

# *United States v. State of Maine: Lawsuit, Settlement & Policy Implications:*

Addressing Systemic Barriers in Community-Based  
Healthcare for People with Disabilities

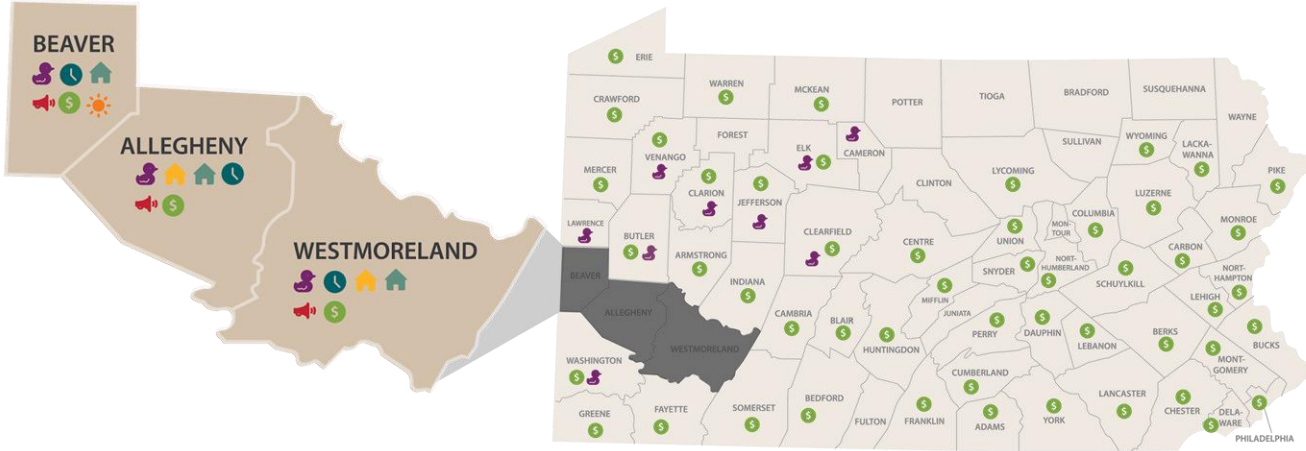
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# Our Family of Organizations

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# Geographic Reach



## Achieva Support

-  Community Supported Living
-  Early Intervention
-  Employment Supports
-  Home and Community Supports

## The Arc of Greater Pittsburgh

-  Advocacy & Family Supports
-  Recreation

## Achieva Family Trust



# Introduction

- Overview of *United States v. State of Maine* lawsuit
- Importance of the case in disability rights and healthcare access
- How this case sets a precedent for improving community-based services

# Overview of the Case

- The case focused on Maine's failure to provide community-based healthcare services for children with behavioral health disabilities.
- DOJ sued Maine for violations of the ADA (Americans with Disabilities Act).
- In November 2023, the DOJ and Maine reached a settlement under which the State has agreed to make specific changes. The settlement will be court-supervised to ensure compliance.

# Background of the Case

- DOJ investigation found systemic failures in Maine's behavioral healthcare system
- Violations of Title II of the Americans with Disabilities Act (ADA) and *Olmstead v. L.C.*
- Key findings: unnecessary institutionalization, lack of timely access to community care, crisis response failures

# The DOJ's Findings

- Children with behavioral health disabilities faced:
  - 328-day average wait time for targeted case management
  - 172-day average wait time for home-based treatment
  - Crisis services often unavailable, leading to ER visits or police involvement
- Juvenile detention facilities became de facto psychiatric institutions due to lack of community resources

# Impact of Institutionalization

- Separation from families and communities.
- Increased trauma and mental health deterioration.
- Higher costs compared to community-based care.
- Juvenile detention centers acting as *de facto* psychiatric facilities due to service gaps.



# Legal Arguments

- *Olmstead v. L.C.* decision: Unjustified segregation of people with disabilities is discrimination
- The ADA mandates services in the most integrated setting appropriate
- Maine failed to provide community-based care despite available Medicaid resources

# Settlement Agreement Terms

- Maine's commitments include:
  - Expanding community-based services
  - Improving care coordination and service planning
  - Reducing institutionalization rates
- Focus on supporting children to remain with their families in community settings

# Key Reforms Under the Settlement

- Implementation of Single Assessments for Medium & High-Intensity Behavioral Health Services
- Expansion of High-Fidelity Wraparound Services (HFW) by 2026
- Care Coordination guided by Wraparound Planning Principles
- Strengthening Maine's crisis response and intervention systems

# Impact on Community-Based Healthcare

- Prevents unnecessary institutionalization by ensuring timely access to care
- Expands home-based treatment and behavioral health support
- Improves crisis response and care navigation for families
- Supports families to keep children in stable, non-institutional settings

# National Policy Implications

- *U.S. v. Maine* highlights systemic issues across states
- Need for national reforms in disability healthcare policy
- The role of Medically Underserved Population (MUP) designation in directing resources
- HEADs UP Act: Proposal to designate people with IDD as a Special MUP to unlock funding for community-based care

# Call to Action

- Advocates must push for:
  - Proper implementation and enforcement of the Maine settlement
  - Support for the HEADs UP Act to improve healthcare access nationwide
  - Policy changes to prioritize community-based care over institutionalization
- Contact representatives to co-sponsor and support federal and state healthcare reforms

# Conclusions and Questions

- Key Takeaways:
  - U.S. v. Maine exposed systemic failures in community-based healthcare.
  - Institutionalization is harmful and expensive compared to community-based care.
  - MUP designation reform and the HEADs UP Act can drive real change.
- Questions?

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*Empowering People With Disabilities.*