Maryland Mental Health Coalition

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August 31, 2012

Charles J. Milligan, Jr.
Deputy Secretary, Health Care Financing
Department of Health and Mental Hygiene
201 West Preston Street
Baltimore, MD 21201

Dear Deputy Secretary Milligan:

We appreciate the significant time and effort you and your staff have put into the monumental task of integrating behavioral healthcare in Maryland. The openness and transparency by which this process has unfolded is laudable, and we hope the collaboration with stakeholders will continue as we work toward a behavioral health system that best meets the needs of the public.

We are nearing a crucial benchmark in the Behavioral Health Integration (BHI) process ongoing for over a year. An official Department of Health and Mental Hygiene report and recommendation of a new financing model is due by September 30. While the months subsequent to the report should offer opportunity for further public comment, as will the 2013 Session of the Maryland General Assembly, the Department's recommendation will carry great weight and must be informed by a balanced accounting of the pros and cons of the various models.

It is with that understanding that we offer the attached comments and suggested edits to the recently distributed "Evaluation of Models Based on Criteria." This document is clearly instrumental in discussions toward a final recommendation. There is concern, however, that the document as drafted lacks balance, listing some "challenges" as "benefits" and vice versa. We believe these edits provide greater balance allowing for a more informed selection.

We also wish to request clarification of statements made at the BHI meeting on August 22. As detailed in your "Description of Phases and Models," the Department will embark on a new process to establish specifications for the new system following the model recommendation. These "Phase 3" specifications include things like authorization/utilization rules, provider rates, staffing requirements, network adequacy, the RFP process, and much more. Stakeholders attempted to raise these issues on numerous occasions throughout the process. They are critical decisions more closely related to the actual delivery of services than selection of a financing model. However, time and time again, the community was asked to refrain from contemplating the "nuts and bolts" until after a financing model was selected.

You can imagine the concern following the August 22 meeting when those in attendance were told there would be no further organized workgroups for stakeholder input following the model

selection. The crucial decisions to be made during Phase 3 are as important to the public as those made up to this point; stakeholder involvement at this final stage is critical. Given the openness with which the process has been conducted to date, we have every reason to believe that similar opportunities for input are planned. We are anxious to learn when, where, and how our concerns and opinions will be accepted and considered. We ask that the next steps section of the final report include a timeline that clearly specifies how stakeholders will be involved in RFP development, the contracting process, regulation development and all other "Phase 3" concerns.

Thank you again for your work and dedication to this effort. Although the integration of behavioral health is just one piece of the overall health care reform puzzle, it is one with serious consequences for hundreds of thousands of vulnerable Marylanders and their families, and it is essential that we get it right. We look forward to your response.

Advocacy and Training Center
Archway Station
Arundel Lodge
Baltimore Crisis Response, Inc.
Catholic Charities Child & Family Services
Center For Children
Chesapeake Voyagers, Inc.
The Children's Guild
Community Behavioral Health Association of Maryland
Eastern Shore Psychological Services
Family Services, Inc.
Garrett County Lighthouse
GUIDE Program, Inc.
Harford-Belair Community Mental Health Center
Helping Other People Through Empowerment
Key Point Health Services
Maryland Association of Core Service Agencies
Maryland Association of Partial Hospitals and Intensive Outpatient Programs
Maryland Association of Resources for Family and Youth
Maryland Clinical Social Work Coalition of the Greater Washington Society for Clinical Social Work
Maryland Coalition of Families for Children's Mental Health
Maryland Coalition on Mental Health and Aging
Maryland Disability Law Center
Maryland Nurses Association
Maryland Psychological Association
Maryland Psychiatric Society
Mental Health Association of Frederick County
Mental Health Association of Maryland
Mental Health Association of Montgomery County
Mental Health Association in Talbot County
Mental Health Center of Western Maryland
Montgomery County Federation of Families for Children's Mental Health

Mosaic Community Services
NAMI Maryland, National Alliance on Mental Illness – *also representing:*
- NAMI Anne Arundel County
- NAMI Carroll County
- NAMI Cecil County
- NAMI Frederick County
- NAMI Harford County
- NAMI Howard County
- NAMI Lower Shore
- NAMI Metropolitan Baltimore
- NAMI Montgomery County
- NAMI Prince George's County
- NAMI Southern Maryland
- NAMI Washington County

Office of Consumer Advocates – *also representing*:
- HOPE Station
- Mountain Haven
- Soul Haven
- Self-Directed Care Program
- Listening Line
- Transportation Program

On Our Own of Anne Arundel County
On Our Own of Carroll County
On Our Own of Cecil County
On Our Own of Frederick County
On Our Own of Maryland
Pathways, Inc.
Peer Wellness and Recovery Services
People Encouraging People
Psychotherapeutic Services
St. Luke's House and Threshold Services United
Way Station