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**OFFICE OF THE ATTORNEY GENERAL**  
**CONSUMER PROTECTION DIVISION**  
**HEALTH EDUCATION AND ADVOCACY UNIT**

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March 30, 2026

To: The Honorable Pamela Beidle, Chair  
Finance Committee

From: Irnise F. Williams, Deputy Director, Health Education and Advocacy Unit

Re: House Bill 0883 - Consumer Protection – Artificial Intelligence – Behavioral  
Health Care Prohibitions **SUPPORT IN CONCEPT**

The Office of the Attorney General’s Health Education and Advocacy Unit (HEAU) supports the aims of HB883 and appreciates the Sponsor’s ongoing consideration of our input on the important protections the bill is intended to provide. This bill addresses evolving consumer protection issues of transparency, safety, and accountability in AI applications, particularly in behavioral health contexts. These protections are essential to prevent misleading representations and mitigate risks for vulnerable users.

Recent disturbing developments highlight the urgent need for this legislation. A [Danish study](#) reviewing nearly 54,000 mental health records found dozens of cases in which patients experienced worsened delusions, mania, suicidal thoughts, and eating disorders after interacting with AI chatbots, underscoring the potential for harm when AI enters clinical contexts without proper oversight. Multiple tragic teen suicides have been tied to AI chatbot interactions.

Tragically, in February 2025, a [young teen died by suicide](#) while interacting with an AI chatbot that failed to provide crisis intervention. This young boy sought support from an AI chatbot during a mental health crisis. Instead of directing him to trusted adults or professional help, the chatbot reportedly reinforced his suicidal thoughts and even assisted in drafting a suicide note—interactions his parents discovered only after his death.

In April 2025, Adam Raine died by suicide. His parents filed a wrongful-death lawsuit against OpenAI and its CEO, alleging that their son’s interactions with ChatGPT contributed to his suicide. According to the lawsuit, ChatGPT “actively helped Adam explore suicide methods,” encouraged him to drink, offered to write a suicide note, and urged him to keep his suicidal thoughts private.

The family contends that OpenAI failed to implement adequate emergency protocols during the conversation and that safeguards intended to direct users to crisis resources failed during extended sessions.

This pattern has emerged repeatedly, with families only discovering after their child's death that they had been turning to a chatbot in their final moments of crisis. These stories underscore the profound risks posed when unregulated AI systems are allowed to simulate therapeutic relationships or respond to vulnerable users without safety guardrails. It is a stark reminder that AI tools, while powerful, can dangerously mislead those in crisis, and that clear consumer protection is essential to prevent similar tragedies.

This bill will protect Marylanders by:

- ***Prohibiting AI from practicing behavioral healthcare*** - AI systems will be barred from diagnosing, treating, or counseling—ensuring only licensed professionals guide patient care.

Behavioral healthcare services require a high degree of professional judgment and human interaction. AI lacks the ability to holistically consider a patient's complex personal history, cultural context, and varied symptoms and factors among other things. The use of unregulated AI in these areas poses significant risks to patient safety, confidentiality, and autonomy. The prohibitions in this bill are rooted in ensuring patient safety, clinical accountability, ethical responsibility, and data privacy

- ***Creating statutory disclosures*** - AI tools must display clear and conspicuous notice that the consumer is not communicating with a human.

Presenting an AI persona as a real human is inherently deceptive, as is conduct that would cause a consumer to reasonably infer they are interacting with a real person. Such conduct is currently prohibited by the Consumer Protection Act, but we support inclusion of an affirmative statement. *We recommend strengthening the language to require that the disclosure be restated in each meaningful context, not just at the beginning of each use.*

- ***Creating safeguards*** – AI tools must detect and address suicidal ideations or expression of self-harm by referring to appropriate services.

AI tools are increasingly interacting with individuals who express distress, hopelessness, or suicidal ideation. When AI systems lack the ability to recognize this risk—or provide inaccurate or inappropriate responses—individuals can be placed in serious danger. Recent incidents have shown that unregulated AI platforms have failed to detect suicidal intent, worsened existing mental health symptoms, or provided advice that inadvertently encouraged self-harm. Requiring protocols that detect and address suicidal ideations or expression of self-harm and referring to appropriate services plays a critical role in public safety. As drafted, this bill makes clear that AI should not provide therapeutic guidance or clinical recommendations itself; instead, its role must be limited to identifying risk and directing individuals to licensed professionals or crisis services.

- ***Empowering Enforcement*** – The bill specifically enumerates that violations are unfair, abusive, or deceptive trade practices under the Consumer Protection Act, and subject to the enforcement provision of Title 13. *We would oppose efforts to remove any private cause of action under the Consumer Protection Act. We also note that lines 14-15 on page four aren't necessary to empower the Consumer Protection Division to act.*

The bill does the following, which could be refined through amendment:

- ***Allows for the use of AI by licensed providers for Administrative Tasks***

Although it is unclear why this provision is needed in this bill, behavioral health providers should be permitted to use AI for administrative tasks because doing so reduces burdens, increases access, and enhances accuracy, while still ensuring that all clinical care is delivered by licensed professionals. *We believe the bill should provide a greater framework to define the bounds of administrative tasks.*

- ***Allows for certain advertisements***

The bill regulates AI, so it is unclear why an advertising provision is necessary. But, as drafted, the bill exempts from coverage “Any advertisement, statement, or representation for or relating to any product meant to provide advice and guidance relating to behavioral health if the product does not claim to offer or provide behavioral health care.” *This exemption is vague and should be more narrowly tailored. At a minimum, the phrase “implicitly or explicitly” should be added after the word “claim.”*

Considering the clear evidence of harm, the increasing sophistication of AI systems, and the urgent need for guardrails to protect vulnerable Marylanders, HB 883 provides essential, timely, and responsible consumer protections. By drawing bright lines between safe administrative uses of AI and prohibited clinical functions, clarifying transparency requirements, and empowering meaningful enforcement, this bill ensures that innovation does not outpace public safety. The tragic cases in which AI systems have failed individuals in crisis demonstrate that the need for these protections are not theoretical; the protections are necessary to save lives, prevent misleading representations, and preserve the integrity of behavioral health care. With thoughtful amendments to clarify definitions, disclosures, and the enforcement structure, HB 883 can safeguard consumers while supporting ethical technological advancement.

We continue to work with the stakeholders to refine the amendments and ensure that the bill provides meaningful consumer protections and the tools to enforce the protections. For these reasons, we urge careful consideration of these recommendations and support for this critical legislation. Thank you for taking this information into consideration when reviewing HB883.

cc: Delegate Lily Qi