This is NAMI Maryland’s top priority. The bill increases funding for the Behavioral Health Crisis Response Grant Program to ensure local governments are investing in a comprehensive crisis program equipped to address Marylanders in crisis 24/7. The bill also encourages local governments to invest in mobile crisis teams that:
- Minimize the role of law enforcement in crisis interactions
- Are culturally competent and understand how to serve their communities.
- Work with their local communities to evaluate and troubleshoot service delivery issues, in part by engaging with local advocacy groups, and
- Following stabilization, ensure that individuals have appropriate follow up care and support utilizing peers.

Protect Telehealth Expansions
Numerous bills introduced – NAMI is supportive of all the expansions, but our priority is the most comprehensive approach in SB 393/HB 551 (Sen. Augustine/Del. Bagnall)
Please protect these expansions – telehealth has been a lifeline for seniors, families, children, those with disabilities or in rural and underserved communities to stay well and access affordable care. The telehealth expansions NAMI Maryland supports include:
- Audio-only telehealth where appropriate. Not everyone has the same access to technology and everyone needs to receive care whether or not their wi-fi is strong. Almost half a million Marylanders lack access to high speed internet.
- Remove originating and distant site restrictions – meet patients where they are and let them do telehealth at home. Feeling safe is of the utmost importance for behavioral health patients.
- Parity. Prevent health insurance carriers from restricting access to telehealth services for mental health or substance use issues.

NAMI Maryland is also working to eliminate health disparities; NAMI supports the following bills:
- HB 28/SB 005 (Del. Pena-Melnyk/Sen. Griffith), a bill to require Maryland to provide timely information so we can better address health disparities.
- HB 78/SB 52 (Del. Pena-Melnyk/Sen. Washington) The Maryland Commission on Health Equity would be established through this bill to address racial injustice and health disparity issues in Maryland.
- HB 463/SB 172 (Del. Barron/Sen. Hayes) This bill allows for designation of “Health Equity Resource Communities” (HERCs) to target State resources to improve health outcomes.
Diversion
NAMI fights for policies to get people help, not handcuffs. This includes expanding access to crisis services, promoting best practices in de-escalation, and diversion of people experiencing psychiatric crises to treatment.

Crisis Intervention Teams Center of Excellence
Thank you for this committee’s work on creating the CIT Center of Excellence last year. It’s getting off the ground within the Governor’s Office of Crime, Youth, and Victim Services and will help provide training and resources to law enforcement across the state to effectively handle mental health crisis situations.

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- Work with their local communities to evaluate and trouble shoot service delivery issues, in part by engaging with local advocacy groups, and
- Following stabilization, ensure that individuals have appropriate follow up care and support utilizing peers.
- **We need your help to make sure the funds are appropriated for this program!**

Optum Behavioral Health Contract
Optum runs the state’s behavioral health ASO, which typically manages more than $1 billion in payments a year for more than 200,000 Marylanders with behavioral health issues. The extreme billing issues and service denials are putting access to services at risk – extraordinarily concerning in a year when more Marylanders are relying on Medicaid and our current pandemic is taking an incredible toll on the mental health of everyone.

Behavioral Health Funding
Included in the budget is the 3.5% increase for behavioral providers we’ve been advocating for over the past few years – which is great news. Thank you for standing with us over the past several years to ensure Maryland is investing in the providers and programs that serve our communities.