Testimony of Sarah Calder, MaineHealth
In Support of LD 1989, "An Act to Increase Access to the Progressive Treatment Program Fund"
January 14, 2026

Senator Ingwersen, Representative Meyer, and distinguished members of the Joint Standing Committee on Health and Human Services, I am Sarah Calder, Senior Government Affairs Director for MaineHealth, and I am here to testify in support of LD 1989, "An Act to Increase Access to the Progressive Treatment Program Fund."

MaineHealth is an 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 vision of "Working Together So Maine's Communities are the Healthiest in America," MaineHealth, which includes MaineHealth Behavioral Health, is committed to creating a seamless system of behavioral healthcare across Maine, coordinating hospital psychiatric care with community-based treatment services, and providing better access to behavioral healthcare through integration with primary care.

Court-ordered outpatient treatment, also known as a Progressive Treatment Program (PTP), allows a patient to remain in the community by helping to avoid the cycle of medication or treatment non-compliance, which can lead to deterioration to the point of the patient being a danger to themselves or others, thus requiring involuntary hospitalization. This precipitous psychiatric decline usually leads to a loss of employment, housing, and severe damage to important supportive relationships. The patient cycling through periods of non-compliance with treatment recommendations makes recovery that much more difficult. A PTP works to break this negative cycle. Patients who actively participate in PTPs are often able to remain stable in the community, thus avoiding involuntary inpatient hospitalization.

I had the pleasure of participating in the PTP stakeholder group that met during the fall and winter of 2021. Our robust conversations illuminated the fact that PTPs are underutilized across the state for a variety of reasons, including that the legal costs to initiate and maintain a PTP and execute a Green Paper are a significant barrier. In fact, MaineHealth has supported and assisted Spurwink, for example, in seeking renewals or modifications for PTPs for our patients because we know that the program, when the process functions well, can help people receive the care they need in the least restrictive and appropriate setting. It is for that reason that we support the legislation before you today.

As I have shared with this Committee before, however, significant problems continue with the PTP program. Arguably, only a small subset of patients are being well served by PTPs at present. We continue to urge the Department and this Committee to convene stakeholders to identify potential solutions to ensure that the needs of our most vulnerable are better met through our continuum of services and supports.

Thank you and I would be happy to answer questions.