



## DEPARTMENT OF HEALTH

*Wes Moore, Governor · Aruna Miller, Lt. Governor · Meena Seshamani, M.D., Ph.D., Secretary*

March 3, 2026

The Honorable Pamela Beidle  
Chair, Senate Finance Committee  
3 East Miller Senate Office Building  
Annapolis, MD 21401

### **RE: Senate Bill 942 – Assisted Outpatient Treatment – Surrender or Seizure of Firearms – Letter of Concern**

Dear Chair Beidle and Committee Members:

The Maryland Department of Health (the Department) respectfully submits this letter of concern for Senate Bill (SB) 942 – Assisted Outpatient Treatment – Surrender or Seizure of Firearms.

Effective October 1, 2026, this legislation would require, if a court orders an individual to comply with Assisted Outpatient Treatment (AOT) under Health-General Article, § 10–6A–08, Annotated Code of Maryland, to determine whether that same individual is likely to endanger or cause physical injury to themselves or another if they have access to a firearm. If the court so determines, the individual would be required to surrender to law enforcement any firearm in their possession and not to purchase or possess a firearm for the duration of the AOT order. Upon surrender, law enforcement would be required to provide an individual with information for retaking or permanently surrendering the firearm. The court would be empowered to impose sanctions for violating an order of firearm surrender, including use of its contempt powers.

The Department appreciates the intent behind this legislation. The Department's primary concern with SB 942 is that the proposed legislation empowers the court to utilize its contempt powers and sanctions against AOT respondents. The statute that established AOT programs explicitly prohibits the use of contempt powers against an individual that violates an AOT order (§ 10–6A–10 of the Health – General Article). Though SB 942 permits sanctions and contempt powers specific to firearm possession violations rather than violations of the AOT order itself, the introduction of contempt powers and sanctions into the AOT process potentially runs counter to the non-punitive, engagement-focused intent of the Maryland AOT program.

Additionally, further restricting the liberties of individuals with behavioral health needs may increase stigma by tying mental health conditions to a propensity for violence. Individuals with behavioral health conditions account only for a small fraction of perpetrators of violence; individuals who have exhibited previous violent behavior are much more likely to commit

violent crimes.<sup>1</sup> Under current Maryland law, individuals who are prohibited from possessing a regulated firearm include individuals who suffer from a mental disorder as defined in § 10–101(i)(2) of the Health 1 – General Article and have a history of violent behavior against the person or another; individuals who have been voluntarily admitted for more than 30 consecutive days to a facility as defined in § 10–101 of the Health – General Article; and individuals who have been involuntarily committed to a facility as defined in § 10–101 of the Health – General Article. The Department anticipates that AOT respondents for whom a firearm restriction is appropriate will meet criteria for prohibition of possession of a regulated firearm based on meeting one of these existing eligibility categories. Basing firearm restriction for AOT respondents on a finding that the AOT respondent meets this current existing criteria is potentially a more targeted approach than criteria proposed in SB 942. In addition, the processes contemplated for surrender and return of firearms may threaten the confidentiality otherwise afforded to individuals with an order for AOT.

The Department appreciates the Committee’s consideration of these concerns. If you would like to discuss this further, please do not hesitate to contact Meghan Lynch, Director of Governmental Affairs at [Meghan.Lynch@maryland.gov](mailto:Meghan.Lynch@maryland.gov).

Sincerely,



Meena Seshamani, M.D., Ph.D  
Secretary of Health

---

<sup>1</sup> Assey, D. Addressing Misconceptions about Mental Health and Violence. The Council of State Governments Justice Center (2021).

<https://csgjusticecenter.org/publications/addressing-misconceptions-about-mental-health-and-violence/>

Wolf, C.R. & Rosen, J.A. Missing The Mark: Gun Control Is Not The Cure For What Ails The U.S. Mental Health System, 104 *J. Crim. L. & Criminology* 851 (2015).

<https://scholarlycommons.law.northwestern.edu/jclc/vol104/iss4/4>