



**Consumer Council System of Maine**  
A Voice for Consumers of Mental Health Services

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March 14, 2023

Good afternoon, Senator Baldacci, Representative Meyer and esteemed members of the Health and Human Services Committee,

My name is Simonne Maline. I am the Executive Director for the Consumer Council System of Maine (CCSM). I am here today on behalf of the CCSM to testify in opposition of **LD 445 "Resolve, Directing the Department of Health and Human Services to Apply for a Waiver from the Federal Government for the Medicaid Limitation on Payment to a Facility with More Than 16 Inpatient Beds for Psychiatric Treatment"**

The Consumer Council System of Maine is a public instrumentality written into State Statute by the Maine Legislature to serve in an advisory capacity and to provide legislators with guidance and advice regarding the delivery of effective and appropriate adult mental health services from those served by them.

This is not the first time we oppose a proposal for an IMD (Institutes of Mental Disease) waiver. DHHS proposed it in 2019. I have attached that testimony to this one. We are grateful that they chose not to pursue it at that time.

The reason we do not support an IMD waiver is that this waiver is about creating more inpatient beds. While inpatient care is needed for a small group of people in a time of extreme crisis, we believe that the real issue is the lack of community care. If people can readily access the care that is needed in their communities, the need for acute care greatly diminishes.

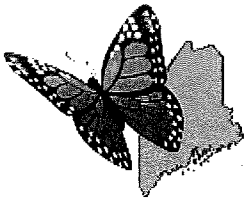
Currently in Maine, there is no live bed tracking data (something that HHS might want to consider) so we have no real way of knowing if all the beds are full. We have heard from DHHS and others in the provider community share that there are beds offline due to staffing shortages. So more beds will not magically fix that if there is no one to staff them.

If we really want to look to infuse more funds from the federal government for community-based care, then there are other waivers and state plan amendments that could be used to support that work. Also, this is not free money and we are concerned that funds will be taken from the community system to pay for the \$1 seed money to get the federal match. Depending on where those funds could be taken from might put us out of compliance with the AMHI Consent Decree.

Thank you,

*Simonne Maline*

Executive Director



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March 6, 2019

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Department of Health and Human Services  
Division of Policy/ MaineCare Services,  
242 State House St.  
11 State House Station,  
Augusta, ME 04333-0011

Dear Department of Health and Human Services,

The Consumer Council System of Maine (CCSM) is here today to speak in opposition to DHHS' draft request of the IMD 1115 waiver from CMS. Our comments are focused on the adult mental health portion of the request, as this is the community we work/live in.

For just a moment, I want to speak about an important fact that does not get said enough. There are a number of groups that will speak today. They will speak about mental health services in a lot of venues; service providers, state entities, etc. Many have an important point of view that has much value. Often though, they either say, imply or we just get used to thinking that they are speaking for US, but they do not.

There is an important saying in the disability community "Nothing about us without us". The reason we make pins and t-shirts that say this is because we are often fighting to have our voices heard. We are talking about what will impact thousands of Mainers directly.

I will tell you that in my years of working with my fellow peers, their requests are not for more hospital beds.

People want to have a place they can call home. This includes family and friends giving purpose and meaning in their lives.

We have spent decades reversing what we did to institutionalize individuals who had no business being in psychiatric hospitals. This resulted in the Maine AMHI Consent Decree filed in 1989. In

spite of this, we have not been successful at creating full community mental health options that would allow people to live well in their communities of choice. I was there for the ceremony in 2004 where we officially closed AMHI and read the names of those who died in that institution. All of these 11,647 deceased individuals were honored.

Allowing hospitals to be paid through the IMD 1115 waiver makes most peers shiver. If we bring funds to Maine for the purpose of making institutional and residential services more prolific, what do you think will grow in Maine? It will not be community-based services. It will be more beds, more hospitalizations, which in reality are only needed for a small group of people short term, but not for the majority of our peers who have proven they can stay well with adequate community supports.

We had hoped last year to support a last-minute Legislative bill which would have addressed potentially ending the Consent Decree. It didn't make it to a public hearing but there is talk of bringing it back for this session. We would not support ending the Consent Decree if there is a new emphasis on creating more beds that would foster a continuum of institutionalization. This flies in the face of everything we have worked for.

We plead with DHHS to think about putting the brakes on this waiver. Why? Because we truly do not know what the mental health system really needs. We need to have a thorough system wide assessment in order to make the best recommendations for investment in our system.

We look forward to working with DHHS and all stakeholders to make smart moves in Maine. Our lives depend on it!

Sincerely,

*Simonne Maline*

Executive Director