HIGHLIGHTS FROM THE SECOND ANNUAL REPORT:

EFFORTS AND PROGRESS IN IMPLEMENTING THE RECOMMENDATIONS OF THE COMMISSION TO STUDY LONG-TERM CARE WORKFORCE ISSUES

Presented by the
Maine Department of Health and Human Services
and the Maine Department of Labor
to the
Joint Standing Committee on Health and Human Services

March 23, 2023

OVERVIEW

Summary

The Commission to Study Long-term Care Workforce Issues was created by the Legislature and met in 2019, issuing its recommendations in January 2020. PL 2021, c.398, Section AAAA implements a rate recommendation from that report (to ensure that MaineCare rates support at least 125 percent of minimum wage) and requires the Maine Department of Health and Human Services (DHHS) to provide annual reports each year from 2022 to 2026 regarding the Department's efforts and progress in implementing the recommendations of the Commission

Relevant Reports and Resources

- Commission to Study Long-term Care Workforce Issues
- AAAA-7 First Annual Report
- AAAA-7 Second Annual Report
- Home and Community Based Services Improvement Plan
- MaineCare Rate System Evaluation

OVERVIEW

Progress on Recommendations from the 2019 Long-term Care Workforce Commission

- Reimbursement
- 2. Workforce Recruitment and Retention
- 3. Workforce Development
- 4. Qualifications and Training
- 5. Expanding Existing Support Systems
- 6. Consumer Directed Services
- 7. Pooling and Connecting Workers
- 8. Public Assistance
- 9. Grants

REIMBURSEMENT

DHHS has taken several steps in the last year to support higher wages for direct support workers (DSWs)

- In 2022, the Department implemented the Commission's recommendation to reimburse long-term care services at rates sufficient to support wages of at least 125% of the State minimum wage
 - o In May 2022, Home and Community Based Services (HCBS) rates indicated in Part AAAA were raised retroactively to January 1st, 2022
 - Supplemental monthly "ramp" payments were made for a few services where rate studies were needed to ensure appropriate adjustments
 - Nursing facilities and PNMI Appendix C facilities received an interim wage add-on to their rates from January through June, 2022, and retroactive to July 1, 2022, rate letters reflected the Part AAAA rates
- In February/March 2022, 354 HCBS providers were allocated \$121M in one-time federal funding for bonuses to direct support workers and supervisors under Maine's HCBS Improvement Plan
- In August 2022, the Department issued \$25 million in supplemental COVID-19 payments to Nursing Facilities, PNMI Appendix C facilities and Adult Family Care Homes
- In September 2022, the Department issued \$6 million in one-time payments to group homes and family centered homes for adults with intellectual and developmental disabilities.
- Effective January 1, 2023, the Department again updated rates to reflect the increase in the State's minimum wage and implemented increases from rate studies for Targeted Case Management and Day Health Services

WORKFORCE RECRUITMENT AND RETENTION

DHHS has worked closely with the Department of Labor and other public private stakeholders to support increased healthcare workforce recruitment and retention efforts



LWM is a state partnership which works with providers to host open jobs and promote Maine across the country This campaign has created 22 career exploration videos, a job board, and a career toolkit distributed across all high schools in Maine. The multimedia advertising strategy includes radio, video, traditional and social media, resulting in 58,533 job views for positions in the healthcare sector, and 699 applications to healthcare jobs posted on the Live and Work in Maine job board



Caring for ME is a marketing campaign and website which hosts HCBS jobs, resources, and training opportunities across the state. Last year the campaign had 40,000 visitors, 3,000 of whom went to MaineJobLink to access current job postings in the field. As part of the Caring For ME campaign, four inperson and one virtual hiring event took place with 100+ employer and 250+ jobseeker participants—resulting in 30 jobseekers submitting applications, receiving conditional offers and interviews for open positions and 20+ jobseekers connected with Healthcare Navigators for additional job search support



LTCOP along with ETHOS marketing is running an advisory council to give a voice to Maine's Direct Care and Support Professionals- their first report will be available January 2023!

WORKFORCE DEVELOPMENT



DHHS, DOL, and DOE continue to collaborate on a number of workforce development initiatives:

- Utilizing a combination of Maine Jobs & Recovery Program (MJRP) funds and a federal grant,
 DOL is actively expanding healthcare pre-apprenticeship and apprenticeship programs
- DHHS is engaged with the University of Maine System (UMS) and MCCS to align learning standards with provider needs
- As part of the COVID-19 response, the UMS was formally engaged as a partner to coordinate students who would be available to increase the worker pool
- Supported by Maine Jobs & Recovery Plan funding, DOL hired two full-time healthcare
 career navigator positions to assist individuals statewide interested in healthcare careers
 get connected to training and job opportunities. Healthcare navigators have worked with
 50+ individuals who are referred from a variety of sources, including the Caring For ME
 campaign, and has connected 30+ individuals to free training, job opportunities and other
 services

QUALIFICATIONS AND TRAINING



Connect to healthcare training resources to accelerate your career or upskill your current workforce

Program Highlights

- Website launched in April 2022. Supported by 2 Healthcare Navigators and 2 Tuition Remission Consultants
- ➤ 433 requests from individuals, and 106 requests from employers for training in priority jobs

Qualifications and Training

Qualifications for doing direct care and support work vary by program and group served. DHHS and DOL are engaging stakeholders and reviewing certification requirements with an eye toward greater consistency (e.g., minimum age to do a certain task) and opportunities for cross training to give workers more opportunities. The Department is also exploring methods to make available training easily found by seekers, so training access does not pose a barrier to job seekers

EXPANDING EXISTING SUPPORT SYSTEMS



In October 2022, DHHS and the five Area Agencies on Aging implemented Respite for ME, funded through the Maine Jobs & Recovery Plan. The two-year pilot program provides grants for family caregivers providing care to a loved one at home. Informal and unpaid caregivers may use the funds for respite care, counseling and training, legal and financial guidance, and assistive technology. Family caregivers can also access services to maintain their own health such as occupational and physical therapy.

CONSUMER DIRECTED SERVICES

- DHHS has long had consumer-directed options in its programs for older adults and adults with physical disabilities and those options have been growing in popularity. Self-Direction is currently offered in Maine Care Section 19 (Older Adults and Adults with Physical Disabilities Waiver), Section 96 (Private Duty Nursing and Personal Care Services) and Section 12 (Consumer Directed Attendant Services). In addition, the Department also allows self-direction in its state funded Section 69 (Independent Support Services), Section 63 (In-Home and Community Support Services for Elderly and Other Adults) and Chapter 11 (Consumer Directed Personal Assistance Services).
- Self-direction has been expanded to participants of Section 18 (Brain Injury Waiver), 20 (Other Related Conditions) and 29 (Supportive Services for Individuals with Intellectual Disabilities waiver) through a temporary modification to the waivers through the emergency use of the Appendix K option during the federal public health emergency. DHHS is pursuing permanent changes to its waiver policies to allow these options to continue.



PUBLIC ASSISTANCE



CLIFF Dashboard Maine Pilot Evaluation

Prepared for the Maine Whole Family Approach to Jobs Team By Maine Applied Research June 2022

Whole Family Approach to Jobs and Partnership with the Federal Reserve Bank of Atlanta (Cliff Tool) Highlights

- The suite of tools includes a calculator (short term planning), dashboard (long term planning), customizable planner for people, employers, and policy decisions
- Maine is one of several states partnering with the Atlanta Fed and Augusta CareerCenter, Family Futures Downeast, Fedcap, Kennebec Valley Community Action Program, Higher Opportunity for Pathways to Employment (HOPE), McAuley Residence, and Southern Midcoast CareerCenter to have piloted the CLIFF dashboard
- Next Steps: Two pilot's have been completed and a roll out plan to various stakeholders will be launched over the next 6 months. The tool will be branded and housed on a specific website.

Click on the picture to read the full report!

DEPARTMENT OF LABOR Center for Workforce Research and Information

Direct Support Worker Market Analysis

Presented by the

Maine Department of Health and Human Services
and the Maine Department of Labor
to the

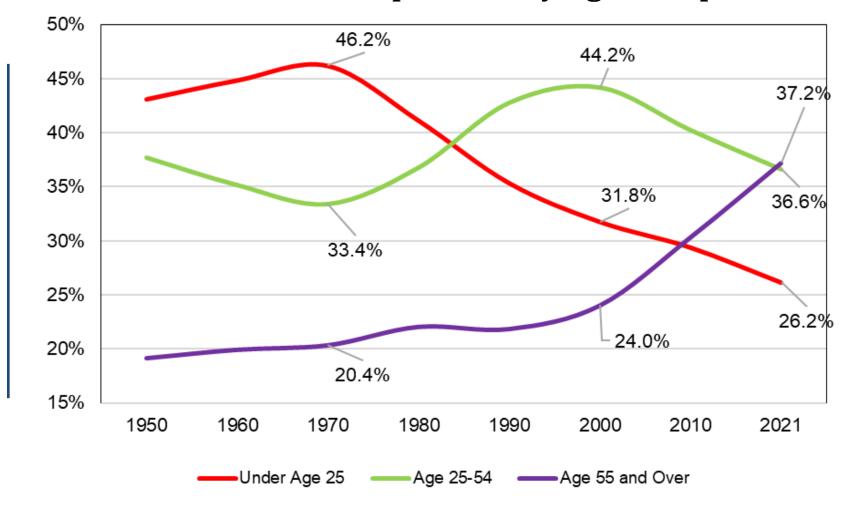
Joint Standing Committee on Health and Human
Services

Over the next ten years, the number of jobs in direct care is expected to increase by approximately 1,940 (6.3 percent) to meet the demand for care of an aging population.

- In conjunction with national projections from the U.S. Bureau of Labor Statistics, the Center for Workforce Research and Information (CWRI) publishes ten-year statewide employment projections every two years.
- Maine is the oldest state in the nation as measured by median age.
- Population aging is expected to lead to increased demand for care and increased demand for workers to provide direct care.

Share of Total Population by Age Group

- Birth rates in Maine have fallen for decades and now just over a quarter of the population is under age 25.
 There are now more people age 55 + than there are people in prime working ages 25-54.
- Maine's imbalanced population structure helps explain the tight labor market, including in direct support industries, and the projected increased demand for direct care.



Occupational Employment and Wage Data

- The Center for Workforce Research and Information (CWRI) identified three occupations that are relevant to the Direct Support Worker Market Analysis.
- These occupations are:
 - Home Health and Personal Care Aides
 - Nursing Assistants
 - Social and Human Service Assistants
- CWRI compiled two sets of data for these occupations: 2021 employment and wage estimates and 2020-2030 ten-year occupational employment projections.

2021 Statewide Occupational Employment and Wage Estimates

Occupation Title	Total Jobs	Mean Wage	Mean Entry Level Wage	Mean Wage Among Experienced Workers
Home Health and Personal Care Aides	15,890	\$15.26	\$13.58	\$16.08
Nursing Assistants	8,460	\$16.52	\$14.00	\$17.76
Social and Human Service Assistants	3,980	\$18.94	\$15.97	\$20.41

- Jobs in direct support occupations are projected to increase by approximately 1,940 from 2020 to 2030.
- Maine's aging population is expected to lead to higher demand for healthcarerelated services, especially in occupations like home health and personal care aids, nursing assistants, and registered nurses.

Occupation Title	2030 Projected Jobs	Percent Change
Home Health and Personal Care Aides	18,712	7.66
Nursing Assistants	10,115	6.44
Social and Human Service Assistants	3,868	-0.13

- Job growth is projected through 2030 among home health and personal care aides and nursing assistants, but most job openings in the coming decade are projected to result from replacement needs due to exits and transfers among incumbents in those jobs.
- Because of the relatively low pay, difficult work environment and lower educational and training requirements for home health and personal care aids and nursing assistants, turnover in these occupations tends to be quite high, leading to thousands of job openings.

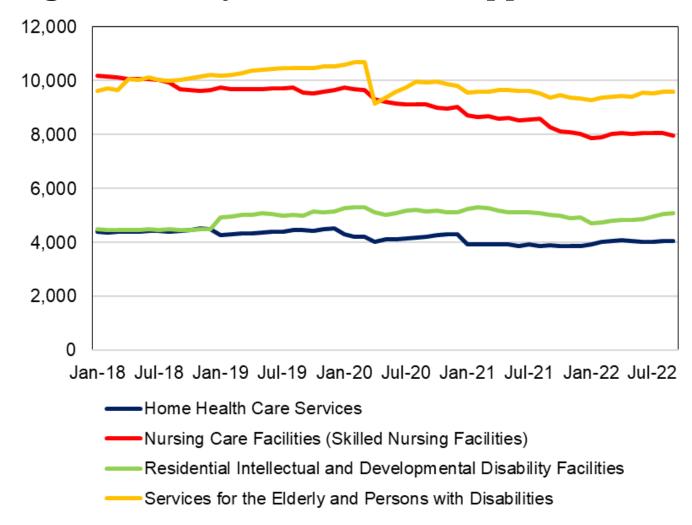
Occupation Title	Annual Total Openings	Annual Exits	Annual Transfers
Home Health and Personal Care Aides	2,310	1,155	1,025
Nursing Assistants	1,250	625	555
Social and Human Service Assistants	450	155	290

Industry Employment Analysis

- CWRI identified eight industries that are relevant to the Direct Support Worker Market Analysis:
 - Home Health Care Services
 - Nursing Care Facilities (Skilled Nursing Facilities)
 - Residential Intellectual and Developmental Disability Facilities
 - Services for the Elderly and Persons with Disabilities
 - Residential Mental Health and Substance Abuse Facilities
 - Continuing Care Retirement Communities
 - Assisted Living Facilities for the Elderly
 - Vocational Rehabilitation Services
- Analysis of job and wage data in relevant industries includes all job holders, not only direct support workers.
- For example, in home health care services, while direct support workers comprise the largest group of occupational employment, other types of jobs are also included such as registered nurses, health care practitioners, and management and administrative workers.

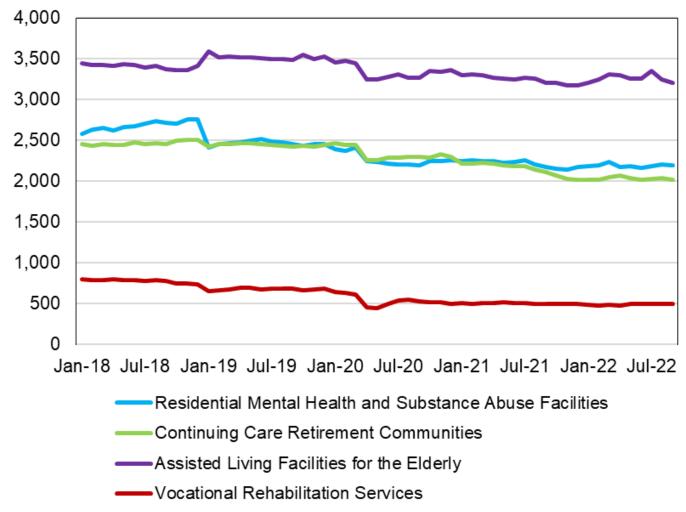
- Overall staffing levels in the combined direct support industries declined at the onset of the pandemic and remain noticeably lower.
- The decline is most notable in skilled nursing care facilities (jobs are 1,650 lower) and services for the elderly and persons with disabilities (jobs are 1,050 lower) through September 2022.

Wage and Salary Jobs in Direct Support Industries



- Comparing the 12 months before the pandemic to the 12 months through September of 2022, jobs are about 4,400 lower across the eight direct support industries.
- Among the smaller direct support industries by total jobs, staffing levels are also notably lower.

Wage and Salary Jobs in Direct Support Industries



Direct Support Worker Retention and Wage Change in Home Health Care Services, Nursing and Residential Care Facilities Sectors, and other Social Assistance Services



- A cohort of workers whose primary employer in 2020 Q1 (the employer that paid the highest wages that quarter) was in one of seven home health care services, nursing and residential care facilities, and social assistance industries and who earned between \$10,000 and \$40,000 in annual wages in 2019 was selected. Workers who earned between \$5,000 and \$200,000 in annual wages in 2021 were included in this analysis.
- Occupational information is not available for these workers, and so this cohort includes individuals working in unrelated occupations, such as administrative, cleaning and maintenance positions.
- These workers were matched to 2021 Q1 wage records of their primary employer to determine whether they remained employed in a relevant industry in early 2021.
- A wage change analysis was conducted to determine whether these workers experienced wage gains from 2019 to 2021.

Comparison of Retention Rates Within Individual Direct Support Industries

- Workers were identified as either staying within the 4-digit industry of their primary employer in both 2020 Q1 and 2021 Q1 (this group is termed 'stayers') or moving into an industry other than the industry of their primary employer in the start quarter (this group is termed 'leavers').
- To better understand within-industry retention rates from 2020 Q1-2021Q1, an identical analysis was conducted using a comparison group of workers from 2018 Q1-2019 Q1 using the same selection criteria (as described on slide 11).
- For both time periods, the 'leavers' may be employed in a different direct support industry but are not employed in the same 4-digit industry as in the start quarter.

All direct support industries had lower worker retention rates from 2020-2021 compared to 2018-2019.

Vocational rehabilitation services, other residential care facilities, and nursing care facilities experienced the greatest net decreases in retention rates.

4-Digit NAICS	Description	2018 Q1 - 2019 Q1 Retention	2020 Q1 - 2021 Q1 Retention
6216	Home Health Care Services	71%	68%
6231	Nursing Care Facilities	73%	68%
6232	Residential Intellectual and Developmental Disability, Mental Health, and Substance Abuse Facilities	74%	72%
6233	Continuing Care Retirement Communities and Assisted Living Facilities for the Elderly	70%	68%
6239	Other Residential Care Facilities	73%	66%
6241	Individual and Family Services	73%	71%
6243	Vocational Rehabilitation Services		66%

All direct support industries have experienced lower retention rates in recent years, but from 2020 Q1 to 2021 Q1 the majority of workers remained working in one of the direct support industries.

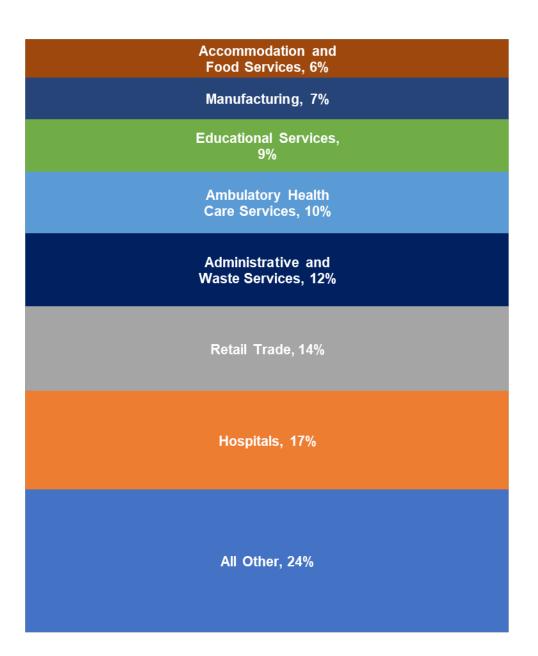
These workers may be moving between employers or direct support industries but remain employed in one of the relevant industries.

In 2021 Q1:

- Approximately 74 percent of workers in this cohort remained employed in any home health care services, nursing and residential care facilities, or select social assistance industries, although they may not be with the same employer or in the same direct support industry.
- Approximately 12 percent were employed in an industry other than the relevant home health care services and nursing and residential care facilities.
- Approximately 14 percent did not have wage records no additional information is available about these individuals. These workers may have retired, relocated out of state, or may have left the labor force to care for children, pursue additional education/training or start a business.



Workers employed in sectors outside of the seven identified direct support industries in 2021 Q1 were most likely to work in hospitals, retail trade, or administrative and waste services, and ambulatory health care services (other than those in direct support industries).



The 2019 median annual wage among this cohort was used to classify workers as either "Below Median" or "At/Above Median."

Those who earned comparatively lower wages in 2019 were more likely to shift into a non-direct support industry from 2020 Q1 to 2021 Q1. This group also experienced slightly greater gains in annual earnings in 2021 compared to 2019.

Wage Category	Remained Employed in any Direct Support Industry	Approximate Net Change in Average Annual Wages, 2019- 2021
Below Median	68%	\$6,500
At/Above Median	80%	\$4,000

Appendix



Occupational Mapping

Occupation Code	Occupation Title	Direct Match Titles	Occupation Definition
31-1120	Home Health and Personal Care Aides	Aide, Blind Escort, Elderly Companion, Geriatric Personal Care Aide, Personal Support Worker	Provide personalized assistance to individuals with disabilities or illness who require help with personal care and activities of daily living support (e.g., feeding, bathing, dressing, grooming, toileting, and ambulation). Monitor the health status of an individual with disabilities or illness, and address their health-related needs, such as changing bandages, dressing wounds, or administering medication. Provide assistance with routine healthcare tasks or activities of daily living. May also help with tasks such as preparing meals, doing light housekeeping, and doing laundry depending on the patient's abilities. Work is performed in various settings depending on the needs of the care recipient and may include locations such as their home, place of work, out in the community, or at a daytime nonresidential facility. Work is performed under the direction of offsite or intermittent onsite licensed nursing staff.
31-1131	Nursing Assistants	Aide, Certified Nursing Assistant, Hospital Aide,	Provide or assist with basic care or support under the direction of onsite licensed nursing staff. Perform duties such as monitoring of health status, feeding, bathing, dressing, grooming, toileting, or ambulation of patients in a health or nursing facility. May include medication administration and other health-related tasks. Includes nursing care attendants, nursing aides, and nursing attendants. Excludes "Home Health Aides and Personal Care Aides", "Orderlies", and "Psychiatric Aides"
21-1093	Social and Human Service Assistants	Addictions Counselor Assistant, Case Work Aide, Clinical Social Work Aide, Family Service Assistant, Human Services Worker, Social Work Assistant	Assist other social and human service providers in providing client services in a wide variety of fields, such as psychology, rehabilitation, or social work, including support for families. May assist clients in identifying and obtaining available benefits and social and community services. May assist social workers with developing, organizing, and conducting programs to prevent and resolve problems relevant to substance abuse, human relationships, rehabilitation, or dependent care.



Industry Mapping (1 of 2)

Industry Code	Industry Title	4 Digit Industry	Examples	Description
621610	Home Health Care Services	6216	Home health care agencies, Visiting nurse associations, Home infusion therapy services, In-home hospice care services	This industry comprises establishments primarily engaged in providing skilled nursing services in the home, along with a range of the following: personal care services; homemaker and companion services; physical therapy; medical social services; medications; medical equipment and supplies; counseling; 24-hour home care; occupation and vocational therapy; dietary and nutritional services; speech therapy; audiology; and high-tech care, such as intravenous therapy
623110	Nursing Care Facilities (Skilled Nursing Facilities)	6231	Convalescent homes or convalescent, hospitals (except psychiatric), Nursing homes, Rest homes with nursing care Assisted living facilities (without nursing facilities) for the elderly with nursing care Inpatient care hospices	
623210	Residential Intellectual and Developmental Disability Facilities	6232		This industry comprises establishments (e.g., group homes, hospitals, intermediate care facilities) primarily engaged in providing residential care services for persons with intellectual and developmental disabilities. These facilities may provide some health care, though the focus is room, board, protective supervision, and counseling.
623220	Residential Mental Health and Substance Abuse Facilities	6232	Alcoholism or drug addiction rehabilitation facilities (except licensed hospitals) Psychiatric convalescent homes or hospitals, Mental health halfway houses, Residential group homes for the emotionally, disturbed	This industry comprises establishments primarily engaged in providing residential care and treatment for patients with mental health and substance abuse illnesses. These establishments provide room, board, supervision, and counseling services. Although medical services may be available at these establishments, they are incidental to the counseling, mental rehabilitation, and support services offered. These establishments generally provide a wide range of social services in addition to counseling.



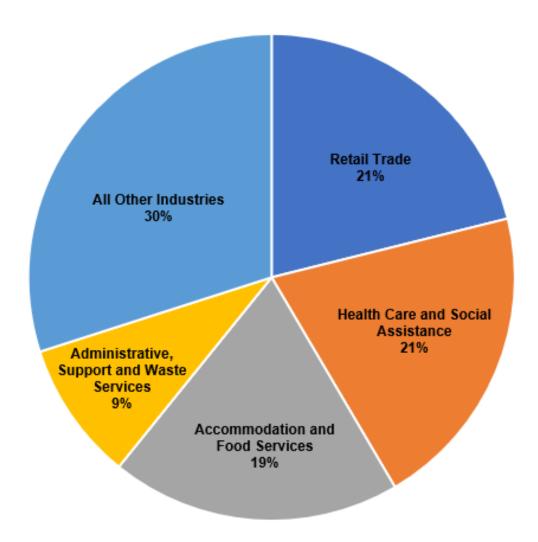
Industry Mapping (2 of 2)

Industry Code	Industry Title	4 Digit Industry	Examples	Description
623311	Continuing Care Retirement Communities	6233		This U.S. industry comprises establishments primarily engaged in providing a range of residential and personal care services with on-site nursing care facilities for (1) the elderly and other persons who are unable to fully care for themselves and/or (2) the elderly and other persons who do not desire to live independently. Individuals live in a variety of residential settings with meals, housekeeping, social, leisure, and other services available to assist residents in daily living. Assisted living facilities with on-site nursing care facilities are included in this industry.
623312	Assisted Living Facilities for the Elderly	6233	Assisted living facilities for the elderly without nursing care, Rest homes without nursing care	This U.S. industry comprises establishments primarily engaged in providing residential and personal care services without nursing care for (1) the elderly or other persons who are unable to fully care for themselves and/or (2) the elderly or other persons who do not desire to live independently. The care typically includes room, board, supervision, and assistance in daily living, such as housekeeping services.
624120	Services for the Elderly and Persons with Disabilities	6241		This industry comprises establishments primarily engaged in providing nonresidential social assistance services to improve the quality of life for the elderly or persons with intellectual and/or developmental disabilities. These establishments provide for the welfare of these individuals in such areas as day care, non-medical home care or homemaker services, social activities, group support, and companionship.
624310	Vocational Rehabilitation Services	6243		This industry comprises (1) establishments primarily engaged in providing vocational rehabilitation or habilitation services, such as job counseling, job training, and work experience, to unemployed and underemployed persons, persons with disabilities, and persons who have a job market disadvantage because of lack of education, job skill, or experience and (2) establishments primarily engaged in providing training and employment to persons with disabilities. Vocational rehabilitation job training facilities (except schools) and sheltered workshops (i.e., work experience centers) are included in this industry.

Recruitment of Workers into Direct Support Industries

- Workers whose primary employer in 2021 Q1 (the employer that paid highest wages that quarter) was in a direct support industry and who earned between \$10,000 and \$40,000 in annual wages in 2020 (from any employer in any industry) were selected.
- To determine other industries that individuals may work in prior to moving into employment in direct support industries, a subset of approximately 1,600 individuals were identified who earned at least 50 percent of their annual wages in 2020 from an employer NOT categorized in one of the seven direct support industries.
- Individuals were then grouped by their 2020 industry of employment at the broad 2-digit level.

Workers employed in a direct support industry in 2021 Q1, but who eared a majority of 2020 wages from another industry, tended to be previously employed within the health care and social assistance, retail trade, or accommodation and food services sectors.



29 percent of the state's population is between the ages of 55-74 – ages when retirement is more prevalent and labor force participation is lower.

 In contrast, 23.5 percent of the population is between the ages of 15 and 34 and are in or aging toward higher labor force participation age ranges.

2021 Census Population Estimates by Age Group

