



March 4, 2024

The Honorable Joseline Pena-Melnyk
Health & Government Operations Committee
House Office Building – Room 241
Annapolis, MD 21401

RE: Support – House Bill 1048: Maryland Medical Assistance Program – Limited Behavioral Health Services

Dear Chair Pena-Melnyk 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/WPS represent over 1000 psychiatrists and physicians currently in psychiatric training.

MPS/WPS support HB 1040: Maryland Medical Assistance Program – Limited Behavioral Health Services (HB 1040). However, the societies believe that requiring a diagnosis before providing limited mental health services can ensure that resources are allocated efficiently and effectively. Requiring a diagnosis ensures that individuals receive treatment tailored to their specific mental health needs. Without a diagnosis, a risk of providing services that may not be appropriate or effective for the individual's condition exists. In addition, requiring a diagnosis can help prevent overutilization of mental health services by individuals who may not necessarily need them. This ensures that limited resources are directed towards those who genuinely require treatment. Finally, a diagnosis provides the basis for treatment planning and monitoring progress. It allows mental health professionals to develop targeted interventions and measure their effectiveness over time, leading to better outcomes for patients.

Therefore, incorporating a diagnosis requirement ensures that limited behavioral health services are provided in a responsible and accountable manner, ultimately benefiting both individuals seeking treatment and the healthcare system as a whole. MPS/WPS suggest the following amendments to get to that end:

On page 2, strike beginning with “REGARDLESS” in line 15 down through “DIAGNOSIS” in line 16.



On page 2, beginning with “REGARDLESS” line 20 strike down through “DIAGNOSIS” in line 21.

For all the reasons above and with the above-referenced amendment, MPS and WPS ask the committee for a favorable report on HB 548. If you have any questions regarding 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