



**Consumer Council System of Maine**  
A Voice for Consumers of Mental Health Services

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Good afternoon, Senator Rotundo, Representative Sachs, Senator Baldacci and Representative Myer and esteemed members of the Appropriations and Financial Affairs Committee and Health and Human Services Committee,

My name is Simonne Maline, I am a resident of Oakland and the Executive Director of the Consumer Council System of Maine. I am here today to testify in favor of **LD 2214 “An Act to Make Supplemental Appropriations and Allocations for the Expenditures of State Government, General Fund and Other Funds and to Change Certain Provisions of the Law Necessary to the Proper Operations of State Government for the Fiscal Years Ending June 30, 2024 and June 30, 2025”**.

The Consumer Council System of Maine is a public instrumentality written into State Statute by the Maine Legislature to serve in an advisory capacity and to provide legislators and state government with guidance and advice regarding the delivery of effective and appropriate adult mental health services from those served by them.

First let me say that we are grateful for two proposals in this budget that are very much needed. First is the increase in mobile crisis services which has been desperately needed. We also are very supportive of the work that the Office of Behavioral Health (OBH) has been doing to reform the crisis system, which will include peer support specialists as integral members of the mobile crisis teams. Also, the expansion of crisis receiving centers is also welcome news. We would hope that these programs have a peer support specialist “heavy” staffing pattern as the one in Portland does. These programs can go a long way to supporting those in crisis across the state of Maine.

As the State is moving towards the best practice models defined by SAMSHA for state crisis systems, we would be remiss to not add that LD 540, which would bring peer respite programs back to Maine after many years absence is sitting on the table awaiting funding, is part of the model. I have attached the link below.

I have also attached the Maine Resiliency Package handout which lists a handful of bills which are in dire need of funding. While we are making great strides to rebuild Maine’s mental health system, we urge you to be bold and use additional funds to make these a reality. We appreciate the due diligence to save in the rainy-day fund but if we do not make additional thoughtful and strategic investments into Maine’s system of care, we will continue to struggle to meet the needs of my fellow peers and Mainers to access the right services needed to move forward in their recovery journeys.

[https://www.samhsa.gov/sites/default/files/national-guidelines-for-behavioral-health-crisis-care-02242020.pdf?fbclid=IwAR0BpQZFTjT0MJYKp0h8d9gRmCYRSA\\_odbchDJsCp2-bjkWNriazLxaEIo8](https://www.samhsa.gov/sites/default/files/national-guidelines-for-behavioral-health-crisis-care-02242020.pdf?fbclid=IwAR0BpQZFTjT0MJYKp0h8d9gRmCYRSA_odbchDJsCp2-bjkWNriazLxaEIo8)



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In closing I urge you to support LD 2214 with the additions noted.

Thank you for your time and consideration.

*Simonne M Masine*

Executive Director

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2024

# Maine Resiliency Package

## For Mental Health Action

### Why Now?

In the last few months Maine has undergone crises that have highlighted the high and increasing need for mental health services across our state.

Much of the need is found in the gaps and under resourcing of current services, and then there are several new initiatives that must be passed and funded.



### Time For Action

**We urge the Governor and the Legislature fund a Maine Resiliency package of bills as an action plan to provide timely and appropriate access to quality mental services across Maine.**

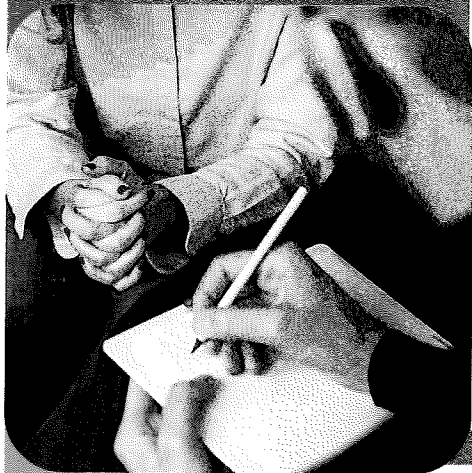
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**BEHAVIORAL HEALTH  
COMMUNITY COLLABORATIVE**

*Working together to promote quality lives*

These bills below already passed with unanimous support & need to be taken from the AFA Table & put into the budget now.

Approx.  
\$2.4M



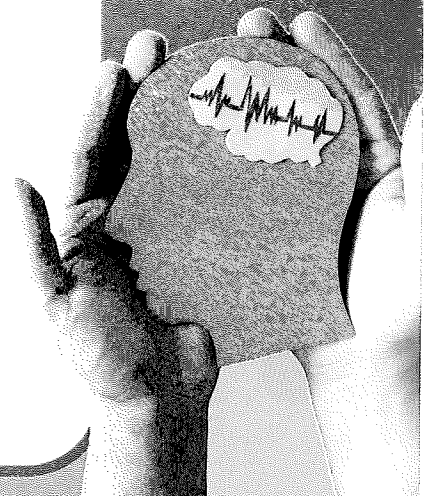
## EXPAND ACCESS TO SERVICES THROUGH WORKFORCE INVESTMENTS

- **LD 632**, to amend the Social Work Education Loan Program to invest in getting more clinicians into the field (\$500K p/yr)
- **LD 997**, to reduce workforce barriers for mental health professionals in Maine (\$920K p/yr)
- **LD 1506**, to convene a stakeholder group to study the training and recruitment of behavioral health professionals (\$450k)
- **LD 1718**, to encourage participation in Maine's essential support workforce through access to higher education (\$500K p/yr)

## FILL IN GAPS IN THE MENTAL HEALTH CARE CONTINUUM FOR SPECIAL POPULATIONS

- **LD 539**, to direct the department to include counseling for substance use disorder in rehabilitative services for MaineCare members who have sustained an acquired brain injury, which in many cases is the outcome from surviving an overdose (\$500K p/yr)
- **LD 840**, to develop support services for individuals with emotional dysregulation disorders that often escalate into crisis (\$1.8M p/yr)
- **LD 907**, to better meet the needs of those with severe and persistent mental illness (\$100K p/yr)
- **LD 1178**, to reduce barriers to recovery from addiction by expanding eligibility for Targeted Case Management services to all who are receiving treatment for substance use disorder (\$2M p/yr)
- **LD 1236**, to increase the provision of children's mental health services in rural areas of Maine (\$500K p/yr)

Approx.  
\$5M



Approx.  
\$3M

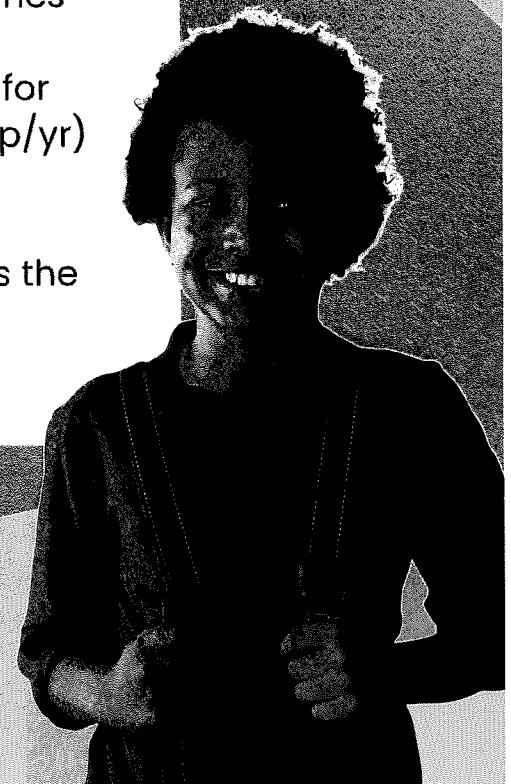


## SUPPORT BEST PRACTICE MODELS OF CARE

- **LD 472**, to provide bridge funding for the Certified Community Behavioral Health Clinic (CCBHC) model of care, that not only provides comprehensive mental health and substance use services, but also are a resource for trauma-informed care (\$2M one-time funds)
- **LD 1305**, to resolve to design and implement a community-based model of care that addresses the acute mental health needs of adolescents with co-occurring disorders and upon discharge from a residential substance use treatment facility (\$1.5M one-time funds).

## We urge passage & funding of these new initiatives of evidence-based practices and preventive supports for youth:

- **LD 435**, to ensure the provision of medically necessary behavioral health care services for children in their homes and communities (minimal cost)
- **LD 2002**, to provide incentives to schools that contract for certain social work and family therapy services (\$1.3M p/yr)
- **LD 2083** - A Resolve to Ensure Timely Access and Medication Management Across the State. For many, medical management of mental health medications is the foundation for their successful integration into their communities and workplaces (minimal cost)



## **ENHANCE MOBILE CRISIS RESPONSE**

LR 3025 - Invest in more mobile crisis response units and fund a hundred new community crisis workers that are supervised and supported by community based mental health agencies, creating a crisis system available for all Mainers 24/7/365 that is funded on a cost reimbursement basis.



## **EXPAND THE NUMBER & GEOGRAPHIC DISTRIBUTION OF RECEIVING CENTERS**

Receiving centers (formerly know as the living room model) are physical locations that are open 24/7 and are places where Law Enforcement, EMT's, families and individuals themselves can take people who are in mental health or SUD crisis. At the center they receive medical attention, mental health support, peer support, safe over night accommodation if necessary, and are triaged into appropriate ongoing services. Currently we have one in Portland and one scheduled for Kennebec County. We believe that 6 additional centers are needed around the state.

*Thank you!*