Language barriers and limited availability of culturally appropriate mental health service providers may prevent people from getting the care that they need. For these reasons, we urge a favorable report.

SB 991_Horizon Foundation_fav.pdf

Uploaded by: Nikki Highsmith Vernick

Position: FAV



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March 8, 2024

COMMITTEE: Senate Finance Committee

BILL: SB 991 – Behavioral Health – Language Assistance Services Pilot Program

POSITION: Support

The Horizon Foundation is the largest independent health philanthropy in Maryland. We are committed to a Howard County free from systemic inequities, where all people can live abundant and healthy lives.

The Foundation is pleased to support SB 991 – Behavioral Health – Language Assistance Services Pilot Program. This bill establishes a pilot program for the state to provide grants to local behavioral health authorities to reimburse providers for language assistance services for children with limited English proficiency.

Like many communities across the country, mental and behavioral health needs in Howard County have been on the rise and barriers remain to ensuring robust and equitable access to care. During the Foundation’s recent strategic planning and community engagement process, the lack of culturally competent providers and language barriers were cited by many residents of color, including low-income residents, as key barriers for their ability to access health care in general and achieve good health.

Improving language assistance services would provide more meaningful access to mental health care for young residents that primarily speak a language other than English. With mental and behavioral health needs rising youth in our communities, and as we continue to see stark racial disparities in mental health, we must do everything we can to improve access to care for all.

By reducing health inequities, we believe all people will be able to live abundant and healthy lives, and we strongly believe everyone should have access to compassionate and affordable mental health care. For these reasons, the Foundation **SUPPORTS SB 991 and urges a FAVORABLE report.**

Thank you for your consideration.

SB 991- LWVMD- FAV- Behavioral Health- Language As

Uploaded by: Nora Miller Smith

Position: FAV



TESTIMONY TO THE FINANCE COMMITTEE

SB0991: Behavioral Health- Language Assistance Services Pilot Program

POSITION: Support

BY: Linda Kohn, President

DATE: March 8, 2024

The League of Women Voters believes that every U.S. resident -- adult and child -- should have access to affordable, high quality health care, including behavioral health care. The League also strongly supports efforts to increase health equity, believing that resource distribution and policy approaches should be based on fairness, giving everyone an equal opportunity to receive culturally-appropriate care.

Over 20% of Maryland families speak a language other than English at home.¹

When an individual with limited English proficiency (LEP) receives medical care delivered in an exclusively English-speaking environment, the language barrier can lead to fragmented care, misunderstood symptoms, and misinterpreted instructions resulting in poor patient outcomes.

Federal laws addressing language access, such as Title VI of the Civil Rights Act of 1964 and Section 1557 of the Affordable Care Act (ACA), **prohibit discrimination on the basis of national origin- which includes language.** These and other laws mandate that language services, including oral interpretation and written translation, be provided to enable all individuals to more fully access programs and care. In some healthcare facilities, language access is provided through a telephonic or computerized "language line" service.

However, "according to the US Department of Health and Human Services (HHS), **language access requirements under the ACA include...offering a developmentally appropriate language assistance program for children.**"² This may not be achieved by simply handing a telephone to a child who hardly understands English and is suffering with behavioral health challenges.

¹ <https://data.census.gov/profile/Maryland?g=040XX00US24>

² <https://jeenie.com/news/language-access-laws-comprehensive-guide/#:~:text=Title%20VI%20of%20the%20Civil%20Rights%20Act%20of%201964&text=Under%20Title%20VI%2C%20any%20organization,oral%20interpretation%20and%20written%20translation.>

SB 991 will create a pilot program to determine how best to remove language barriers, which constitute a preventable obstacle to accessing quality health care, for children who are receiving behavioral health care and their families. Better communication will lead to more trust, more adherence to treatment, and more positive outcomes for those children.

The League of Women Voters Maryland, representing 1,500+ members throughout Maryland, urges a favorable report on Senate Bill 991.

2024 MASBHC SB 991 Senate Side.pdf

Uploaded by: Robyn Elliott

Position: FAV



Committee: Senate Finance Committee

Bill: Senate Bill 991 – Behavioral Health - Language Assistance Services Pilot Program

Hearing Date: March 8, 2024

Position: Support

The Maryland Assembly on School-Based Health Centers (MASBHC) supports *Senate Bill 991 - Behavioral Health - Language Assistance Services Pilot Program*. This bill establishes a 4-year pilot program, under which the Behavioral Health Administration provides grants to local behavioral health authorities to reimburse behavioral health providers for behavioral health care and language assistance services designed to improve the health of children with limited English proficiency.

There are almost 90 school-based health centers across Maryland providing primary care and behavioral health care to underserved student communities. Access to language assistance for patients is important to the delivery of high-quality care for all populations with limited English proficiency. MASBHC supports this bill as a strong public health policy that will improve behavioral health services for children with limited English proficiency.

We ask for a favorable report. If we can provide any additional information, please contact Robyn Elliott at relliott@policypartners.net or (443) 926-3443.

2024 MCHS SB 991 Senate Side.doc.pdf

Uploaded by: Robyn Elliott

Position: FAV



Maryland Community Health System

Committee:	Senate Finance Committee
Bill:	Senate Bill 991 – Behavioral Health - Language Assistance Services Pilot Program
Hearing Date:	March 8, 2024
Position:	Support

The Maryland Community Health System (MCHS) supports *Senate Bill 991 – Behavioral Health - Language Assistance Services Pilot Program*. This bill establishes a 4-year pilot program, under which the Behavioral Health Administration provides grants to local behavioral health authorities to reimburse behavioral health providers for language assistance services designed to improve the health of children with limited English proficiency.

MCHS is a network of federally qualified health centers across the state whose mission is to provide care to underserved communities. MCHS treats many patients with limited English proficiency. Behavioral health services can save lives and language assistance services can overcome an obstacle that prevents meaningful behavioral health care for children with limited English proficiency. MCHS supports the bill because it removes a major barrier to care.

We urge a favorable report on this bill. If we can provide any further information, please contact Robyn Elliott at relliott@policypartners.net.

SB 991 - Support - MPS WPS.pdf

Uploaded by: Thomas Tompsett

Position: FAV



March 7, 2024

The Honorable Pamela Beidle
Finance Committee
Miller Senate Office Building – 3 East
Annapolis, MD 21401

RE: Support Senate Bill 991: Behavioral Health - Language Assistance Services Pilot Program

Dear Chairman Beidle 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 enthusiastically support Senate Bill 991: Behavioral Health - Language Assistance Services Pilot Program. The primary purpose of the Behavioral Health Language Assistance Services Pilot Program is to provide meaningful access to behavioral health care for children with limited English proficiency (LEP) and their parents or legal guardians. Access to mental health services is a fundamental aspect of public health, and ensuring that language barriers do not prevent individuals from accessing these services is crucial for the well-being of the community. All too often, our members see that language barriers can exacerbate health disparities, particularly in communities with high proportions of individuals with LEP. By providing language assistance services, including interpretation and translation services, the program aims to address these disparities and promote equity in access to behavioral health care. Furthermore, the requirement for health care providers to develop and implement language access plans fosters cultural competence within the behavioral health care system. By understanding the linguistic and cultural needs of their patients, providers can deliver more effective and responsive care, ultimately improving health outcomes for individuals with limited English proficiency.

Finally, the establishment of a competitive grant process for local behavioral health authorities allows for the efficient allocation of resources to areas with the greatest need. This approach ensures that the program targets communities where language barriers are most prevalent and where additional support is necessary to improve access to behavioral health services.



Therefore, for all the reasons above, MPS/WPS ask the committee for a favorable report on SB 991. 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

Health Care for the Homeless - 2024 SB 991 FAV - L

Uploaded by: Vicky Stewart

Position: FAV

HEALTH CARE FOR THE HOMELESS TESTIMONY
IN SUPPORT OF
SB 991 - Behavioral Health - Language Assistance Services Pilot
Program

Senate Finance Committee
March 8, 2024



Health Care for the Homeless supports SB 991, which would establish the Language Assistance Services Pilot Program in the Behavioral Health Administration to provide grants to local behavioral health authorities to reimburse behavioral health providers for language assistance services for children with limited English proficiency (LEP) accessing behavioral health services. Importantly, the grants would provide funding for interpretation and translation services for parents and legal guardians who are coordinating behavioral health care for a child. There is a critical need for children with LEP to better access behavioral health services and language assistance services has been an immense barrier for providers to provide these services. This bill will begin to provide meaningful access to this vital care at a time when there is an immense shortage of behavioral health providers for children in the state.

At Health Care for the Homeless, our clients are among Maryland's most vulnerable – those experiencing homelessness or housing instability. In recent years, we have seen an increasing number of children with LEP that have complex behavioral health needs. We know that school-aged children who experience homelessness face significant mental health challenges that prevent students from focusing on their education, among other things. These challenges can result in students experiencing homelessness to become chronically absent from school. Even after just one year of chronic absenteeism, students are significantly less likely to complete high school.¹ These mental health challenges are exacerbated for children with LEP, as language is a significant barrier to receiving care.

Health Care for the Homeless is a federally qualified health center and, as such, we will never turn anyone away due to limited English proficiency and we ensure that every client – including children and their parents and legal guardians – have full translation services for all of their care. However, these language services are not free and we are increasingly needing to rely on these services. Every dollar we save and funding we receive goes directly back into the services we provide so we can continue to provide and expand care.

Financial sustainability aside, there are immense challenges with referrals for children with more complex behavioral health needs. When we need to refer a child for behavioral health care outside our practice, we oftentimes have difficulty finding a provider who will accept children specifically based on their LEP. Many providers will not accept children with LEP because the cost of translation is far too high. Some of these denials even come from community health centers, in violation of federal policy.²

¹ See, for instance, Stout, *Assessment of Maryland's Need for Eviction Prevention Funds (EPF) and the Estimated Fiscal Impact of EPF (2023)*, page 26, available at [Maryland's Need for Eviction Prevention Funds | Maryland Center on Economic Policy \(mdeconomy.org\)](https://www.mdeconomy.org/maryland-need-for-eviction-prevention-funds).

² Under Title VI of the Civil Rights Act of 1964 & Section 1557 of the Care Act, all mental health providers in Maryland who accept federal financial assistance for any of their programs or activities must provide language assistance services, including interpretation and translation, to individuals with limited English proficiency (LEP).

Having a funding mechanism for language access services for children with LEP will have an enormously beneficial impact on access to critical behavioral health care for this vulnerable population. We strongly urge a favorable report on SB 991.

Health Care for the Homeless is Maryland's leading provider of integrated health services and supportive housing for individuals and families experiencing homelessness. We deliver medical care, mental health services, state-certified addiction treatment, dental care, social services, housing support services, and housing for over 11,000 Marylanders annually at sites in Baltimore City and Baltimore County.

Our Vision: Everyone is healthy and has a safe home in a just and respectful community.

Our Mission: We work to end homelessness through racially equitable health care, housing and advocacy in partnership with those of us who have experienced it.

For more information, visit www.hchmd.org.

SB 0991-FIN-BHA-LOI.docx.pdf

Uploaded by: Jason Caplan

Position: INFO



Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

March 8, 2024

The Honorable Senator Pamela Beidle
Chair, Finance Committee
3 East Miller Senate Office Building
Annapolis, MD 21401-1991

RE: Senate Bill 991 – Behavioral Health - Language Assistance Services Pilot Program – Letter of Information

Dear Chair Beidle and Committee Members:

The Maryland Department of Health (MDH) respectfully submits this letter of information for Senate Bill (SB) 991 – Behavioral Health - Language Assistance Services Pilot Program.

The purpose of SB 991 is to establish the Language Assistance Services Pilot Program in the Behavioral Health Administration. This pilot program will provide grants to local behavioral health authorities in order to reimburse behavioral health providers for language assistance services for children with limited English proficiency accessing and receiving behavioral health services and parents and guardians coordinating the provision of behavioral health services and making health care decisions regarding the services on behalf of a child.

To achieve these goals, the bill proposes a mandated appropriation of \$120,000 for FY25 and FY26 in the annual state budget. Additionally, the bill stipulates a minimum of three \$30,000 grants, respectively for FY25 and FY26, be provided to grantees in addition to any request for reimbursement.

Title VI of the Civil Rights Act of 1964 and Section 1557 of the Affordable Care Act already require access to accurate, impartial, and effective services for behavioral health care at no cost to children and adolescents with limited English proficiency. Compliance actions include offering a qualified interpreter to an individual with LEP for oral interpretation and a qualified translator when translating written content in paper or electronic form. Because the translation services are required by civil rights laws, costs for the services cannot be passed on to the patient.¹

In short, these services are already required under federal law as cited above and offered at no cost to patients through many insurance plans.

If you have any further questions, please contact Sarah Case-Herron, Director, Office of Governmental Affairs at sarah.case-herron@maryland.gov.

¹ American Medical Association (2017). Affordable Care Act, Section 1557 Fact sheet. Accessed March 6, 2024: <https://www.ama-assn.org/media/14241/download>

Sincerely,

A handwritten signature in blue ink, appearing to read "LH Scott".

Laura Herrera Scott, M.D., M.P.H.
Secretary

9b - SB 991 - FIN - MACHO - LOI .docx (1).pdf

Uploaded by: State of Maryland (MD)

Position: INFO



**2024 SESSION
POSITION PAPER**

BILL: SB 991 - Behavioral Health - Language Assistance Services Pilot Program

COMMITTEE: Senate Finance Committee

POSITION: Letter of Information

BILL ANALYSIS: SB 991 would establish a Language Assistance Services Pilot Program in the Behavioral Health Administration in the Maryland Department of Health to provide grants to local behavioral health authorities to reimburse behavioral health providers for language assistance services for children and their caregivers with limited English proficiency.

POSITION RATIONALE: The Maryland Association of County Health Officers (MACHO) submits this Letter of Information regarding SB 991. The bill would establish a pilot program with the goal of improving access to behavioral health services for children with limited English proficiency and their caregivers. MACHO is strongly supportive of efforts to ensure that all Maryland residents have equitable access to behavioral health services, including access to language assistance services to ensure that people from all backgrounds can communicate effectively with healthcare providers.

There is a clear and growing need for language assistance services in healthcare settings. According to the American Community Survey, 5-Year estimates for 2018 - 2022:

- 3.3% of households in Maryland are linguistically isolated, meaning every member aged 14 years or older has some difficulty speaking English
- 19.8% of Marylanders aged five and over have a language other than English spoken at home

The bill establishes a pilot grant program where local behavioral health authorities (LBHAs) will apply for competitive funding that will be used to reimburse behavioral health providers for language assistance services if the providers meet certain program requirements. Although LBHAs will be required to establish a mechanism and dedicate staff time to review requests and process reimbursements, the bill language does not reference any direct funding support to LBHAs to manage the additional administrative responsibilities that will accompany this new programming. In the absence of dedicated funding to support this work, it will be a challenge for LBHAs to establish, staff, and administer these programs and may hinder progress toward the shared goal of improving equitable access to behavioral health services.

For these reasons, MACHO submits this letter of information for SB 991. For more information, please contact Ruth Maiorana, MACHO Executive Director, at rmaiora1@jhu.edu or 410-937-1433. *This communication reflects the position of MACHO.*