

Delegate Geraldine Valentino-Smith
House of Delegates/Maryland General Assembly
District 23A
Peggy Callahan
240-593-0329
Delegategeraldinevalentino@gmail.com

1. What would you propose to reduce stigma associated with mental health and substance use disorders?

Stigma and negative perceptions of mental illness and substance use disorders can be a barrier and discourage individuals and families from seeking needed treatment and services. Further, behavioral health services have historically been underfunded in comparison to other important health care sectors.

- As a member of the House Appropriations I have and will continue to support fully funding behavioral health community provider rates and access to treatment and services.
- We must do more to integrate behavioral health care into primary care settings, starting with training primary care providers to appropriately screen, recognize and make behavioral health treatment referrals.
- Commitment to work with advocacy organizations to educate Maryland's communities, businesses, faith communities and school systems to increase education and understanding of behavioral health disorders.
- Ensure individuals, when appropriate, are diverted from the criminal justice system to treatment. A criminal record increases the stigma associated with behavioral health and decreases the likelihood the individual receives needed treatment and can have negative effects on housing and employment opportunities.
- Parity between health insurance coverage for mental health and physical health.
- Ensure Maryland does not remove the condition for insurance companies to cover pre-existing conditions.

2. What strategies would you employ to reduce overdose deaths and suicides?

- Expand the number of treatment beds in Maryland by fully-funding community behavioral providers and treatment facilities and/or programs. Funding for 8-507 beds only addressed the criminal justice system.
- Criminal justice system should screen every inmate for behavioral health issues and ensure they have access to evidence-based treatment and services, as well as linkages in the community upon release
- Allow medication-assisted treatment in state prisons and county jails.
- Better data sharing between state agencies, as well as between state and local agencies.

3. What specific initiatives would you propose to better address the prevention, early intervention and treatment needs of children and youth living with mental illness and/or substance use disorders?

- Increase access to a comprehensive array of services and supports, such as services provided in home and the community; school-based behavioral health

services; respite care for families; peer support services; and increase access to inpatient and residential treatment for children and youth.

- Adolescents transitioning to adulthood can be a difficult. Therefore, services and supports must be available for youth by at least 14 or 15 and continue to early adulthood. Increase transition age services and supports for youth by at least 14 or 15.
- Ensure MDH continues to adequately fund and expand access to the Maryland Early Intervention Program (EIP). Increase outreach and education to increase community knowledge, including schools, about the EIP program.
- Work toward increased coordination and collaboration between systems serving children, youth and families.
- Ensure all school personnel, including coaches, building services and resource officers receive Crisis Intervention Team (CIT) training and/ or mental health first aide in order to recognize signs and symptoms of a behavioral health issue and to deescalate situations that could become violent or deadly.
- Reduce burdensome and unnecessary regulatory, financial criteria or eligibility requirements for treatment and services, such as tele-health services for families living in rural communities.

4. Maryland's older adults are the fastest growing demographic with unmet mental health and substance use disorder needs. How would you address the behavioral health needs of this population?

- Increase the geriatric mental health provider workforce.
- Increase appropriate community-based treatment housing and support for older adults with mental illness
- Ensure continuity-of-care for older adults by allowing better information sharing and treatment plan development between their family and/or care-giver and health care providers, including their behavioral health provider.
- Ensure Medicare fully covers medication prescribed for the treatment of behavioral health disorders.
- Determine whether co-payments imposed on out-patient behavioral health care and services are equal
 - Support new insurance options to stabilize Maryland's health insurance marketplace, including a Medicaid Buy-In Program
 - Support Maryland's efforts to implement a state reinsurance program beyond 2019 in the individual market place.

5. What would you do to increase the availability of mental health and addiction providers in the state?

- Legislation requiring the state or an independent organization to study and report evaluating the scope and extent of workforce shortages in the mental health field, the impact of shortage on access to quality and affordable behavioral health treatment for people with behavioral health disorders and recommendations to attract and retain a well-qualified workforce.

- Fully-fund community provider rate increase in 2020 State Budget.
- The state should allow certified peer recovery specialists, when appropriate to provide clinical services to individuals with behavioral health disorders.
- Ensure state funding to increase university faculty, as well as recruit students to mental health disciplines; especially persons with culturally diverse backgrounds.
- Incentivize students, such as providing stipends, in psychiatry, psychiatric social work, psychiatric nursing and psychiatric rehab.
- Increase the number of fellowships to residents in child psychiatry.

6. How would you ensure health insurance plans are in compliance with existing behavioral health parity laws and educate consumers about their rights to equitable mental health and addiction coverage?

- Determine whether health plans offered in Maryland are in compliance with federal and state parity requirements between health insurance coverage for mental health and physical health.
- Ensure Maryland does not remove the condition for insurance companies to cover pre-existing conditions.
- Support policies that ensure public and private health insurance plans provide adequate mental health coverage and adequate, readily accessible networks of specialty providers.
- Support policies that would prohibit mid-year changes to drug formularies, high out-of-pocket costs, and restrictive prior authorization policies by insurers.

7. What would you do to ensure that low income individuals with mental health and substance use disorders have access to safe, stable and affordable housing?

- Increase funding to expand SSI/SSDI Outreach, Access, and Recovery (SOAR) Programs to increase the number of SOAR certified staff who assist the homeless qualify for federal benefits.
- Support policies that prohibits landlords and other property owners from discriminating against persons (e.g., the mentally ill) who are disproportionately vulnerable to discrimination.
- Increase funding for providers to offer more respite care programs statewide.

8. What strategies would you employ to address the over-representation of individuals with behavioral health needs in Maryland jails and prisons.

- Increase access to behavioral health treatment in communities, including full funding for community provider rate increases.
- Proposals to ensure, where appropriate, the diversion of individuals with behavioral health needs from the criminal justice system.
- Reduce or eliminate the use of restrictive housing for individuals with serious mental illness in Maryland's jails and prisons.
- Prohibit the release of an inmate from restrictive housing directly to the community.

- Increase the number of specialty courts (mental health and drug courts) across the state.
- Require Crisis Intervention Team (CIT) training and programs across the state
- Ensure the state is investing the savings, required under the Justice Reinvestment Act, in community systems and services to keep individuals with complex behavioral health conditions stable and living well in the community.

9. Given the continuing rise in demand for mental health and substance use disorder services, what steps would you take to move Maryland toward a system with true on-demand access and comprehensive behavioral health crisis response services?

- Require Medicaid and health insurance plans reimburse behavioral health crisis response services, including peer support services.
- Require BHA to implement the recommendations set forth by the Behavioral Health Advisory Council's report to establish a comprehensive network of crisis services throughout the state, including increased funding for crisis intervention services