



TESTIMONY OF THE MAINE MEDICAL ASSOCIATION

AND

THE MAINE OSTEOPATHIC ASSOCIATION

IN SUPPORT OF

L.D. 353, An Act Concerning Substance Use Disorder, Treatment, Recovery, Prevention and Education

Sponsor's Amended Title: Resolve, Directing the Governor's Office of Policy Innovation and the Future to Study Key Aspects of the Adequacy of Maine's Substance Use Disorder Treatment

Joint Standing Committee on Health and Human Services Room 209, Cross Building, Augusta, Maine Wednesday, January 24, 2024

Good afternoon Senator Baldacci, Representative Meyer, and Members of the Joint Standing Committee on Health and Human Services. My name is Erik Steele. I am an osteopathic family physician serving patients in the communities of Biddeford, Gorham, and Scarborough, Maine and am the Immediate Past President for the Board of Directors for the Maine Medical Association. On behalf of the Maine Medical Association and the Maine Osteopathic Association, I am submitting this testimony in support of LD 353, An Act Concerning Substance Use Disorder, Treatment, Recovery, Prevention and Education or, as proposed in the Sponsor's Amendment, Resolve, Directing the Governor's Office of Policy Innovation and the Future to Study Key Aspects of the Adequacy of Maine's Substance Use Disorder Treatment.

The Maine Medical Association (MMA) is a professional organization representing more than 4,000 physicians, residents, and medical students in Maine. MMA's mission is to support Maine physicians, advance the quality of medicine in Maine, and promote the health of all Maine people. The Maine Osteopathic Association (MOA) is a professional organization representing more than 1,200 osteopathic physicians, residents, and medical students in Maine whose mission is to serve the Osteopathic profession of the State of Maine through a coordinated effort of professional education, advocacy, and member services in order to ensure the availability of quality osteopathic health care to the people

of this State. This year MMA and MOA's legislative committees have joined together to advocate from one voice.

At the onset, I wanted to say thank you to Senator Farrin. We are really grateful that he approached us about how we affect real change on Substance Use Disorder (SUD) and Opioid Use Disorder (OUD) treatment. We know there is not one solution to fixing this public health epidemic, but we believe that there are solid evidence based interventions that clinicians can take to ensure that Mainer's receive the care that they need. This is why MMA launched the 1,000 Lives Campaign at the end of 2023. And why we are grateful that LD 353 could complement the efforts of the campaign.

The 1000 Lives Campaign is a systematic, clinician-led, collaborative campaign to prevent 1000 opioid-related deaths of fellow Mainers - in Maine during the next 5 years from what is currently projected. That's the equivalent of the whole town of Moncton or the entire student body of the Edward Little High School in Auburn. The campaign seeks to do this by implementing a set of health care site- and clinician-specific interventions to improve the treatment of opioid use disorder (OUD), everywhere in Maine so everyone with this illness can find life-saving care. The interventions are based on their ability to reduce deaths.

Maine's 1000 Lives Campaign is based on the Institute for Healthcare Improvement's (IHI's) 100,000 Lives Campaign – a highly successful effort to prevent 100,000 deaths in hospitalized patients from preventable errors and complications of inpatient care through the implementation at every participating hospital of five specific interventions. The campaign's tag line was "Some is not a number, soon is not a time," reflecting the goal of systematic implementation of a series of specific steps to prevent those deaths within a specific period of time. Beginning in 2004, more than 3,000 American hospitals literally signed a pledge to implement the steps, and five years later, exceeded the goal of preventing more than 100,000 deaths. Most of those improvements in hospital care became permanent – they are still in place today.

LD 353 would complement the 1,000 Lives Campaign because it would help us identify the gaps in care so that the Campaign could partner with communities and healthcare organizations with gaps in capability to educate and provide resources to fill those gaps so that every Mainer can receive the help that they need.

We need data like

- How many patients are getting screened for being at high risk for SUD/OUD?
- How patients many have gaps in coverage of medications for OUD?
- How many communities do not have enough access for Mainers with OUD?
- How many primary care practices are and are not providing OUD care which ones need help to be able to provide that care for their patients?

Best practices around health care site- and clinician-specific interventions could be part of the solution to this public health epidemic, but if we don't have data then how can we partner with facilities to educate them and provide resources so they can offer every patient the best possible care.

170,000 Mainers are waiting to receive treatment¹, 8,576 Mainers overdosed and 559 died from a fatal overdose². We cannot wait and hope that one day it will get resolved, we need to act. The data from this Resolve will help us act.

Thank you for considering the support of Maine's physician community on L.D. 353. We urge an "ought to pass" vote on this bill. I would be happy to respond to any questions you may have.

Thank you,

Erik Steele, D.O. Immediate Past President of the Maine Medical Association Board of Directors

¹ https://www.samhsa.gov/data/report/2021-nsduh-state-specific-tables.

² https://mainedrugdata.org/wp-content/uploads/2024/01/2023-11-ME_OD_Report-Final.pdf.