

Testimony in support of LD 582

Resolve, To Support the Fidelity and Sustainability of Assertive Community Treatment

Sponsored by Representative Colleen Madigan

April 15, 2021

Good afternoon Senator Claxton, Representative Meyers, and members of the Joint Standing Committee on Health and Human Services. My name is Holly Cavanaugh and I am testifying today in support of LD 582, An Act to support the fidelity and sustainability of Assertive Community Treatment.

For the majority of my career I have worked on/with an ACT team, and currently serve as the Manager for ACT at Tri-County Mental Health Services. It has been one of the most fulfilling parts of my career. I appreciate working on a team, out in the community, supporting and helping our most vulnerable consumers who struggle with severe and persistent mental illness. Over the years, our ability to ensure this evidence-based service meets all fidelity requirements has become increasingly more difficult.

I recently had the chance to sit with our administrative support person for our ACT team to review our billing procedures. After sitting with her for almost 2 hours, it dawned on me how labor intensive our billing process has become under the per diem model. Our administrative support person has to go into our billing system every day to submit billing just to keep on top of it. If she did not do this every day, the process for end of the month billing would take her at least 2 full business days to complete. 2 full days of no interruptions, which would mean not taking calls, not helping us keep our documentation current, not participating in our daily team meeting, and much more. Our administrative support person told me that when the model was under the Per Member Per Month model, the billing was not nearly this complicated and/or time consuming.

In addition to challenges with billing, we've had significant challenges with hiring for the numerous positions that remain vacant. Some positions have been open for over a year, with no relief in sight. The most difficult position/s to fill are our nursing positions. As I'm sure you're aware, we have a significant nursing shortage in the state. To be honest, we have a significant workforce problem across the board. The proposed bill is putting forth the ability to open our applicant pool to individuals who have licenses and/or certifications that would be equally as beneficial to our team-based approach. For example, having a Medical Assistant on the team instead of a RN or in addition to an RN would be a game changer. Another example is that I have turned away numerous candidates that have come with a wealth of knowledge and experience but do not qualify for a MHRT/C (even the provisional) right away. This certification takes at minimum 1-2 years to get from either a certification class and/or going back to college for classes they already took at another college.

Lastly, as I know you are all aware, the cost of living has gone up and the State of Maine has done a wonderful job at instituting higher minimum wages to ensure that everyone can afford to live on the wage they earn. Unfortunately, our rates have not increased in over a decade. As a result, being able to offer competitive wages in the field has become more difficult. The work we do is hard and intensive. It takes a special type of person to work on an ACT Team for a number of reasons. The dual role of being a Case Manager as well as a Clinician or Substance Use Counselor is a challenge in and of itself. Add onto that the population we serve and the challenges they live with, the limited community resources, and the intensity of the service we provide, you can see why it can be difficult to find the right person for the position.

I sincerely believe this bill would offer the opportunity for us to grow this service to serve more individuals with severe and persistent mental illness who are struggling now more than ever. I appreciate your time and support for this bill.

Sincerely,

Holly Cavna, LCPC, CADC, CCS

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