

TO: The Honorable Heather Bagnall, Chair
House Health Committee

FROM: Annie Coble
Assistant Director, Maryland Government Affairs

HB1014
Favorable with
Amendments

DATE: February 24, 2026

RE: HB1014 MENTAL HEALTH LAW - DANGER TO THE LIFE OR SAFETY OF THE INDIVIDUAL OR OF OTHERS - DEFINITION (RIGHT TO TREATMENT)

Johns Hopkins supports **HB1014 Mental Health Law - Danger to the Life or Safety of the Individual or of Others - Definition (Right to Treatment)** with amendments. This bill creates a definition for the “danger to the life or safety of the individual or of those” in Maryland Statute.

By refining this definition, the bill strengthens the state’s ability to ensure timely, appropriate treatment for individuals experiencing severe mental health crises—before those crises escalate into irreversible harm. Johns Hopkins supports the State’s efforts to create clarity regarding the dangerousness standards, and suggests aligning the definition to Health General §10–708(3)(iii) essential needs or health and safety to have better alignment and standardization for clinicians.

In Maryland, families, providers, and first responders often face heartbreaking situations in which an individual is clearly decompensating—unable to care for themselves, disconnected from reality, or engaging in increasingly risky behavior—yet does not meet the current threshold for intervention. The existing legal standard can be so narrowly interpreted that meaningful action is delayed until danger becomes imminent or catastrophic. At that point, outcomes are often worse for the individual, their loved ones, and the broader community.

Importantly, this legislation affirms that individuals living with serious mental illness deserve the same proactive medical care that we would expect for any other life-threatening condition. We do not wait for cardiac arrest before treating heart disease. Likewise, we should not wait for a suicide attempt or violent act before providing psychiatric care when clear warning signs are present.

This bill balances compassion, clinical expertise, and public safety. It moves our system toward earlier stabilization, better outcomes, and reduced long-term harm.

Accordingly, Johns Hopkins respectfully requests a **FAVORABLE with Amendments** committee report on HB1014.