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Testimony of the Office of Child and Family Services  
Maine Department of Health and Human Services

Before the Joint Standing Committee on Health and Human Services

Neither for nor against LD 1001, *An Act to Prohibit Medical Providers and Certain Others from Reporting Prescribed Medication-assisted Treatment of Parents to Child Protective Services*

Sponsor: Representative Milliken  
Hearing Date: March 27, 2025

Senator Ingwersen, Representative Meyer, and members of the Joint Standing Committee on Health and Human Services, my name is Bobbi Johnson, and I serve as the Director of the Office of Child and Family Services (OCFS) in the Maine Department of Health and Human Services. I am here today to testify neither for nor against LD 1001, *An Act to Prohibit Medical Providers and Certain Others from Reporting Prescribed Medication-assisted Treatment of Parents to Child Protective Services*.

This bill would modify portions of statute related to reporting to the Department regarding infants born affected by substance use to prohibit reporting of an infant who is affected by the substances prescribed for medication-assisted treatment when there is no apparent risk of abuse or neglect. If a provider, nonetheless, makes a report, the Department would be prohibited from taking further action.

OCFS has concerns regarding the potential impact of this bill on OCFS' eligibility to receive federal Child Abuse Prevention and Treatment Act (CAPTA) grant funding. CAPTA requires states to have "policies and procedures...to address the needs of infants born with and identified as being affected by substance abuse or withdrawal symptoms resulting from prenatal drug exposure...including a requirement that health care providers involved in the delivery or care of such infants notify the child protective services system of the occurrence of such condition of such infants." OCFS is also required under CAPTA to track the number of infants that qualify for a report and the number of those infants who receive a Plan of Safe Care.

OCFS has worked diligently with Maine CDC and providers to build a robust system around Maine's Plan of Safe Care. OCFS views these Plans as a strong protective factor for families impacted by substance use. In an ideal world every family welcoming a newborn would receive a similar plan, regardless of whether or not substance use is an issue impacting their family structure.

OCFS recognizes that there is still work to be done between the Department, providers, and advocates to continue to capitalize on opportunities to remove stigma around the State's response to substance affected and substance exposed infants. OCFS is committed to engaging in this work and we believe that rather than removing the requirement of a report altogether, the stakeholders can instead work towards a solution to reduce stigma and increase the use and strength of Plans of Safe Care.

OCFS would urge you to support OCFS' commitment to working with providers, advocates, and parents themselves to continue strengthening Maine's response to prenatal substance use.

Thank you for your time and attention. I would be happy to answer any questions you may have and to make myself available for questions at the work session.