

## Written Testimony for LD 279

March 23, 2025

Dear Senators Baldacci, Grohoski, Ingwersen and Rafferty and the Committee on Health and Human Services.:

My name is **Roy Ulrickson III, LCSW**. I live in Newport and am a father of 2 neurodiverse children, I am testifying on behalf of the Autism Society of Maine (ASM) Board of Directors as the Treasurer. I have been working in the field for over 15 years as a former paraprofessional in the public-school setting and long-term provider of in-home mental health services. I am testifying in favor of **LD 279: An Act to Address the Shortage of Direct Care Workers for Children with Disabilities in Maine**.

My oldest son was diagnosed with autism in 2003 when he was 3 years old. Our family utilized in-home mental health services for many years. Wanting to use the lessons I learned by raising my son and wanting to return to the community, I decided to do this work as well. I was fortunate to have provided families with support as a Section 28 BHP and Section 65 HCT (home and community therapy) services as a clinician. Overall, I worked with children with behavioral and special needs and their families for over 15 years.

For the entirety of my 15 years, these services were in high demand due to the shortage of behavior health providers and service providers. Many of the families that I supported waited for up to 2 years for services. This was a result of a lack of agencies providing services (especially in rural parts of the state) and a shortage of providers due to these agencies being unable to hire qualified BHPs and clinicians. These shortages were so severe that in 2024, the U.S. Department of Justice sued the state of Maine for allegedly violating the civil rights of disabled children. Among the allegations are that the state has failed to invest in community-based providers and that it has been “unnecessarily segregating children with behavioral health disabilities in hospitals, residential facilities and a state-operated juvenile detention facility.” As a result, children often institutionalized due to scarcity of services – some stay in hospitals for weeks waiting for high level of care placements. Similar shortages are currently negatively affecting the ability of families and children to receive in-home person care.

My oldest son still lives with us. We are very fortunate that we have been authorized as Section 29, share living providers. Section 29 refers to a program in Maine where individuals with intellectual disabilities or autism can live in a family-style home with a host family, funded through the MaineCare Section 29 waiver. These services allow for community-based services. They provide the opportunity for these individuals to remain at home or in a community setting and avoid institutionalization. These services have been very successful for my son and our family.

One thing that I have learned through my years of service is that parents are often the most knowledgeable and most appropriate people to support their children. This is the same for both mental health and medical support. **LD 279** would allow these parents to receive reimbursement for services that they already provide to their children. If in-home personal care services are not available from outside agencies, the family would greatly benefit from these reimbursements. Anything that can allow children to remain in their homes would lead to improved physical and mental health and avoid hospitalization. These translate to improved long-term outcomes for both the individual and family. In-home services have shown great benefits and success when families provide mental health services. This can certainly be the same for in-home personal care as well.

Thank you for your time and consideration.

Sincerely,

Roy Ulrickson III, LCSW  
Father of Roy “Andrew” Ulrickson IV and Thomas Ulrickson  
Autism Society of Maine Treasurer