



HOUSE OF REPRESENTATIVES
2 STATE HOUSE STATION
AUGUSTA, MAINE 04333-0002
(207) 287-1400
TTY: Maine Relay 711

Lori K. Gramlich
Assistant House Majority Leader
(207) 287-1430
Lori.Gramlich@legislature.maine.gov

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Testimony of Rep. Lori K. Gramlich presenting
**LD 1631, Resolve, to Implement the Recommendations of the
Stakeholder Group to Address Child Stay Times in Hospital
Emergency Departments**

Before the Joint Standing Committee on Health and Human Services

Senator Ingwersen, Representative Meyer and honorable colleagues of the Health and Human Services Committee, I am Lori Gramlich. I have the distinct honor of representing House District 131, the lovely seaside community of Old Orchard Beach, and of serving as Assistant House Majority Leader. Thank you for the opportunity to present **LD 1631, Resolve, to Implement the Recommendations of the Stakeholder Group to Address Child Stay Times in Hospital Emergency Departments.**

As I have shared with many of you previously, I am a Licensed Master Social Worker and have been practicing in the state of Maine for over 35 years. As a social worker, advocate and now as a four-term state legislator, I have focused on ensuring that all Mainers have access to the mental and behavioral health care they need - especially our young people. I have sponsored a number of bills during my time in the Legislature to address our fractured mental health care system, including my bills to "Bring the Kids Home" - policy initiatives that seek to ensure that Maine children will no longer be sent out of state, away from their loved ones and homes, simply because they cannot access residential treatment services appropriate to their level of need in their own communities or even just within their own home state.

LD 1631 is a natural extension of that work. No individual - and especially no child - should be stranded in an emergency room because we cannot provide them with the care and support they need. It places a strain on our hospitals and health care workers and causes undue suffering to these kids, who are already facing incredibly difficult challenges, and their loved ones. I know that you all here are far too familiar with these scenarios.

During the 131st Legislature, thanks to the good work of this committee, the Legislature directed the Department of Health and Human Services to convene a stakeholder group to identify solutions to the problem of children and adolescents experiencing long stays in hospital emergency departments simply because the community-based or residential treatment options they need are not available.

Pursuant to that legislation, the Department of Health and Human Services appointed members and convened a stakeholder group to address these issues, in the fall of last year, which - you may recall - provided a report to this committee in January. (*Stakeholder Report pursuant to Resolves 2023, Ch. 134, Resolve, to Establish a Stakeholder Group to Address the Problem of Long Stays for Children and Adolescents in Hospital Emergency Departments*).

LD 1631 is a critical step toward implementing the recommendations that came out of those meetings.

Specifically, LD 1631 directs the department to:

1. Provide residential, inpatient and community-based service providers with the funding and other support necessary to address the closure of beds for children and youth residential services;
2. Develop an internal process to ensure the state is meeting our obligations to make available and maximize the use of funding for early and periodic screening, diagnostic and treatment services under federal law;
3. Collect and report back to this committee with data to inform our work on this issue, including any time a child is stranded in an emergency department for more than 48 hours, the number of youth placed in residential facilities out of state, the number of youth placed in in-state residential facilities for more than one year and any closures of mental health care programs that serve children and youth; and
4. Provide to this committee a gap analysis that will further illustrate the landscape and challenges, including information on waiting lists and average wait times, as well as updates on several programs we are now working to implement.

Again, I know that you all are familiar with these issues and have received this Report.

Today, you will hear from mental and behavioral health advocates who can speak in more detail to the urgency of this problem, the strain on our existing resources and the very real human cost to Maine children and families.

Thank you for your thoughtful consideration of their testimony and of LD 1631 as part of the solution. I would be happy to answer any questions you may have for me.