

Public Comment: Continuity of Care and the Power of Informed Advocacy - Support for SB 549

TO: Chair Beidle and members of the Senate Finance Committee

FROM: Matthew Thompson (Healthcare Professional and Long-term Advocate)

HEARING DATE: March 10, 2026

**BILL: SB 549 – Mental Health – Treatment Plans for Individuals in Facilities – Participation of Family Members or Other Individuals (The H.E.R. Continuity of Care Act)**  
**POSITION: SUPPORT (FAV)**

I am writing today as a healthcare professional and a support person who has been a witness to a person's mental health journey for several years (to protect their privacy, I will not identify who they are). In my professional life, I am quite aware of the importance of patient privacy and autonomy; these are the cornerstones of ethical care. However, I am also acutely aware of how a patient's loved one can make the critical difference in the continuity of care through tireless advocacy.

I am here to urge a FAVORABLE report on SB 549.

### **The Vital Role of the Consistent Caregiver**

Over the years, I have seen firsthand that a mother is often the only consistent person standing between a child with multiple disabilities and a total systemic collapse. While medical staff and case managers may change, the mother remains the historian and the primary protector. I have watched her tirelessly advocate to ensure the patient's rights were protected and that they received the care they desperately needed, even when the system itself created barriers to that very care. I have witnessed the "revolving door" that occurs when this expertise is ignored:

- **The Witness to Crisis:** I have been the person to call the mother late at night to get this person help, because she knew exactly what to do and how to do it. Her knowledge is the most effective tool available in a crisis. Don't shut out the mothers who can actually help turn a medical crisis around.
- **The Breakdown of Continuity:** I have seen the devastating results of decompensation when a patient is discharged prematurely because the facility shut out the mother—the one person who truly understands the patient's baseline—by failing to adequately inform the patient of their right to have family participate in the treatment plan.
- **The Toll of Procedural Negligence:** As a healthcare worker, it is painful to watch administrative chaos and insurance hurdles preventing proper health care, effectively forcing a health crisis when this is preventable if the family member or chosen advocate is involved.

**This bill is the missing piece required for true continuity of care.** It recognizes that when a patient is in a crisis of capacity, the person who has been their most consistent advocate should not be legally silenced or excluded due to a lack of clear communication from the healthcare team. We must stop forcing medical emergencies into a revolving door.

- **Balancing Autonomy with Care:** This bill respects autonomy by ensuring the patient is clearly informed of their right to have family involved, honoring their documented wishes when they need support navigating their care.
- **Immediate Stabilization:** When a medical crisis occurs, time is of the essence. This bill allows for immediate stabilization by keeping the support system involved, preventing a health crisis from escalating further.
- **Representation and Equity:** By mandating the facility's duty to inform patients and honor family participation in mental health treatment plans in the same way we do for physical health, we provide families the tools they need to be the safety net their loved ones deserve.

Current law is the only thing cutting the safety net that these dedicated caregivers work so hard to maintain. Based on my professional background and the years I have spent witnessing this struggle, I am certain that SB 549 is the solution needed to provide the healing, representation, and equity the mental health community lacks. I respectfully urge you to support SB 549.

Sincerely,  
Matthew Thompson