TO: The Honorable Thomas Mac Middleton, Chairman
Members, Senate Finance Committee
The Honorable Richard Madaleno

FROM: Joseph A. Schwartz, III
Pamela Metz Kasemeyer
J. Steven Wise
Danna L. Kauffman

DATE: February 5, 2014

RE: SUPPORT WITH AMENDMENT – Senate Bill 262 – Mental Health and Substance Use Disorder Safety Net Act of 2014

The Maryland State Medical Society (MedChi), which represents more than 8,000 Maryland physicians and their patients, supports Senate Bill 262 with amendment.

Senate Bill 262 reflects a comprehensive effort to address a myriad of limitations in the State’s current ability to comprehensively meet the mental health and substance abuse health care service delivery needs of Maryland residents. It creates, enhances and implements a number of programs designed to address longstanding unmet need across a range of key mental health and substance use disorder issues.

MedChi would like to draw attention to one particular program that was not reflected in similar legislation considered in 2013. On page 15, in lines 14-21, language is added to the Medicaid program which specifies that MCOs must require primary care providers who treat individuals with mental illness to implement a collaborative care model using specified collaborative tools and clinical monitoring. While MedChi is not opposed to advancing the collaborative care model with respect to primary care and mental health services, the specific language of the provisions raise as many questions as they answer and will need to be further discussed and refined if the proposed approach is to be acceptable.

While this particular section noted above will require amendment, MedChi assumes there will be deliberative discussion of other provisions contained in this omnibus legislation.
MedChi looks forward to working with the sponsor and affected stakeholders as the details of
the various initiatives are further considered following the hearing. MedChi applauds the effort to comprehensively address deficiencies in the current delivery of these services and urges the Committee to seriously consider enactment of many, if not all, of the proposed initiatives. With its amendment request noted, MedChi urges a favorable report.

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