Testimony of Maria Hadjiyane, MaineHealth

In Support of LD 840, “An Act to Support Individuals with Personality Disorder or Emotional Dysregulation by Requiring Reimbursement Under the MaineCare Program”

Wednesday, April 5, 2023

Senator Baldacci, Representative Meyer, and distinguished members of the Joint Standing Committee on Health and Human Services, I am Maria Hadjiyane, Chief Operating Officer at Maine Behavioral Healthcare, and I am here to testify strong support of LD 840, “An Act to Support Individuals with Personality Disorder or Emotional Dysregulation by Requiring Reimbursement Under the MaineCare Program.”

MaineHealth is an integrated non-profit health care system that provides a continuum of health care services to communities throughout Maine and New Hampshire. As part of our vision of “Working Together so Our Communities are the Healthiest in America,” MaineHealth provides a range of behavioral health services throughout our footprint. These range from community based outpatient therapy, medication management, substance use treatment and care management to inpatient treatment in four community hospitals and Spring Harbor Hospital. And until just a few years ago, it included the highly successful ACTION Program.

The ACTION Program was an intensive treatment program for individuals with a diagnosed personality disorder or emotional dysregulation. Our team worked with each member to learn emotion regulation skills as defined in the Dialectical Behavioral Treatment (DBT) model to avoid hospitalization. It’s important to note that these patients are some of the most acutely ill and difficult to treat patients our teams encounter, and they are often the patients who cycle in and out of Emergency Departments and in-patient hospitals.

I’d like to share one patient’s story with you. In June 2018, a woman had been hospitalized at Spring Harbor Hospital for over a month, and this was just one of over 60 admissions. She was combative and engaging in self-harming behaviors and our staff were petitioning for her to be placed at Riverview Psychiatric Hospital. The Department asked us to try enrolling her in the ACTION program and she soon moved into residential treatment. Once in residential care, her problem behaviors continued, including attacking staff, running into the road, and swallowing objects. But, the behavioral approach taken by the ACTION program gave her the needed skills so that she eventually stopped using dangerous behaviors, improved her relationships with others, and reduced her medications. She has since moved out of the group home and lives in her own home. Her use of hospitalization and crisis services have decreased dramatically.

In 2019, the Department ended Maine Behavioral Healthcare’s contract for its ACTION Program because it did not meet the definition of an ACT team. And, unfortunately, the data shows the impact the program’s closure has had on these patients. In FY 2019, Maine Medical Center saw 614 patients with personality disorders in its Emergency Department. In FY 2021, after the
program closed, the Emergency Department saw a 41% increase in visits from patients presenting with personality disorders. That number has held steady and the Emergency Department is on track to see almost 900 patients this year.

The legislation before you today creates a bundled rate to recreate a similar model of care as the ACTION program so that providers across the state can support intensive treatment for individuals with a diagnosed personality disorder or emotional dysregulation. The rate would include psychiatry, nursing, individual and group therapy, DBT skills group, case management, and vocational support services. With a bundled rate, we can create the needed services so that these clients can live productive lives and avoid unnecessary and ineffective hospitalization.

Thank you for your time and I would be happy to answer any questions you may have.