

**House Bill 32 Maryland Department of Health – Forensic Review Board and Community
Forensic Aftercare Program – Established**

Health and Government Operations Committee

January 29, 2025

Position: SUPPORT

Mental Health Association of Maryland (MHAMD) is a nonprofit education and advocacy organization that brings together consumers, families, clinicians, advocates and concerned citizens for unified action in all aspects of mental health and substance use disorders (collectively referred to as behavioral health). We appreciate the opportunity to provide this testimony in support of House Bill 32.

HB 32 requires the Maryland Department of Health (MDH) to establish forensic review boards (FRB) at psychiatric facilities that have charge of persons who have been committed as not criminally responsible (NCR) to review patient records and determine whether to recommend that a committed person should be considered eligible for discharge or conditional release. The bill also establishes a community forensic aftercare program (CFAP) to monitor individuals on conditional release and support those individuals in complying with the conditions of their release. FRB and CFAP are existing entities within MDH created by internal policy. HB 32 will clarify and standardize existing best practices related to these entities.

There is a lack of transparency in the process of obtaining conditional release. In most facilities, an FRB designated by the facility determines whether MDH is ready to recommend release (often with conditions) at a hearing. HB 32 will create a standardized approach for each FRB's assessment to ensure that each committed person is entitled to the same due process, regardless of where they are held or the strength of their treatment team's advocacy.

Similarly, the existing CFAP – which is charged with coordinating and monitoring an individual's compliance with the treatment plan and conditions outlined in the conditional release order – exists without enabling statutes or regulations. Support and oversight vary greatly across CFAP monitors. Here too, the program and the individuals subject to CFAP oversight would benefit from more consistency and transparency.

HB 32 will increase transparency and accountability in institutional programs that determine whether individuals committed to psychiatric institutions are ready for release and in community programs charged with supporting the successful reentry for these individuals. For these reasons, MHAMD supports this bill and urges a favorable report.

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