



Testimony for HB 684

Date: February 23, 2022

From: Treatment Advocacy Center

Position: Support

The Treatment Advocacy Center supports HB 684. We believe the Maryland Department of Health (MDH) has historically required hospital emergency departments to obtain five denials from general hospital psychiatric units before allowing Medicaid recipients in need of inpatient psychiatric care to be admitted to an institution for mental diseases (IMD), or a facility specializing in psychiatric care. That is a discriminatory practice because it limits the access to care for individuals based on a diagnosis and HB 684 would counteract it.

Federal law generally prohibits the use of federal Medicaid funds in IMDs,¹ and MDH has been paying in full for Medicaid recipients in IMDs. That is presumably the reason why MDH has such a high bar for admission to an IMD—the cost. However, individuals with mental illness in need of inpatient care are a vulnerable population and they should have access to facilities staffed by doctors and other practitioners who specialize in treating their conditions.

As a well-reasoned approach to offset the cost of treating Medicaid recipients in IMDs, Maryland recently obtained permission from the federal Centers for Medicare and Medicaid Services (CMS) to partially waive the legal exclusion for treatment in IMDs. Maryland may, as soon as it submits a complete implementation plan to CMS and CMS approves that plan, access federal funds for at least half of that cost for limit lengths of stay. This is a step in the right direction, but HB 684 is still badly needed. The waiver obtained by MDH will not be implemented for at least several months and it only lasts for five years. Therefore, enacting HB 684 would be a permanent piece to ensure MDH does not continue or resume their five-denial policy in the future.

Thank you for reading the testimony of the Treatment Advocacy Center. We respectfully urge you to give HB 684 a favorable report.

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¹ 42 U.S.C. § 1396d(a)(31)(B).