



DEPARTMENT OF HEALTH

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Acting Secretary

Behavioral Health Administration

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December 4, 2020

Dear Behavioral Health Partners:

I hope everyone had a safe and happy Thanksgiving. We realize that this year's celebrations were likely not traditional, however I hope that you were able to stay virtually connected with your family and friends while maintaining the social distancing critical to keeping yourself and your families safe. Unfortunately, we will still need to take similar precautions for the upcoming winter holidays, while trying to enjoy the holiday season together.

With COVID positive cases on the rise, this year's holiday season will be even more difficult for many, bringing greater anxiety, fear, stress, and sadness. In support of your efforts to be proactive in supporting individuals and their families, I would like to encourage everyone to share the mental health supports and resources available, including [Mental Health Supports During the COVID-19 Crisis](#) and [FAQs about Mental Health, Stress and Anxiety](#). You may also want to take this time to review the CDC recommendations [Coping with Holiday Stress](#). Finally, my most recent radio interview focused on managing stress during the holidays, you may want to take a listen and share some of the suggestions on this topic: [More people than ever reaching out for mental health help amid pandemic \(October 5, 2020\)](#).

As we continue to expand and improve our crisis services, I would like to share with you the Health Services Cost Review Commission (HSCRC) awards and Crisis Response awards under HB1092 that were more recently provided:

Greater Baltimore Region Integrated Crisis System - \$44,862,000

- Establishes a regional Care Traffic Control system by implementing a single hotline to take and manage calls from people struggling with substance abuse and/or experiencing a mental health crisis
- Expands Mobile Crisis Teams (MCT) to help create diversion opportunities for patients who go to the ED but do not require a high-level intervention
- Expands access to immediate-need behavioral health services by piloting the Same Day Access (SDA) program

Totally Linking Care - \$22,889,722

- Enhances Prince George's County Response System through technological enhancements
- Expands mobile crisis teams throughout Prince George's County
- Establishes a crisis receiving facility accepting individuals in crisis 24/7/365 on a walk-in self-referred basis

Peninsula Regional - \$11,316,332

- Increases behavioral health crisis care for individuals by establishing a regional behavioral healthcare urgent care center (BHUCC)
- Centralizes and regionalizes two mobile crisis programs with the BHUCC

Crisis Response Grant Program (HB1092) - FY21

With a combination of new and continuous funding and one-time-only funding, the Crisis Response Grant Program continued services launched in FY20 and added the following programs for FY21.

Baltimore County - \$55,000

- Develops an awareness campaign to promote urgent care services

Calvert County - \$826,988

- Establishes a mental health crisis facility
- Merges a Crisis Call Hub – Someone To Talk To response services with the established Crisis Intervention Center hotline with the Recovery Rapid Response hotline

Harford County - \$309,697

- Supports the Klein Family Harford Crisis Center

Howard County - \$898,092

- This program establishes crisis beds and will consist of short-term intensive substance use disorder and/or mental health support delivered by an integrated medical and clinical staff for the youth and adult population

Prince George's County - \$818,510

- This program expands crisis services to include SUD observation chairs

Congratulations to all the award recipients!

The 2020 Presidential election will be one for the record books. It was exciting to see how much engagement there was in this critical civic duty. If any of you or your staff served in any way to facilitate the election process — Thank you! We are certain that the change in administrations will have some impact on our industry. We look forward to learning more and sharing this information with you. We will continue to strongly advocate for federal support and assistance to support the behavioral health and wellness of Maryland's citizens.

While there were no newly released updated **FAQs** over the last month, [I shared a message with you](#) reminding everyone of the Governor's latest measures to help keep communities safe and aid in stopping the spread of COVID-19. I encourage everyone to continue to follow these guidelines and all the information we continue to share with you. Again, please continue to use the reporting form if your program experiences any positive cases of COVID-19 so that a proactive coordinated response continues with Local Behavioral Health Authorities and Local Health Departments. The form and protocol are posted on the top of the [BHA COVID-19 webpage](#) as the **BHA COVID-19 Positive Test Reporting Form and Protocol for OTPs and Residential/Congregate Living Facilities**.

I am pleased to report that the **BHA/MedChi Behavioral Health Webinar Series: Helping the Helpers and Those They Serve** has been well received. The number of participants is increasing, and we are excited to continue to bring you this series. The next webinar is scheduled for December 17: **The Impact of Racial Trauma on Providers**. The speaker will be Stephanie Slowly, MSW, LCSW-C, and the moderator will be Shanta Powell, MD. Register for this webinar here: https://zoom.us/webinar/register/WN_kLD_IQoqQSOVIJ-mbdQPhg. Register for other webinars on the webpage: [bha/medchi behavioral health webinar series](#).

Our **Friday provider webinars with Public Health** will continue as scheduled at 10:00 am, and the presentation slides and recordings will continue to be posted on the [BHA COVID-19 webpage](#).

BHA, through the University Training and Evaluation Center, also hosted the first of a **six-part webinar series focused on topics related to older adult behavioral health**. The first webinar, held Friday November 20th, was focused on Maryland's Pre-Admission Screening and Resident Review (PASRR) program for individuals with mental illness. BHA recognizes the need for cross training between the State's Public Behavioral Health System and the State's Long Term Services and Supports as a growing aging population, at risk of both mental health and substance use disorders, require services from both state systems. This webinar series is intended to educate the behavioral health, aging and disability workforces about services, clinical conditions, and other factors that impact the behavioral health of older adults.

The **ASO transition** has been challenging and we are working with Medicaid and Optum to address the various issues that continue to impact our providers' ability to remain confident in the stability of the behavioral health system and their operations. On November 17 and 19,

MDH presented the ASO transition to the House Health and Government Operations Committee, House Appropriations Committee's Health and Social Services Subcommittee, Senate Budget & Taxation Committee's Health and Human Services Subcommittee, and the Senate Finance Committee. The [House](#) and [Senate](#) briefings are available for public viewing on the Maryland General Assembly's YouTube Channel.

Over the course of the last month, BHA designed a second financial survey tool and is working with Maryland's Association of Behavioral Health Authorities (MABHA) to administer the survey to our provider community.

Additionally, a **second COVID-19 provider survey**, in conjunction with the University of Maryland, was distributed. This is the second survey looking at access to services and the experiences of those we serve. There were 930 responses, and we thank you if you participated. Survey results show that telehealth continues to be an important tool in accessing services. There are successes and challenges associated with telehealth. Successes including easier access to treatment, lack of need for childcare, more flexible scheduling, and increased choice of provider. Challenges include lack of equipment, Wi-Fi or other technology issues and missing face-to-face contact, especially in group sessions. This second survey showed that more new people are seeking services than in the previous survey, and more people are keeping their appointments.

The BHA **Behavioral Health Equity workgroup** continues to work on developing the framework of the strategic plan. As we prepare for 2021, the workgroup is hard at work beginning engagement activities. In partnership with the Office of Suicide Prevention, we will be co-facilitating a conversation in their Racism and Mental Health training series. This discussion will allow participants to work on how to implement strategies and techniques into their practices. If you are interested in joining this brown bag series, please register for our first discussion scheduled for January 7, 2021 on "How To Become an Ally." You can register [here](#). In addition, we are inviting interested stakeholders to attend our workgroup meeting to begin our collaborative work. If you are interested in participating in our meetings, please email stephanie.slowly1@maryland.gov.

Since our last update, the **Psychiatric Rehabilitation Program (PRP) Workgroup** pulled PRP service utilization data to examine PRP service by fiscal year, jurisdiction, and associated expenditures. The work group has been collaborating with major PRP provider groups and the ASO to identify upstream and downstream systemic issues associated with authorization and claims for PRP services.

Due to COVID-19, the use of telehealth has exploded, but because of the digital divide we recognize that many have been left behind. BHA is looking to address this by distributing **telehealth equipment**. We have requested that SAMHSA allow us to repurpose some of our block grant funds to fund this initiative and enable us to provide patients with HIPPA compliant smartphones and tablets, along with internet access with high enough speeds for video

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conferencing. We are starting with a small pilot for this telehealth equipment program before expanding to a larger number of providers. Providers will purchase the equipment and internet access, will maintain ownership of the equipment, and will provide them to clients via signed loaner agreements. A survey will soon be forthcoming to assist with the selection of providers for the pilot.

Now as the nation plans for the distribution of the **COVID-19 vaccination**, MDH will follow the recommendations of the Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP) as to who should be prioritized to receive COVID-19 vaccine. As you may have read in the [Maryland COVID-19 Vaccination Plan](#), vaccine distribution and administration will be split into two phases. Phase 1 providers will primarily be hospitals and local health departments and will focus on front line health care workers and populations at highest risk and with greatest clinical need. During Phase 2, vaccines will be more broadly available, and a larger number of providers will be relied upon to administer the vaccine, either as staff at vaccine clinics or in other settings, such as provider offices. MDH is looking into various avenues to expand scope of practice for various health occupations to maximize the number of vaccinators available in the state. MDH's Public Health Administration has taken the lead on the vaccination efforts and as more details are made available on the stages of distribution for our communities, I will keep you informed.

I want to convey my sincerest gratitude to all of you for supporting me over the course of what will be my first year as the Deputy Secretary for Behavioral Health. I would have never envisioned all the challenges we have faced together in 2020. It has been my honor to work with each of you. I know that together, we can continue to meet any challenge that confronts us.

Thank you, and may your Holiday Season be filled with hope, peace, and joy. Stay safe, and well.

Sincerely,

A handwritten signature in black ink, appearing to read 'Aliya Jones', written in a cursive style.

Aliya Jones, M.D., MBA
Deputy Secretary Behavioral Health