

Testimony of Sarah Calder, MaineHealth LD 156, "An Act to Improve Notifications Related to Substance-exposed Infants" February 4, 2025

Senator Ingwersen, Representative Meyer and distinguished members of the Joint Standing Committee on Health and Human Services, I am Sarah Calder, Senior Government Affairs Director at MaineHealth, and I am here to express concerns with LD 156, "An Act to Improve Notifications Related to Substance-exposed Infants."

MaineHealth is an integrated non-profit health care system that provides a continuum of health care services to communities throughout Maine and New Hampshire. Every day, our over 23,000 care team members support our vision of "Working Together so Our Communities are the Healthiest in America" by providing a range of services from primary and specialty physician services to a continuum of behavioral health care services, community and tertiary hospital care, home health care and a lab.

Prior to 2019, health care providers were required by state law to report newborns affected by *illegal* substance use and that were demonstrating withdrawal symptoms that required medical monitoring beyond standard newborn care. In 2019, the Governor signed into law legislation introduced by the Department of Health and Human Services that significantly changed the reporting requirements of providers involved in the care of infants to include *legal* substances. The Department reasoned that this change was necessary in order to comply with the federal Child Abuse Prevention and Treatment Act (CAPTA).

Since that change, we have continued to express our concerns to the Department, particularly the impact it has on new mothers who are prescribed Medication-Assisted Treatment (MAT) for Substance Use Disorder and other prescribed medications, like SSRIs, and the potential it has to overwhelm the Child Welfare system. Additionally, we continue to argue that the State could have used alternative language, similar to what other states like <u>New Hampshire</u> used, to comply with CAPTA. CAPTA simply mandates that a plan of safe care must be developed for infants "born with and identified as being affected by substance abuse or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder."

As such, we oppose both the changes in this legislation and the underlying statute as amended in 2019.

After years of expressing our concerns to the Department about the negative impact this change has on new mothers, we were disappointed to see LD 156 introduced without feedback or consultation from MaineHealth or our providers.

If you proceed with this legislation, we urge the Committee to make two changes.

While we appreciate the Department's desire to provide additional clarity, we believe, once again, that the language is far broader than necessary to comply with CAPTA. Additionally:

- 1) The deletion of subparagraphs A and B under Section 2 in the proposed text is particularly troubling and could further undermine the provider patient relationship and deter pregnant women from seeking care, if there is the threat that they could be prosecuted for abuse and neglect for taking prescribed medications during their pregnancy.
- 2) We believe that, at a very minimum, the development of the subsequent rules should be major substantive, not routine technical, to allow for public comment.

This is a complicated issue, and one in which we all want the same thing – for our most vulnerable Mainers to be protected from abuse and neglect – but LD 156 has the potential to overwhelm the Child Welfare system and bury the true cases of abuse and neglect, erode the provider patient relationship, and deter some women from seeking prenatal care and delivering in an in-patient hospital setting.

Instead, we would urge this Committee to amend LD 156 to direct the Department to convene stakeholders and develop recommendations that both comply with CAPTA and support pregnant women and their newborns.

Thank you for your time and consideration and I would be happy to answer any questions that you may have.