Janet T. Mills Governor

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Senator Ned Claxton, Chair Representative Michele Meyer, Chair Members, Joint Standing Committee on Health and Human Services 100 State House Station Augusta, ME 04333-0100

Re: LD 1009 – Resolve, To Create a Health Care Ombudsman Position To Serve in Maine's County Jails

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

This letter is to provide information regarding LD 1009, Resolve, To Create a Health Care Ombudsman Position To Serve in Maine's County Jails.

We understand that the sponsor is introducing an amendment that would address our concerns about an Intensive Case Manager being tasked with this role. We appreciate this. For the record, we submit the following related to the bill <u>as drafted</u>.

As written, the resolve would require the Department to designate an Intensive Case Manager (ICM) working in the county jails to serve as a health care ombudsman to oversee county jail inmates with medical and mental health care needs and connect them to the health care services for which they qualify. The resolve also directs the ombudsman position to assist county jail inmates in receiving the medications they need in a timely fashion

Medical providers working in the county jails are private providers and asking ICMs, whose credentials are typically a Mental Health and Rehabilitation Technician (MHRT) certification, to oversee the expertise of private clinical providers would be inappropriate. This work is outside the scope of an ICM's role and responsibilities and neither the Office of Behavioral Health (OBH) nor the Department of Health and Human Services has authority over the county jails.

This work would open up ICM oversight to a significantly increased number of individuals and would require creating a new position for each county jail. Creating an ombudsman position for each of the fifteen (15) county jails and a supervisor would have a significant fiscal impact.

OBH agrees that there is work to be done in order to help the system operate more smoothly and to help ensure incarcerated individuals have appropriate access to services

and necessary medications; however, the level of training and authority of an ICM only allows for them to provide assistance rather than oversight. While OBH leadership works on system improvements to address the needs of incarcerated individuals, ICMs currently provide community reentry services for inmates with mental health concerns in every jail in the state. A Justice and Health Team has been included as a budget initiative in the Governor's biennial budget proposal and would add ten (10) additional positions to OBH. This would further expand our capacity to serve incarcerated individuals as well as community-based diversion away from the justice system. We appreciate the support of this initiative when it came before this Committee last month. This would achieve the desired goal of providing services to individuals with behavioral health disorders during incarceration and upon reentry into the community.

We are aware that there may be changes proposed to this bill, but want to be sure you have our concerns related to the proposal as printed. If there are questions for the Office of Behavioral Health, we will gladly participate in the work session.

Sincerely,

Jessica Monahan Pollard, PhD, Director

Office of Behavioral Health