

# MAINE STATE LEGISLATURE

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L.D. 215

Date:

6/11/25 Majority

(Filing No. H-645)

## HEALTH AND HUMAN SERVICES

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### STATE OF MAINE HOUSE OF REPRESENTATIVES 132ND LEGISLATURE FIRST SPECIAL SESSION

COMMITTEE AMENDMENT "A" to H.P. 138, L.D. 215, "An Act to Establish a Program to Assist Residents of Large Recovery Residences"

Amend the bill by striking out the title and substituting the following:

**'An Act Regarding Large Recovery Residences'**

Amend the bill by inserting after the title and before the enacting clause the following:

**'Emergency preamble. Whereas,** acts and resolves of the Legislature do not become effective until 90 days after adjournment unless enacted as emergencies; and

**Whereas,** residents of the State continue to suffer from the devastating impacts of substance use disorder; and

**Whereas,** recovery residences have proven to be effective in helping residents of the State experiencing substance use disorder in initiating and maintaining recovery; and

**Whereas,** funding for recovery residences remains limited; and

**Whereas,** many residents of recovery residences have turned to municipal general assistance for support; and

**Whereas,** municipalities with large recovery residences have experienced steep and unsustainable increases in general assistance expenses; and

**Whereas,** this legislation must take effect before the expiration of the 90-day period in order to address these issues; and

**Whereas,** in the judgment of the Legislature, these facts create an emergency within the meaning of the Constitution of Maine and require the following legislation as immediately necessary for the preservation of the public peace, health and safety; now, therefore,'

Amend the bill by striking out everything after the enacting clause and inserting the following:

# COMMITTEE AMENDMENT

1       **Sec. 1. 22 MRSA §4305, sub-§3-E** is enacted to read:  
 2       **3-E. Maximum levels of assistance for large recovery residences.** Municipalities  
 3       shall establish maximum levels of assistance for housing assistance provided to or on behalf  
 4       of a person residing in a recovery residence, as described in section 4309, subsection 6,  
 5       with occupancy of 26 or more beds, in an amount equal to 70% of the maximum levels of  
 6       assistance for recovery residences with occupancy of 25 or fewer beds.

7       **Sec. 2. 22 MRSA §4311, sub-§1-D** is enacted to read:  
 8       **1-D. Reimbursement for large recovery residences.** The department shall  
 9       reimburse each municipality for housing assistance provided to or on behalf of a person  
 10       residing in a recovery residence, as described in section 4309, subsection 6, with occupancy  
 11       of 26 or more beds, in an amount equal to 100% of housing assistance granted to that  
 12       individual.

13       **Sec. 3. Department to convene stakeholder group; report.** The Department of  
 14       Health and Human Services shall convene a stakeholder group of interested parties,  
 15       including, but not limited to, individuals in recovery, operators of recovery residences,  
 16       municipal officials and individuals representing the entity responsible for the certification  
 17       of recovery residences in the State to review options for managing the costs of general  
 18       assistance provided for residents of recovery residences, including possible expansion or  
 19       creation of state-funded subsidy programs. The department shall report its findings by  
 20       February 1, 2026 to the Joint Standing Committee on Health and Human Services. The  
 21       committee may report out legislation related to the report to the Second Regular Session of  
 22       the 132nd Legislature or to any special session of the 132nd Legislature.

23       **Sec. 4. Appropriations and allocations.** The following appropriations and  
 24       allocations are made.

25       **HEALTH AND HUMAN SERVICES, DEPARTMENT OF**

26       **Office of Behavioral Health Z199**

27       Initiative: Establishes one Social Service Program Specialist II position to provide program  
 28       and contract oversight for recovery housing initiatives and technical assistance to  
 29       community-based recovery service providers and provides funding for related All Other  
 30       costs.

31 <b>GENERAL FUND</b>	<b>2025-26</b>	<b>2026-27</b>
32       POSITIONS - LEGISLATIVE COUNT	1,000	1,000
33       Personal Services	\$113,649	\$119,023
34       All Other	\$7,256	\$7,256
35		
36       GENERAL FUND TOTAL	<u>\$120,905</u>	<u>\$126,279</u>

37       **Office of Behavioral Health Z199**

38       Initiative: Provides funding to reimburse municipalities for 100% of housing assistance  
 39       provided for a person residing in a certified recovery residence with 26 or more beds.

40 <b>GENERAL FUND</b>	<b>2025-26</b>	<b>2026-27</b>
41       All Other	\$120,139	\$120,139
42		

1	GENERAL FUND TOTAL	\$120,139	\$120,139
2			
3	HEALTH AND HUMAN SERVICES,		
4	DEPARTMENT OF		
5	DEPARTMENT TOTALS	2025-26	2026-27
6			
7	GENERAL FUND	\$241,044	\$246,418
8			
9	DEPARTMENT TOTAL - ALL FUNDS	\$241,044	\$246,418

11 **Emergency clause.** In view of the emergency cited in the preamble, this legislation  
12 takes effect when approved.'

13 Amend the bill by relettering or renumbering any nonconsecutive Part letter or section  
14 number to read consecutively.

### SUMMARY

16 This amendment replaces the bill, changes the title and adds an emergency preamble  
17 and emergency clause. It establishes maximum levels of assistance for housing assistance  
18 provided to or on behalf of a person residing in a certified recovery residence with  
19 occupancy of 26 or more beds, in an amount equal to 70% of the maximum levels of  
20 assistance for recovery residences with occupancy of 25 or fewer beds. It requires the  
21 Department of Health and Human Services to reimburse each municipality for housing  
22 assistance provided to or on behalf of a person residing in a certified recovery residence  
23 with occupancy of 26 or more beds, in an amount equal to 100% of housing assistance  
24 granted to that individual. It also directs the department to convene a stakeholder group of  
25 interested parties, including, but not limited to, individuals in recovery, operators of  
26 recovery residences, municipal officials and individuals representing the entity responsible  
27 for the certification of recovery residences in the State to review options for managing the  
28 costs of general assistance provided for residents of recovery residences, including possible  
29 expansion or creation of state-funded subsidy programs. The department must report its  
30 findings by February 1, 2026 to the Joint Standing Committee on Health and Human  
31 Services, and the committee has the authority to report out legislation related to the report.

### FISCAL NOTE REQUIRED

(See attached)

**132nd MAINE LEGISLATURE****LD 215****LR 70(02)****An Act to Establish a Program to Assist Residents of Large Recovery Residences****Fiscal Note for Bill as Amended by Committee Amendment****Committee: Health and Human Services****Fiscal Note Required: Yes****A(M-645)**

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**Fiscal Note**

	<b>FY 2025-26</b>	<b>FY 2026-27</b>	<b>Projections FY 2027-28</b>	<b>Projections FY 2028-29</b>
<b>Net Cost (Savings)</b>				
General Fund	\$241,044	\$246,418	\$250,593	\$254,402
<b>Appropriations/Allocations</b>				
General Fund	\$241,044	\$246,418	\$250,593	\$254,402

**Fiscal Detail and Notes**

The bill includes ongoing General Fund appropriations to the Department of Health and Human Services of \$241,044 in fiscal year 2025-26 and \$246,418 in fiscal year 2026-27 to implement the provisions in the bill. This includes ongoing General Fund appropriations of \$120,319 in each year to reimburse municipalities for 100% of housing assistance provided for a person residing in a certified recovery residence with 26 or more beds. It also includes ongoing funding for one Social Service Program Specialist II position to provide program and contract oversight for recovery housing initiatives and technical assistance to community-based recovery service providers.