



THE MARYLAND HOUSE OF DELEGATES
ANNAPOLIS, MARYLAND 21401

March 5, 2025

Testimony in Support of HB 1146

Maryland Behavioral Health Crisis Response System – Integration of 9–8–8 Suicide and Crisis Lifeline Network and Outcome Evaluations

Good afternoon Chair Peña-Melnyk, Vice Chair Cullison, and members of the House Health and Government Operations Committee. Thank you for the opportunity to present **HB 1146 - Maryland Behavioral Health Crisis Response System – Integration of 9–8–8 Suicide and Crisis Lifeline Network and Outcome Evaluations** for your consideration. This bill takes two important steps to strengthen Maryland’s Behavioral Health Crisis Response System:

- *Formally incorporating 9-8-8 into Maryland’s Crisis Response Statute.* The current statute was written before the establishment of the 9-8-8 Suicide and Crisis Lifeline. Updating the law to include 9-8-8 explicitly will ensure that jurisdictions partner with 9-8-8 call centers and properly coordinate crisis services across the state.
- *Improving Crisis Outcome Measurement and Transparency.* Establishing clear, standardized metrics for tracking crisis response outcomes will provide the Maryland Department of Health and the General Assembly with critical data to assess system performance and determine where additional investments are needed.

The Issue: The Need for a Strengthened Crisis Response System

Maryland’s Behavioral Health Crisis Response System plays a vital role in connecting individuals in crisis with the appropriate support services. The 9-8-8 Suicide and Crisis Lifeline serves as the front door to this system, providing immediate crisis intervention, supportive counseling, and referrals to additional resources. However, the state’s current statute does not explicitly require jurisdictions to coordinate with 9-8-8 call centers, even though this collaboration is happening in practice. **HB 1146** ensures that the law accurately reflects 9-8-8’s central role in Maryland’s crisis response system.

Additionally, Maryland lacks consistent and comprehensive data on crisis response outcomes. Without clear, standardized metrics, it is difficult to evaluate the effectiveness of interventions, ensure equitable access to care, and allocate resources efficiently. Maryland Department of Health (MDH) already collects much of this data at the local level and this legislation formalizes an annual reporting requirement.

What HB 1146 Does

HB 1146 strengthens Maryland’s Behavioral Health Crisis Response System:

- Codifies 9-8-8 as a required component of the state’s crisis response infrastructure;
- Enhances crisis outcome evaluation and transparency by requiring annual reporting on 9-8-8 call, text, and chat volumes, answer rates, and call dispositions; mobile crisis team dispatched, response times, and outcomes; crisis stabilization center utilization and discharge results;
- Mandates public reporting of this data by December 1 each year, disaggregated by race, gender, and zip code to ensure equitable service delivery.

Why this is Critical for Maryland’s Crisis System

By fully integrating 9-8-8 into Maryland’s crisis response infrastructure and improving data collection, **HB 1146** will accomplish the following:

- ***Strengthen crisis services*** and ensure individuals in crisis receive timely care;
- ***Improve coordination*** between mental health professionals, mobile crisis teams, and first responders;
- ***Reduce unnecessary emergency room visits*** and limit law enforcement involvement in mental health crises ;
- ***Provide real-time disaggregated data*** to improve crisis response programs and allocate resources equitably for policymakers;
- ***Increase transparency and accountability*** by ensuring annual public reporting on crisis system outcomes.

Maryland has made significant progress in building a comprehensive Behavioral Health Crisis Response System, but gaps in coordination and data transparency remain. **HB 1146** ensures that 9-8-8 is fully integrated into our crisis response framework while providing the necessary data to strengthen services and support informed policymaking. This bill represents a critical step toward ensuring that Marylanders experiencing a mental health crisis receive timely, well-coordinated care. Furthermore, by improving crisis outcome evaluations, **HB 1146** will support efforts to reduce criminal detentions and enhance crisis diversion programs.

I respectfully request a **FAVORABLE** report.

Thank you for your consideration,



Delegate Jennifer White Holland