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March 21, 2018

Regarding LD1868

Good afternoon, members of the Legislative Committee. My name is Joe Boggs. I am an Executive Vice President and the Director of Business Development at MST Services. Our organization is the dissemination and quality assurance organization for Multisystemic Therapy (MST). The MST Treatment Model is an evidence-based service for youth and families involved in the Juvenile Justice system. Randomized Clinical Trials (conducted both by the model developers and independent researchers) have repeatedly demonstrated that MST lowers recidivism rates for youth AND achieves positive outcomes for families.

The MST Treatment Model has also been endorsed by several organizations that are seeking to improve services for youth and families - some of which include Blueprints for Healthy Youth Development, Office of Justice Programs, National Institutes of Health, and the Coalition for Evidence-Based Policy. These independent organizations have evaluated the research, and have found MST to be an effective treatment model for youth exhibiting behavioral problems and their families

MST achieved outcomes that had an immediate impact for youth, such as decreasing days in out-of-home placements up to 64% and reducing re-arrest rates by as much as 70%. There is also long-term research to indicate that MST sustains positive outcomes <u>22 years</u> after MST treatment was completed with the youth - these youth (now adults) had 36% fewer arrests, 75% fewer violent arrests, and spent 33% fewer days in adult confinement. Each of these outcomes - when achieved by the MST Teams in Maine - will save taxpayer dollars.

In addition, this same long-term research suggests that the siblings of the youth that received MST treatment also did better - having a 40% reduction in arrest rates, a 60% reduction in felony arrest rates, and a 50% reduction in incarceration rates.....<u>plus</u> the caregivers benefitted as well - having 94% fewer felonies, 70% fewer misdemeanors, and reporting improved family relationships. Again - these multigenerational impacts will save tax dollars for the citizens of Maine.

States that have evaluated the Return On Investment (ROI) for the monies spent funding MST programs have found the following:

Florida: A program that redirected offenders from residential confinement to community-based alternatives including MST saved \$3.9 for every \$1 spent.

New Mexico: Evaluation report from New Mexico's Children, Youth & Families Department found that for every \$1 invested in MST \$5.87 was returned through reductions in expenses related to crime and behavioral health treatment.

Pennsylvania: Analysis estimated a return of \$2.2 for every \$1 spent on MST, via reduction in costly residential placement.

The above outcomes and cost savings are those achieved by MST for Juvenile Justice Youth. The State of Maine has also implemented MST-PSB (for youth exhibiting Problem Sexual Behavior and their families). The cost savings have been found to be even greater for youth treated with MST-PSB, as usual services for these



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youth are costly to the communities that provide them. A recent study found that MST-PSB achieved a total ROI of \$48.81 for every \$1 spent on the program.¹

However, these outcomes cannot be obtained if MST is not being provided in your state. In the past few months, several MST teams in Maine have closed, as the organizations with those MST teams were financially unable to sustain the teams using the current unit rate for treatment (\$31.06 per 15-minute unit). This rate is substantially lower than rates in other states that use a Medicaid unit rate to fund MST (e.g., Nebraska @ \$38.24; Washington DC @ \$51.96; and Delaware @ \$48.75). Members of some of the provider organizations from your state are here today who will talk about the struggles they face in sustaining their programs at the current Medicaid rate, and will offer input into the amount and type of rate that would be most helpful in sustaining MST in Maine.

LD1868 has the potential to rectify this unsustainable financial predicament, so on behalf of the youth and families that need MST, the organizations that are seeking to provide MST with model fidelity, and the taxpayers who will ultimately benefit from the cost savings - I would strongly encourage you to vote Ought To Pass on this legislation.

Thank you.

Respectfully submitted,

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¹ Bourduin, CM and Dopp, AR (2015). Economic Impact of multisystemic therapy with juvenile sexual offenders. Journal of Family Psychology, 29:5, 687-696.