

STATE OF MARYLAND

Community Health Resources Commission

45 Calvert Street, Room 336, Annapolis, MD 21401

Wes Moore, Governor; Aruna Miller, Lt. Governor; Edward J. Kasemeyer, Chair; Mark Luckner, Executive Director

February 27, 2025

The Honorable Vanessa E. Atterbeary Chair, House Ways & Means Committee Room 130, Taylor House Office Building Annapolis, Maryland 21401

Re: Letter of Information- House Bill 1305 – Maryland Consortium on Coordinated Community Supports – Workgroup and Study

Dear Chair Atterbeary:

Thank you for your leadership in ensuring that Maryland students are provided with the highest quality educational services they deserve. The Maryland Community Health Resources Commission submits this letter of information on behalf of House Bill 1305, Maryland Consortium on Coordinated Community Supports – Workgroup and Study.

The Maryland Community Health Resources Commission was created in 2005 to expand access to health care in underserved communities in Maryland and has a long history of serving Maryland residents. The Commission staffs the Consortium on Coordinated Community Supports and serves as its fiscal agent. The Consortium, established in the Blueprint, is creating a statewide framework to provide comprehensive, non-stigmatized, and holistic behavioral health services for all children.

In March 2024, the Consortium awarded its first round of grants, funding 137 programs at \$116 million, supporting programs in all 24 jurisdictions. From March to December 2024 (about half-way through the grant period), these programs collectively served over 77,000 students. It's important to note that these grant programs not only provide access to behavioral health and wraparound services, but also expand Maryland's capacity to deliver these services. As part of program implementation, Consortium grantees have hired 475 new behavioral health workforce members. More than 1,200 community providers and over 2,250 school staff are receiving training in evidence-based best practices. Based on data submitted by the grantees, there is evidence that positive outcomes are being achieved. Over 70% of students served are demonstrating improvement in their symptoms. Over 80% of students and families are reporting satisfaction with services received.

The Consortium meets regularly and reviews the progress of its grantees. Should the legislature wish to convene a workgroup as suggested in Section 1 of House Bill 1305, the Commission believes it will be able to staff the workgroup using existing resources.

The Consortium released its third Request for Applications in December and recently received 150 applications requesting \$151 million. These applications are under active review, and these grants are designed to maintain the services that are currently being provided across the state.

House Bill 1305 as drafted, would prohibit the Consortium from making any new awards until the Workgroup study is complete. This would result in an immediate disruption of services for students. Moreover, many of the community-based providers who received the awards are small businesses who rely on state and federal grant funding to survive. If the Consortium is prohibited from making new awards in FY 2026, these providers are unlikely to be able to sustain programming and staffing, and the programming outlined above would likely cease.

Thank you again for your support for the work of the Community Health Resources Commission and the Consortium on Coordinated Community Supports. Should you have any questions, please do not hesitate to contact me directly.

Sincerely,

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Mark Luckner, Executive Director

Maryland Community Health Resources Commission

cc: The Honorable April Miller

Members, House Ways & Means Committee

Ryan B. Moran, Acting Secretary, Maryland Department of Health

The Honorable Dave Rudolph, Chair, Consortium on Coordinated Community Supports

The Honorable Ed Kasemeyer, Chair, Maryland Community Health Resources Commission