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Senator Joe Baldacci, Chair Representative Michele Meyer, Chair Members, Joint Standing Committee on Health and Human Services 100 State House Station Augusta, ME 04333-0100

Senator Baldacci, Representative Meyer, and Members of the Joint Standing Committee on Health and Human Services:

This letter is written to provide the Committee with information as it relates to LD 821 - Resolve, to *Improve Access to Neurobehavioral Services*. The Department is opposed to this bill as written as it would fundamentally alter the planned work currently underway to address the gaps in providing evaluation, rehabilitation, and transitional support for individuals with an acquired brain injury and accompanying behavioral and complex medical support needs in Maine.

The Department is supportive of having specialized evidence-based rehabilitation in the domains of cognitive, physical or behavioral supports for individuals with identified neurobehavioral needs who receive those supports in out-of-state placements. In February of this year, there were 21 individuals placed out of state in community-based facilities and 23 individuals placed in out of state nursing facilities. The Department monitors progress for each of those individuals and works towards returning those individuals into community or institutional facilities appropriate to their needs, goals and choice of community living.

The Department is invested in addressing the lack of this critical home and community based rehabilitative services in Maine through its current innovation project included in the HCBS Improvement Plan. This project includes collaboration with Maine stakeholders and impacted members to develop specialized neurobehavioral services. This work could result in either adding specific services to existing MaineCare policies or the creation of a new MaineCare section of policy. The overall goal of this project is to bring out-of-state Mainers back and reduce the likelihood that MaineCare members would need out-of-state neurobehavioral services in the future.

We believe this bill and the Department's current innovation project share a goal of developing neurobehavioral treatment in Maine, but the expansive target populations in the bill concern us. As currently written, the bill would present significant operational challenges for providers, given the specialized needs of each of the named groups. If the Committee were to move this bill forward, we would recommend limiting the target population to individuals with an acquired brain injury.

The Department looks forward to improving the rehabilitation infrastructure in Maine with support of stakeholders, such as the Maine Acquired Brain Injury Advisory Council and impacted members. The Department is eager to work with this committee to enhance the system of rehabilitative care for

individuals with acquired brain injury to fulfill a commitment to services and supports for Mainers here in Maine.

We are happy to provide additional information at the work session.

Sincerely,

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Paul Saucier, Director Office of Aging and Disability Services