

Senator Claxton, Representative Meyer, and distinguished members of the Joint Standing Committee on Health and Human Services, my name is Sarah Lynch and I am here today to testify in strong support of LD 674, "An Act to Support Early Intervention and Treatment of Psychotic Disorders."

I am the Program Manager of the Portland Identification and Early Referral (or PIER) Program. I joined the PIER team 20 years ago when it was under the leadership of Dr. William McFarlane. PIER is a nationally recognized leader in research, training, and gold standard team-based and family-involved care. Care that can mean the difference between a young person being chronically disabled and living a productive and meaningful life.

The World Health Organization recommends evidence-based treatment be provided within 3-4 months of a first episode of psychosis because there is a critical window of opportunity to make this difference. For most Mainers, the delay to treatment is months or years longer and for treatment that includes only individual therapy or medication. Sadly, our current system waits for people to prove a level of disability before offering more assertive, comprehensive treatment that is less effective because it is offered too late.

Coordinated Specialty Care (or CSC) works because individual therapy and psychopharmacology are complemented by a range of non-billable components. These include community education to identify youth early, supported education and employment to engage young people in goals that matter to them, peer support to facilitate connection and hope, and twice a week team meetings and impromptu collaboration to monitor and respond to early warning signs and avert crises and expensive hospitalizations.

Coordinated team-based care relies heavily on Mental Health Block Grant funding which is temporary. PIER is currently the only early psychosis CSC team in the state. In the last 5 years, PIER has served 180 young people and their families mostly from southern Maine. With telehealth expansion since the pandemic we now serve people from Androscoggin, Aroostook, Knox, Kennebec, Lincoln, Oxford, Somerset, and Waldo counties. We have doubled our census but the wait for care is now 3 months, outside the recommended window of opportunity. Meeting the needs of people most at risk for poor outcomes in time to make a lifelong difference, requires sustainable funding for CSC teams serving the entire state. Providing proper care for Maine's most vulnerable youth requires LD 674.

I am grateful for the many young people and families that have graduated from our program and continue to be involved through our advisory, advocacy, and sharing their stories. These are the people who inspire us. Please listen to them.

Please support LD 674 so that we can expand these services to more deserving young people throughout the state.

Thank you,  
Sarah Lynch, LCSW  
PIER Program  
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