



Late Testimony

February 5, 2023

The Honorable Joseline A. Peña-Melnyk
Health & Government Operations Committee
Room 241 - House Office Building
Annapolis, MD 21401

RE: Oppose - House Bill 121: Mental Health – Treatment Plans for Individuals in Facilities – Requirements

Dear Chair Peña-Melnyk and Honorable Members of the Committee:

The Maryland Psychiatric Society (MPS) and the Washington Psychiatric Society (WPS) are state medical organizations whose physician members specialize in diagnosing, treating, and preventing mental illnesses, including substance use disorders. Formed more than sixty-five years ago to support the needs of psychiatrists and their patients, both organizations work to ensure available, accessible, and comprehensive quality mental health resources for all Maryland citizens; and strive through public education to dispel the stigma and discrimination of those who have a mental illness. As the district branches of the American Psychiatric Association covering the state of Maryland, MPS and WPS represent over 1000 psychiatrists and physicians currently in psychiatric training.

MPS/WPS oppose House Bill 121: Mental Health – Treatment Plans for Individuals in Facilities – Requirements (HB 121) because we believe that the procedures envisioned in the bill will be unduly burdensome on clinicians, hospital staff, and administrative law judges who are already saddled with caring for patients.

Mental health treatment is complex and can involve a variety of options, such as therapy, medication, and lifestyle changes, which should be tailored to the specific needs and preferences of the individual. HB 121 attempts to get to that end, but with unrealistic hastiness attached to it. Like somatic health, the length of an involuntary commitment stay depends on how the patient responds to mental health treatment and simply cannot be determined, let alone “predicted” in advance. Some patients respond quickly to treatment, while others take longer to respond or can even regress.

In addition, MPS/WPS believe that HB 121 gives the families of those involuntarily committed an oversized role in the process and veto power over treatment plans devised by medical professionals with the education and experience to make such a decision. Family members, while well-intentioned, may not fully understand or have access to the complete medical history and current mental state of the individual in question. Sometimes, family members may be the issue in the first place. Involving a patient in the treatment decision-making process with



his/her medical provider, which imparts to the patient autonomy and rights to self-determination, can improve a patient's engagement and adherence to the treatment plan.

For those reasons, MPS/WPS asks this committee for an unfavorable report on HB 121. If you have any questions with regard to this testimony, please feel free to contact Thomas Tompsett Jr. at tommy.tompsett@mdlobbyist.com.

Respectfully submitted,
The Joint Legislative Action Committee
of the Maryland Psychiatric Society and the Washington Psychiatric Society