



Testimony on HB 886

Certified Peer Recovery Specialists

Coverage Under the Maryland Medical Assistance Program and Health Insurance and Workgroup on Certification Health Committee

Hearing Date: February 19, 2026

POSITION: Support

Chairperson Bagnall, Vice Chairperson Cullison and members of the House Health Committee thank you for hearing testimony on HB 886. I am Suanne Blumberg, CEO, at Upper Bay Counseling and Support Services. We serve over three thousand consumers yearly, from early childhood to geriatric. We serve both Cecil County and Harford County providing an array of services including Early Childhood Therapy, Outpatient Therapy, Residential Rehabilitation Program, Assertive Community Treatment, Psychiatric Rehabilitation Programs, and Health Homes to name just some of the services.

Upper Bay Counseling & Support Services is asking for your support of HB 886 which would provide reimbursement for the use of Certified Peer Recovery Specialists in behavioral health programs. This bill also requires that the Maryland Department of Health convene a workgroup to examine the certification process relating to certified peer recovery specialists.

Peer support involves emotional support, respect, empowerment, shared responsibility, hope and self determination by using lived experience knowledge to support those in early recovery from substance use/mental health issues. Peer support is recognized as an evidence-based practice and an essential component of recovery-focused systems.

Research has shown that the use of peers in behavioral health settings improves outcomes, reduces costs, reduces hospitalization rates and emergency room visits, and improves the client's quality of life on quality of life measures.

The high demand for behavioral health services in the state of Maryland and across the country has left many without access to much needed services. Integrating peer support specialists and other paraprofessionals into the behavioral health workforce is a positive way to help reduce the workforce crisis and assist licensed professionals.

For example, if we have a client who disengages from therapy we call them, we send letters to help them re-engage but we cannot do much else. Therapists cannot go to their homes and try to re-engage clients, but peer specialists can and probably do a much better job than the therapist.

The improved emotional wellbeing, psychological wellbeing and social wellbeing that has been measured against groups who receive traditional therapy only and add in the cost savings to the state and the decrease in waitlists for services this is a game changer for the Maryland Behavioral Health System.

I urge you to give HB 886 a favorable report.

Helping Individuals - Strengthening Families - Uniting Communities

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