



Analysis of Need for Acute Psychiatric Services for Historically Underserved Populations - Public Comment MHAMD

1 message

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Maryland Health Care Commission:

Thank you for reaching out to Mental Health Association of Maryland asking us to provide comments on your assessment of the need for acute psychiatric services for historically underserved populations. The problem of youth stuck in emergency departments or psychiatric inpatient units has been a major concern of ours. Unfortunately, the information provided in the MHCC data tables is somewhat unclear, as are the explanations of certain methodologies used. We would require more time to gain a better understanding of the data and methodology to provide specific feedback.

Overall, however, the conclusions in the MHCC analysis - that only the Baltimore Upper Shore Health Planning Region needs more than four additional adolescent psychiatric beds (other areas need less than one additional bed, except Montgomery county, which needs just 1.5 beds), and that there is little need for additional beds for youth with co-occurring mental health conditions and developmental disabilities - do not seem to match the experiences reported by hospitals, families, and jurisdictions across the state, who repeatedly maintain that there are not enough adolescent psychiatric beds, particularly for youth with co-occurring mental health conditions and developmental disabilities. For example, in 2021, Maryland Coalition of Families surveyed families on their use of psychiatric crisis services for a child or adolescent and found that 31% of families who went to an emergency department waited more than 30 hours for an acute psychiatric inpatient bed. Those with a child with a co-occurring mental health condition and developmental disability waited months for an appropriate inpatient psychiatric bed. Also, as noted in the introduction to MHCC's Analysis, six counties (Ann Arundel, Calvert, Charles, Garrett, Saint Mary's, and Baltimore city) reported in their jurisdiction's needs assessment that there is a lack of acute psychiatric beds for youth.

Over the last several years, legislators in Annapolis have been trying to address the problem of children and adolescents in hospital overstay status. In the 2025 legislative session, the General Assembly passed, and Governor Moore signed into law, HB 962/SB 696, "Public Health – Pediatric Hospital Overstay Patients and Workgroup on Children in Unlicensed Settings and Pediatric Overstay." In the bill, "pediatric hospital overstay patient" is defined as *"a patient under the age of 22 who remains in an inpatient unit or emergency department of a hospital for more than 48 hours after being medically cleared for discharge or transfer."* Overstays in hospital inpatient units and emergency departments are closely intertwined, for youth stuck in psychiatric inpatient units cause more youth to be stuck in emergency departments waiting for an inpatient bed.

In the hearings for HB 962/SB 696, representatives from Medstar Health, University of Maryland Medical Systems, UPMC Western Maryland, and Lifebridge Health all testified about the urgent problem of youth stuck in their emergency departments. All reported that they had children who spent days and weeks in their EDs awaiting an inpatient bed. The Maryland Hospital Association testified that at a point in time in February 2025, there were 43 children across the state in overstay status, with 20% stuck in emergency departments.

To address the problem, HB 962/SB 696 implements several measures, including strengthening a hospital bed registry, creating hospital overstay coordinators, and establishing a workgroup to determine, among other things, the number and type of additional acute psychiatric beds needed.

A final point – many youth who are in the custody of DHS, and who need acute psychiatric care, end up being housed in hotels or local DSS offices with a one-to-one aide when an appropriate acute psychiatric bed can't be found. To fully grasp the need, MHCC should look at the DHS data as well.

Thank you for the opportunity to provide comments. Please feel free to contact me if you have any questions.

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