

## State Capitol Day: Legislative Priorities

February 2023

**Support SB 3/HB 271: 988 Trust Fund – Funding.** Would appropriate \$12M for FY 25 to the 988 Trust Fund, to maintain the 988 system and to develop and implement a statewide initiative for the coordination and delivery of behavioral health crisis response services statewide.

- As of July 16, 2022, the **988 Suicide and Crisis Lifeline** is now operational nationwide. Formerly the National Suicide Prevention Lifeline, the 988 Suicide and Crisis Lifeline connects callers to a national network of state and local crisis centers that provide around-the-clock crisis care. Individuals experiencing a suicidal, mental health, or substance use crisis, and those that are worried about someone else, can now call 988 (supports over 240 languages), text 988 (English only), or chat with a Lifeline counselor (English only) at 988lifeline.org.
- 988 is **free, confidential, and available 24/7/365**.
- Now that 988 is a reality, Maryland's 8 Lifeline centers are answering more crisis calls than ever before; **calls have already increased by 30%** compared to 2021.<sup>i</sup>
- A full continuum of crisis services is not yet accessible to all Maryland communities. Mobile crisis teams, crisis stabilization centers, and other acute behavioral health care services that provide in-person crisis response must be built out statewide.
- **Reliable, sustainable funding is needed** for Maryland's crisis services continuum to meet growing community crisis needs and to truly provide all Marylanders with someone to call, someone to respond, and somewhere to go.<sup>ii</sup>
- A 988 system that is effectively resourced and promoted will **reduce healthcare spending** with early intervention, **reduce the burden on emergency rooms and law enforcement**, and **improve outcomes** for individuals experiencing a suicide or behavioral health crisis. It will also **ensure more equitable access** to and fill gaps in the current crisis response system, particularly those that affect rural and underserved communities.
- AFSP sincerely **thinks the legislature for passing SB 241/HB 293** last year that established the 988 Trust Fund and for allocating \$5M (FY 23) to local crisis centers and \$5.5M (FY 24) to the fund as a down payment on full 988 implementation in Maryland.

**Support SB 283/HB 418: Mental Health – Workforce Development – Fund Established.** Would establish a special, non-lapsing Behavioral Health Workforce Investment Fund to provide reimbursement for costs associated with educating, training, certifying, recruiting, placing, and retaining behavioral health professionals and paraprofessionals. Would require the Maryland Health Care Commission to conduct a comprehensive behavioral health workforce needs assessment on or before 12/1/23, to include a recommendation for an initial allocation to the fund.

- A key component in suicide prevention is **connecting individuals at risk with a mental health professional** for assessment and treatment.
- Behavioral health conditions, especially when unaddressed, increase risk for suicide.<sup>iii</sup>

- Upwards of 90% of individuals who die by suicide have a diagnosable and potentially treatable mental health condition at time of death, although often those conditions are untreated or undiagnosed.<sup>iv</sup>
- As of September 2022, **over 1.7 million Marylanders** lived in a mental health care provider shortage area. Statewide, there is one mental health provider for every 330 residents and **only 19%** of the state's workforce need is met.<sup>v</sup>
- In Maryland, 55% of adults with a mental illness (**422,000 adults**) and 59% of youth with depression (**47,000 young people**) **receive no treatment**.<sup>vi</sup>
- Increasing the number of behavioral health professionals practicing in Maryland, particularly in rural and other underserved areas, is critical to ensuring that more Marylanders can access lifesaving care when needed.

**Support SB 159/HB 162: Firearms – Maryland Voluntary Do Not Sell Firearm Registry – Establishment.**

Would require the Department of State Police to create and maintain a Maryland Voluntary Do Not Sell Firearm Registry in which a person may voluntarily enroll for the purpose of being prohibited from obtaining a firearm. Removal requests must be approved promptly but not sooner than 21 days after the request is received. Prohibits discrimination against any person because of their enrollment or previous enrollment on the registry.

- Firearms are **highly lethal** and the **most used method** of suicide; 85-90% of suicide attempts with a firearm are fatal.<sup>vii</sup>
- Of the 585 suicide deaths in Maryland in 2020, almost half (267, or 46%) were completed by firearm. One in three firearm deaths in the state were suicides.<sup>viii</sup>
- Putting **time and distance** between a person at risk and the lethal method can save their life in both the short and long term. When people at risk of suicide are unable to access their chosen method, most will not go on to attempt with another method. <sup>ix</sup>
- People considering suicide are typically ambivalent about life; part of them wants to live, but part of them is focused on dying to stop the unbearable pain they're experiencing. A voluntary do-not-sell list option **provides a lifeline** to that part of them that wants to live.

<sup>i</sup> Fund Maryland 988 Campaign Fact Sheet. (2023). Retrieved 2/1/23 from <https://www.fundmd988.org/>.

<sup>ii</sup> SAMHSA National Guidelines for Behavioral Health Crisis Care. (2020). Retrieved 2/1/23 from <https://www.samhsa.gov/sites/default/files/national-guidelines-for-behavioral-health-crisis-care-02242020.pdf>.

<sup>iii</sup> AFSP. (2023). What we've learned through research. Retrieved 2/1/23 from <https://afsp.org/what-we-ve-learned-through-research>.

<sup>iv</sup> Ibid.

<sup>v</sup> Kaiser Family Foundation. (2023). Mental health care Health Professional Shortage Areas (HPSAs). Retrieved 2/1/23 from <https://www.kff.org/other/state-indicator/mental-health-care-health-professional-shortage-areas-hpsas>.

<sup>vi</sup> Reinert, M., Fritze, D., & Nguyen, T. (Oct 2022). The state of mental health in America 2023. Mental Health America, Alexandria, VA. Retrieved 2/1/23 from <https://mhanational.org/sites/default/files/2023-State-of-Mental-Health-in-America-Report.pdf>.

<sup>vii</sup> Barber, C. W. & Miller, M. J. (2014). Reducing a suicidal person's access to lethal means of suicide: A research agenda. *American Journal of Preventive Medicine*, 47(3S2), S264-S272.

<sup>viii</sup> CDC National Center for Injury Prevention and Control. (2023). WISQARS Fatal Injury Reports 1999-2020. Retrieved 2/1/23 from <https://wisqars.cdc.gov/fatal-reports>.

<sup>ix</sup> Barber, C. W. & Miller, M. J. (2014). Reducing a suicidal person's access to lethal means of suicide: A research agenda. *American Journal of Preventive Medicine*, 47(3S2), S264-S272.