Janet T. Mills Governor

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Senator Ingwersen, Chair Representative Meyer, Chair Members, Joint Standing Committee on Health and Human Services 100 State House Station Augusta, ME 04333-0100

Re: LD 215 – An Act to Establish a Program to Assist Residents of Large Recovery Residences

Senator Ingwersen, Representative Meyer and members of the Joint Standing Committee on Health and Human Services:

Thank you for the opportunity to provide information in opposition of LD 215, An Act to Establish a Program to Assist Residents of Large Recovery Residences.

This bill would establish a rental assistance program within the Department of Health and Human Services (Department) to support persons residing in certified recovery residences that have the capacity to serve 20 or more residents at one time. Rental assistance equal to the monthly rent would be paid directly to the recovery residence on behalf of the eligible individual who must otherwise be eligible for municipal general assistance. As proposed, the bill would also require the Department to contract with a nonprofit organization in the state that certifies recovery residences to administer the program, which would be jointly developed with Maine State Housing Authority and undergo routine technical rulemaking by the Department. The fund for the program would be established within and administered by the Department and funded by appropriations, allocations and other public or private sources. We agree that the bill addresses a problem, namely by addressing financial challenges experienced by individuals seeking to receive support at a recovery residence and who without support might not be able to receive this service. However, we respectfully disagree that this bill is the best solution.

The Office of Behavioral Health currently funds a recovery residence subsidy through a contract with the sole entity in Maine that certifies recovery residences, the Maine Association of Recovery Residences (MARR). The existing program subsidizes beds for recovery residences as follows:

- Five or less beds one bed may be subsidized
- Six to ten beds up to two beds may be subsidized
- Ten or more beds up to three beds may be subsidized

The subsidies are only available to new residents for an initial 60 days with the opportunity for an additional 30-day extension for a total of 90 days of funding. The program serves to support

new residents transitioning out of residential treatment settings, correctional facilities, and similar environments to provide assistance while they transition back into the community, seek and obtain steady employment, and are then able to pay rent and other expenses themselves.

There are currently only three recovery residences in Maine applicable to the proposed legislation as most residences are smaller organizations which is a national standard for recovery residences. There are some concerns that this bill would require already scarce funding to be utilized for a minority of residences throughout the state at a cost to the majority, creating an increased risk for disparity and inequity among Maine's uniquely varied recovery residences and municipalities.

We also have concerns about potential unanticipated implications or consequences of this bill as currently written. By requiring broad subsidies for larger recovery residences, Maine could see a shift away from the current recovery residence model of a home-like environment to larger, more institutionalized settings. Larger recovery residences serve a vital role and allow for greater accessibility; however, the home-like setting of traditional, smaller residences is a foundational element of recovery residences and is the national standard. According to the National Association for Recovery Residences, "The term 'recovery residence' denotes safe and healthy residential environments in which skills vital for sustaining recovery are learned and practiced in a home-like setting, based on Social Model principles. (NARR Standards V 3.0, p 1). By possibly encouraging the expansion of larger residences, the fiscal and programmatic impacts of this legislation, and to those served by the residences, could also be negatively affected.

Please feel free to contact me if you have any questions during your deliberation of this bill.

Sincerely,

Sarah Squirrell

Sarah Squirrell
Director
Office of Behavioral Health
Maine Department of Health and Human Services