

~ Officers ~ Eric Meyer, President Spurwink

Dave McCluskey, 1<sup>st</sup> Vice-President Community Care

Greg Bowers, 2<sup>nd</sup> Vice President Day One

Vickie Fisher, Secretary Maine Behavioral Health Org.

Suzanne Farley, Treasurer Wellspring, Inc.

Catherine Ryder, Past President Tri-County Mental Health

~ Board Members ~

Adcare Educational Institute ARC at Mid Coast Hospital

Alternative Services, NE, Inc.

Aroostook Mental Health Ctr.

Assistance Plus

Catholic Charities Maine CCSME Christopher Aaron Center Common Ties

Community Caring Collaborative

Community Concepts, Inc.

Community Health & Counseling

COR Health

Crossroads Maine

Genoa Telepsychiatry Kennebec Behavioral Health

Maine Behavioral Healthcare

MaineGeneral Behavioral Health

Milestone Recovery

NFI North, Inc.

Portland Recovery Community Ctr. Penquis C.A.P., Inc. Pathways of Maine Rumford Group Homes SequelCare of Maine Sunrise Opportunities

Wings for Children & Families

Woodfords Family Services

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 1147 Resolve, To Enhance Access to Medication Management for Individuals With Serious and Persistent Mental Illness Sponsored by Representative Madigan April 12, 2021

Good afternoon Senator Claxton, Representative Meyers, and members of the Joint Standing Committee on Health and Human Services. I am Malory Shaughnessy, resident of Westbrook, and Executive Director of the Alliance for Addiction and Mental Health Services. Please accept this testimony on behalf of the Alliance <u>in</u> <u>Support of</u> LD 1147.

In the past few years, there has been a crisis brewing in access to one of the very basic foundational community services for severe and persistent mental illness – medication management. Medications can play a role in treating several mental disorders and conditions. Treatment also often includes psychotherapy of some type. Choosing the right treatment plan however, should be based on a person's individual needs and medical situation, and under a mental health professional's care.<sup>1</sup>

Mental health medications require oversight in order to determine if they're addressing what they need to address. A mental health professional tracks any changes in symptoms, provides insight about whether the symptoms or side effects are normal, and helps make sure the prescription meets the needs presented. Because some mental health medications have potentially serious side-effects, it's important that someone follow a client's reaction to these meds until they know they are safe.

Unfortunately, we have been losing providers of this service over the past few years, and many other providers have reduced the amount of this service that they provide. The reimbursement rate for this service simply does not cover the cost of providing it --and for more complex patients, it doesn't even come close.

This bill would provide an immediate rate increase of 25% for medication management under Section 65 of MaineCare. This first step is essential to maintain access to this service across Maine. This service rate has not kept pace with inflation over the past decade, and is now at a minimum 25% below cost.

But it will do a couple of other things as well.

Once it has stabilized this service with the increase to meet the current costs, it also calls for pulling together a stakeholder group to do two critical things:

One – they would work together to develop a per member, per month reimbursement rate method that covers the cost for all wrap around administrative and support services provided (it could also be per member per week if needed); and

Two - create 3 levels of care and reimbursement to meet the complex and varied needs of those receiving these services:

- Level 3: An enhanced rate for any client with a more complex case. This would include someone involved in a progressive treatment plan, recently released from inpatient psychiatric treatment, or from a forensic state-run hospital;
- Level 2: A standard rate (based on the new 25% higher basic rate) for care that accounts for regular monitoring and updating as needed to achieve and maintain stabilization; and
- Level 1: A lower maintenance rate for those that have achieved a very stable, consistent response and adherence to their regimen.

This three tier approach echoes that which has proven to be successful in the Opioid Health Homes. A more robust rate reimbursement is available when someone first comes into treatment and needs a more intense intervention, then gradually they move to different levels as the complexity and acuteness of their need changes. This would work well here as well.

And finally, to again reference the rate evaluation project of the administration this past year --- please understand that it is a multi-year process. Yes, this analysis will be good for moving into the future as they set up systems to do rate reviews on a regular basis. That will help to end the deconstruction we have seen over the past decade. However, the plan is to do rate reviews for most of the mental health services within the next 3-4 years.

## This is too long to address the critical need now. We will have very few providers still in the system by then. Please support this investment in our foundational mental health services now!

Please vote Ought to Pass for LD 1147. Thank you. I would be happy to bring any information to the work session as well.

With 35 members, the **Alliance** is the state association for Maine's community based mental health and substance use treatment providers. The **Alliance** advocates for the implementation of sound policies and evidence-based practices that serve to enhance the quality and effectiveness of our behavioral health care system. All Mainers should have full access to the continuum of recovery-oriented systems of care for mental illness and substance use disorder – from prevention through treatment and into peer recovery support.