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Testimony of
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Before the Joint Standing Committee on Health and Human Services

LD 503 – Resolve, To Help Children in Therapeutic Foster Care Move toward Adoption

Hearing Date: March 23, 2021

Good Morning Senator Claxton, Representative Meyer, and Members of the Joint Standing Committee on Health and Human Services:

I am Todd Landry, Director of the Office of Child and Family Services (OCFS) within the Department of Health and Human Services and I am here today to testify in opposition to LD 503, Resolve, To Help Children in Therapeutic Foster Care Move toward Adoption. This bill would direct the Department to require that adoptive families receive the same level of financial assistance at adoption that they received when the child was in treatment foster care.

OCFS' primary concern with this bill is that it has the potential unintended consequence to disincentivize efforts to address a child's needs and move them to non-treatment level foster care. As its name implies, treatment foster care is meant to provide treatment to children in care (primarily those who have mental or behavioral health needs). It is not intended to be a permanent service and instead meant to address a child's needs to improve functioning in their day-to-day lives.

Also, under the current system for adoption subsidy the rate is negotiated for each adoption. If resource parents have concerns about the needs of a child and the costs associated with meeting those needs they can bring them forward during that negotiation for consideration. Children with significant needs due to a medical condition, disability, or mental or behavioral health issue may be eligible for an enhanced foster care reimbursement rate and often the amount of that reimbursement is carried forward into the adoption subsidy rate. It is important to keep in mind that adoption subsidy is not intended to pay adoptive parents to care for the child, but instead to reimburse for certain costs associated with raising a child.

It is OCFS' experience that families who are interested in adoption will move forward given the existing flexibility for enhanced subsidy rates based on the child's required level of care. Children adopted through the foster care system remain eligible for MaineCare until their 26th birthday and can receive any MaineCare services for which they qualify, thus minimizing the cost to the adoptive family in order to meet any ongoing treatment needs.

This proposal would have a fiscal impact and if this resolve is passed without the allocation of funding it would likely result in funding reductions for other programs currently available to all foster and adoptive parents, such as Adoptive and Foster Families of Maine and clinical support services for resource parents. The fiscal impact would be even more significant if the change proposed by this bill were to apply not just to future adoptions but to all previous adoptions of children who were in treatment foster care prior to adoption.

We wanted to make you aware of our concerns as you consider this proposal. Thank you for the opportunity to testify before you today. I'm happy to answer any questions you may have.