

## LaPlante, Jill

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**From:** Stephen Merz <smerz@mainebbehavioralhealthcare.org>  
**Sent:** Friday, May 05, 2017 5:40 PM  
**To:** LaPlante, Jill  
**Subject:** Statement for hearing today at 2:30 on LD 1517 - An Act to Ensure Access to Behavioral Health Services

Dear Jill,

I was unable to attend today's hearing at 2:30p in person, so I am sending this to you via email in hopes that you may share it with the committee regarding LD 1517, An Act to Ensure Access to Behavioral Health Services.

Thank you.

Steve

Statement of Support by  
Stephen M. Merz  
Maine Behavioral Healthcare  
In Support of LD 1517  
"An Act to Ensure Access to Behavioral Health Services"

Senator Brakey, Representative Hymanson and distinguished members of the Joint Standing Committee on Health and Human Services, I am Stephen Merz, President and CEO of Maine Behavioral Healthcare, and I am writing you in support of the creation of a Behavioral Health Oversight Council as outlined in Subchapter 6 of this bill. Maine would benefit from the establishment of an oversight council specifically focused on the needs of Maine people with behavioral health needs.

I recently came to Maine from Connecticut, where I served for several years on the Connecticut Behavioral Oversight Council, a similar oversight body as the one proposed in LD 1517. I believe an oversight council is a best practice approach to manage the complex behavioral health needs of communities while balancing the effective administration of state resources. Since I have come to Maine, I see much attention and effort focused on improving behavioral health services, as evidenced by the thoughtful process of the state rate setting process as well as multiple hearings, panels and testimony regarding many health issues such as proposed opiate addiction legislation. An entity such as an oversight council will provide a robust structure for Maine legislators, consumers, and providers to work with state agency leaders to establish successful policies to improve health outcomes. Specific examples of successes in Connecticut include deployment of Intensive In-Home Child and Adolescent Psychiatric Services (IICAPS) throughout the state to reduce avoidable re-hospitalizations, reducing inpatient length of stay and establishing community care teams to offer case management services for consumers who frequently utilize emergency medical and psychiatric services. All vital components of behavioral healthcare system including community organizations, school-based clinics, community mental health centers and hospitals, need to be active and involved in such an effort. An oversight council can fulfill this important role.

Thank you for your consideration.

Regards,  
Stephen Merz, FACHE  
President and CEO  
Maine Behavioral Healthcare

Stephen M. Merz, FACHE

President/CEO

**Maine Behavioral Healthcare**

78 Atlantic Place

South Portland, ME 04106

(207)-661-6206

[smerz@mainebbehavioralhealthcare.org](mailto:smerz@mainebbehavioralhealthcare.org)

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