Behavioral Health System Baltimore sets policy priorities every two years based on community feedback and an assessment of the political environment. These priorities guide our efforts to advance effective behavioral health policy and represent Baltimore City communities at the Maryland General Assembly. Learn more at https://www.bhsbaltimore.org/get-involved/advocate/

1. Promote high quality behavioral health services and provider accountability within the public behavioral health system

Maryland must prioritize improving the quality of behavioral health services and provider accountability, which varies across the system of care. As the Maryland Department of Health (MDH) strives to improve provider accountability and the quality of services, they must look to local behavioral health authorities (LBHA) for support. LBHAs have local expertise and relationships that can support the state if given clearer authority in management and oversight within the Public Behavioral Health System (PBHS). The state must also promote higher quality standards through more rigorous models such as the Certified Community Behavioral Health Clinic (CCBHC) and other evidence-based programs. *MDH must drive quality improvement by elevating effective provider models, such as CCBHCs, empowering LBHAs by defining the full range of their responsibilities in state regulations, and ensuring greater transparency and accountability across the provider network.*

2. Ensure Marylanders continue to have access to the full range of behavioral health services through Maryland's Medicaid program

H.R. 1, the One Big Beautiful Bill Act passed by Congress in July 2025, makes significant changes to Maryland Medicaid and threatens access to behavioral health services for residents. Changes to Medicaid include additional work requirements and more frequent eligibility determinations. The Maryland Department of Health (MDH) estimates the bill will cost the state \$2.7 billion and lead 175,000 Marylanders to lose coverage. Medicaid is the largest source of federal funding for the state and the largest expenditure, representing more than 20% of the state budget. Medicaid is also the primary source of funding for the PBHS and provides coverage to almost 250,000 Baltimore residents. It is incumbent on the state to maintain the full range of behavioral health care services for its residents. Maryland should work to educate Medicaid beneficiaries about pending changes that impact their coverage, implement paperwork and exemption policies to minimize coverage loss, and backfill coverage losses with state-funded support if needed.

3. Strengthen and expand the behavioral health workforce to ensure timely access to highquality behavioral health care

Maryland has a long-standing behavioral health workforce shortage. The deficit is particularly acute for frontline behavioral health workers, such as social workers, behavioral health crisis responders, peer support specialists, and other community roles. Baltimore City is identified as a Mental Health Professional Shortage Area, meaning the city lacks the number of social workers and counselors required to meet the need for care. In October 2024, the Maryland Health Care Commission (MHCC) published *Investing in Maryland's Behavioral Health Talent*, a report that estimated a statewide shortage of 32,800 behavioral health professionals across all disciplines. The report recommended a comprehensive set of strategies, including streamlining licensure, increasing awareness of behavioral health careers, and making targeted investments to expand loan repayment, apprenticeships, and other financial incentives to join and remain in the field. Trends suggest the workforce shortage will worsen without investment and policy change. *Maryland must begin to implement the recommendations of the MHCC behavioral health workforce report and devote state resources to the Behavioral Health Workforce Investment Fund.*





4. Increase affordable housing options for those with behavioral health needs, including quality recovery housing and permanent supportive housing

Quality, affordable housing is the foundation that allows for effective treatment and recovery from behavioral health challenges. Unfortunately, these housing opportunities are often not available, and the housing options that do exist may not be safe or affordable. Marylanders who need behavioral health support too often face homelessness or substandard housing, and their prospects for recovery can suffer as a result. Many look to recovery housing for stability early in their journey, but far too many residences remain uncertified and without oversight. At the same time, federal policy seems to be moving away from supportive housing and towards harsher policies for unstably housed individuals. The rejection of 'housing first' as a model for addressing homelessness is concerning and will only make housing instability worse. **State and local leaders should invest in dedicated housing options such as permanent supportive housing, continue to support 'housing first' models, and require all recovery housing programs to acquire certification to operate in the state of Maryland.**

5. Implement policies to reduce law enforcement and criminal justice interaction for people with behavioral health needs

People with behavioral health conditions are overrepresented in jails and prisons, and experience inappropriate use of force by police more often. In Baltimore, this has manifested most prominently through the Department of Justice consent decree with the police department, which directs the city to build behavioral health capacity to reduce the reliance on law enforcement to respond to people with behavioral health needs. Baltimore has made significant progress through better law enforcement protocols, the expansion of behavioral health crisis services, and the establishment of the 911 diversion program. However, critical incidents with law enforcement continue to occur and more must be done to reduce law enforcement involvement. Civilian responders who can deploy directly from 911 would be an effective addition to the continuum of crisis response services available in Baltimore. State and local leaders must invest in innovative solutions such as civilian responders to augment the crisis response system and reduce law enforcement involvement with people with behavioral health conditions.

6. Maximize the impact of state and local opioid restitution funds by investing in overdose prevention strategies, connections to treatment, and recovery support services

Maryland and Baltimore have both received significant settlement funding for use in addressing opioid overdose. These settlements represent a tremendous opportunity to invest in effective approaches for overdose prevention and recovery from substance use. The Baltimore Overdose Response Strategic Plan provides a strong roadmap for a comprehensive array of overdose prevention strategies, connections to treatment, and recovery support services, and there is work ahead to ensure investments align with the plan. One effective approach for overdose prevention is investing in overdose prevention centers (OPCs)— safe and supportive spaces where people can use drugs under supervision, significantly reducing the risk of fatal overdose. State and local leaders should use their restitution funds to invest in evidence-based interventions such as OPCs and ensure other investments are focused strategies that prevent overdose and connect people to treatment and recovery supports.

