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**SB 284: Budget Reconciliation and Financing Act of 2026
Position: FAVORABLE WITH AMENDMENT (Education: Community Supports Partnership Fund Cut)
March 4, 2026
Senate Budget and Taxation Committee**

Chair Guzzone, Vice Chair Rosapepe, and members of the Senate Budget and Taxation Committee, thank you for the opportunity to provide written testimony in opposition to the proposed Community Supports Partnership Fund budget cuts on page 9 of Senate Bill 284. My name is Laura Rogers, and I am the Nurse Practitioner Team Lead for the Summit Hall School Based Health Center in Gaithersburg, Maryland through Children's National Hospital. As the region's only standalone children's hospital, Children's National has been serving the nation's children since 1870. For 155 years, we have delivered expert pediatric care at every milestone. Sixty percent of our patients are residents of Maryland, and we maintain a large network of community-based pediatric practices, surgery centers and regional outpatient centers in Maryland. As we believe that partnering with schools will improve students' health and academic outcomes, we have led dozens of school health programs serving early childhood and K-12 school systems for nearly three decades, including providing a medical health care program to 10 Montgomery County Elementary School-Based Health Centers with additional sites starting in Prince George's County this year.¹ Our programs reach diverse populations including students, teachers, caregivers and other support professionals.

Children's National is strongly opposed to the proposed cuts of 20 million dollars to the Community Supports Partnership Fund in its projected FY27 budget, especially as it relates to school based behavioral health (SBBH). SBBH is a critical component of Maryland's continuum of behavioral health care and is an integral tool in addressing the growing children's behavioral health emergency.² According to the Centers for Disease Control and Prevention, 40% of high school students reported consistent feelings of hopelessness, and 20% seriously contemplated

¹ [Children's National Hospital 2024 School Health Programs and Initiatives Report](#)

² [AAP, AACAP, CHA declare national emergency in children's mental health | AAP News | American Academy of Pediatrics](#)

suicide.³ Given the significant amount of time children spend in school, and the difficulty many families have of accessing affordable and quality behavioral health care, SBBH services are necessary to ensure children are accessing some level of care and support. SBBH also provides essential preventive and early intervention services, which have been proven to reduce the need for intensive behavioral services and therefore save state governments a significant amount of funds to spend on other vital social services.⁴ We stand firm that removing funding for the Partnership Fund and reducing SBBH services by 20% will be detrimental for children and families across Maryland and will prevent students from accessing essential health services.

We applaud the Maryland General Assembly for initially approving funding for the Partnership Fund under the Blueprint legislation, and we urge the committee to now restore funding for this program to the agreed upon level. This program has been incredibly successful – according to the most recent Consortium on Coordinated Community Supports Statewide Impact Report, 136,945 students across the state are receiving behavioral health services, 705 new behavioral health workers hired, 1,620 behavioral health providers trained in proven practices to improve student outcomes, and 5,946 school staff trained in behavioral health practices to improve student outcomes⁵. This funding has also been effective at improving behavioral health outcomes and exhibiting positive behavioral health and emotional regulation skills.

Access to mental health care in our schools remains critically inadequate. For many of the underserved families we care for, schools are the only viable place for treatment. Barriers such as a lack of transportation, no insurance, and the inability of parents to take time off work make outside referrals nearly impossible. While virtual therapy is an option for some, many of our students lack the reliable technology or high-speed internet needed to participate.

The trauma our children are facing is extensive, driven largely by an increasingly unstable immigration climate. We are seeing more children than ever who have had parents, siblings, or close friends detained and/or deported. This constant threat of separation creates a state of toxic stress that manifests as severe anxiety, depression, and disruptive behavior in the classroom.

Currently, our school-based therapists have waitlists of **four to six months**. This forces staff into the unthinkable position of "ranking" high-needs children to decide who is most deserving of immediate care. For example, I have an elementary student with ADHD currently demonstrating

³ [Data and Statistics on Children's Mental Health | Children's Mental Health | CDC](#)

⁴ [Cost-effectiveness evidence of mental health prevention and promotion interventions: A systematic review of economic evaluations - PMC](#)

⁵ [Pages - Maryland-Consortium-on-Consolidated-Community-Supports](#)

violent classroom behaviors; under our current staffing, he is not estimated to begin therapy until next November.

Critically, these cuts do not just affect students; they place an unsustainable burden on our teachers and school nurses. When mental health services are slashed, our educators and nurses become the default first responders for psychological crises they are not fully equipped to manage. This leads to secondary traumatic stress and burnout. When a child's mental health is neglected, it is not just one student who suffers—the entire classroom faces the consequences. Even our best-staffed schools, equipped with multiple counselors and wellness trainers, are currently overwhelmed by the demand.

We strongly urge the committee to reconsider the detrimental proposed cuts to the Community Supports Partnership Fund and corresponding SBBH services as they will have a devastating effect on children and families across the state. Children's National emphasizes that by reducing the funding for this program, Maryland will end up with a greater need for intensive behavioral health services and higher health care costs. Thank you for the opportunity to submit testimony.

For more information, please contact:

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