



Maryland Behavioral Health Coalition 2018 CANDIDATE QUESTIONNAIRE

The Maryland Behavioral Health Coalition respectfully requests that you respond to the questions below on issues related to mental health and substance use disorders. The Maryland Behavioral Health Coalition is a diverse mix of nonprofit organizations working to ensure that individuals with mental health and substance use disorders have access to quality care and services that meet their needs.

To educate voters impartially and on a nonpartisan basis, complete candidate responses will be published verbatim on the Maryland Behavioral Health Coalition website (<http://keepthEDOORopenMD.org/>) on October 16, 2018. To meet our publication deadline, your responses must be received no later than October 12, 2018. If you do not respond, the publication will state Did Not Respond.

Questions and responses will be used in compliance with all IRS rules for 501(c)(3) organizations.

Please respond to each question in 200 words or less, and submit completed questionnaires to Dan Martin via email at dmartin@mhamd.org.

Thank you for taking the time to complete this questionnaire, and for taking the opportunity to communicate your views on behavioral health issues and policy.

Candidate Name	Lorig Charkoudian
Office Sought	Delegate
District	20
Campaign Contact	Lorig Charkoudian
Campaign Contact Phone	410-227-4941
Campaign Contact Email	lorig.charkoudian@gmail.com

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

Reducing stigma requires greater education and support for people who struggle with mental health and substance use disorders, and support for those who choose to share their experiences in a public way. It is also important for policy makers and those in the public eye to be especially aware of their language and how they may inadvertently be using language that is stigmatizing. I intend to be careful with my language and to welcome feedback.

From a policy perspective, ensuring insurance, care, and funding parity between mental and physical health sends a message that all our part of supporting Maryland residents to live healthy lives.

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

We must fully fund treatment on demand across Maryland so that we don't miss windows of opportunity when a person seeks help. Maryland can also increase access to 24/7 mobile crisis units and train law enforcement and other first responders to engage behavioral health providers and peer counselors when they respond to crisis. It is also important to distribute Naloxone broadly and train as many community members as possible on how to use it.

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?

Maryland must establish and support broad screening protocols to ensure early diagnosis and connection to services for families. This can include partnerships with schools, pediatricians, and other child care providers. Education within these systems is also important, in order to reduce the stigma children or their families may feel, as this stigma is hurtful in and of itself, but also may keep the family from seeking services.

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?

In addition to the need to fully fund behavioral health services for all Marylanders and ensure parity, the State must pay particular attention to ensure inter-agency coordination among the various state and local agencies that address the needs of older adults.

The State must also work with state hospitals to ensure that older adults have access to the same community placements as do other age groups. Furthermore, the State can support both training for mental health providers to ensure they are trained in specific geriatric issues and training for geriatric health care specialists to ensure they are aware of mental health issues.

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

Maryland can increase the availability of mental health and addiction service providers by fully funding the Keep the Door Open Act and ensuring that reimbursement rates increase over time so that those who choose to work in community behavioral health settings are fairly and appropriately compensated. This will help decrease turnover and increase the likelihood that all positions are filled. The State can also do more to enforce parity laws to ensure that private insurance companies are reimbursing providers appropriately.

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?

Despite progress in establishing parity from a legal perspective, too many Marylanders still find it difficult to get quality psychiatric care covered by their health insurance company - because there may not be any accepting new patients or the waiting time for an appointment may be dangerously long. Insurance companies need to be held accountable by Maryland Insurance regulators. The state can also work in partnership with advocacy groups to make sure Marylanders know their rights and are able to advocate for these rights.

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?

Finding affordable housing is a challenge for many Marylanders, and people struggling with mental health and substance abuse disorders are too often homeless. Maryland must increase the housing stock, with inclusionary zoning that ensures quality housing options for individuals with low and moderate incomes. Tax incentives allocated by the state, such as the Low Income Housing Tax Credit, can help spur this local development. Furthermore, the Rehabilitative Tax Credit should be used to stave off the loss of current affordable housing, while improving its quality. State policies should widen housing options for families using Section 8 vouchers, by making it illegal for landlords to discriminate based on legal sources of income. Finally, Maryland should expand the Rental Allowance program to prevent homelessness and promote Housing First policies to address chronic homelessness in the state.

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

The strategies discussed above, including ensuring parity and increasing reimbursement rates create a foundation for a strong system. To prevent individuals from ending up in prison and jail we must build a comprehensive mental health system, with a focus on community treatment, including prevention, early intervention, recovery, 24/7 mental health crisis mobile units in every county in Maryland, assertive community treatment, peer supports, funding for acute and crisis in-patient treatment and effective release planning with transition to out-patient care. Officers must be trained in CIT training and law enforcement must have a plan to dispatch appropriately trained officers when responding to a behavioral health need. Finally, Maryland must establish civil outpatient treatment program as a less restrictive treatment alternative for individuals cycling through crisis hospitalization and/or incarceration.

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?

Building a strong system with on-demand access must be the goal. This takes financial investment, but this investment will pay dividends and save in the long run with decreased use of law enforcement and emergency room resources. Maryland should do an analysis similar to the Justice Reinvestment Act process, to take a comprehensive look at the behavioral health system and its current gaps, identify a long term plan to address it, and then fund it!