



**Written Testimony of Jena Jones on Behalf of
the Maine Council on Aging
to the Committee on Health and Human
Services**

**Neither For nor Against LD 99 – An Act to Clarify
the Allowable Temperature Range in Certain
Long-term Care Facilities**

Submitted via Testimony Portal on February 6, 2023

Greetings Senator Baldacci, Representative Myer, and members of the Committee on Health and Human Services.

My name is Jena Jones and I'm the Policy & Advocacy Director of the Maine Council on Aging (MCOA). The MCOA is a broad, multidisciplinary network of over 135 organizations, businesses, municipalities, and older community members working to ensure we can all live healthy, engaged, and secure lives with choices and opportunities as we age at home and in community settings. I am testifying neither for nor against LD 99.

The intentions of LD 99, to safeguard the comfort of all residents within Maine's long-term care facilities, are some we should all agree on. Just as we would wish for our own homes, it should be the right of all residents living in long-term care facilities to feel comfortable and protected from the extreme temperatures Maine's weather produces. Though we support the aim of LD 99, we also know that our systems care for older people both at home and in long-term care facilities are fraying at the seams and nearing collapse.

In addition to the Federal mandate ([Title 38, Chapter I, Part 51, Subpart D, § 51.100](#)) to maintain long-term care facilities between 71-81 degrees Fahrenheit, LD 99 adds additional facility-staff-lead mitigation measures aimed at keeping residents comfortable during breakdowns of heating or cooling equipment. Many of Maine's long-term care facilities are of older construction; many facilities lack central heating or cooling options, some have windows that will not support cooling units, and all are facing unprecedented challenges with staffing wrought by pre-existing difficulties that were further compounded by a multi-year global pandemic.

Instead of allocating funding for facilities to purchase the systems and equipment needed to comply with the terms of LD 99, this bill directs facilities to source the funding needed for the updates LD 99 would require. The mitigation efforts proposed by LD 99 would be delegated to direct care workers, the very same group of workers most likely to be short-staffed¹ in a long-term care facility. Within a national crisis of care worker availability, Maine is ranked 3rd in states facing the greatest shortages², reporting that 59% of facilities in Maine are unable to fill staffing needs.

¹ <https://www.kff.org/coronavirus-covid-19/issue-brief/nursing-facility-staffing-shortages-during-the-covid-19-pandemic/>

² Ibid.

A new unfunded mandate will serve only to stress an already deeply stressed system. Over the past few years, several long term care facilities have closed due to staffing shortages and other financial challenges, resulting in hundreds of residents needing to move far from family, community supports, and their primary care staff. Simply put, the MCOA would like to ensure that not one more residential care home for older people closes. That's why we're working tirelessly to grow Maine's direct care staff and ensure that all parts of the continuum of care, including nursing homes, are appropriately compensated for the care they provide. Requiring long-term care facilities that support MaineCare residents to source their own funding not only adds additional tasks and stress to an over-burdened system but also disregards the lack of workers available to maintain the mitigation techniques required in LD 99.

Every resident in each of Maine's long-term care facilities is deserving of a livable space where they are comfortable and receiving quality care. The MCOA ardently agrees with the impetus for LD 99 but cannot support the lack of funding available to implement its requirements. I urge the Committee to consider appropriating funds to realize the necessary guarantees of comfort LD 99 would provide. Without this appropriation, this mandate will further impede needed progress in stabilizing and growing supports to maintain long-term care facility operations.