



**Testimony on HB581/SB486 Labor and Employment – Employment Standards During an Emergency
(Maryland Essential Workers’ Protection Act)**

House Economic Matters Committee House Appropriations Committee

February 5, 2021

POSITION: OPPOSE

Cornerstone Montgomery is the largest provider of Behavioral Health Services in Montgomery County. We provide outpatient and residential treatment for mental health and addiction-related disorders, day programs, case management, Assertive Community Treatment (ACT), employment supports, and crisis interventions. While we support the intent of the bill to provide protection and support for essential workers, the provisions of this bill would create severe financial hardship for those of us who serve individuals with serious mental health disorders in the public behavioral health system. Our rates are set by the State Medicaid program; we cannot alter them nor can we pass additional costs onto the individuals we serve. Should this bill pass in its current posture we strongly urge that Medicaid rates for impacted organizations be raised commensurate with the costs associated with compliance.

Further, we are very concerned that employees could refuse to fulfill their job duties if they encounter conditions they feel to be unsafe. This provision could result in unstaffed group homes and residences for individuals with psychotic and other mental health disorders who rely on staff support – and in many cases are required to be there around the clock. This is especially relevant during the pandemic if staff can state that they refuse to work because of the risk of COVID infection. Cornerstone Montgomery has been able to provide our employees and clients with all the PPE that they need to stay safe – but this has not been the case for other agencies. PPE has been very difficult to obtain on a consistent basis. We have seen that having the necessary PPE works and we have been able to contain all of the potential outbreaks that we have had with only 1 or 2 staff and clients testing positive in each case. Even hospitals have struggled to get what they need. Sometimes the residents we work with do not adhere with masking, hand washing or social distancing guidelines due to the disorganization cause by their mental disorder. Every effort is made to work with the individuals we serve to educate and assist them with adherence but those efforts sometimes are to no avail. If one or more employees choose not to work their shifts we could quickly have homes left unattended and clients going without essential services such as medication monitoring. We would not be able to adequately staff group homes and other residential programs potentially leading to increased decompensation, hospitalization and even COVID infection. This is simply not acceptable.

HB 581/SB486 requires employers to provide hazard pay during an emergency. At the beginning of the COVID emergency CBH strongly urged the Maryland Department of Health (MDH) to provide retainer payments or temporarily raise reimbursement rates so that providers could offer hazard pay, particularly

for their residential staff. Although other states implemented such changes, MDH refused to do so. Cornerstone Montgomery was only able to provide some hazard pay because of the federal PPP money, but we certainly are not going to be able to do that again.

This bill also requires employers to provide financial assistance for unreimbursed health care costs to each essential employee who becomes sick or injured as a result of the emergency – whether the illness or injury resulted from the employee’s workplace. This could run up a significant tab with premium contributions, copays, deductibles, and other out-of-pocket expenses accruing to us – again, with no commensurate Medicaid reimbursement rate increase to offset the costs.

For these reasons we urge careful deliberation on the unintended consequences of this bill. Given the expected flood in demand for behavioral health services resulting from the impacts of the pandemic, this is a dangerous time to risk implementing measures that could result in reduced access to needed services. We respectfully urge an unfavorable report for HB 581/SB486.