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**House Bill 665 Maryland Medical Assistance Program and Health Insurance - Annual
Behavioral Health Wellness Visits - Coverage and Reimbursement**

Health and Government Operations Committee

February 6, 2025

Position: SUPPORT

The Mental Health Association of Maryland 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 665.

HB 665 requires that commercial health insurers in Maryland and the Maryland Medicaid program provide coverage and reimbursement for annual behavioral health wellness visits, regardless of whether the assessment results in a behavioral health diagnosis.

Federal law requires that health insurers cover and reimburse for preventive care for physical health issues. Annual physicals, including recommended tests, are completely covered, with no out-of-pocket costs. This is true regardless of whether the screenings, assessments and tests uncover a potential health concern and/or result in a diagnosis.

This is not the case, however, for assessments from behavioral health providers. Most insurers do not reimburse for behavioral health assessments that do not result in a diagnosis. This limits opportunities to identify and address mental health and substance use concerns early because individuals who may be noticing mild behavioral health concerns may be reluctant to seek help from a behavioral health professional if they are unsure whether their insurance will cover it.

And the failure to identify and address these concerns results in poor health outcomes and high costs. Untreated anxiety and depression can lead to an escalation of symptoms, unnecessary hospitalization and higher intensity levels of care. This leads to higher overall health care costs. According to [a recent study](#) analyzing health care claims data for 21 million individuals, while only 27% of the study population had a behavioral health diagnosis and/or received behavioral health-specific treatment, those individuals accounted for 56.5% of total health care costs.

Ensuring access to preventive behavioral health care via annual behavioral health wellness visits will increase early identification and intervention for these illnesses, reduce stigma related to mental health and substance use disorders, and save money. For these reasons, MHAMD supports HB 665 and urges a favorable report.

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