

# MARYLAND PSYCHIATRIC SOCIETY



VIA EMAIL

June 7, 2021

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Eileen Fleck, Chief  
Acute Care Policy and Planning  
Maryland Health Care Commission  
4160 Patterson Avenue  
Baltimore, MD 21215

Dear Ms. Fleck:

The Maryland Psychiatric Society is a medical specialty organization representing psychiatric physicians. We reviewed the proposed **COMAR 10.24.21 State Health Plan for Facilities and Services: Acute Psychiatric Services** referenced in the Maryland Register. We are still gathering information but go on record now objecting to including the description of the Issue below, which raises serious concerns with far-reaching effects.

The push to deinstitutionalize psychiatric care has been largely implemented in the State of Maryland; many State facilities have been closed and no longer care for patients who require short-term acute psychiatric services. *The five remaining psychiatric hospitals operated by the State serve forensic patients* [emphasis added], and none of the State hospitals provide acute psychiatric services for children. The remaining hospitals operate significantly less bed capacity compared to previous years.

**We strongly disagree with formalizing and/or acknowledging the State psychiatric hospital role in the State Health Plan regulation as primarily dedicated to the forensic patient population.**

Although capacity has limited their role in recent years, there remains a critical need for State hospital beds and other resources to serve long-stay acute psychiatric patients. These patients, some of whom with stays exceeding one year, are currently treated in acute care hospital settings, exacerbating the bed shortage. Responsibility for the most complex, long-stay patients should rest with the State, which has global responsibility for the population with serious and persistent mental illness, not with community hospitals. The resources and other supports necessary for these long-stay patients to be discharged do not exist in community settings.

We do not support the current status quo of State psychiatric hospitals being considered as *mainly* for the forensic patient population and urge that the proposal be revised to reflect the goal of a **full continuum of State care for all patients with serious and persistent mental illness**. We recommend that this proposal recognize that state hospitals need more funding to restore this service capacity. We would be glad to collaborate with you on this or provide any assistance you may need. Please email Heidi Bunes at [heidi@mdpsych.org](mailto:heidi@mdpsych.org) with questions.

Sincerely,

Virginia L. Ashley, M.D.  
President