



Testimony of Lee-Andra D’Attilio, LCSW
In Opposition to LD 496, “An Act Regarding the Time Frame for Issuing a Silver Alert and to Require Silver Alerts for All Persons Missing from Certain Inpatient Facilities”

Wednesday, March 26, 2025

Senator Beebe-Center, Representative Hasenfus, and distinguished members of the Joint Standing Committee on Criminal Justice and Public Safety, I am Lee D’Attilio, Senior Director of Intensive Services at MaineHealth Behavioral Health, and I am here to testify in opposition to LD 496, “An Act Regarding the Time Frame for Issuing a Silver Alert and to Require Silver Alerts for All Persons Missing from Certain Inpatient Facilities.”

MaineHealth is an integrated non-profit health care system that provides the full continuum of health care services to the residents of eleven counties in Maine and one in New Hampshire. As part of our vision of “Working Together So Maine’s Communities are the Healthiest in America,” MaineHealth, which includes MaineHealth Behavioral Health, is committed to creating a seamless system of behavioral healthcare across Maine, coordinating hospital psychiatric care with community-based treatment services, as well as residential treatment, and providing better access to behavioral healthcare through integration with primary care.

LD 496 requires a Silver Alert be issued “immediately” when a resident of a group home or patient of a psychiatric hospital is “reported missing.” While well-intentioned, this legislation could violate patient confidentiality and HIPAA regulations and place undue burden on behavioral health providers and law enforcement. Additionally, group homes and psychiatric hospitals have existing safety protocols that we follow in the event a resident or patient is missing, including notifying law enforcement, the Office of Behavioral Health, and, if there is one, the patient or resident’s guardian.

It is important to note that not all patients and residents we treat are receiving court-ordered treatment, many are receiving treatment voluntarily. Those patients have the ability and right to leave Spring Harbor Hospital Against Medical Advice (AMA), and our residents in our treatment facilities are also able to leave the facility to access services and goods, like libraries and convenient stores.

We have protocols in place, however, that account for instances in which a resident does not return at the expected time. In those cases, care team members alert the supervisor and, depending on the individual case, action may be taken like contacting the police or a guardian, if one exists. In the circumstances where we fear for the danger of the patient or resident – or others – we would contact law enforcement immediately as well as the Office of Behavioral Health.

In addition to our concerns about publicly disseminating a person's private information, including their mental health diagnosis, we have significant concerns about several terms used in the legislation before you today. Specifically, the bill does not define the terms “missing” or “immediately.” Are we required to notify law enforcement the moment a resident does not return at their expected time?

In closing, while the intent of LD 496 is laudable, it imposes burdensome requirements when effective safety protocols are already in place and violates patient confidentiality laws. We urge you to oppose this legislation and I would be happy to answer any questions that you may have.