

MARYLAND PSYCHIATRIC SOCIETY



February 6, 2026

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The Honorable Heather Bagnall
Health Committee
241 Taylor House Office Building
Annapolis, Maryland 21401

Support: House Bill 658: Maryland Department of Health - Community Forensic Aftercare Program - Established

Dear Chairwoman Bagnall & Members of the Committee:

The Maryland Psychiatric Society (MPS) and the Washington Psychiatric Society (WPS) are state medical organizations whose physician members specialize in diagnosing, treating, and preventing mental illnesses, including substance use disorders. Formed more than sixty-five years ago to support the needs of psychiatrists and their patients, both organizations work to ensure available, accessible, and comprehensive quality mental health resources for all Maryland citizens and strive through public education to dispel the stigma and discrimination of those suffering from a mental illness. As the district branches of the American Psychiatric Association covering the state of Maryland, MPS/WPS represent over 1200 psychiatrists and physicians currently in psychiatric training.

MPS/WPS support House Bill 658: Maryland Department of Health - Community Forensic Aftercare Program - Established. The Community Forensic Aftercare Program (CFAP) is an invaluable part of our forensic psychiatric system in the State of Maryland. They serve an important role of monitoring patients who have been found Not Criminally Responsible (NCR) for crimes in the state but have been granted a conditional release by the court. Patients on conditional release are no longer committed to a state hospital but are released into community treatment programs. They are required to follow certain conditions for a term determined by the court to remain in the community. For example, conditional releases typically include the terms that the patient may not use illicit substances, may not obtain new criminal charges, and must attend their psychiatric appointments. When CFAP finds that a patient is not abiding by their conditional release, they bring this information to the court. The court then determines whether the patient must return to the state hospital for further treatment of their mental illness. The purpose of this system is two-fold: ensure treatment of symptoms of patients who are suffering from mental illnesses that may render them dangerous, and keep the community safe from individuals who are at risk of dangerous behaviors due to their mental illness.

HB 658 codifies the CFAP into law and puts forth standard procedures of monitoring of those found NCR who are on conditional release. Those that have been found NCR are at future risk of dangerous behaviors due to their mental illness as demonstrated by their NCR adjudication. Passage of this bill could enable the CFAP to take a closer look at the quality of care given to our forensic patients in the community and intervene more quickly on patients who are decompensating. This is a much-needed safeguard for people in the community who become dangerous when psychiatrically decompensated.

HB 658 would also establish standard monitoring of individuals who have been found Incompetent to Stand Trial (IST) and not dangerous by the court. These individuals are released into the community awaiting restoration of their competency and resolution of their legal issues. As it stands now, individuals who are IST and released into the community receive no competency restoration services. Passage of this bill would allow CFAP to gather information about what kind of services are needed to build an outpatient competency restoration program in Maryland.

Therefore, we ask for a favorable report on HB 658. If you have any questions regarding this testimony, please contact MPS lobbyist, Lisa Harris Jones at lisa.jones@mdlobbyist.com.

Respectfully Submitted,
The Maryland Psychiatric Society & Washington Psychiatric Society
Legislative Action Committee