



## ClearView COMMUNITIES

**February 18, 2026**

**RE: Testimony regarding Maryland SB 707 and HB 1014**

**Position: Support**

**To Whom it May Concern:**

I have been a psychiatrist for 36 years, and my career has been focused on care for people with severe mental illnesses such as schizophrenia and bipolar disorder. I am currently the medical director of a long-term residential rehabilitation program for young adults with severe mental illnesses.

SB707 and HB 1014 make needed clarifications to Maryland's standard for emergency evaluation and involuntary psychiatric hospitalization – clarifications that will allow individuals with severe mental illnesses to receive treatment before they reach a point of crisis or tragedy.

Right now, the requirement that a person be “a danger to the life or safety of the individual or others” is often interpreted so narrowly that families and clinicians cannot act until harm is imminent. For people who lack awareness of their illness, this delay can lead to homelessness, victimization, incarceration, or irreversible deterioration.

These bills clarify that:

- Danger does not need to be imminent
- Personal and medical history should be considered
- “Danger to self” includes inability to meet basic needs or substantial deterioration in judgment when the person cannot make an informed decision about treatment

These changes do not expand who can be hospitalized - they simply ensure that the existing standard is applied consistently and humanely. They allow intervention at the point when treatment can still prevent suffering, protect safety and preserve lives.

Sincerely,

*MBKnable*

Michael B. Knable, DO  
Medical Director