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Testimony of Rep. Lori K. Gramlich presenting LD 1745, An Act to Stabilize Residential Treatment Capacity for Children and Youth in Maine

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 1745, An Act to Stabilize Residential Treatment Capacity for Children and Youth in Maine.*

As a licensed master social worker who has worked in the field for over 35 years, I have dedicated my entire professional career to advocating for children and to ensuring that people of all ages have access to the behavioral health and mental health services they need and deserve. It has also been my top priority as a four-term state representative.

Over my time in the Legislature, as many of you here know, I have introduced several bills seeking to address one piece of our fractured mental health system, which is to provide our children with the mental health care they need, right here in Maine. I have been grateful for this committee's attention to these issues. But despite our efforts, Maine children are still being placed in residential mental health care facilities out of state because they cannot access care that is appropriate to their needs here at home. LD 1745 continues our work on this critical policy area, because I believe we cannot stop fighting for these kids.

As a parent, I cannot begin to imagine the anguish of having my child, if she needed therapeutic behavioral health care- placed so far from her home state and the people she loves. It is even more difficult to fathom what it would be like for that child being so far away from their parents-*their* support system.

When we talk about services children are receiving while in residential placement, treatment plans and therapeutic interventions include family therapy and support, with family reunification as a primary focus. Staff and families work together to create safe discharge plans in a timely manner. As you can imagine, it becomes nearly impossible to achieve this objective when a

family living in Maine must be able to get to Arkansas or Utah, or frankly even our neighboring state of New Hampshire, to even see their child, let alone to be part of their treatment plan.

As a social worker, I believe wholeheartedly in the power and effectiveness of prevention and early intervention. Investing in these strategies means that people can avoid a lifetime of dealing with the lasting consequences of unmet needs. Most importantly, this helps our children, and it also pays off in terms of avoiding more expensive costs in the future. I believe that by providing prevention-based, home-based services for children, we might be able to prevent the need for residential placement altogether - at least for many children. But I want to be absolutely clear that residential treatment is not a replacement for home- and community-based services.

Right now, there are children who desperately need services that adequately address their needs. Our in-state residential treatment providers are working tirelessly every day to ensure our kids get the best care possible, but they face major challenges—particularly with staffing, reimbursement and capacity. Given these challenges, maintaining —let alone expanding — capacity within this critical portion of the mental health care continuum for our children has become more and more difficult. Instead, we have seen programs closing their doors.

Without a sustainable residential system, children who meet this level of need and their families will be left with no options other than sending their child out of state away from their communities and homes or waiting in limbo in an emergency department—which is no place for a child. It also leaves us unable to meet our legal obligations as outlined in the Department of Justice's Settlement Agreement with the state.

LD 1745 aims to address this crisis with three core components:

- 1. Data and information reporting to inform how to address challenges faced by providers and families moving forward to create a more sustainable system;
- 2. Establishing an emergency stabilization fund to prevent further closures in the immediate; and,
- 3. Establishing changes to the residential aftercare services program to facilitate smoother, more successful transitions back into a child's home and community.

I know there are mental health care providers and advocates here today to speak in more detail to each of these components. They are on the front lines of this crisis, and they have seen firsthand the way our broken, inadequate system is harming Maine children and families.

LD 1745 would provide us with the framework to finally transition that broken system to one that meets all our kids' needs.

Thank you for your consideration. I would be happy to try to answer any questions you may have for me.