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**Introducing LD 632, “An Act To Facilitate the Conversion of Children's Private
Nonmedical Institutions to Qualified Residential Treatment
Programs as Required by Federal Law”
Joint Standing Committee on Health and Human Services
March 18, 2021**

Chair Meyer and honorable members of the Joint Standing Committee on Health and Human Services, I am Senator Ned Claxton and I represent Senate District 20, which includes Auburn, Poland, New Gloucester, Minot and Mechanic Falls. I’m here today to introduce LD 632, “An Act To Facilitate the Conversion of Children's Private Nonmedical Institutions to Qualified Residential Treatment Programs as Required by Federal Law.”

In 2018, congress passed the Families First Prevention Services Act as part of a budget agreement, and in 2019 it became law. The bill was a major overhaul of the child welfare system in an effort to achieve better outcomes for children across the country. As a part of that effort, states are required to establish Qualified Residential Treatment Programs (QRTP) standards of care for residential programs in order to qualify for federal reimbursement. According to the Office of Child and Family Services, the “purpose of utilizing QRTP for youth in care is to safely stabilize youth who need residential level of care for behavioral and developmental needs while involving the family and providing supportive services after the child has returned to their home.”¹

Transitioning to meet the Federal requirements of a QRTP requires a lot of effort on the part of existing residential programs, known as Private Non-medical Institutions (PNMI). With the new requirement of 6-months of after care, there will be significant development and support needs. The Office of Children and Family Services has taken important steps to support the initiation and rollout of this transition. By involving those responsible for the homes, providing training and supporting credentialing, the Department has demonstrated its commitment to successfully moving ahead. This bill would provide DHHS with additional resources to help our existing PNMI’s become compliant with QRTP standards and support this process. Whether for further training, physical alterations, staffing changes needed because of new standards, meeting new rules or unanticipated costs, this allocation would further support the transition in order to ensure success.

There is broad support among various stakeholders for the transition of these facilities to meet QRTP standards and appreciation of the ways this change will benefit our children. That \$700,000 has been allocated by DHHS to cover much of the expenses is admirable. This bill

¹ <https://www.maine.gov/dhhs/ocfs/family-first-act/qualified-residential-treatment-program.shtml>

provides additional resources to support DHHS efforts to ensure transitions and future care work are successful.

Thank you for your time and I would be happy to try and answer any questions you have.