

Maine Association of Recovery Residences 844 Stevens Ave. 1st floor REAR, Portland ME 04103

www.mainerecoveryresidences.com

January 23rd, 2025

L.D. 209

An Act to Make Supplemental Appropriations and Allocations from the General Fund and Other Funds for the Expenditures of State Government and to Change Certain Provisions of the Law Necessary to the Proper Operations of State Government for the Fiscal Year Ending June 30, 2025 (EMERGENCY)

Good Afternoon, Senator Rotundo, Representative Gattine, Senator Ingwersen, Representative Meyer, and Honorable Members of the Health and Human Services and Appropriations Committees, my name is Dr. Ron Springel, a resident of Scarborough and testifying today as the Executive Director of the Maine Association of Recovery Residences (MARR).

Our concern with LD 209 lies in Part S, Section I-a that reduces the number of months a person may receive housing assistance from 9 to 3 months in any 12-month period.

MARR is a Maine 501-C-3 non-profit established in 2016 that operates under the authority of our parent organization NARR, the National Alliance for Recovery Residences. We currently certify 91 recovery residences with 1100 beds in 11 counties.

When a person is admitted to a MARR-certified recovery Residence the vast majority (92.9%) have no employment or even the means to pay the first month's rent. They come from incarceration (22.9%), Detoxes or hospitals (43.4%), Unhoused (20.4%) and other unstable or emergency housing^{*}.

MARR's Housing Subsidy Services Program (HSSP) can fund rent for up to the first 60 days, but these funds only allow for 1 in 9 beds to be supported in this manner. Other philanthropic programs, such as Pathways of Hope and MARR's own Bed Sponsorship Fund help but are not nearly enough. General Assistance (GA) housing support has become a lifeline for many.

MARR has long held the view that persons in early recovery from Substance Use Disorder need time to engage in meaningful recovery programs and activities before engaging in sustained employment. The amount of time to accomplish this varies. Some are able to begin employment during the first 30 days. Most take longer.



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There are numerous obstacles to overcome in early recovery. More than a few have treatment in progress. Some are engaged in a Treatment and Recovery Court or have other legal obligations that prevent full-time employment. The impact of reducing GA Housing Assistance would be to severely hinder the ability of a person in these circumstances to fulfill their obligations, engage in meaningful recovery treatment and destabilize the fragile structure they are rebuilding in their lives.

Maine has made remarkable progress in reducing the tragic toll of SUD. In the last two years alone (2023-24) overdose fatalities have dropped 33%. That translates to several hundred lives being saved.

The reasons for this successful trend are many. But few would argue that greater availability of recovery supports, including safe recovery housing, have been major contributors. If we want to see continued progress, we cannot reduce the support needed by people just beginning their journey to recovery.

Maine has been a national leader in demonstrating how an "all hands-on deck" approach can reverse the epidemic. Now, when we are just beginning to show progress, is not the time to cut back on a vtal element of success.

We urge you to amend LD 209 to eliminate the reduction in general assistance housing benefits and retain the invaluable support currently provided.

Therefore, we humbly ask the Committee NOT TO PASS LD 209 with Section S in its current form.

Most sincerely and respectfully,

Ronald Springel, MD

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*Data Source: over 1300 admissions to the HSSP Program July 1, 2023 – December 31, 2024