

**Testimony of Sarah Calder on behalf of MaineHealth, Northern Light Health,  
and the Maine Hospital Association  
In Support of LD 966, “An Act Allowing Access by State Agencies and  
Hospitals to Certain Confidential Probate Court Records If the Access Is in  
the Public Interest”  
March 17, 2025**

Senator Carney, Representative Kuhn, and distinguished members of the Joint Standing Committee on Judiciary, I am Sarah Calder, Senior Government Affairs Director at MaineHealth, and I am here on behalf of MaineHealth, Northern Light Health, and the Maine Hospital Association in support LD 966, “An Act Allowing Access by State Agencies and Hospitals to Certain Confidential Probate Court Records If the Access Is in the Public Interest.”

My colleagues and I have appeared before this Committee over the years to discuss the challenges we experience with guardianship – which, as you know, is key to not only providing care to a patient, but also securing MaineCare coverage and discharging a patient to the next appropriate level of care. Today, I am here to share our collective support for LD 966.

Last Session, this Committee and the Legislature approved a temporary postponement (until April 1, 2025) of changes to the confidentiality provisions in the Probate Code that were approved by the 128<sup>th</sup> Legislature, which limited hospitals’ access to the court records of guardianship and similar probate proceedings, the existence of a guardian, and the restrictions of power of a guardian. This limitation prevented hospitals from determining if a patient had the legal authority to act as their own decision maker, including regarding their discharge. Our social work teams were left wondering if the application was approved or denied, if a temporary guardianship expired, and who the petitioner was. The situation was made even worse during emergencies when a patient was unconscious, in an altered mental state, or unable to communicate.

With those significant challenges in mind, we strongly supported the temporary postponement last Session, but asked that this Committee consider a permanent exemption for hospitals. With the expiration of that postponement quickly approaching, we were grateful to see the legislation before you today, which grants a permanent exemption.

MaineHealth is currently caring for approximately 100 patients who are cleared for discharge but for whom there is no appropriate long-term care placement available. And the situation is similar for other hospitals throughout the state, including Northern Light Health. This is not patient-centered care, it can cause delays in care for patients with acute needs, and it is leading to the burnout of our workforce. If the temporary postponement expires on April 1 and our access to information is restricted once again, this number could potentially grow if we are not able to easily and quickly determine guardianship status.

Thank you and I would be happy to answer any questions you may have.