



**Testimony on SB 192  
Budget Reconciliation and Financing Act of 2020**

Senate Budget and Taxation Committee

February 26, 2020

**POSITION: OPPOSE**

The Community Behavioral Health Association of Maryland is the professional organization for providers of community-based mental health and substance use disorder treatment services. Our members serve the majority of the almost-300,000 children and adults who access care through the public behavioral health system. We provide outpatient treatment, residential and day programs, case management and assertive community treatment (ACT), employment supports, and crisis intervention.

We strongly oppose the cuts to community behavioral health providers on p.17, line 11, reducing the mandated rate increase for 2021 from 4% to 2%.

It is important to recall that in 2017's HOPE Act the Maryland General Assembly passed three years of mandated rate increases for community behavioral health providers in response to decades of financial neglect and the resulting increases in overdose deaths and suicides. FY 21 is the third year of that commitment in which providers were to receive 3% from the HOPE Act and an additional 1% to help offset the costs of compliance with minimum wage implementation.

Maryland is just beginning to turn the tide of opioid deaths, although suicides, particularly among teens, continue to plague even our most affluent communities. As the job market becomes increasingly competitive, community providers must receive reimbursement rates that will allow them to attract and retain a qualified workforce. Our direct care workers are the backbone of our organizations and make up over a quarter of our workforce. In addition, our outpatient clinics are struggling to compete with better-resourced hospital systems for professional staff, such as psychiatrists, nurse practitioners, and therapists. The HOPE Act increases have allowed providers to invest in their workforce, but decades of neglect can't be reversed in only two years.

We urge your rejection of the BRFA and its cut to community behavioral health providers.