## April 10, 2017

## **Health & Human Services Committee**

## Senator Eric L. Brakey, Chair & Representative Patricia Hymanson, Chair In Opposition

LD 10: An Act To Build Greater Accountability into the General Assistance Program by Increasing the Penalty for Falsely Representing Information on an Application for General Assistance

LD 36: An Act to Create a 9-month Time Limit on General Assistance Benefits;

LD 219: An Act to Prioritize Use of Available Resources in General Assistance Programs;

LD 220: An Act to Align Time Limits in the Municipal General Assistance Program and Temporary

Assistance for Needy Families Program

Senator Brakey, Representative Hymanson, distinguished members of the Health & Human Services Committee, I am David MacLean, Director, Social Services Division of the Health & Human Services Department for the City of Portland submitting testimony in opposition to LDs 10, 36, 219, and 220.

The City of Portland opposes these bills, which seek to increase time limits, expand disqualifications, and impose new penalties on individuals and families seeking assistance through Maine's safety net programs - General Assistance (GA) and Temporary Assistance for Needy Families (TANF).

GA and TANF are a last resort safety net designed to assist individuals and families with housing, food, clothing, medicine and other basic necessities. These programs, by definition, serve those without access to other resources.

Any restriction that is not focused on protecting access for that minority of GA and TANF recipients who *need* assistance longer, whether because they are waiting for a Social Security disability determination or for another valid reason, fails to reflect the intent of these programs, puts those individuals, children and families at direct risk of homelessness, hunger and inability to purchase medications, and shifts significant costs to municipalities, municipal taxpayers, and non-profits.

When considering these bills, it is important to know that most Mainers receive assistance for a short time. Those individuals who receive GA do so for well under 9 months and those families who receive TANF do so at a median rate of about 18 months. In addition, for those individuals who are able to work, but demonstrate a need for over 9 months of GA, the law already allows municipalities to work for their benefits within their communities, and can terminate their benefits if they refuse.

<sup>&</sup>lt;sup>1</sup> Butler, Sandra: TANF Time Limits and Maine Families: Consequences of Withdrawing the Safety Net; University of Maine (2013).

Maine law also already requires recipients of GA to apply for all other available help in order to remain eligible and provides for disqualification of those who fail to do so, and, anyone found to have deliberately lied in order to get GA, can be charged with a Class E crime, be required to pay back the assistance and be disqualified from receiving GA again until they repay or after 120 days (whichever takes longer).

But there is a small percentage of recipients who, due to serious mental or physical illness, a child or dependent with a disability, lack of education and employment opportunities, or other extreme barriers, find themselves in need of extended support. These individuals who remain on GA and TANF for longer periods have lower than average levels of education and higher than average rates disability and of Adverse Childhood Experiences, which are directly linked to the likelihood of experiencing homelessness.<sup>2</sup> One 2010 Maine study found that family members with a work limiting disability were highly prevalent in TANF families generally (67%), and particularly so (90%) in those families receiving assistance for 60 months or more.<sup>3</sup>

Imposing arbitrary time limits does nothing to eliminate or address the sometimes serious and chronic needs of those seeking help. It simply pushes those individuals into the increasingly strained shoulders of private faith and non-profit organizations and municipal taxpayers.

Policies like LD 10, 36, 219, and 220 ultimately magnify the fiscal, social and public safety costs to our communities, since the most effective way to address homelessness and mental and physical illness is to provide support *before* someone is in full crisis, saving the high costs of emergency room visits, police contacts, and in-patient mental health treatment.

These proposals may, on paper, reduce dependence on General Assistance and TANF merely by restricting access, but they fail to include evidence based, effective, and cost efficient strategies to address the underlying causes of homelessness and extreme poverty. We urge you to vote Ought Not to Pass.

<sup>&</sup>lt;sup>2</sup> Relationship Between Adverse Childhood Experiences and Homelessness and the Impact of Axis I and II Disorders Leslie E. Roos, MSc, Natalie Mota, MA, [...], and Jitender Sareen, MD, FRCPC. <a href="https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3969113/">https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3969113/</a>

<sup>&</sup>lt;sup>3</sup> Butler, Sandra: TANF Time Limits and Maine Families: Consequences of Withdrawing the Safety Net; University of Maine (2013).