



Maryland
Hospital Association

Senate Bill 441 Mental Health- Emergency Facilities List- Comprehensive Crisis Response Centers, Crisis Stabilization Centers, and Crisis Treatment Centers

Position: *Support*
February 18, 2020
Senate Finance Committee

MHA Position

Maryland's 61 nonprofit hospitals and health systems care for millions of people each year and are on the front lines of the state's behavioral health crisis. Hospitals and their partners improved access to the most appropriate level of care for Marylanders overall, but for the one in five living with a mental health or substance use disorder, the emergency department (ED) remains the only door to access treatment.

In 2018, ED visits for medical conditions were down 10%, but ED visits for behavioral health related conditions rose 14%. Part of this increase stems from a rise in the number of patients transported to the ED by law enforcement—referred to as an emergency petition. One community hospital reported a 60% increase in these ED visits in three years. However, hospital EDs are not the most appropriate place for people in behavioral health crisis to receive the care they need. Senate Bill 441 is an important step toward helping these patients receive the right care, in the right setting.

SB 441 would strengthen Maryland's crisis response system. Police officers are required to take individuals on emergency petitions to a designated "emergency facility" for psychiatric evaluation. The Maryland Department of Health (MDH) allows only hospital EDs to accommodate them. SB 441 clarifies that the department should consider other facilities, such as crisis stabilization centers, when designating "emergency facilities." [The Lt. Governor's Commission to Study Mental & Behavioral Health](#) and [Mobile Crisis Response Strategic Plan](#) work group from 2017 both endorse this change.

These facilities are well equipped to respond to the mental health crisis and create a healing environment responsive to patients' needs. MDH maintains the authority to designate emergency facilities and ensure these facilities have the necessary protocols and resources to effectively receive these individuals and conduct required evaluations.

As Maryland continues to build a comprehensive and coordinated behavioral health system, MDH should designate emergency facilities other than hospital EDs for Marylanders in a behavioral health crisis. Doing so would not only reduce ED traffic, but would, more importantly, create an additional and more appropriate access point for a group of individuals who do not need acute medical care as part of a psychiatric evaluation.

For these reasons, we urge a *favorable* report.

For more information, please contact:
Erin Dorrien
Edorrien@mhaonline.org