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LD 514

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Senator Ingwersen, Representative Meyer, and Honorable Members of the Health and Human Services Committee,

My name is Courtney Meade, and I am here today to voice my strong support for LD 514. As someone in long-term recovery, I know firsthand how critical access to medical detox is. I never had the opportunity to go to a medical detox facility, and I wish I had. Instead, I went to a rehab that did not offer medical detox services but assured me that I would be kept comfortable while I experienced withdrawal symptoms. That was not true. I suffered through four days of withdrawal symptoms from methamphetamine and alcohol before leaving to find medication management services, including Naltrexone. I eventually got into an intensive outpatient program (IOP), but I had to figure everything out on my own, without support or guidance.

I was incredibly persistent—stubborn even—in finding the care I needed, despite not knowing what I was doing. It is important to note that not everyone is able to navigate this process on their own. There is a very small window of time between when someone asks for help and when they may change their mind. If services aren't available immediately, people often return to substance use, increasing their risk of overdose, arrest, or worse.

I saw this happen again recently when I took a relative to the hospital while she was detoxing. There were no detox beds available, and she also needed medical care. I called the hospital ahead and was told she would receive comfort medications, a treatment plan, and placement in a rehab or medical detox facility when discharged. That did not happen. Instead, she was sent to a crisis stabilization unit where she was ignored and not properly treated, because hospital staff were overworked and lacked the resources to help her. Once again, I had to fight and push to get her into a rehab—not because the system worked for her, but because I did not give up.

Emergency rooms and jails are not equipped to handle substance withdrawal. Yet, without enough medical detox beds, these are often the places people end up. ER visits for withdrawal are extremely expensive, costing thousands per visit, and usually fail to connect people to the care they need. Jails are even worse—people detox there without medical support, only to be released at a high risk of relapse and overdose. The cycle repeats, and the cost to individuals, families, and the state continues to grow.

Medical detox facilities save lives and save money in the long run. But right now, Maine's reimbursement rate does not cover the cost of care. Many providers are left struggling to keep beds open. Increasing the reimbursement rate to match New Hampshire's is a necessary step in ensuring people can access proper, timely detox services when they need them—not after they've already suffered, relapsed, or ended up in an ER or jail.

I urge you to support LD 514 and help give people a real chance at recovery.

Thank you for your time, and I am happy to answer any questions.