

**Senate Bill 321 Budget Reconciliation and Financing Act of 2025**

Budget and Taxation Committee

February 28, 2025

**Position: FAVORABLE WITH AMENDMENTS**

The 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 Senate Bill 321 with amendments.

SB 321 modifies a range of corporate and individual income tax rules, alters and repeals certain required appropriations, and makes a range of other statutory changes to reconcile and finance the proposed Fiscal 2026 budget.

Maryland is contending with a significant budget crisis and unprecedented levels of uncertainty at the federal level. MHAMD recognizes the challenge this poses for state policymakers and understands that difficult decisions will have to be made.

These challenges notwithstanding, there remains critical unmet need across the state that must be addressed. Nearly a third of Maryland adults with anxiety or depression do not get needed counseling or therapy,<sup>1</sup> over 1,500 Marylanders lost their lives to an overdose in 2024,<sup>2</sup> and more than 36% of Maryland high school students have reported feeling persistently sad or hopeless with 18% of those students having seriously considered suicide.<sup>3</sup>

Addressing this unmet need will require strategic investments to expand access to community- and school-based mental health and substance use care, bolster Maryland's behavioral health workforce, and increase the availability of crisis response services that are designed to address the unique needs of various populations. These are investments that will improve the health of our society and ultimately save the state money through a reduction in preventable hospital emergency department utilization, homelessness and criminal justice involvement. But there are upfront costs that require additional revenue.

Accordingly, MHAMD supports elements of SB 321 that would modify corporate and individual income tax rules and credits to increase revenue and create a more equitable state tax system. However, as described in greater detail below, **we strongly oppose** provisions in the bill that would eliminate funding for critically important school- and community-based mental health services and hinder the 988 helpline's ability to help people in crisis.

Specifically, we urge the following:

<sup>1</sup> <https://www.kff.org/statedata/mental-health-and-substance-use-state-fact-sheets/maryland/#:~:text=Unmet%20Need%20and%20Barriers%20to%20Care,Unmet%20need%20refers&text=As%20shown%20in%20the%20figure%20below%2C%20in%20May%202022%2C%20among,the%20U.S.%20average%20of%2028.2%25>

<sup>2</sup> <https://health.maryland.gov/dataoffice/Pages/mdh-dashboards.aspx>

<sup>3</sup> Youth Risk Behavior Survey/Youth Tobacco Survey (YRBS/YTS) 2022-2023, Maryland Department of Health, <https://health.maryland.gov/phpa/ccdc/Reports/Pages/YRBS-2022-2023.aspx>

*For more information, contact Dan Martin at (410) 978-8865*

1. **Please REJECT the \$90 MILLION annual reduction in school mental health funding** (pg. 22, lines 17-19)

According to Maryland's 2022-2023 Youth Risk Behavioral Survey (YRSB), 36% of Maryland high school students are persistently sad or hopeless, 18% of high school students and 24% of middle school students have seriously considered suicide, and 10% of both high school students and middle school students have actually attempted suicide.<sup>4</sup>

Despite these dire statistics, SB 321 would reduce the annual budget of the Consortium on Coordinated Community Supports – which provides mental health funding to public schools in every jurisdiction across the state – from \$130 million to \$40 million (a 70% reduction).

After several delays, the Consortium just became operational last year, but it is already having a tremendous impact. In just its first six months the Consortium:

- Provided mental health resources to more than 58,000 students across 80% of all Maryland public schools
- Increased Maryland's school mental health workforce by nearly 500 individuals
- Provided mental health training to nearly 1,200 school personnel
- Improved mental health outcomes for 70-80% of Maryland students

2. **Please REJECT the elimination of language supporting a statewide expansion of certified community behavioral health clinics (CCBHCs)** (pg. 128, lines 4-13)

CCBHCs are federally designated care delivery models that provide a comprehensive range of outpatient mental health and substance use care, coordination with other providers and services, and connection to other systems and supports. They are similar to federally qualified health centers (FQHCs), providing services regardless of insurance status or ability to pay.

States implementing the model have seen increased access to care, reduced emergency department and inpatient utilization, mitigation of behavioral health workforce challenges, higher engagement post discharge from hospitals, and greater integration with physical care.

The General Assembly in 2023 passed legislation ([SB 362](#) & [HB 1148](#)) to establish a statewide network of CCBHCs, and although the Maryland Department of Health *did* apply for *and did* receive a nearly \$1 million CCBHC planning grant last year,<sup>5</sup> this provision in SB 321 would result in a rescission of the planning grant and the abandonment of this initiative.

3. **Please REJECT language that makes FY25 funding for the Maryland 988 helpline discretionary** (pg. 127, line 28 - pg. 128, line 3)

More Marylanders than ever are using Maryland's 988 behavioral health helpline. The helpline received over 8,000 calls in the most recent month, an increase of 30% over last year and 130% since launch. Texts to 988 are averaging 2,000 per month, a rate that is double that of two years ago and 20 times the rate since launch.

Despite this, SB 321 would make the \$12 million legislatively mandated FY25 appropriation for the 988 helpline discretionary, threatening the program's viability at a time of great need.

<sup>4</sup> Maryland Department of Health 2022-2023 Youth Risk Behavioral Survey and Youth Tobacco Survey data. <https://health.maryland.gov/phpa/ccdpc/Reports/Pages/YRBS-2022-2023.aspx>  
<sup>5</sup> SAMHSA Grants Dashboard: [https://www.samhsa.gov/grants/grants-dashboard?PK%5B0%5D=by\\_nofo\\_number%3AASM-25-001#awards-tab](https://www.samhsa.gov/grants/grants-dashboard?PK%5B0%5D=by_nofo_number%3AASM-25-001#awards-tab)