



Cornell Brooks Public Policy

Senate Judicial Proceedings Committee

Date: April 3, 2026

HB1181 Family Law – Children in Out-of-Home Placement – Voluntary Placement Agreements

Position: FAVORABLE

Dear Chair Smith and Committee Members,

We are pleased to offer strong support for HB1181. The State Policy Advocacy Clinic at the Jeb E. Brooks School of Public Policy at Cornell University* comprises undergraduate and MPA students who research, design, and advocate for a wide variety of concrete, human-rights focused state policy solutions in collaboration with legislators, academics, community members, and nonprofit organizations. In recent years, Clinic teams have successfully contributed to the drafting and advancement of state legislation, produced fiscal and implementation analyses used by lawmakers, and authored numerous in-depth white papers and policy memoranda. The Clinic's work spans health care policy, immigrant rights, children's rights, criminal justice reform, democracy and good governance, disability rights, and consumer protection.

Voluntary Placement Agreements (VPAs) were designed to provide families with access to vital resources without losing custody of their child but, as it currently stands, this process has fallen short of its intended goal. HB1181 addresses major barriers that have impacted families' abilities to enter into VPAs, and especially the parents of children suffering from developmental disabilities or mental illness. The Clinic has conducted extensive research into the state's hospital overstay population and has found that a majority of these children are under the care of hospitals because there were no other placement options available that could meet the child's needs¹ or because the parent could not afford the resources required to meet their child's needs.² **Under the current VPA process, many parents are being placed in an untenable position where they feel they have no choice but to leave their children in hospitals in order to access the support and services they need.**

As stated in the bill's preamble, parents also experience wait times upwards of 60 days before receiving a decision on their VPA request. If it is not approved, parents then need to go through an appeal process that would require them to hire legal counsel; even if it is approved, parents are then responsible for paying child support, despite the fact that financial barriers to accessing needed resources may be the reason they are pursuing the agreement in the first place. HB1181 strengthens family preservation efforts by clearly defining timelines for agencies to respond to VPA requests and ensuring that families of children with special needs do not lose custody of their child simply because they are unable to financially meet their child's needs.

¹ Small, L., Brunsink, A. M., Heisler, K., Lardner, M., Naqvi, S. & Olson, S. (2024). *Maryland Social Services Administration Placement Needs Assessment: Final Report*. Chicago, IL: Chapin Hall at the University of Chicago,

<https://dhs.maryland.gov/documents/Local%20Offices/Baltimore%20City/Consent%20Decree/72nd%20Compliance%20Report/72nd%20Report/Att.%20A.pdf>.

² Bowie, L., Miller, H., & Little, R. (2022). "Maryland kids in distress are being kept in emergency departments for weeks, months." *The Baltimore Banner*.

<https://www.thebaltimorebanner.com/community/public-health/hundreds-of-maryland-children-live-in-hospitals-FCLWTVRAZFARHKCP74RP5EFJNQ/>.

Under HB1181, parents must also be informed of their right to appeal a child support obligation and relevant agencies are compelled to establish uniform criteria for waiving or reducing these obligations for low-income families. The bill also adds an avenue for direct referral to a local behavioral health authority, creating a clearer pathway for access to resources and reinforcing a parent's entitlement under a VPA to retain all legal and educational decision rights for their child. Together, these changes ensure families are not penalized for seeking help and promote earlier, more equitable access to the services children need to remain safely connected to their families.

Additionally, HB1181 provides annual training for staff within local departments who are responsible for administering VPAs to ensure the standardization of current policies and practices. This includes understanding necessary timelines, standards of compliance, traumainformed family engagement, and improving interagency coordination. Furthermore, it builds accountability and transparency into the system by requiring data tracking and public reporting on the department's website concerning the number of VPA requests received, approved, and denied in a given year as well as the average time to make a determination, find a placement, and the average length of a child's stay in the hospital.

HB 1181 realigns the VPA process with its intended purpose to preserve families, reduce the number of children entering care, and provide access to vital resources. It provides necessary steps to address issues impacting the proper implementation of the VPA process by providing training, improving data management, setting reporting requirements, and establishing clear timelines. For these reasons, the State Policy Advocacy Clinic at the Jeb E. Brooks School of Public Policy at Cornell University **requests a favorable report for HB1181.**

* The State Policy Advocacy Clinic does not represent Cornell University

Respectfully,

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