MaineHealth

MaineHealth Local Health Systems

Franklin Community Health Network LincolnHealth MaineHealth Care At Home Maine Behavioral Healthcare Memorial Hospital Maine Medical Center Mid Coast-Parkview Health NorDx Pen Bay Medical Center Southern Maine Health Care Waldo County General Hospital Western Maine Health

Part of the MaineHealth Family

MaineHealth Accountable Care Organization

MaineHealth Affiliates

MaineGeneral Health New England Rehabilitation Hospital of Portland St. Mary's Health System

Testimony of Sarah Calder, MaineHealth In Support of LD 526, "An Act to Provide Funding to Emergency Medical Services Organizations" Monday, March 20, 2023

Senator Beebe-Center, Representative Salisbury, and distinguished members of the Joint Standing Committee on Criminal Justice and Public Safety, I am Sarah Calder, Senior Government Affairs Director at MaineHealth, and I am here to support LD 526, "An Act to Provide Funding to Emergency Medical Services Organizations."

MaineHealth is an integrated non-profit health care system that provides a continuum of health care services to communities throughout Maine and New Hampshire. Every day, our over 22,000 care team members support our vision of "Working Together so Our Communities are the Healthiest in America" by providing a range of services from primary and specialty physician services to a continuum of behavioral health care services, community and tertiary hospital care, home health care and a lab.

MaineHealth also operates three ambulance services across our service area, including PACE Paramedic Service in Norway, NorthStar Ambulance Service in Farmington, and the Barbara Bush Children's Hospital neonatal transport system. Since 2019, calls to both PACE and NorthStar have increased by upwards of 33%. At the same time, the losses sustained by both services have also dramatically increased. PACE's operating margin in Fiscal Year 2022 was -25%. NorthStar's was over -9% and is on track to be almost -15% this year, and because of these losses the reliance on town subsidies has increased by over 25% since 2018. This is simply not sustainable for MaineHealth or the local towns.

As you have heard today, we are not alone. In addition to delays responding to emergency calls, the strained system is also failing to adequately accommodate inter-facility transports (transporting patients from the hospital to another hospital or from the hospital to a long-term care facility). And these delays in transports are resulting in patients staying longer in the hospital than they need to, which contributes to backups in our Emergency Departments and hospital beds.

I want to share one, perhaps, less obvious patient population these delays are impacting. As you have likely heard, our behavioral health system is in

crisis and our Emergency Departments have become a significant part of the behavioral health continuum, though they are in no way equipped to meet the needs of this population. In fact, last year 435 children and adolescents languished in MaineHealth Emergency Departments for an average of 5.5 days awaiting appropriate services, including for inpatient psychiatric care. Only four hospitals in Maine have pediatric and adolescent inpatient psychiatric beds, including Northern Maine Medical Center in Fort Kent. It is not uncommon for a child to be transferred from Maine Medical Center's Emergency Department to Northern Maine Medical Center because it is the only available and appropriate bed to care for that child in crisis – 361 miles away. As if accessing behavioral health services isn't enough of a challenge, we now have to find an ambulance willing to be out of service for at least 11 hours transporting this child.

The inability to transfer patients in MaineHealth hospitals has become so severe, we have been forced to stand up our own inter-facility transport system by pulling NorthStar staff and rigs to provide inter-facility and medical transports for our patients. Just in November and December, NorthStar made 278 transports from Maine Medical Center, Mid-Coast-Parkview Health, Pen Bay Medical Center, and Waldo County General Hospital. To be clear, we first contacted local EMS to request these transports, but they were unable to accommodate the request.

The past three years have thrown unimaginable hurdles at our hospitals and our care team members – a pandemic, a behavioral health, long-term care, and workforce crisis, and a failing EMS system. In the face of each of those challenges, we have done our best to respond with innovative solutions – many of which have come with significant investments – but we can't continue to shoulder the burden of a failing system alone. We need your support. Passing LD 526 is an important first step in stabilizing one piece of the failing system.

Thank you and I would be happy to answer any questions you may have.