



**Testimony of Sarah Calder, MaineHealth
In Support of LD 1178, “Resolve, to Reduce Barriers to Recovery from
Addiction by Expanding Eligibility for Targeted Case Management
Services”
Monday, April 10, 2023**

Senator Baldacci, Representative Meyer, and distinguished members of the Joint Standing Committee on Health and Human Services, I am Sarah Calder, Senior Government Affairs Director at MaineHealth, and I am here to testify in support of LD 1178, “Resolve, to Reduce Barriers to Recovery from Addiction by Expanding Eligibility for Targeted Case Management Services.”

MaineHealth is an integrated non-profit health care system that provides a continuum of health care services to communities throughout Maine and New Hampshire. As part of our vision of “Working Together so Our Communities are the Healthiest in America,” MaineHealth provides a range of behavioral health services throughout our footprint. These range from community based outpatient therapy, medication management, substance use treatment and care management to inpatient treatment in four community hospitals and Spring Harbor Hospital.

Maine Behavioral Healthcare (MBH) serves as the leader of MaineHealth’s effort to address the substance use epidemic. Our multi-faceted approach involves prevention, education, and treatment across the entire MaineHealth footprint, including intensive treatment “hubs” run by MBH and overseen by psychiatrists, and intermediate and ongoing maintenance level treatment in primary and specialty care practices located in each of our local health services areas. In Fiscal Year 2022, we served 1,939 patients with opioid use disorder, but at a significant loss of \$916,000 due to inadequate MaineCare reimbursement.

Currently, Targeted Case Management is only available to MaineCare members with substance use disorder who are pregnant or parenting or who use substances intravenously. The legislation before you today expands this valuable service to all MaineCare adults seeking substance use disorder treatment.

The role of case management is integral to the whole health wellness of someone experiencing challenges in various social determinants of health, and can improve the connection someone has to their health care providers and reduce the use of emergency medical and behavioral health services. Case management involves meeting clients to work on goals identified in their treatment plan, including finding and maintaining housing, applying for SNAP benefits, identifying and pursuing educational opportunities, and connecting with vocational supports.

Our team is currently caring for a patient who is seeking care for his opioid use disorder – the severity of his disease is so significant it was affecting his ability to even feed himself. He lives on a fixed income and does not have access to reliable transportation, but he does not meet the

current MaineCare requirements to qualify for Targeted Case Management. We are doing what we can – importantly, without reimbursement – to connect him with the mental and physical health care he needs, arrange for reliable transportation, and address his financial challenges. But with significant losses, and a workforce stretched thin, this is not sustainable.

This may sound familiar to those of you returning to the Legislature as this bill was considered by this Committee last Session and was ultimately combined with Rep. Paul Stearns' bill (LD 415). While we are grateful that the components of Rep. Stearns' bill were funded, expanding Targeted Case Management to all adults with substance use disorder was not.

With a record number of overdose deaths last year, it is our sincere hope that it will finally be addressed this Session.

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