Janet T. Mills Governor

Sara Gagné-Holmes Commissioner



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4/9/2025

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 721 – Resolve, To Support the Full Implementation of Certified Community Behavioral Health Clinics in the State

Senator Ingwersen, Representative Meyer and members of the Joint Standing Committee on Health and Human Services, thank you for the opportunity to provide information neither for nor against LD 721, *Resolve, To Support the Full Implementation of Certified Community Behavioral Health Clinics in the State.* 

It is without question that the implementation of Certified Community Behavioral Health Clinics (CCBHCs) offers Maine communities the opportunity for expanded access to integrated behavioral health care through an innovative model endorsed by both the Substance Abuse and Mental Health Services Administration and the Centers for Medicare & Medicaid Services. CCBHCs aim to improve both quality and accessibility of important evidence-based, trauma-informed, recovery-oriented and person- and family-centered care and services. The innovation of CCBHCs is built upon the notion that care delivery is expanded and improved by an alternative payment model that breaks down fee-for-service funding silos and includes typically non-billable activities such as outreach and care coordination.

This letter provides some considerations related to the sponsor's amendment rather than the original bill. This resolve provides one-time funding to further support the implementation of the five CCBHCs certified by the State as part of the federal CCBHC Medicaid Demonstration Program. The Department completed a rate determination process in accordance with MaineCare Rate Reform Statute, resulting in rate methodology assumptions that complied with CCBHC methodological requirements and strived for consistency in relevant assumptions for reimbursement across CCBHC providers and compared to other behavioral health services, especially in terms of wage levels assumptions. These rates are scheduled to be rebased in one to two years.

The Department utilized its established rate determination process to develop a rate methodology it believes is appropriate. Understanding that CCBHCs are in a demonstration period and have never been implemented in the State, there are also likely to be lessons learned during this rollout to refine future CCBHC work. As amended and if passed, the Department would work with CCBHC providers to determine how any available funds would be utilized.

The Department values the opportunity that CCBHCs provide for Maine and underscores the strong collaborative process that has been undertaken and will continue to make the most of the opportunity. We would be happy to provide more information on the reimbursement methodology for CCBHCs, if that would be helpful.

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

Sincerely,

Michelle Probert

Director

Office of MaineCare Services

Maine Department of Health and Human Services

Sarah Squirrell

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Director

Office of Behavioral Health

Maine Department of Health and Human Services