

Testimony Neither For Nor Against LD 258


An Act Making Unified Appropriations and Allocations from the General Fund and Other Funds for the Expenditures of State Government and Changing Certain Provisions of the Law Necessary to the Proper Operations of State Government for the Fiscal Years Ending June 30, 2023, June 30 2024 and June 30, 2025

February 23, 2022

Good afternoon, Senators Rotundo and Baldacci, Representatives Sachs and Meyer, and members of both the Appropriations and Financial Affairs and the Department of Health and Human Services Committees. I am Kate Marble, resident of Auburn and Licensed Clinical Social Worker. I am a member of the Policy Committee of NASW-Maine, which represents Maine Social Workers, and am the Case Management Program Director at Health Affiliates Maine, a large statewide behavioral health agency which provides community based behavioral health services to over 10,000 Mainers each year. I have been providing community-based social services and behavioral health for over twenty years.

On behalf of both NASW-Maine, my organization and myself, I am here first to applaud the 131st Legislature for the overall increase in the rates to behavioral health providers to ensure a living wage for the behavioral health workforce. We applaud the \$4 million in funding for the Health Professions Education Loan Repayment Program to provide relief to our dedicated frontline workers and to increase the number of behavioral health professionals staying in Maine with their skill set. This investment in our behavioral health workforce is crucial to ensure we can staff the hundreds of vacant behavioral health positions that are currently forcing both children and adults to be on long waitlists for services (over 4,000 currently waitlisted at our agency alone). Given only three of last year's nineteen awardees in the program were social workers, we hope for more focused effort and funding to support the 400 or more social workers who currently report devastating educational loans and who consider or have already left the field. We need to bring them back.

I am also here to share that, while the investment is the greatest in years, it is still not going to be transformational due the historical lack of investment in behavioral health. My colleagues and I have watched the behavioral health system be decimated brick-by-brick with decreased funding over three decades, and that is not going to be repaired with this budget alone. We warned past legislative bodies about how a reduction in funding of prevention and early intervention would result in increased higher levels of care such as hospitalization, out-of-state residential treatment, and adults who are stuck in emergency rooms, sent to jail or are homeless and living on the streets. Those past legislative bodies turned away from the expertise of providers, clients, and their support people.



Our warnings have borne out, resulting in many Mainers now being in a more vulnerable place. Case managers used to help people access the resources they need to be employed and regain stable housing. Since even before COVID, however, their role evolved to placing client names on waitlists and helping them figure out ways to survive day-to-day. Some clients do not survive. These losses hit almost everyone in this room.

The state of emergency during COVID and the opioid pandemic shed a bright light on what has been a deteriorating behavioral health infrastructure, resulting in support during the 130th Legislature to start rebuilding our system. There is a growing understanding that we are losing the lives of our friends, neighbors, and family members to preventable and treatable behavioral health issues due to lack of access to services. We hope that the 131st Legislature will continue this recognition and work to ensure that every Mainer who asks for help can receive it. Right now, that is not happening, and Mainers are still very much at risk.

Thank you for your time and attention to these crucial matters.