

**SB 738 – Maryland Medical Assistance Program and Health Insurance – Required Coverage –
Mobile Crisis and Crisis Stabilization**

Senate Finance Committee

March 4, 2026

Position: FAVORABLE

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 HB 738.

SB 738 requires Medicaid and certain private insurance carriers to provide coverage for mobile crisis and crisis stabilization services.

Crisis services are a key component of the behavioral health system of care and are needed now more than ever. Over the last decade, rates of suicidal ideation, self-harm, and severe depression have increased dramatically, which is reflected in a three-fold increase in emergency department visits related to mental health.¹

Crisis stabilization services and mobile crisis services have been shown in multiple studies to reduce emergency department utilization and hospital admissions, as well as free up law enforcement officers and prevent criminal justice involvement.²

There are both economic reasons and humanitarian reasons to ensure that a continuum of behavioral health crisis services are available to the public – to anyone, anywhere, any time. They save lives and create healthy communities, just as other essential services such as police, fire, and emergency medical services do. Accordingly, access to behavioral health crisis services should be comparable to physical health crisis services and funded similarly – with public and commercial insurance, federal and state grants, and other sources of state and local funds.³

¹ Tanner Bommersbach. National Trends in Emergency Department Visits for Suicide Attempts and Intentional Self-Harm. American Journal of Psychiatry (2024). <https://pubmed.ncbi.nlm.nih.gov/38831705/>

² Ashlyn Burns. Availability of behavioral health crisis care and associated changes in emergency department utilization. Health Services Research (2025). <https://pmc.ncbi.nlm.nih.gov/articles/PMC11911218/>

Andrew Anderson. Availability of Mobile Crisis Services in Mental Health Facilities. Journal of the American Medical Association Network Open (2025). <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2830554>

³ 2025 National Guidelines for a Behavioral Health Coordinated System of Crisis Care. SAMHSA (2025). <https://library.samhsa.gov/sites/default/files/national-guidelines-crisis-care-pep24-01-037.pdf>

SB 738 will ensure that public and commercial payers are meeting their parity obligations by appropriately funding behavioral health crisis services. For this reason, MHAMD supports HB 738 and urges a favorable report.