

March 27, 2023

Good morning.

Thank you for allowing me the opportunity to speak with you today. I know you are all very busy so I will do my best to be brief.

My name is Dr. Austin Errico and I am a clinical neuropsychologist from Freeport, Maine. For the last 24 years, I have provided neuro behavioral and neuro cognitive services to outpatient and residential programs supporting persons with acquired brain injury. I have written a training program for Maine caregivers that is designed to educate and mentor direct care staff on the techniques for supporting adults with disabilities. For the past 13 years, I have had the honor of serving on Maine's Acquired Brain Injury Council.

Having been trained and worked in several other states, I can confidently say that Maine continues to be a leader in our progressive approach to brain injury rehabilitation. I am grateful for the support that this committee has provided in the past to the survivors of acquired brain injury and their families. It has made a tremendous difference in the lives of many.

For those of you who may not know, Maine supports 8 neurorehabilitative clinics through section 102 of the MaineCare manual. These clinics are required to provide a state-of-the art integrated team approach to neurorehabilitation. Professional team members include Physical therapists, Speech therapists, Occupational therapists, Therapeutic Recreation specialists, Nurses, Physicians, Mental Health counselors and Neuropsychologists. Unfortunately, substance abuse counselors are not currently among the identified healthcare providers supported by these clinics. This omission is significant and often poses a hinderance to effective neurorehabilitation.

The problems related to substance abuse and acquired brain injury are significant and at times overwhelming. Here are a few statistics.

- Nearly 58% of individuals with acquired brain injuries had a history of alcohol abuse prior to their injury.
- As many as 50% of individuals with acquired brain injury will return to abusing substances after their injury.
- Acquired brain injury survivors who continue to abuse alcohol can worsen their condition and place themselves at risk of sustaining a second brain injury due to falls.
- Adults with brain injury and diagnosed substance abuse are not readily accepted into conventional substance treatment abuse programs because of challenges with attention, memory, executive functioning and social pragmatics.

- Substance abuse counseling for person's with acquired brain injury is most effectively delivered by licensed professionals who are both well versed in brain injury recovery as well as treatment models of addiction.

LD 539 allows substance abuse counselors to be part of the integrated neurorehabilitation team supported through section 102. This seemingly simple addition of one more trained professional will reduce the risk for substance abuse relapse and further help survivors reach their full rehabilitation potential. Please consider LD 539. I am confident that the benefits will be significant.

Thank you for your time.

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