



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

**In Favor of LD 977 - Resolve, Authorizing the Maine
Health Data Organization to Develop a Plan for
Measuring Gaps in Home and Community Based
Services**

Submitted April 1, 2025

Senator Ingwersen, Representative Meyer, and Members of the Health and Human Service Committee.

My name is Jess Maurer, I am the Executive Director of the Maine Council on Aging (MCOA), and the Chair of the Essential Support Workforce Advisory Committee. I am testifying in support of LD 977 on behalf of both entities.

The MCOA is a broad, multidisciplinary network of over 140 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.

Established in 2021, the Essential Support Workforce Advisory Committee (ESWAC) was statutorily created to advise the Legislature, the Governor and state agencies on the State's shortage of essential support workers, people who provide care and support to older adults, people with physical and intellectual disabilities, and those with behavioral health challenges. The Committee was not convened until 2022, and only met once that year. Thus, the Committee only started its work in earnest in 2023.

In 2023, ESWAC issued a recommendation to provide funding to the Maine Health Data Organization to do an environmental scan and inventory of data that is already collected and/or available to be collected related to the “care gap,” and to provide a report to the legislature on what it would take to create a uniform data collection and reporting system that would establish a “care gap” baseline that could be measured over time. Technical challenges impeded the recommendation being enacted that year.

In ESWAC’s 2024 report filed with this Committee in early January of this year, ESWAC renews the following recommendation:

Pursue legislation and one-time funding for MHDO to do an environmental scan and inventory of data that is already collected and/or available to be collected related to the “care gap,” and to provide a report to the legislature on what it would take to create a uniform data collection and reporting system that would establish a “care gap” baseline that could be measured over time.

As reported in the Department's most recent report on their Efforts and Progress in *Implementing the Recommendations of the Commission to Study Long-term Care Workforce Issues*, the "care gap" in Maine continues to be significant.¹ For instance, half of Maine's most vulnerable older people, who are both technically poor and nursing home eligible, are not receiving all or any of the Home-Based Care they are entitled to receive under Section 19. While the care gap narrowed considerably for people in Section 63, this is largely due to more than 300 people leaving the program and a growing waitlist of nearly 1,000.

This is the only real data we have on Maine's "care gap." Such data does not exist for people who are entitled to receive behavioral health services or support while living with intellectual disabilities. More importantly, as a Committee, ESWAC has found there is no way to understand how many workers currently work in this workforce, nor any way to track growth or contraction. LD 977 proposes to ask the Maine Health Data Organization to discover what data currently exists to understand the full care gap in Maine.

ESWAC's authorizing legislation requires the Committee to collaborate with DOL, DHHS, the others "to examine staffing level needs in the essential support workforce, including entities funded by the State and through the MaineCare program," and to "monitor essential support worker shortages and the expansion of the essential support workforce to examine if actions taken to promote expansion in the essential support workforce have been successful."

Because we do not fully understand Maine's "care gap," we have no way to understand what the actual staffing needs are. In addition, we have no way to measure year over year if actions taken have been successful. Thus, it is critically important that LD 977 be enacted. Otherwise, we will never have any way to track if we are making progress to growing Maine's Essential Care and Support workforce.

Thank you for your consideration.

¹ https://www.maine.gov/dhhs/sites/maine.gov.dhhs/files/inline-files/2024%20PART%20AAAA%20Workforce%20Annual%20Report_0.pdf