



Testimony by Clara Keane, Legislative Advocacy Manager, Treatment Advocacy Center
Submitted to the Committee on Health and Human Services
Hearing regarding LD 445
March 17, 2023

Senator Baldacci, Representative Meyer, and the members of the Committee on Health and Human Services,

My name is Clara Keane, and I am the Legislative Advocacy Manager at Treatment Advocacy Center, a national nonprofit dedicated to making treatment possible for people with severe mental illness. The Treatment Advocacy Center supports LD 445 and respectfully requests the Legislature to advance this bill so that Maine may apply for expenditure authority under Section 1115 of the Social Security Act to cover adult Medicaid recipients receiving treatment for serious mental illness (SMI) in institution for mental diseases (IMDs). The expansion of Maine's 1115 waiver to include psychiatric services for people with SMI will lead to greater access to inpatient psychiatric care. In addition to increasing access for inpatient care, LD 445 will strengthen Maine's continuum of care for mental health services.

Although ten states currently have waivers for SMI/SED treatment, seven more are pending, including New York. California will soon be applying for a waiver with strong bipartisan support, and New Hampshire has expanded coverage for people with SMI under its Section 1115 waiver. Vermont, one of the first states to take advantage of this Medicaid authority, is the strongest example of how Maine can use federal fund participation (FFP) under an SMI waiver to help people at all stages of medically necessary treatment.

Vermont's waiver contains several avenues of FFP, including both the SMI/SED IMD exclusion language and funds for outpatient care. Vermont has authority to use waiver funds to achieve a number of objectives, specifically:

- Reduce the rate of uninsured and/or underinsured in Vermont;
- Increase the access to quality health care for uninsured, underinsured, and Medicaid beneficiaries;
- Provide public health approaches and other innovative programs to improve the health outcomes, health status and quality of life for uninsured, underinsured and Medicaid-eligible individuals in Vermont; and
- Encourage the formation and maintenance of public-private partnerships in health care, including initiatives to support and improve the health care delivery system and promote transformation to value-based and integrated models of care.

To achieve that goal, Vermont is allowed to spend waiver funds on a number of services, including "MH outpatient services for adults." The state just has to make the case that the expenditures advance one of those listed objectives. Maine can do the same with its waiver, but only after passage of LD 445.

Thank you for considering these comments.