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## Testimony of Rep. Lori K. Gramlich presenting LD 435, Resolve, to Ensure the Provision of Medically Necessary Behavioral Health Care Services for Children in Their Homes and Communities Before the Joint Standing Committee on Health and Human Services

Senator Baldacci, Representative Meyer, and my esteemed colleagues of the Joint Standing Committee on Health and Human Services: My name is Lori Gramlich, and I represent House District 131, the lovely seaside community of Old Orchard Beach. I am here today to present LD 435, a Resolve, to Ensure the Provision of Medically Necessary Behavioral Health Care Services for Children in Their Homes and Communities.

We are all painfully aware of the crisis that exists in our community-based mental health system for children as well as adults. As a licensed master social worker working in the social service and nonprofit sector as well as for state government with the Department of Health and Human Services here in Maine for over 35 years, I have dedicated my entire professional career to advocating for children and to ensuring that both children and adults have the behavioral health and mental health services they need and deserve.

This bill, LD 435, just as the one I presented before you in 2021, LD 1173, and the one I presented before you in 2019, LD 984, addresses one piece of the fractured mental health crisis that has plagued our state for decades, which is our need to provide the best care for our children who need community-based residential and in-home mental health care, right here in Maine, with their families.

Four years ago, when I was before this committee, I presented a very similar bill to bring these kids home. At that time, there were about 61 kids placed out of state. Two years ago, when I was before you again, there were 64 kids placed out of state, and now there are 67 kids placed out of state. That is 67 kids too many. That is 67 families who cannot see their children. That is 67 treatment plans that will never be truly successful because parents cannot be an active partner in these care plans because these parents cannot see their children. And, importantly, these children cannot be with their families. These are children placed in Massachusetts, North Carolina, and even as far away as Missouri, Illinois, Arkansas and Utah. And clearly, we have seen little change in these numbers.

When we talk about services children are receiving while in residential placement, the common thread for any organization includes treatment plans and therapeutic interventions, including family therapy and support with family reunification as a primary focus with staff and families working together to create safe discharge plans in a timely manner. As you can imagine, it becomes nearly impossible to achieve this objective when a family living in Maine must get to Arkansas or Utah to not only see their child but to be part of their treatment plan as described above.

As a parent, I cannot begin to imagine the anguish of having my child, who is not only in need of therapeutic behavioral health care but also in need of her parents, to be placed so far from her home state and the people she loves. What is even more difficult to fathom is what it must be like for that child, being so far away from her parents or guardian – her support system. And certainly, over the last three years, COVID has exacerbated this. Even if a family *does* have the means and financial ability to travel potentially great distances to see their child, the global pandemic prevented such travel, and thus the implications of families being separated are sadly even more universal.

When I presented this four years ago, this committee did indeed pass it but without the funding mechanism to provide care for these kids right here in Maine. At the time, the bill was amended to require the Department of Health and Human Services to negotiate reimbursement rates with providers to provide services to children returning to the state, including deviating from reimbursement rates established by Department rules in order to access additional services. The idea was that the Department would make a plan to bring these children back home to Maine.

I understand that the Department has studied reimbursement rates, again, and I am hopeful that providers will indeed receive rates sufficient to employ staff to ensure services are provided here in Maine.

The increased numbers of kids placed out of state would lead one to believe that this was sadly not accomplished.

According to 2019 figures, sending a child out of state costs on average \$210,000 per year. Serving that same child in Maine costs an average of \$160,000 per year.

It is clearly more cost-effective to provide services to kids right here in Maine.

The Department will tell you, as they have told me, that they "firmly believe this work is already happening, and therefore oppose this proposal." We have heard that "the Department has also developed a set of strategic priorities to guide the work of the Department on children's behavioral health services through 2026." In their Strategic Priorities for 2023 - 2026, I see reference to accessibility, availability, and improving quality and consistency of services. I see reference again to their pursuit of a psychiatric

residential treatment facility, which we heard about two years ago, which, by the way, is not a least restrictive environment for these children. Again, if we were able to provide the prevention-based, home-based services for these children, we might actually prevent the need for residential placement, but that is another bill for another time.

To be clear, LD 435 is pretty simple in that it requires the Department of Health and Human Services to make a plan to bring these kids back home – and to inform you, the legislative policy committee of jurisdiction, to be informed as to what this plan is no later than October 1, 2023.

The plan must include an assessment of and plan for the needs of children currently in institutional settings within the State and outside the State.

The plan must identify clear steps and timelines for implementation, and it must identify any additional resources needed to implement the plan.

Please, bring the kids home. It's best for the kids, best for the taxpayers and best for families. I urge you to pass LD 435.

Thank you for your time, for tackling these very difficult issues presented before you and for your consideration of this critically important issue. I would be happy to try to answer any questions for you.