

**TO:** The Honorable Ben Barnes, Chair  
*House Appropriations Committee*

**HB1181**

**Favorable**

**FROM:** Annie Coble  
*Assistant Director, Maryland Government Affairs*

**DATE:** March 3, 2026

**RE:** HB1181 FAMILY LAW - CHILDREN IN OUT-OF-HOME PLACEMENT -  
VOLUNTARY PLACEMENT AGREEMENTS

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Johns Hopkins **supports HB1181 Family Law- Children in Out-of-Home Placement – Voluntary Placement Agreements.** This bill alters the provisions related to voluntary placement agreements to balance the needs of the child, families and State. Improving the voluntary placement agreement (VPA) process is a necessary and important change that will only help the children in out-of-home placements.

As the Committee is aware, frequently, children are brought to hospitals and simply left there for days, weeks or even months, while appropriate placements can be identified by the Local Department of Social Services (LDSS). For example, in 2024 Johns Hopkins Children’s Center experienced 1,591 days of pediatric overstay. There are many reasons why placements cannot be identified including lack of capacity (which is the primary cause), and administrative barriers. The current VPA process is one of the administrative barriers.

A VPA is an agreement between families and LDSS to have their child placed outside of the home to have their treatment needs better met. The current process identifies no timeline for VPA’s leaving some cases undecided for months. This delay has a dramatic impact on the well-being of the children stuck in the inappropriate setting. A timeline would positively impact the children who are awaiting out of home placement. It would demand that a decision be made by the department so that a case can move forward.

Additionally, legislation was passed in in 2022 allowing Local Behavioral Health Authorities to authorize education funding for Medicaid-eligible children entering RCS, but that has never been implemented. This bill further clarifies those rules so the State can finally implement this legislation, and give children access to the education services they are entitled to.

This bill is a thoughtful, targeted, urgently necessary reform. It does not expand government authority, create expensive new programs, or invoke contentious debates. It simply: removes duplicative barriers; ensures predictable timelines; supports families and gets children into the right level of care faster.

Accordingly, Johns Hopkins respectfully requests a **FAVORABLE** committee report on HB1181.