

MaineHealth
Local Health Systems
Franklin Community
Health Network
LincolnHealth
MaineHealth Care At Home
Maine Behavioral Healthcare
Memorial Hospital
Maine Medical Center
Mid Coast-Parkview Health
NorDx
Pen Bay Medical Center
Southern Maine Health Care
Waldo County General Hospital
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New England Rehabilitation
Hospital of Portland
St. Mary's Health System

Testimony of Robert McCarley, M.D.

In Support of LD 869

" Resolve, Directing the Department of Health and Human Services To Review the Progressive Treatment Program and Processes by Which a Person May Be Involuntarily Admitted to a Psychiatric Hospital or Receive Court-ordered Community Treatment"

Monday, May 3, 2021

Senator Claxton, Representative Meyer and distinguished members of the Joint Standing Committee on Health and Human Services, I am Dr. Rob McCarley, Vice President of Medical Affairs for Maine Behavioral Healthcare Intensive Services, and I am here to testify in support of LD 869, "Resolve, Directing the Department of Health and Human Services To Review the Progressive Treatment Program and Processes by Which a Person May Be Involuntarily Admitted to a Psychiatric Hospital or Receive Court-ordered Community Treatment."

MaineHealth is Maine's largest integrated non-profit health care system that provides the full continuum of health care services to the residents of eleven counties in Maine and one in New Hampshire. As part of our mission of "Working Together So Maine's Communities are the Healthiest in America," MaineHealth, which includes Maine Behavioral Healthcare, is committed to creating a seamless system of behavioral healthcare across Maine, coordinating hospital psychiatric care with community-based treatment services, and better access to behavioral healthcare through integration with primary care services.

The legislation before you today is a product of a robust conversation this Committee had in the 129th Legislature regarding court-ordered outpatient treatment, also known as a Progressive Treatment Program (PTP) or "green paper." A PTP allows a patient to remain out of the hospital by helping to avoid the cycle of medication or treatment non-compliance leading to deterioration to the point of the patient being a danger to themselves or others. This precipitous psychiatric decline usually leads to a loss of employment, housing, and severe damage to important supportive relationships. This makes recovery that much more difficult. A PTP works to break this negative cycle. It has the additional benefit of keeping the patient out of the hospital (typically involuntarily).

The conversation last Session illuminated the fact that PTPs are underutilized across the state for a variety of reasons. As this Committee grapples with the

tragedy of individuals with behavioral health needs stuck in hospital emergency departments for days and weeks, it has never been more evident that we must utilize every tool available to ensure that people receive the care they need in the community.

A few topics of concern this review could analyze:

- The creation of a standardized process for bringing forth a PTP to the Court from a non-State mental health institution.
- Increase the number of or access to independent examiners in the state.
- Increase the frequency or availability of judicial review to ensure that medication treatment is expedited for patients languishing in hospitals.
- Funding needs for outpatient treatment for this higher level of care.
- How long can hospital emergency departments “hold” a patient until a bed is available?
- Is the institution who issued the PTP committed to take the patient as the next admission?
- Does a patient hospitalized on a “green paper” require a hospital commitment hearing and treatment over objection hearing before PTP ordered medications (previously ordered by the court) can be administered over objection?

Convening stakeholders to examine these topics will ensure that there is a standard interpretation of existing statute, as well as identify barriers and potential solutions to ensure that the needs of our most vulnerable are met.

I would also add that we are supportive of providing funding to ensure that PTPs can be brought by non-State mental health institutions, and would urge the Committee to pass both bills. Thank you and I would be happy to answer any questions you may have.