

# Children's Behavioral Health Coalition

1301 York Road ♦ Suite 505 ♦ Lutherville, Maryland 21093 ♦ (443) 901-1550 ♦ FAX (443) 901-0038 ♦ info@mhamd.org

December 11, 2018

Governor Lawrence J. Hogan, Jr.

100 State Circle

Annapolis, MD 21401

Re: Problems with Maryland's Voluntary Placement Agreement Process

Dear Governor Hogan,

Congratulations on your re-election! The Children's Behavioral Health Coalition looks forward to working with you and your Administration to improve the lives of Maryland children and youth with mental health and substance use disorders.

We, the undersigned organizations of the Children's Behavioral Health Coalition (CBHC), are writing to ask for your assistance in addressing a disturbing trend that is undermining the system of care for young Marylanders with mental health and substance use disorders – a decrease in the availability of Voluntary Placement Agreements (VPAs) for families of children with behavioral health needs. This is resulting in substantial delays in accessing care or an inability to secure treatment at all, and it is forcing families to relinquish custody of their children to obtain needed services and supports.

During the recent legislative session, SB 977|HB1517 passed and was signed into law, which requires the Social Service Administration to report on the number of VPAs requested, approved, and the reasons for denial. Moreover, the Joint Chairmen's Report for April 2018 required the Maryland Department of Health and the Department of Human Services to report their use of voluntary placement agreements for youth with a behavioral health disorder and co-occurring developmental disorder and behavioral health disorder who are discharged from residential treatment centers by December 1, 2018. (*See attached.*) The report has not been issued to the House Appropriations or Senate Budget and Taxation committees.

We acknowledge that VPAs are not an ideal solution to meet the needs of our youth. We support the provision of services in community settings to keep children at home with their families whenever possible, and we are committed to working with you and your administration develop better options. However, until a robust system of community based services are available and accessible, VPAs are a necessary option for families seeking treatment for their children.

When youth not in the care and custody of the state are discharged from a residential treatment center (RTC), they are usually discharged to a lower intensity setting. Unfortunately, insurance generally does not pay for these placements, and out-of-pocket costs are prohibitive for most families. For the past 15 years, parents and guardians in this situation have been able to enter into a VPA with a local department of social services (LDSS). Under these agreements, the parent or guardian retains legal custody of their child while the LDSS is given the responsibility to determine the most appropriate out-of-home placement based on treatment recommendations.

These VPAs have been extremely helpful for parents that are unable to afford step-down care for their child with behavioral health needs following an RTC placement. Unfortunately, VPA approvals have been

in decline, which is resulting in children cycling in and out of high intensity placements or not receiving any behavioral supports and services at all.

The VPA process has been in effect since January 17, 2003, when Governor Robert Ehrlich signed his first Executive Order, "Custody Relinquishment and Access to Services for Children." The process was codified in 2007 with legislation that established a responsibility of the LDSS to review all VPA requests and make decisions that would improve the care of children with disabilities (SB579, HB1226). COMAR 07.02.11.13 dictates the regulatory requirements for families to apply for a VPA.

It is unclear why VPA approvals are in decline – the behavioral health community has made a sincere effort to obtain the reason for denials from the Social Service Administration (SSA) with little response – but the effect is profoundly negative for Maryland children with behavioral health needs and their families who are desperately seeking the assistance of the state to help their child access quality care. Recently, the Governor's Office for Children reestablished Local Care Teams to coordinate services and get children into treatment, but this solution will likely do little to address the need given a persistent lack of community treatment options.

Maryland's behavioral health system of care for children has been in decline. The state has seen closures of three RTCs and families have increasingly turned to more restrictive emergency departments and hospital inpatient units to connect their children to behavioral health treatment. These access challenges often result in a decompensation of the child's situation, which may lead to unnecessary inpatient psychiatric stays or criminal justice involvement. Continued denials of VPAs by SSA will only exacerbate this situation.

The Children's Behavioral Health Coalition has witnessed the benefits of VPA approvals for children with unique, individualized needs. The declining number of approvals directly impacts families who do not have the means or ability to secure services in the community. This forces families to make tough decisions such as trying to care for a child at home without the appropriate resources or seeking unnecessarily intensive treatment in hospitals. At worst, families end up relinquishing custody of their child to access needed intensive services.

We urge you to compel SSA to uphold the statutory requirements under Section 5-525 of the Family Law Article and regulatory authority under COMAR 07.02.11.03 (B)(13), allowing families to use VPAs as a tool when seeking to provide necessary care for their child with serious behavioral health needs.

Thank you for your attention to this request. We look forward to your response. If you have any questions, please contact Irnande Altema at 443-901-1550 x206 or [ialtema@mhamd.org](mailto:ialtema@mhamd.org).

cc: David Brinkley, Secretary of Budget and Management  
Lourdes Padilla, Secretary of Department of Human Resources  
Rebecca Jones Gaston, Executive Director of Social Services Administration  
Randi Walters, Deputy Secretary of Programs at Department of Human Resources