

# Infant Mental Health Association of Maryland & DC

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## House Health and Government Operations Committee TESTIMONY IN SUPPORT

### **HB 1083: “Maryland Department of Health - Workgroup to Implement Early and Periodic Screening, Diagnostic, and Treatment Requirements”**

The Infant Mental Health Association of Maryland and District of Columbia (IMHA MD-DC), established in 2018, is an affiliate of the World Association for Infant Mental Health (WAIMH). WAIMH is a not-for-profit organization of scientific, clinical and educational professionals whose central aim is to promote the mental well-being and the healthy development of infants and very young children throughout the world, and to generate and disseminate scientific knowledge. The Maryland affiliate is a multidisciplinary group of committed early childhood professionals whose mission is to promote healthy social, emotional, cognitive and physical development of infants from pre-conception through early childhood.

On behalf of the IMHA MD-DC past president Joyce Harrison MD, **strongly supports HB 1083: “Maryland Department of Health - Workgroup to Implement Early and Periodic Screening, Diagnostic, and Treatment Requirements”**. This bill requires Maryland’s Department of Health (MDH) to convene a workgroup including **early childhood behavioral health experts** to ensure the behavioral health benefits covered by Medicaid (Early and Periodic Screening, Diagnostic, and Treatment- EPSDT) meet the needs of all of Maryland’s children including young children. When we support the behavioral health needs of young children, we improve their school readiness and prevent much more serious mental health issues when they are older. **HB 1083 deserves your favorable consideration**

In 2021, the United States Surgeon General issued an Advisory on youth mental health, urging an increased focus on the behavioral health of young people.<sup>1</sup> According to Kids Count data, in Maryland, 15-22% of adults living with children report those children experiencing depression<sup>2</sup> and 20-30% of adults living with children report those children experiencing anxiety.<sup>3</sup>

On September 26, 2024, the Department of Health and Human Services’ Centers for Medicare & Medicaid Services’ (CMS) Center for Medicaid & CHIP Services issued State Health Official # 24-005, “Best Practices for Adhering to Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Requirements.”<sup>4</sup> This guidance from CMS includes some recommendations related to early childhood mental health that would be valuable

<sup>1</sup> <https://www.hhs.gov/surgeongeneral/priorities/youth-mental-health/index.html>

<sup>2</sup> <https://datacenter.aecf.org/data/tables/11212-adults-ages-18-to-24-who-felt-down-depressed-or-hopeless-for-more-than-half-of-the-days-or-nearly-every-day-for-the-past-two-weeks?loc=22&loct=2#detailed/2/22/false/2501,2485,2475,2470,2460,2461,2421,2420,2102,2101/any/21604>

<sup>3</sup> <https://datacenter.aecf.org/data/tables/11217-adults-living-in-households-with-children-who-felt-nervous-anxious-or-on-edge-for-more-than-half-of-the-days-or-nearly-every-day-in-the-past-two-weeks?loc=22&loct=2#detailed/2/22/false/2502,2484,2480,2476,2472,2465,2458,2463,2448,2418/any/21608>

<sup>4</sup> [SHO # 24-005: Best Practices for Adhering to Early and Periodic Screening, Diagnostic, and Treatment \(EPSDT\) Requirements](#)



improvements to Maryland's current array of behavioral health services. Intervening early with young children can prevent much more serious behavioral health issues when these children are older and can ensure that they are better equipped to perform well in school from an early age.

## Screening and Assessment of Behavioral Health Concerns

The first topic included under the purview of SB 790's taskforce is screening and assessment. In Maryland, clinicians are required to render a diagnosis (even for young children) within three visits with that child. However, this does not align with best practice recommendations.

**Significant mental health problems can and do occur in young children.** Children can show clear characteristics of anxiety disorders, attention-deficit/hyperactivity disorder, conduct disorder, depression, posttraumatic stress disorder, and neurodevelopmental disabilities, such as autism, at a very early age. That said, young children respond to and process emotional experiences and traumatic events in ways that are very different from adults and older children. Consequently, diagnosis in early childhood can be much more difficult than it is in adults.<sup>5</sup>

For clinicians, it can take more than three visits with a young child to render an accurate behavioral health visit.

**States should avoid requiring an EPSDT-eligible child to have a specific behavioral health diagnosis for the provision of services,** as screenings may identify symptoms that require attention but do not meet diagnostic criteria. This may be particularly salient when addressing the developmental and behavioral health needs of children under age 5<sup>6</sup>

HB 1083 would give these clinicians the leeway to ensure that they have spent sufficient time and addressed potential confounders to diagnosis (developmental concerns, trauma) with very young children and their families to make a diagnosis rather than having to rush to render a provisional diagnosis simply to be able to receive payment for those services. Intervening early and **appropriately** with young children can improve school readiness and prevent much more serious behavioral health issues when these children are older.

The IMHA MD-DC believes that HB 1083 is an important step in acknowledging that infant and early childhood mental health is relational health. Allowing time for accurate diagnosis, also appreciates that in infants and very young children, behavioral problems often are symptoms of underlying developmental disorders or traumatic exposure, which may take months to elucidate<sup>6</sup> HB 1083 is a step toward eliminating barriers to the critical behavioral health services an increasing number of very young children need. **Joyce Harrison MD, on behalf of the Infant Mental Health Association of Maryland and DC, urges the House Health and Government Operations Committee to issue a favorable report on HB 1083.**

<sup>6</sup>Leppert ML, Bettencourt A, Harrison JN. Behavioral Concerns in Early Childhood Consultation: Diagnostic Overshadowing and Comorbidity. *Clinical Pediatrics*. 2023;0(0). doi:10.1177/00099228231157960



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