



February 27, 2026

The Honorable Pamela Beidle  
Chair, Finance Committee  
Maryland Senate  
Annapolis, Maryland 21401

The Honorable Antonio Hayes  
Vice Chair, Finance Committee  
Maryland Senate  
Annapolis, Maryland 21401

Dear Chair Beidle, Vice Chair Hayes, and Members of the Committee:

On behalf of the Behavioral Health Action Team (BHAT) of the Healthy St. Mary's Partnership (HSMP), we write to express our strong support for *Senate Bill 39 – Behavioral Health – Certified Community Behavioral Health Clinics and Outpatient Mental Health Centers – Reimbursement Rates*. HSMP is the Local Health Improvement Coalition (LHIC) serving St. Mary's County, Maryland. Through BHAT, we work collaboratively with community partners to improve mental health outcomes, strengthen substance use prevention and treatment systems, and promote equitable access to high-quality behavioral health services across our region.<sup>1</sup> SB 39 directly aligns with these priorities by strengthening the financial sustainability and long-term capacity of Maryland's outpatient behavioral health system.

St. Mary's County and other rural jurisdictions face unique challenges in maintaining robust behavioral health services. Geographic distance, workforce shortages, transportation barriers, and limited provider networks can delay or prevent residents from receiving timely care.<sup>2</sup> Community-based outpatient mental health centers and prospective Certified Community Behavioral Health Clinics (CCBHCs) are critical access points for individuals experiencing mental health conditions and substance use disorders.<sup>3,4</sup> However, when Medicaid reimbursement rates do not reflect the true cost of providing care, clinics struggle to recruit and retain qualified clinicians, expand services, and meet increasing demand.

SB 39 takes an important step toward addressing these challenges. By establishing a workgroup to study CCBHC implementation and rate methodology, requiring a cost-based rate

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<sup>1</sup> The Centers of Excellence (2025, April). *Sequential Intercept Model Mapping Report for St. Mary's County, Maryland*. Governor's Office of Crime Prevention and Policy.

<https://smchd.org/wp-content/uploads/FINAL-St-Marys-Co.-2025-SIM-Mapping-Report.pdf>

<sup>2</sup> Anderson, K. (2024, December 4). *MD Faces a Behavioral Health Workforce Crisis*. Maryland Association of Counties. <https://conduitsstreet.mdcountries.org/2024/12/04/md-faces-a-behavioral-health-workforce-crisis/>

<sup>3</sup> Annapolis Coalition (2025, August 22). *Maryland Identifies Need for 32,000 Behavioral Health Workers*. The Annapolis Coalition on the Behavioral Health Workforce.

<https://annapoliscoalition.org/maryland-identifies-need-for-32000-behavioral-health-workers/>

<sup>4</sup> SAMHSA (2023, April 24). *Certified Community Behavioral Health Clinics (CCBHCs)*. <https://www.samhsa.gov/communities/certified-community-behavioral-health-clinics>

study for outpatient mental health centers, and providing targeted rate increases while a sustainable methodology is developed, this legislation supports both immediate stabilization and long-term reform. A transparent, data-driven reimbursement structure will help ensure that providers can deliver comprehensive, evidence-based services without compromising quality or access.

For BHAT, strengthening outpatient behavioral health infrastructure is essential to achieving our local Community Health Improvement Plan goals.<sup>5</sup> Improved reimbursement and sustainable funding mechanisms will enhance continuity of care, reduce reliance on emergency departments, and expand prevention and early intervention services – outcomes that are particularly critical in rural counties like St. Mary’s. Investment in outpatient systems is also an investment in workforce stability, integrated care, and equitable access for Medicaid recipients and other vulnerable populations.

SB 39 reflects a thoughtful and strategic approach to building a more resilient behavioral health system in Maryland. By aligning reimbursement with the actual cost of care and supporting implementation of the CCBHC model, the bill advances health equity, system accountability, and long-term sustainability. For these reasons, the Behavioral Health Action Team of the Healthy St. Mary’s Partnership respectfully urges the Senate Finance Committee to issue a favorable report on SB 39. Thank you for your leadership and continued commitment to strengthening Maryland’s behavioral health system.

Sincerely,

*Chris Shea*

Chris Shea  
Healthy St. Mary’s Partnership  
Behavioral Health Action Team Co-Chair

*Jodi Gardiner*

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Healthy St. Mary’s Partnership  
Behavioral Health Action Team Co-Chair

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<sup>5</sup> The Healthy St. Mary’s Partnership (2024, January). Healthy St. Mary’s 2026.  
<https://healthystmarys.com/wp-content/uploads/2024/01/Healthy-St.-Marys-2026-January-2024-Updated.pdf>