



Committee on Health and Human Services

**Re: LD 514 - Resolve, to Raise MaineCare Reimbursement Rates for Detoxification
Services for Substance Use Disorder Treatment**

March 10, 2025

Dear Senator Ingwersen, Representative Meyer, and distinguished members of the Committee on Health and Human Services, my name is Gia Drew, and I am the Executive Director of EqualityMaine, which has been advocating on behalf of Maine's LGBTQ+ community since 1984. We strongly support ensuring that detox beds remain open and lives are saved by increasing MaineCare reimbursement rates.

Most people find it difficult to stop using substances without help as well as separation from active use. Detox offers crucial support in a safe and medically supervised environment, helping individuals stabilize before progressing in their recovery journey, such as transitioning into rehab or a recovery house. Detox has been shown to reduce the “revolving door” phenomenon of repeated withdrawals, and saves money by increasing recovery and decreasing the use of detox and treatment services in the future, especially when examining expensive acute medical and surgical treatments related to untreated substance abuse.¹ The costs of ER visits and inpatient hospitalization far exceed the cost of detox treatment, and without adequate detox care, Maine taxpayers bear the additional financial burden of increased incarceration rates, homelessness, and public assistance costs.

LGBTQ+ people have higher rates of substance use and substance use disorders compared to non-LGBTQ+ people: LGB adults are nearly twice as likely as heterosexual adults to experience a substance use disorder², and transgender people are almost four

¹ “Detoxification and Substance Abuse Treatment.” *National Center for Biotechnology Information*, U.S. National Library of Medicine, 2006, www.ncbi.nlm.nih.gov/books/NBK64115/.

² Bastian Rosner et al. “Substance Use among Sexual Minorities in the US – Linked to Inequalities and Unmet Need for Mental Health Treatment? Results from the National Survey on Drug Use and Health (NSDUH).” *Journal of Psychiatric Research*, Pergamon, 17 Dec. 2020, [sciencedirect.com/science/article/pii/S0022395620311316](https://www.sciencedirect.com/science/article/pii/S0022395620311316).

times as likely as cisgender people to experience a substance use disorder.³ While there are no state-level data for LGBTQ+ MaineCare recipients, nationally, LGB adults receiving Medicaid were both significantly more likely than heterosexual adults to receive alcohol or drug treatment in the past 12 months (6.2% compared to 4.2%) but also to report unmet alcohol or drug treatment needs (17.0% compared to 9.4%).⁴ It is important to note that for many people who use drugs, the stigma and discrimination toward individuals with substance use disorders is compounded by the prejudice already faced by marginalized communities, which places them at additional risk for a number of negative physical and mental health outcomes.⁵

We urge you to vote “Ought to Pass” on LD 514 in order to ensure that Maine residents have access to adequate detox care. Helping people have access to detox services when they are needed most saves money and lives.

Thank you,

Gia Drew (she/her)

Executive Director, EqualityMaine

³ Wanta, Jonathon W., et al. *Transgender Health*, vol. 4, no. 1, 1 Nov. 2019, pp. 313–315, doi:10.1089/trgh.2019.0029.

⁴ www.macpac.gov/wp-content/uploads/2022/06/Access-in-Brief-Experiences-in-Lesbian-Gay-Bisexual-and-Transgender-Medicaid-Beneficiaries-with-Accessing-Medical-and-Behavioral-Health-Care.pdf.

⁵ Krueger, Evan A, et al. “Sexual Orientation Disparities in Substance Use: Investigating Social Stress Mechanisms in a National Sample.” *American Journal of Preventive Medicine*, U.S. National Library of Medicine, [pmc.ncbi.nlm.nih.gov/articles/PMC6925636/](https://pubmed.ncbi.nlm.nih.gov/articles/PMC6925636/).