



# Alliance for Addiction and Mental Health Services, Maine

## *The unified voice for Maine's community behavioral health providers*

Malory Otteson Shaughnessy, Executive Director

### Testimony in support of LD 1135

## **“An Act Regarding Substance Use Disorder Treatment Services and Increasing Reimbursement Rates for Those Services”**

Sponsored by Representative Stover

April 6, 2021

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Good morning Senator Claxton, Representative Meyer, and members of the Joint Standing Committee on Health and Human Services. I am Malory Shaughnessy, a resident of Westbrook, and the Executive Director of the Alliance for Addiction and Mental Health Services. Please accept this testimony on behalf of the Alliance in **support of** LD 1135.

There are several pieces to this legislation and I would like to take them one by one.

**First, insuring that all substance use disorder (SUD) services comply with trauma-informed principles of care according to the US DHHS, Substance Abuse and Mental Health Services Administration (SAMHSA) is a basic fundamental need.** Patients who have experienced trauma benefit from emerging best practices in trauma-informed care. These practices involve both organizational and clinical changes that have the potential to improve patient engagement, health outcomes, provider and staff wellness, and decrease unnecessary utilization.

This bill does not clearly state that the Department should develop and provide training to providers and clinicians to support trauma-informed practices and principles, but it would be a good investment for some of the federal covid relief dollars. We know that substance use and misuse are on the rise in response to the pandemic, and providing this training and support would produce long-term savings and positive impacts.

**Secondly, providing an increase of 25% to Section 65, reimbursement for SUD outpatient services is in keeping with the increases in the consumer price index since these rates were set last.** The Department currently has a rate study in progress on Section 65 SUD Intensive Outpatient Program services which shows a need for a considerable increase (above the 25%). However, based on the Myers & Stauffer Implementation Report, the proposed timing for a full Section 65 rate study, which would include the basic outpatient treatment for SUD, may not begin until 2023.

We know that there are growing waitlists for Mainers to get into SUD treatment, which shows that the rate is not attracting and supporting enough providers to meet the need. And the need is continuing to grow. In 2020, Maine had 502 fatal overdoses, surpassing the previous high of 417 in 2017. The data available for 2021 indicates a continued and alarming trend upward.

**Third, DHHS has a rate study currently in progress for Section 97, Appendix B (SUD residential treatment), funded by the federal SUPPORT for ME grant award. The shared proposed rates show the need for a substantial increase, which supports the providers claim that the current rate has not been adequate for some time.** This fact is also reflected in that there are growing waiting lists for this service as well.

And **finally, this bill calls for changes in the length of stay for residential rehabilitation** to better accommodate for flexibility based on clinical need and to remove the limit of a single admission to halfway house services annually. We know that substance use disorder does not come in a one size fits all presentation, and the treatment needs to be flexible to adapt to the needs of the client.

**All of the pieces of this legislation appear to be based on solid ground and worthy of support**, and it appears that the department is largely in agreement based on the studies they have underway, and that they propose. The big sticking point is they have not included these needs into the budget presented and passed by this body last week.

Section 1902(a)(30)(A) of the Social Security Act not only requires that states' Medicaid payment rates be consistent with efficiency, economy, and quality of care – the must produce an adequate network of providers to be **sufficient to provide access to the general population**.

It is safe to say that the growing waiting lists show that current rates are not sufficient to supply access to appropriate SUD treatment to all Mainers in need, and in all Maine communities. The department's own studies allude to this fact. And the need is growing due to the pandemic.

We urge this committee to consider a unanimous **Ought to Pass** to this legislation to send it straight to the Appropriations table where it could receive funding through the covid relief funds that the state will be receiving to use for the next few years. This would be very appropriate as a direct result of the pandemic is an increase in mental health problems and increased substance use.

Thank you for considering these comments, and we would be happy to provide any additional information for the work session.