



BEHAVIORAL HEALTH COMMUNITY COLLABORATIVE

Working together to promote quality lives

Senator Rotundo, Representative Gattine, Senator Ingwerson, Representative Meyer, and the good members of the Appropriations and Health and Human Services Committees.

I am Betsy Sweet, and I am speaking today on behalf of the Behavioral Health Community Collaborative. We are a group of eight community mental health agencies and together serve over 65% of the Maine people who seek mental health treatment.

First, I appreciate you. This is my 43rd year as an advocate before the Maine State Legislature. Passing budgets is never easy. Passing supplemental budgets isn't any easier. And the current level of need for services and support of the people in our communities, and the structures that serve them is at an all-time high. And as is always the case, the needs are the greatest when the financial ability to meet those needs is the most difficult. And here we are again. And your job is hard. And we are committed to help you find the best path forward to do both things.

The central feature of this budget for us as mental health providers is the filling of the Medicaid (MaineCare) gap and the provision of timely payments. The agencies and people who provide mental health services are, as you know, severely underfunded. If this gap is not realized and the state is not able to pay providers for the services they provide, many services – and some agencies – will close, resulting in a loss of access to critical services. They do not have cash reserves, and many would very quickly max out their lines of credit.

One stark example of a service that would be affected is this: The Medicaid population most recently enrolled disproportionately access SUD services and are prescribed Medication Assisted Treatment. This population is at risk of losing eligibility if the deficit isn't addressed. If MaineCare expansion or services are cut or cut back we would see thousands of people lose coverage for life saving MAT treatment, which would go against all that we have worked for so hard as a state. It's realistic to say that we will likely see a dramatic increase in overdose deaths if this gap is not addressed immediately.

And this is just one example. Critical services across the continuum will be affected for children and adults. This restoration must happen if we do not want to see the worsening of our mental health and SUD services – already at a crisis point. Please pass this budget.

That said, we want to acknowledge that our support does not hide the fact we also have concerns about other parts of the budget, which we believe is best addressed in the biennial budget – and we will work with you to do so. The elimination of the COLA put into the budget last year is significant and will have a serious adverse impact. In addition, the provider tax "fix" is, in some cases, not revenue neutral as we all have hoped it would be, and we must ensure that there are no additional cuts in these services. I am pleased to report that we are in good, detailed conversation with the Office of Behavioral Health about these concerns

and hoping that we can resolve them outside of the legislative and budget negotiations. If we are unable, we will bring this back to you to be resolved in the 25-26 budget.

In the short term, however, we ask that you address the most immediate crisis which is to fill the Medicaid budget gap by passing this supplemental budget very quickly.

Thank you and I am happy to answer any questions.

The members of the Behavioral Health Community Collaborative are Sweetser, Inc., Opportunity Alliance, Volunteers of America, Gateway Community Services, Shalom House, KidsPeace, Spurwink, Community Concepts