



2022 Maryland Mental Health & Aging Coalition Legislative Agenda

The Maryland Mental Health and Aging Coalition (MHAC) is comprised of representatives from aging and behavioral health consumer, family and professional associations, and related government agencies, all working together to improve the quality and accessibility of mental health and substance use services for older Marylanders.

There are many behavioral health challenges specific to the state's older adult community. Services need to be affordable, accessible, and suited to meet the growing needs of this booming and diverse population. Care must be available regardless of whether individuals are aging in place at home or living in a residential facility. As people age or as their required level of care changes, individuals should have a range of available care options, with a focus on reducing transitions, supporting aging in place, and maintaining dignity and autonomy.

MHAC calls on the Maryland General Assembly to take the following steps in 2022 to enhance Maryland's system of care for older adults.

ENSURE COMPREHENSIVE ACCESS TO EFFECTIVE CARE FOR ALL OLDER ADULTS WITH COGNITIVE AND BEHAVIORAL HEALTH NEEDS



A 2021 interagency report has clearly documented the rapidly expanding need for care, as well as the limited availability, scope and capacity of behavioral health and aging services across the state. The state must now ensure the staffing and strategic leadership necessary to operationalize this 5-year plan and move Maryland from spotty to consistent availability of essential care and supports in all jurisdictions. **The legislature must direct funding to create dedicated positions at the Behavioral Health Administration (BHA) and the Maryland Department on Aging (MDOA) to advance the interagency plan for the cognitive and behavioral health needs of older adults.**

PROTECT THE DIGNITY AND AUTONOMY OF OLDER ADULTS BY CENTERING THEIR CAPACITY FOR CHOICE, CARE, AND APPROPRIATE COMMUNITY SUPPORTS

Individuals with behavioral health disorders represent a disproportionate number of those subject to public guardianship, and they tend to be in the program for many years. While MHAC appreciates the necessity of public guardianship in certain situations, it is a serious restriction of individual liberty, and it must be viewed as a last resort. Supported decision-making, on the other hand, prioritizes an individual's ability to make decisions with appropriate supports if and as needed. It is recognized as an effective alternative to public guardianship where an individual retains the legal capacity to make decisions for themselves. **The legislature must pass legislation establishing supported decision-making as a pre-requisite to public guardianship.**



MODERNIZE MARYLAND'S PRE-ADMISSION SCREENING AND RESIDENT REVIEW (PASRR) PROGRAM TO REDUCE OVERRELIANCE ON INSTITUTIONAL PLACEMENT



Maryland's PASRR program is intended to prevent unnecessary hospitalization and institutionalization of older adults with behavioral health concerns. Unfortunately, the program is woefully antiquated. PASRR specialists must rely on a lengthy and burdensome paper process despite the availability of multiple federally approved automated processes. Maryland's process can take upwards of two weeks to complete, all while an individual is waiting unnecessarily in a hospital or institutional setting. **The state must modernize PASRR and provide the funding necessary to automate the process – funding which would be eligible for a 75% federal match.**

SUPPORT HEALTHY AGING AND CARE COORDINATION BY FUNDING DEDICATED BEHAVIORAL HEALTH NAVIGATORS IN MARYLAND'S LOCAL AREA AGENCIES ON AGING (AAAS)

Maryland's Area Agencies on Aging are increasingly called upon to assist in addressing the behavioral health needs of their clients. Unfortunately, most AAAs lack the resources necessary to help individuals navigate a complex behavioral health system to access an appropriate level of care. There is consensus across AAAs of the need for a dedicated behavioral health navigator in each agency to work directly with community mental health and substance use treatment providers, serve as technical support to AAA staff in their work with clients, and assist in coordinating needed community supports. **The legislature must direct funding to establish critical behavioral health navigator positions in each of the 19 AAAs across the state.**



SUPPORT BROADER BEHAVIORAL HEALTH SYSTEM REFORM EFFORTS

In addition to the older adult-specific priorities outlined above, MHAC supports those advocacy priorities of the Maryland Behavioral Health Coalition that will positively impact the mental health and substance use needs of older Marylanders.