

## John Nutting's Testimony in favor of LD 1090

Senator Claxton, Representative Meyer, distinguished members of the Health and Human Services committee:

My name is John Nutting. I live in Leeds. When I served in the State Senate, I sponsored the bill that created the Progressive Treatment Plan, known as PTP. This law, like the Conditional Release Law in New Hampshire, the Johnson Act in Massachusetts, and Kendra's Law in New York is tailored for those who have anosognosia, a total lack of awareness of their illness. Many mental health studies have shown that this is the group of individuals who oftentimes stop their treatment plan and end up in jails and hospitals multiple times. Your committee will hear today from parents, Psychiatrists, Nurse Practitioners, ACT teams, and law-enforcement that the PTP program has saved lives, kept people compliant with their treatment plan, and allowed them to have successes in their lives.

The original 2005 PTP law allowed that only a hospital could apply to the District Court to have an individual, who had had many prior hospitalizations or time spent in jail, be placed on a PTP program. By 2010, my lead cosponsor, Senator Peter Mills, and I realized that the law needed a moderate expansion because after the one-year PTP was finished, many individuals, because of newly gained insight, were staying on their treatment plan. However, if someone stopped their treatment plan, they had to get to the point of being an imminent threat to themselves or others before they were being re-hospitalized and then re-PTPed. Oftentimes, very unfortunate events were happening to those individuals. Senator Mills and I sponsored the Assisted Outpatient Treatment bill called AOT, which allowed doctors, ACT teams, or case managers to petition the court for a PTP hearing under a lower standard, "a substantial risk of harm standard". Maine became the 46th state to pass a statute like this to intercede in people's lives before they were an imminent risk to themselves or others. This bill received 117 votes in the Maine House and 32 votes in the Maine Senate. As a mother testified at that public hearing, "My son has ended up either in a mental health hospital or jail each of the previous seven times he has stopped his treatment plan. It is absolutely no mystery what's going to happen the eighth time he stops his treatment plan."

Senator Mills and I never imagined that Maine would choose to constrict this law by refusing to pay the legal fees associated if some entities decided to use the AOT/PTP law. How are they doing this? If the two state hospitals, Riverview Psychiatric Center or Dorothea Dix Psychiatric Center, choose to initiate a AOT/PTP hearing before the District Court, the

state says that's in the public good and will pay the legal fees associated with this. If a non-state mental health hospital, or an ACT team, or a doctor wants to initiate a PTP hearing the state refuses to pay the legal fees. Non-state mental health hospitals, ACT teams, and doctors do not have funds in their budgets and thus, are unable to use the AOT/PTP statute. The department is even telling these entities, "Use the PTP program" all the while knowing they can't afford the legal fees in order to do so! LD 1090 will stop the strangulation of our AOT/PTP statutes by ensuring that all of the entities that are listed in the statute can initiate a public hearing, and that all AOT/PTP hearings are in Maine's best interest. The practical effect of this state decision has been many individuals who had great successes in their one year program have ended up in jails, hospitals, or deceased. This is so wrong, cruel, and unnecessary and has caused so much pain for families, and millions of dollars more being spent in jails and hospitals than if the legal fees were funded for all as the legislation intended.

You will hear in other testimony today that Maine is the only state in the United States that is keeping their AOT/PTP law constricted by denying to pay the legal fees of many of the entities that are authorized to use the statute. Study after study has shown that a majority of those in our jails and hospitals with mental illness suffer from anosognosia, a lack of awareness of their illness. I am very proud to have talked to family after family that have said this program has saved their children's lives and allowed their children to become successful in life. But I am so frustrated that the laws are not being used as they were written. If Maine would facilitate all entities being able to use this law, the new federal "Cares Act" mental health bill would compensate our state a million dollars a year in ACT team funding without any state match required. A growing number of states have taken advantage of this new federal law for years.

Finally, just a word about where the funding source for LD 1090's grant program comes from. The Journal of American Medical Association recently issued a report stating the devastational impacts marijuana has on those with depression and schizophrenia. The medical marijuana fund has been in existence for years. Two and a half million dollars were taken from the last session in a bipartisan vote to fund the Mainer's Feeding Mainer's food program and the Breakfast Before the Bell school lunch program. Currently, there is \$6.2 million in that fund.

Thank you very much I'll be happy to answer any questions.