



Date: February 28, 2024

To: Chair Joseline Pena-Melnyk and Vice Chair Bonnie Cullison of the Health & Government Operations Committee

House Bill 933 – Behavioral Health Crisis Response Services – 9-8-8 Trust Fund Fees

Position: Favorable

Dear Chair Pena-Melnyk and Committee Members:

On behalf of LifeBridge Health, we appreciate the opportunity to comment on HB933.

LifeBridge Health is a regional health system comprising Sinai Hospital of Baltimore, an independent academic medical center; Levindale Hebrew Geriatric Center and Hospital in Baltimore; Northwest Hospital, a community hospital in Baltimore County; Carroll Hospital, a sole community hospital in Carroll County; Grace Medical Center (formerly Bon Secours Hospital), a freestanding medical facility in West Baltimore; and Center for Hope a center of excellence focused on provided hope and services for trauma survivors in Baltimore City.

Behavioral health crisis services and the suicide prevention lifeline are effective interventions that reduce the likelihood of inpatient hospitalization and help prevent tragic deaths due to suicide or overdose. The transition to 988 as the national suicide prevention and behavioral health crisis hotline provides a once in a generation opportunity to strengthen Maryland’s behavioral health system.

We have consistently seen increased numbers of individuals in mental health or suicidal crisis present to our emergency rooms. Whether brought by EMS in an ambulance, or by law enforcement, or even by family members, these capable and well-meaning responders simply do not have the capacity to provide the care people need when in crisis. Like all providers, LifeBridge has seen an increase in behavioral health needs during the pandemic, but the problem predates the pandemic. In fact, this steady increase and the pressure it puts on our Emergency Room to respond has caused us to redesign our new Emergency Room with more capacity for behavioral health patients and to increase inpatient behavioral health capacity as well. While this will enhance care for these patients, it does not guarantee the type of response individuals need when in crisis. Hospital emergency rooms are not optimal sites for addressing the needs of people experiencing suicidal or other behavioral health crisis, as hospitals must also triage life-threatening medical emergencies, resulting in delays of hours or even days for behavioral crisis patients.

LifeBridge and our hospital partners are committed to supporting crisis services through regional catalyst programs like the Greater Baltimore Regional Integrated Crisis System (GBRICS). Strengthening our local

**CARE BRAVELY**

network of crisis call centers through establishing a 988 Trust Fund will help ensure these system enhancements are successful.

For all the above stated reasons, we request a **FAVORABLE** report for HB933.

For more information, please contact:

Jennifer Witten, M.B.A.

Vice President, Government Relations & Community Development

[jwitten2@lifebridgedhealth.org](mailto:jwitten2@lifebridgedhealth.org)

Mobile: 505-688-3495