

HB0883_MHAMD_FAV.pdf

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Position: FAV

HB 883 – Consumer Protection – Artificial Intelligence – Behavioral Health Care Prohibitions

Senate Finance Committee

April 1, 2026

Position: FAVORABLE

Mental Health Association of Maryland (MHAMD) is a nonprofit education and advocacy organization that brings together consumers, families, clinicians, advocates and concerned citizens for unified action in all aspects of mental health and substance use disorders (collectively referred to as behavioral health). We appreciate the opportunity to provide this testimony in support of HB 883.

While Artificial Intelligence (AI) holds the promise of being able to assist behavioral health providers with certain tasks, provide some basic support to consumers, and ease the behavioral health workforce crisis, protections for consumers must be put into place. HB 883 would establish critical safeguards.

Any consumer using an AI behavioral health platform must be provided with loud and clear information that they are not interacting with a human. Users must be regularly informed that the responses they are receiving are not human responses. This is especially important since AI chatbot companies have been making efforts to deliberately mislead consumers into thinking that they are interacting with a human mental health provider.¹

AI chatbot companies must also be required to ensure that their chatbots detect when a consumer expresses any sign of suicidal ideation or self-harm and responds appropriately by referring the user to crisis response and behavioral health services. There are dangers associated with AI therapy. AI chatbots can overly-empathize with a user and endorse actions that should not be endorsed, such as the desire to do self-harm. AI companies must prevent this from ever happening again and guarantee that consumers will instead receive correct advice.²

AI, while a promising tool for behavioral health, also still holds some risks. HB 833 would protect consumers from unscrupulous AI companies and put key protections into place. Therefore we urge a favorable report.

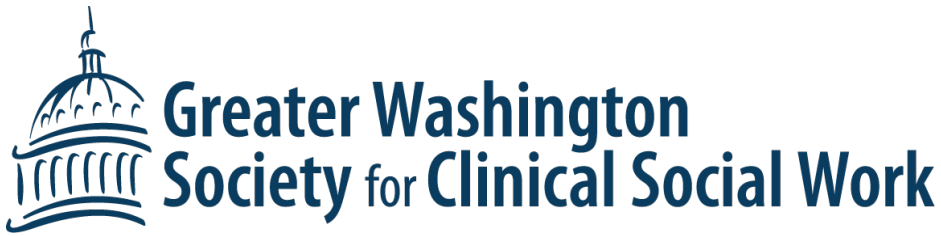
¹ Susan Trachman. The Hidden Dangers of AI-Driven Mental Health Care. Psychology Today (2026).
<https://www.psychologytoday.com/us/blog/its-not-just-in-your-head/202601/the-hidden-dangers-of-ai-driven-mental-health-care>

² Sherri Gardner. Experts Caution Against Using AI Chatbots for Emotional Support. Columbia University (2025).
<https://www.tc.columbia.edu/articles/2025/december/experts-caution-against-using-ai-chatbots-for-emotional-support/>

HB0883_GWSCSW_FAV

Uploaded by: Judith Gallant

Position: FAV



Senate Finance Committee

April 1, 2026

House Bill 883 – *Consumer Protection – Artificial Intelligence – Behavioral Health Care Prohibitions*

POSITION: SUPPORT

The Greater Washington Society for Clinical Social Work (GWSCSW) was established in 1975 to promote and advance the specialization of clinical practice within the social work profession. Clinical social workers are licensed to evaluate, diagnose and treat mental disorders and substance use and addictive disorders and are licensed as medical professionals. Through our lobbying, education, community building, and social justice activities, we affirm our commitment to the needs of those in our profession, their clients, and the community at large. The Maryland Legislation and Advocacy Committee of GWSCSW **strongly supports House Bill 883.**

House Bill 883 ensures that any providers of artificial intelligence (AI) in the state of Maryland clarify to users that the AI product, bot, or program is not a healthcare provider and may not provide a service or experience that would constitute the practice of behavioral health care if provided by a behavioral health care provider. The “practice of behavioral health care” includes evaluation, diagnosis, or treatment of psychiatric or mental disorders. House Bill 883 specifically requires conspicuous notice that a consumer is not communicating or interacting with a human. It also requires the AI program to take steps to detect and address suicidal ideations or expression of self-harm by the user. The AI is required to refer the user to behavioral health services or to the Maryland Behavioral Health Crisis Response System’s services when these issues are detected. If the AI program does not have these protocols successfully in place, the developer is subject to a civil penalty of \$1,000,000 for each violation and authorizes the Attorney General to investigate and bring an action for an alleged violation of this Act.

As artificial intelligence continues to grow in its impact on our lives, we have both benefited from its ability to gather large amounts of information quickly, as well as suffered intensely from its ability to lead impressionable individuals, particularly young people, to tragic, self-destructive acts. Strengthening protocols that distributors are required for AI to support are necessary to keep Marylanders safe from the risks that have become evident from the use of these non-human interactions with AI. Even programs that are not designed to provide mental health care can impact vulnerable individuals and lead them to misinterpret language used by AI as support for suicidal or homicidal thoughts. For these reasons we strongly urge passage of this bill.

For more information:

Judy Gallant, LCSW-C

Co-Chair, GWSCSW MD Legislation & Advocacy Committee

judy.gallant@verizon.net

NASW Maryland - 2026 HB 883 FAV - Consumer Protect

Uploaded by: Karessa Proctor

Position: FAV



Senate Finance Committee

April 1, 2026

HB 883 - Consumer Protection - Artificial Intelligence - Behavioral Health Care Prohibitions

Position: SUPPORT

Dear Chair and Members of the Committee:

On behalf of the Maryland Chapter of the National Association of Social Workers (NASW-MD) Chapter, I respectfully submit this testimony in strong support of HB 883 – Consumer Protection: Artificial Intelligence – Behavioral Health Care Prohibitions.

NASW-MD represents thousands of licensed social workers across Maryland who practice in schools, hospitals, community behavioral health agencies, private practice, government, and nonprofit settings. Our members serve children, families, older adults, veterans, and individuals experiencing mental health and substance use challenges. We are committed to ensuring that Marylanders receive safe, ethical, and high-quality behavioral health services.

HB 883 is a necessary and timely response to the rapid growth of artificial intelligence technologies being marketed in behavioral health contexts. While innovation can improve access and efficiency, it must not outpace consumer protections. This bill appropriately establishes guardrails to ensure that AI systems are not misrepresented as behavioral health providers and do not function in ways that mislead or endanger Maryland residents.

Licensed behavioral health professionals, including social workers, complete years of education, supervised training, examination, and ongoing continuing education. They are bound by professional licensing laws and the NASW Code of Ethics, which requires practitioners to protect client well-being, obtain informed consent, maintain confidentiality, and practice within their scope of competence. AI systems, regardless of sophistication, are not licensed professionals. They are not accountable to a licensing board, do not carry malpractice insurance, and cannot exercise professional judgment rooted in lived human experience, relational context, or ethical reasoning.

HB 883 protects consumers by prohibiting developers from representing AI systems as capable of providing behavioral health care. This distinction is critical. Marylanders seeking help for

(over)

depression, trauma, anxiety, or suicidal thoughts may be particularly vulnerable to misleading claims. Clear statutory language preventing AI from being marketed or functioning as a substitute for professional care ensures that individuals are not diverted away from appropriate treatment.

Additionally, the bill's requirement that AI systems interacting with users in behavioral health contexts provide clear notice that the user is engaging with AI promotes transparency and informed decision-making. Individuals deserve to know whether they are communicating with a licensed human provider or a machine. Transparency is foundational to ethical practice and consumer protection.

NASW-MD also supports provisions requiring AI tools to implement protocols to identify and respond appropriately to expressions of suicidal ideation or self-harm. Social workers are trained to assess risk, intervene in crises, and connect individuals to emergency and ongoing supports. If AI tools are permitted in behavioral health-adjacent spaces, they must at minimum contain safeguards that direct individuals to crisis resources such as 988 and other appropriate services. Failure to include such measures could result in serious harm.

Importantly, HB 883 does not prohibit innovation. Rather, it establishes reasonable boundaries to ensure that technological advancement does not come at the expense of safety, ethical standards, or consumer trust. Maryland has long been a leader in behavioral health reform and consumer protection. This bill continues that leadership by proactively addressing the intersection of artificial intelligence and mental health care.

For these reasons, NASW-MD respectfully urges a Favorable Report on HB 883. We appreciate the Committee's attention to safeguarding Marylanders while allowing responsible innovation to move forward.

Thank you for your time and consideration. Please do not hesitate to contact us if we can provide additional information or technical assistance.

Sincerely,

Karessa Proctor, BSW, MSW
Executive Director: Maryland, Metro DC, Delaware Chapters
National Association of Social Workers

Testimony to Sen. Finance on HB883 Consumer Protec

Uploaded by: Marceline White

Position: FAV



Testimony to Senate Finance

HB883 Consumer Protection – Artificial Intelligence – Behavioral Health Care Prohibitions Position: FAV

April 1, 2026

The Honorable Pam Beidle, Chair
Senate Finance Committee
3 East, Miller Senate Office Building
Annapolis, Maryland 21401
cc: Members, Senate Finance

Chair Beidle and Members of the Committee:

Economic Action Maryland Fund submits this letter in support of HB995. HB995 prohibits behavioral health care providers from using AI to provide an assessment, diagnosis, treatment plan, counseling, or therapeutic communications.

As AI becomes increasingly popular in a wide-range of professional settings, it is critical that care is taken to ensure that it is used judiciously, particularly when dealing with sensitive information and in particular settings.

When using AI in any healthcare setting, but particularly when providing sensitive treatment for behavioral health, caution is called for. However, the need for a cautious approach is bolstered by recent research. In an October 2025 [study](#) at Brown University, chatbots systematically violate ethical standards by *inappropriately navigating crisis situations, providing misleading responses that reinforce users' negative beliefs about themselves and others, and creating a false sense of empathy*. The study also found that AI exhibited discrimination, failed to contextualize situations based on lived experience, and responded indifferently to crisis situations like suicidal ideation.

A [Stanford University study](#) drew similar conclusions while also finding that AI exhibited greater stigma towards those with alcohol dependence or schizophrenia compared to individuals with depression which may reinforce negative self-images among those seeking support.

While therapists may also exhibit concerning behavior, unlike AI, therapists are held accountable by their governing boards, are required to be mandatory reporters, and do not hallucinate as AI has been known to do.

Although patients may be aware that chatbots are not real therapists, individuals may still develop a dependence on them and an emotional attachment.

Economic Action (formerly the Maryland Consumer Rights Coalition) champions economic rights and housing justice through advocacy, research, consumer education, and direct service. Our 12,500 supporters include consumer advocates, practitioners, and low-income and working families throughout Maryland.



HB883 addresses these concerns by prohibiting a developer’s AI from making any claims that it can provide behavioral health. The bill also provides clear and conspicuous notice to patients that they are not communicating with a human. It also requires the developer to establish protocols should an individual exhibit signs of suicidal ideation and sets out penalties for violations.

HB883 is needed to address this critical health issue, protect Marylanders, and establish appropriate guardrails around the use of AI in behavioral health.

For all these reasons, we support HB883 and urge a favorable report.

Best,

Marceline White
Executive Director

Economic Action (formerly the Maryland Consumer Rights Coalition) champions economic rights and housing justice through advocacy, research, consumer education, and direct service. Our 12,500 supporters include consumer advocates, practitioners, and low-income and working families throughout Maryland.

2209 Maryland Ave · Baltimore, MD 21218 | www.econaction.org
Marceline White · Marceline@EconAction.org | Jennifer Bevan-Dangel · Jennifer@EconAction.org

Testimony in Support of House Bill 883 - Crossover

Uploaded by: Megan O'Brien

Position: FAV

Testimony in Support of House Bill 883 – Consumer Protection – Artificial Intelligence – Behavioral Health Care Prohibitions
Before the Senate Finance Committee

Chair Beidle, Vice Chair Hayes, and Members of the Committee:

Thank you for the opportunity to provide testimony in support of House Bill 883 – Consumer Protections – Artificial Intelligence – Behavioral Health Care Prohibitions. My name is Megan O’Brien, and I serve as the Advocacy Specialist at EveryMind, a nonprofit organization that has served Maryland’s communities for nearly 70 years by providing prevention, early intervention, and mental health services across the continuum of care, including running one of the state’s 988 Suicide and Crisis Lifelines.

We rely on our behavioral health workforce, which includes several professionally licensed individuals such as social workers, psychologists, and psychiatrists, to provide services to all Marylanders in need of support. The Maryland Health Care Commission’s 2024 report “Investing in Maryland’s Behavioral Health Talent” stated that the significant shortage in this workforce is impacting access to care and will continue to get worse as the demand for behavioral health professionals increases. By 2028, Maryland will need more than 32,000 more workers to meet the demand for behavioral healthcare. Without a growing cohort of behavioral health professionals, Marylanders in need will go without the mental health supports they require, which may in turn lead them to seek support from other sources like artificial intelligence.

EveryMind strongly supports House Bill 883 because it provides important protections for vulnerable Marylanders seeking support in moments of crisis. The inability to access timely and affordable care can force some to turn to AI chatbots for comfort, advice, and even therapeutic support. These platforms lack the training of licensed professionals, only reflect back the users’ own thoughts and intentions to them, and in some cases may put the user in more harm than they were before they started chatting.

Artificial intelligence is not equipped with the skills required to safely replace a licensed professional. A 2025 Stanford study examined the ways that chatbots responded to users experiencing severe mental health concerns, such as suicidal ideation and psychosis, and discovered that the chatbots could not provide appropriate responses, in fact they often gave responses that escalated the crises instead of de-escalating them. The conclusion of the researchers was that chatbots could not – and should not – replace the key foundations of therapy provided by humans. The human-to-human connection provides understanding, empathy, and stakes that you just can’t achieve with a machine.

Requiring these platforms to identify when users are exhibiting serious mental health conditions and refer them to behavioral health or crisis response services is the bare minimum we can ask of these companies. Taking this important step can help save lives.



At EveryMind, we see the daily impact of life-saving services each time we answer a call to the 988 hotline from someone in crisis. For this, we urge a favorable report on House Bill 883. Thank you for your consideration, and for your leadership on this critical issue.

HB 883_3rd_BH & AI_SWA.pdf

Uploaded by: Allison Taylor

Position: FWA



Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc
4000 Garden City Drive
Hyattsville, MD 20785

April 1, 2026

The Honorable Pamela Beidle
Senate Finance Committee
3 East, Miller Senate Office Building
11 Bladen Street
Annapolis, Maryland 21401

RE: Support with Amendments – House Bill 883 (Health Care – Artificial Intelligence)

Dear Chair Beidle and Members of the Committee:

On behalf of Kaiser Permanente, I am writing to express our support for House Bill 883 with a specific clarifying amendment. Kaiser Permanente is committed to the responsible use of technology to enhance patient care, and we appreciate the Committee's work in addressing the evolving landscape of artificial intelligence in healthcare.

While we support the underlying goals of the legislation, we believe it is essential to distinguish between the use of AI as a replacement for clinical judgment and its use as a supportive tool for behavioral health providers. To that end, we request an amendment to clarify that the provisions of this bill do not apply to behavioral health providers who utilize AI to complement or supplement treatment, rather than to replace the essential role of the human provider.

In behavioral health, AI can offer vital support—such as assisting with documentation, providing clinical decision support, or offering supplemental digital therapeutics—that improves the efficiency and effectiveness of care without removing the practitioner from the center of the therapeutic relationship. Ensuring that these supplemental tools are not inadvertently restricted will allow providers to continue leveraging innovation to expand access and improve patient outcomes.

We look forward to working with you and the Committee to ensure this legislation achieves its goals while protecting the ability of providers to use innovative tools responsibly. Thank you for the opportunity to comment. Please feel free to contact me at Allison.W.Taylor@kp.org or (919) 818-3285 with questions.

Sincerely,

A handwritten signature in cursive script that reads "Allison Taylor".

Allison Taylor
Head of Government Relations
Kaiser Permanente Mid-Atlantic Region

AMENDMENTS TO HB 883
(Third Reading File Bill)

AMENDMENT NO. 1

On page 3, in line 8, after “SELLS,” insert “OR”; in line 9, strike “GIVES, OR OTHERWISE PROVIDES”; in line 17, after “CARE” insert “INDEPENDENT FROM OVERSIGHT OF A LICENSED BEHAVIORAL HEALTH CARE PROVIDER”; in line 18, after “SELL,” insert “OR” and in the same line strike “GIVE, OR OTHERWISE PROVIDE”.

AMENDMENT NO. 2

On page 4, in line 26, after “TO” insert “COMPLEMENT OR SUPPLEMENT BEHAVIORAL HEALTH CARE SERVICES OR”.

HB 883_MDCC_Consumer Protection-Artificial Intelli

Uploaded by: Hannah Allen

Position: UNF



House Bill 883

Position: Unfavorable

Committee: Finance

Date: April 1, 2026

Founded in 1968, the Maryland Chamber of Commerce (the Chamber) is the leading voice for business in Maryland. We are a statewide coalition of more than 7,000 members and federated partners, and we work to develop and promote strong public policy that ensures sustained economic growth for Maryland businesses, employees, and families.

House Bill 883 (HB 883) prohibits artificial intelligence developers from representing that an AI system is a behavioral health care provider or capable of providing behavioral health care, prohibits offering AI programmed to provide services that would constitute the practice of behavioral health care if delivered by a licensed provider, requires consumer-facing AI systems to disclose at the beginning of each use that a user is not communicating with a human, mandates suicide ideation detection and referral protocols, and authorizes significant penalties for violations, including enforcement under the Maryland Consumer Protection Act.

We appreciate the sponsor's goal of protecting vulnerable Marylanders seeking behavioral health support. However, HB 883 takes an overly broad approach that extends far beyond AI systems designed or marketed to provide behavioral health services and instead captures a wide range of general-purpose AI tools used every day by families and businesses. While stakeholders raised concerns and suggested narrowing the bill to better align with approaches taken in other states, the version passed by the House retains expansive definitions while adding additional enforcement mechanisms that increase business risk and liability.

First, HB 883 extends well beyond AI systems designed, marketed, or intended to provide behavioral health services. As written, the bill applies sweeping disclosure and suicide detection requirements to any consumer-facing AI system that may encounter behavioral health-related content in conversation. This would effectively encompass general-purpose AI assistants, productivity tools, customer service chatbots, and voice-enabled platforms that are not designed to provide clinical care and do not hold themselves out as licensed behavioral health providers. Requiring every such system to provide disclosures "at the beginning of each use," regardless of context, transforms a targeted consumer protection concept into a blanket mandate affecting virtually all AI-enabled products used by Maryland residents and businesses.

Second, the "beginning of each use" disclosure requirement would significantly disrupt product functionality and user experience, particularly for voice-first and ambient computing

technologies. For tools designed to provide seamless, hands-free interactions, such as checking the weather, setting reminders, or retrieving general information, mandatory repeated disclosures unrelated to the user's request would degrade usability without providing meaningful consumer benefit. Maryland families and businesses rely on these tools daily for efficiency and productivity. Imposing repetitive warnings in non-clinical contexts does not enhance safety and instead risks making common technologies less practical or even unusable within the state.

Third, HB 883 imposes clinical-style obligations on products that are not health care services. The bill requires AI systems to implement protocols to detect suicidal ideation and refer users to behavioral health services or the Maryland Behavioral Health Crisis Response System. While well intentioned, applying such requirements to general-purpose AI platforms creates substantial technical, operational, and liability challenges. Developers of non-clinical tools would be forced to implement and maintain clinical-grade screening mechanisms across all interactions, subject to significant penalties, which will likely deter innovation or limit product availability in Maryland.

Finally, the addition of enforcement under the Maryland Consumer Protection Act, including a private right of action, raises serious concerns for the business community. Allowing private lawsuits for alleged violations, particularly in the context of broadly defined and highly technical requirements, creates significant litigation risk and uncertainty. Private rights of action are often accompanied by an increase in opportunistic or frivolous lawsuits, diverting resources away from innovation and compliance and toward legal defense. This is especially concerning where the underlying obligations are not clearly tailored to the actual risk posed by the technology. Expanding liability in this way, without first narrowing the scope of the bill, compounds the negative impact on businesses and could discourage companies from offering AI-enabled products in Maryland.

More balanced approaches are available. Other jurisdictions have focused regulation specifically on AI systems designed or marketed to provide behavioral health services, while exempting general-purpose tools. A narrower framework would better align regulatory obligations with actual risk while still protecting individuals seeking behavioral health care.

For these reasons, the Maryland Chamber of Commerce respectfully requests an **unfavorable report on HB 883**.

PFD_for Senate_[MD] HB 883_AI_HC_TechNet.pdf

Uploaded by: margaret durkin

Position: UNF

March 30, 2026

The Honorable Pam Beidle
Chair
Senate Finance Committee
Maryland Senate
3 East Miller Senate Office Building
11 Bladen Street
Annapolis, MD 21401

RE: HB 883 (Qi) - Consumer Protection - Artificial Intelligence - Behavioral Health Care Prohibitions – Unfavorable

Dear Chair Beidle and Members of the Committee,

On behalf of TechNet, I'm writing to share comments on HB 883.

TechNet is the national, bipartisan network of technology CEOs and senior executives that promotes the growth of American innovation by advocating a targeted policy agenda at the federal and 50-state level. TechNet's diverse membership includes more than 100 dynamic American businesses ranging from startups to the most iconic companies on the planet and represents five million employees and countless customers in the fields of information technology, artificial intelligence, e-commerce, the sharing and gig economies, advanced energy, transportation, cybersecurity, venture capital, and finance.

TechNet supports the underlying concept of HB 883 – to protect Marylanders seeking behavioral health support. However, we have several concerns with HB 883.

HB 883 requires every AI system to provide disclosure "at the beginning of each use" and implement suicide detection protocols, even if the AI is not designed for, marketed as, or capable of providing behavioral health care. This means voice assistants would have to announce "I'm not a human" before answering questions about the weather, playing music, or setting timers. As a result, users will lose the natural, seamless experience that makes AI assistants useful, while gaining no meaningful safety benefit since these products already don't claim to provide clinical care.

Additionally, the bill requires suicide ideation detection and automatic referral protocols for any AI that might encounter behavioral health topics in conversation, regardless of whether the product is designed for mental health support. The problem with this mandate is that general-purpose AI assistants would need to

implement clinical-grade mental health screening for every interaction, even though they're productivity and convenience tools, not healthcare products. This creates significant liability exposure for products that already responsibly direct users to professional help when appropriate. We are also concerned about the definition of developer and believe this definition should be clarified further to avoid it conflating with deployers operating in the AI space.

The bill, as amended by the House, provides for a private right of action (PRA). We believe that PRAs lead to frivolous lawsuits and only benefit a small subset of industry operating in the litigation space. We believe any enforcement should rest solely with the Attorney General.

Other states have crafted narrower legislation that focuses on AI systems specifically designed or marketed for behavioral health services, with exemptions for general-purpose tools. By failing to distinguish between dedicated mental health chatbots and general assistants, HB 883 either drives useful AI products out of Maryland or forces companies to implement expensive, ineffective compliance measures that don't improve safety. A targeted approach would protect vulnerable users without negatively impacting everyday technology.

For the reasons stated above, TechNet is opposed to HB 883 in its current form. Please don't hesitate to reach out with any questions.

Sincerely,

Margaret Durkin

Margaret Durkin
TechNet Executive Director, Pennsylvania & the Mid-Atlantic

MD HB 883 - Chatbots (Behavioral Health) - Oppose

Uploaded by: Tahra hoops

Position: UNF



April 1, 2026

The Honorable Pamela Beidle
Chair
Committee on Finance
Room 3 East Wing, Miller Senate Office Building
11 Bladen Street
Annapolis, MD 21401-1991

RE: Oppose HB 883 - Consumer Protection – Artificial Intelligence – Behavioral Health Care Prohibitions

Dear Chair Beidle and members of the Committee,

On behalf of Chamber of Progress, a tech industry association supporting public policies to build a society in which all people benefit from technological advances, **I respectfully urge you to oppose HB 883**. The bill rightly targets AI products that misrepresent themselves as behavioral health providers, but its disclosure and safety-protocol requirements sweep in every consumer AI product in the state, from voice assistants to coding tools. The result would be degraded everyday products and heavy compliance burdens on tools with no connection to mental health care.

HB 883's requirements apply to all consumer AI, not just behavioral health products

HB 883's prohibitions on AI misrepresenting itself as a behavioral health provider are reasonable and targeted. The problem is Section 14-5102(B), which requires every AI product sold or provided to Maryland consumers to display a disclosure at the beginning of each use and implement suicide-detection and crisis-referral protocols. These obligations are not limited to systems designed for or likely to encounter behavioral health conversations. They apply equally to a voice assistant answering a weather question, a coding tool helping a developer debug software, and a photo editor applying filters.

The amendments retain this universal applicability and do not create a risk-based distinction between general-purpose AI systems and those intended for behavioral health interactions.

Products with no behavioral health function would need to build and maintain mental health screening infrastructure simply because they use AI. This is a blanket mandate

that treats a coding assistant and a therapy chatbot as though they present the same risk.

The per-use disclosure requirement would break the products Marylanders depend on

Section 14-5102(B)(1) requires AI systems to display a notice that the consumer is "not communicating with a human" at the beginning of *each* use. For text-based applications, this adds friction to every session, but for voice-first platforms and ambient computing products, it would disrupt the experience entirely.

A Maryland family using a voice assistant for morning routines would hear "I am not a human" or "I am not a licensed provider" before every command: before checking the weather, before playing music, before setting a timer. Over the course of a day, that adds up to dozens of interruptions for a product that has never claimed to be a therapist and never will.

These tools work because they are fast and seamless. Mandatory per-interaction warnings strip away that value without any corresponding safety benefit, since general-purpose assistants already do not represent themselves as behavioral health providers. The amendments do not modify the requirement that this notice be provided at the beginning of each use, preserving the same disruptive user experience concerns.

Overbroad requirements risk pushing AI products out of Maryland

Faced with the choice between retrofitting every product with behavioral health compliance infrastructure or withdrawing from a single state market, many developers will choose the latter. The bill's \$1,000,000 per-violation penalty reinforces that calculus: for a general-purpose AI tool processing millions of interactions, the liability exposure of serving Maryland consumers may simply outweigh the cost of leaving. The residents who lose access first are those who depend on free or low-cost AI tools for schoolwork, accessibility, and daily tasks.

While the amended bill shifts violations into the Maryland Consumer Protection Act framework, it still preserves significant enforcement authority and liability exposure that will weigh heavily on developers considering whether to operate in the state.

We support the principle that AI products should not deceive consumers into believing they are receiving care from a licensed professional, and we agree that AI systems designed for behavioral health conversations should include appropriate safety protocols. But those obligations should be scoped to the products that actually present the risk. For these reasons, **I respectfully urge you to oppose HB 883.** Applying behavioral health compliance requirements to all consumer AI would degrade the tools Maryland residents rely on daily without protecting those who need behavioral health support.

Even as amended, HB 883 fails to adopt a targeted, risk-based framework and instead maintains broad, one-size-fits-all requirements that will burden low-risk technologies.

We welcome the opportunity to work with the Committee on a more targeted approach.

Sincerely,

A handwritten signature in black ink, appearing to read "Aden H.", with a horizontal line underneath the name.

Aden Hizkias
Associate Policy Director

HB0883 - Senate_LOI_MTC_Consumer Protection - AI -

Uploaded by: Drew Vetter

Position: INFO



Senate Finance Committee

April 1, 2026

House Bill 883 – *Consumer Protection – Artificial Intelligence – Behavioral Health Care Prohibitions*

LETTER OF INFORMATION

The Maryland Tech Council (MTC), with over 800 members, is the State’s largest association of technology companies. Our vision is to propel Maryland to be the country’s number one innovation economy for life sciences and technology. MTC brings the State’s life sciences and technology communities into a single, united organization that empowers members to achieve their goals through advocacy, networking, and education. On behalf of MTC, we submit this **letter of information** on House Bill 883.

The MTC supports the intent of this bill, which is to ensure that individuals seeking behavioral or mental health care are protected from potential harm that could result from the use of certain artificial intelligence (AI) systems. The MTC fully agrees with the bill’s provisions that seek to prevent AI systems from providing services that should be provided by human behavioral health care providers.

Over the last several years, dozens of bills have been introduced addressing specific use cases for AI technology. The number of new policy proposals in this emerging, constantly evolving area led the MTC to draft an “Artificial Intelligence Policy Statement” in 2024. We have attached that policy to today’s testimony. We would like to draw attention to one item from our policy platform, which is that “Any new requirements must be clear and specific. Overly broad requirements make it difficult for the industry to evaluate the impact and comply with.”

We would note that this bill, which is intended to protect individuals using AI tools in the behavioral and mental health context, appears drafted to be broadly applied to all AI systems and tools, including required disclosures and mandatory screening and referral protocols, whether or not the AI tool being used is specific to behavioral health. Another component of our policy platform is that “Consideration should always be given to smaller and medium-sized local businesses when AI laws or regulations are being adopted.” Building in broadly applicable, specific protocols to be followed across all AI tools, even if outside the intended scope of the bill, may be particularly onerous for smaller, locally based AI firms to comply with.

Consistent with the MTC’s policy statement, we encourage the sponsor and committee to consider an approach that applies more narrowly to the harm the legislation seeks to prevent.

For more information call:

Andrew G. Vetter

J. Steven Wise

Danna L. Kauffman

Christine K. Krone

410-244-7000



Maryland Tech Council

Artificial Intelligence Policy Statement

The continued development and adoption of artificial intelligence (AI) has the potential to transform many aspects of society and our daily lives, from how we interact online to education, e-commerce, healthcare delivery, finance, and many other applications. The Maryland Tech Council (MTC) is optimistic about the promise of AI to be a force of good and positive societal change. However, MTC is clear that adoption of AI carries risks that must be considered by innovators and policymakers. Elected leaders, regulators, and the private sector must work together to ensure that the use of AI is safe, ethical, responsible, and trustworthy. We must protect against unintended harms such as bias and disproportionate impact on marginalized communities.

The promise and risks inherent in the adoption of AI has policymakers at the federal, state, and local levels of government considering laws, regulations, and other measures to examine the complex issues presented above. As such, the MTC has developed a set of factors to be considered by policymakers and regulators when considering new efforts to govern the use and adoption of AI.

- Ensure broad representation of industry sectors on new commissions and boards. There are different use cases and impacts depending on sector, be it healthcare, finance, education, etc. To the extent these impacts are being regulated, policymakers should bring subject matter experts and stakeholders into the discussion.
- Policymakers are considering various new assessments or certifications of AI tools. Any new requirements must be clear and specific. Overly broad requirements make it difficult for industry to evaluate impact and comply with. Consider using risk assessment standards and practices that already exist, such as the NIST AI Risk Management Framework.
- Be mindful in defining new terms, ensuring that there are not multiple definitions of the same or similar terms and that there is not conflict with Federal definitions. Strive for consistency with other states so as not to have a patchwork of laws from state to state. Avoid creating overly broad discretion of terms that subject companies to liability such as the definition of a harmful or high-risk action or impact.
- Special deliberation should occur around the challenges and opportunities presented by Open Source AI. Open Source AI is critical to the democratization of AI technologies beyond a few massive technology providers. Yet, Open Source AI systems must be rigorously reviewed and assessed from a security perspective. Policy leaders should consult with the private sectors to ensure an understanding of the benefits of Open Source AI while providing reasonable expectations to securing these platforms.

- The implications on the workforce must be incorporated into AI policy discussions. A majority of companies lack enough skilled employees for future growth. AI developers, learning institutions, training programs, and prospective workers must coordinate to ensure we have an AI-ready workforce.
- Consideration should always be given to smaller and medium sized local businesses when new AI laws or regulations are being adopted. Far too often, these laws are considered with only the largest technology companies in mind, when smaller and locally based businesses are impacted just the same. Often, these smaller companies lack the resources to quickly adapt and comply with complex new laws.
- Enforcement mechanisms must be calibrated to be consistent with the level of risk that AI solutions present, especially in cases where there is a new risk created by AI that is not already addressed. Liability and enforcement standards should be thoughtful and proportionate, with an emphasis on compliance over being punitive. Distinctions between 3rd party services, technology providers, and end-users should be accounted for, as well as recognition of good faith efforts to develop technology that evolves and improves over time.

HB883 AI BH Prohibitions SIC Crossover.pdf

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

ANTHONY G. BROWN
Attorney General

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