

MARYLAND PSYCHIATRIC SOCIETY



May 21, 2024

Dear Secretary Dr. Herrera Scott and Deputy Secretary Lord:

As current President of The Maryland Psychiatric Society – an organization that represents over 775 psychiatrists from across the state of Maryland, I am writing to you to express our dismay over the withdrawal of additional state support by your office for Psychiatric and other medical care in the state of Maryland. Your office's recent decision to cut funding for psychiatry residency training at the University of Maryland starting this July is a decision that will have detrimental effects on the well-being of our community.

First and foremost, I would like to highlight the critical importance of psychiatrists in addressing the behavioral health needs of our population. Behavioral health disorders affect individuals from all walks of life and can have profound impacts on their overall quality of life. However, there is already a shortage of psychiatrists both in our state and across the United States. By cutting funding for psychiatry residency training, we are exacerbating an already dire situation and depriving our community of much-needed mental health professionals.

This decision shows a concerning pattern of de-funding of psychiatric services in Maryland. We recently sent a letter to your office that we are deeply troubled by the withdrawal of state support for vital research initiatives at the MPRC and SGHC. The research conducted at these centers has not only advanced our understanding of mental health disorders but has also led to innovative treatments and interventions, particularly for those within our state hospitals.

This new proposed cut in funding for psychiatry residency training at the University of Maryland continues this pattern and goes against the long-standing and exemplary Maryland Plan, which has served as a model for other states in addressing behavioral health needs. The Maryland Plan has been instrumental in improving access to mental health services and reducing stigma, and cutting funding for psychiatry residency training would be a further step backward in our state's commitment to behavioral health care. Furthermore, I am deeply troubled by the timing of this decision and the lack of opportunity for meaningful input from stakeholders. It is my understanding that contracts have already been signed, and cutting funding at this stage would be not only unfair to the institutions involved but also disruptive to the training of current and future psychiatrists. We owe it to our aspiring behavioral health professionals to provide them with the resources and support they need to succeed in their training and ultimately serve our community.

As you may know, the University of Maryland has focused on Community Psychiatry services and training. It is a diverse program that includes multiple sites from the University of Maryland and Sheppard Pratt hospitals to several state hospitals and community clinics. The residents in the Fayette and Carruthers community clinics provide roughly 3000 visits per year in those clinics. Over 60% of graduates remain to work in the state of Maryland in community/public psychiatry clinics or state hospitals.

I also want to emphasize that cutting funding for psychiatry residency training is not just a

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financial issue; it is a matter of public health and social justice. Failing to make behavioral health a fiscal priority sends a damaging message that behavioral health care is not valued or essential. This not only reduces access to care for those in need but also perpetuates the harmful stigma surrounding behavioral health issues, discouraging individuals from seeking help when they need it most. For several years, medical organizations, including the American Psychiatric Association (APA) and the American Medical Association (AMA), have supported federal legislation to increase Graduate Medical Education (GME) slots to address workforce shortages. The fact that the Maryland Department of Health (MDH) would work against this effort by eliminating funding for positions is deeply concerning. Doing so also counters the administration's purported prioritization of improved behavioral healthcare access to the citizens of Maryland.

By targeting psychiatry and other vulnerable and stigmatized health issues like pediatric HIV, your recent decisions impact the most vulnerable members of our society and further widen existing health disparities. This is particularly troubling at a time when we are facing a behavioral health epidemic compounded by the ongoing challenges of the COVID-19 pandemic.

In light of these concerns, I urge you to reconsider the decision to cut funding for psychiatry residency training. Instead, I implore you to work towards increasing investment in behavioral health services and training programs to ensure that all individuals have access to the care they need and deserve. Together, we can make a meaningful difference in the lives of countless individuals and build a healthier, more resilient community for generations to come.

Thank you for your attention to this matter, and I look forward to your prompt action in addressing these pressing issues.

Sincerely,

A handwritten signature in black ink, appearing to read 'Theodora Balis'.

Theodora Balis, MD, President
Maryland Psychiatric Society, Inc.