



Alliance for Addiction and Mental Health Services, Maine
The unified voice for Maine's community behavioral health providers

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Testimony in Opposition to
An Act to Establish a Managed Care Program for MaineCare Services –
LD 1878

May 12, 2025

Good morning, Senator Ingwersen, Representative Meyer, and honorable members of the Committee on Health and Human Services. My name is Adam Bloom-Paicopolos. I am a resident of Wells and am proud to serve as the Executive Director of the Alliance for Addiction and Mental Health Services, Maine (the Alliance). The Alliance is the statewide association representing Maine's community-based behavioral health agencies who provide mental health and substance use services to over 80,000 children, adults, and families annually. The Alliance advocates for the implementation of sound policies and evidence-based practices that serve to enhance the quality and effectiveness of our behavioral health care system.

On behalf of the Alliance, I am here today to speak in opposition to LD 1878, "An Act to Establish a Managed Care Program for MaineCare Services."

This bill proposes a significant transformation of the MaineCare program, moving from the current fee-for-service model to a statewide comprehensive managed care system. While we fully support efforts to improve care coordination and fiscal sustainability, we are deeply concerned that LD 1878 may unintentionally exacerbate the challenges already facing our behavioral health system by including a mandatory behavioral health "carve-in" for behavioral health – an option that many states that transitioned to managed care have opted to "carve-out" alongside other services such as I/DD and long-term services and supports (LTSS).

Community behavioral health providers in Maine are already grappling with unprecedented demand, long waitlists, staffing shortages, and workforce burnout. Over the past several years, we have seen essential programs shrink or close altogether due to funding and capacity constraints. Layering in the added administrative complexity of managed care – annual reimbursement negotiations, excessive prior authorizations, utilization management, shifting payment systems – risks further destabilizing an already fragile system.

Maine has already taken positive steps to improve integration and quality of care without relying on managed care models. Certified Community Behavioral Health Clinics (CCBHCs) are just one example of value-based care and innovation rooted in collaboration, not competition. We encourage the Legislature to build on these successes rather than importing a commercial-based system that has often resulted in fragmented networks, delayed payments, and no empirically proven guarantees of cost savings or improved access to care. It is important to consider that the budget predictability of managed care does not necessarily translate to budget savings.

Furthermore, LD 1878 proposes sweeping changes without a fully articulated implementation plan or stakeholder engagement with providers or MaineCare beneficiaries. The timeline proposed in this legislation is insufficient for a full-scale transition of this magnitude, and the state's capacity to undergo such a change without causing major disruption to providers and beneficiaries is not clear. Providers, advocates, and the individuals we serve must be meaningfully engaged in shaping any future changes to the delivery system – particularly one as substantial as fee-for-service to managed care.

The Alliance is committed to improving access, outcomes, and sustainability of behavioral health services in MaineCare. But without clear safeguards for continuity of care, adequate provider reimbursement, and streamlined administrative processes, this bill poses significant risks to an already fragile behavioral health safety net. **For these reasons, we urge the Committee to vote "Ought Not to Pass" on LD 1878.**

Thank you for the opportunity to provide testimony this morning. I would be happy to answer any questions from the Committee or serve as a resource given my prior experience delivering policy and competitive strategy consulting services to managed care organizations and states that have transitioned to managed care delivery systems.

Respectfully,

A handwritten signature in black ink, appearing to read 'Adam Bloom-Paicopolos', with a stylized, cursive script.

Adam Bloom-Paicopolos, MPP
Executive Director