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**HB0886**

February 19, 2026

**TO:** Members of the House Health Committee

**FROM:** Nina Themelis, Director of Mayor's Office of Government Relations

**RE:** House Bill 886 – Certified Peer Recovery Specialists - Coverage Under the Maryland Medical Assistance Program and Health Insurance and Workgroup on Certification

**POSITION: Favorable**

Chair Bagnall, Vice Chair Cullison, and Members of the Committee, please be advised that the Baltimore City Administration (BCA) **supports HB 886**.

This bill would require entities that provide certain health-related insurance benefits to provide full coverage in any setting for the services of Certified Peer Recovery Specialists (CPRS), as well as require the Maryland Department of Health to establish a workgroup to examine the process for certification of Peer Recovery Specialists and make that process more efficient.

The BCA supports the expansion of insurance coverage for critical services provided by CPRSs, and making the certification process more efficient to help expand the CPRS workforce in the state. Peer Recovery Specialists are individuals with lived experience who are trained and certified to provide support, advocacy, and mentorship for people with substance use or mental health challenges in healthcare, outreach, or treatment settings. Peer recovery specialists build trust, reduce stigma, and help people feel understood in ways traditional providers often cannot. They also improve engagement and outcomes by connecting individuals to services and providing practical, ongoing support.

Baltimore City has experienced the challenges associated with the inability for hospitals and providers to bill insurers for the services of a CPRS. The Baltimore City Health Department's Levels of Care Program grades hospitals as level 1, 2, or 3 depending on the services they offer for people with substance use disorder. In order to qualify as levels 1 or 2, hospital Emergency Departments must offer CPRS services. However, many hospitals struggle to meet this qualification because they are unable to bill for the services of these professionals. This bill would address this barrier by allowing hospitals to bill for such services.

Additionally, the workgroup proposed by this bill will help increase the behavioral health workforce. In a 2024 report, the Maryland Health Care Commission estimated that Maryland is short 50% of the behavioral health care workers required to meet demand for services, and that the state would need to add **8,029 peer recovery specialists to the workforce by 2028**.<sup>i</sup> Identifying ways to make the peer recovery specialist certification process more efficient will help meet this need.

For the reasons stated above, the BCA respectfully requests a **favorable** report on HB 886.

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<sup>i</sup> Maryland Health Commission. (2024). Investing in Maryland's Behavioral Health Talent. Retrieved from [https://marylandmatters.org/wp-content/uploads/2024/11/Full-Report\\_Maryland-BH-Workforce-Assessment\\_Final-Oct-2024.pdf](https://marylandmatters.org/wp-content/uploads/2024/11/Full-Report_Maryland-BH-Workforce-Assessment_Final-Oct-2024.pdf)