

BEHAVIORAL HEALTH COMMUNITY COLLABORATIVE

Senator Baldacci, Representative Meyer and good members of the Health and Human Services Committee:

My name is Betsy Sweet, and I am here on behalf the Behavioral Health Community Collaborative in support of LD 1975. As members of this committee well know, the incidence of substance use disorder is on the rise - dramatically. The issues that both lead to and result from SUD have not been adequately addressed by the current approach, despite the best intent to make a positive difference. What we are doing is simply not working. We fully endorse shifting our approach to this problem and treating SUD as a public health issue, not a criminal issue – and we support all the policy and budget implications that would ensue from such a shift. Others today have and will talk about how critical this change is. We will never arrest our way out of this problem.

I want to draw attention specifically to the first section, second part of the bill that calls for the establishment of “receiving centers” in each county – a place where EMTs, law enforcement, families, and individuals themselves can walk in and get services, support and help in an environment that is not a hospital or a jail. You have heard this same request from the mental health provider, consumer, and advocacy community. We simply MUST develop these alternatives quickly, and statewide. And it makes a lot of sense to ensure that these “receiving centers” are able to help Mainers with SUD or mental health issues.

We know that anywhere from 33-48% of Mainers have a dual diagnosis of both an SUD and a mental health issue. The pilot mental health receiving center in Portland experience is that people come in or are brought in who are dealing with both issues. It simply makes sense to expand the service array of these receiving centers to include SUD specific services than to expend the capital and administrative costs it would take to create two separate centers. Ultimately both the financial and human costs will be far less if such centers are available to Mainers and the people who are tasked with helping us.

The original plan for the mental health receiving centers was to have one in each county. We currently have one in Portland and there were funds included in last year’s budget to establish one in Kennebec. I urge this committee to advocate for pushing the timeline so that we are able to open more and more geographically diverse centers as soon as possible.

As a final note, we have been trying to advocate that we determine if federal disaster relief funds from the Lewiston shooting may be accessed for the initial capital costs for these centers. There are capital costs to get them up and running and some additional operational costs, but many of the costs of actual services provided are already covered through Medicaid, Medicare and private insurance as those services are already covered in other settings – often at a much higher cost.

We urge you to vote yes on LD 1975 and I am happy to answer any questions.