



132nd MAINE LEGISLATURE

FIRST SPECIAL SESSION-2025

Legislative Document

No. 1932

H.P. 1293

House of Representatives, May 6, 2025

An Act to Support Essential Support Workers and Enhance Workforce Development

Reference to the Committee on Health and Human Services suggested and ordered printed.

A handwritten signature in cursive script that reads "Robert B. Hunt".

ROBERT B. HUNT
Clerk

Presented by Speaker FECTEAU of Biddeford.
Cosponsored by President DAUGHTRY of Cumberland and
Representatives: CLOUTIER of Lewiston, GATTINE of Westbrook, POIRIER of Skowhegan,
STOVER of Boothbay, Senators: BENNETT of Oxford, DUSON of Cumberland.

1 **Be it enacted by the People of the State of Maine as follows:**

2 **Sec. 1. 5 MRSA §282, sub-§10**, as enacted by PL 2017, c. 284, Pt. GG, §3, is
3 amended to read:

4 **10. Economic projections.** To prepare long-range economic projections to ensure
5 that projected available state financial resources are commensurate with projected state
6 expenditures needed to meet long-term state economic goals and policies; ~~and~~

7 **Sec. 2. 5 MRSA §282, sub-§11**, as amended by PL 2021, c. 717, §3, is further
8 amended to read:

9 **11. Economic and demographic analyses.** To conduct studies and continuing
10 economic and demographic analyses of the state economy, including economic and
11 demographic forecasting, and collect, collate and analyze all pertinent data and statistics
12 relating to those studies and analyses to assist the Governor, the Legislature and the various
13 state departments in formulating goals, programs and policies. The commissioner shall
14 make these data and statistics available to the Legislature upon request. All state agencies
15 shall cooperate with the commissioner regarding implementation of the provisions of this
16 subsection. In implementing this subsection, the commissioner may use secondary data
17 made available to the commissioner by other state agencies or other organizations; and

18 **Sec. 3. 5 MRSA §282, sub-§12** is enacted to read:

19 **12. Biennial funding comparison report.** To report to the joint standing committee
20 of the Legislature having jurisdiction over health and human services matters, by January
21 15, 2026 and every 2 years thereafter, the total biennial cost to the State for all approved
22 services under the MaineCare program and state-funded programs provided by essential
23 support workers as defined in Title 22, section 7401, subsection 3. The report must include
24 the total projected cost if all such approved services were provided to the individuals who
25 qualify for the services and forecast anticipated costs in the future with projected
26 demographic changes.

27 **Sec. 4. 22 MRSA §7402**, as enacted by PL 2021, c. 398, Pt. AAAA, §1, is amended
28 to read:

29 **§7402. Essential support worker reimbursement**

30 Services provided by essential support workers that are reimbursed by the department
31 under the MaineCare program or another state-funded program must include in the
32 reimbursement rate the following:

33 **1. At least 125% 140% of the minimum wage.** An amount equal to at least 125%
34 140% of the minimum wage established in Title 26, section 664, subsection 1 for the labor
35 portion of the reimbursement rate. An increase to the minimum wage must be applied to
36 the reimbursement rate at within 6 months of the time the increase takes place; and

37 **2. Taxes and benefits.** An amount necessary to reimburse the provider for taxes and
38 benefits paid or costs incurred by the provider that are directly related to the reimbursed
39 wage increase in subsection 1. This amount must be adjusted whenever an increase to the
40 minimum wage is applied to the reimbursement rate under subsection 1.

41 **3. Effective date.** ~~This section takes effect January 1, 2022.~~

1 Essential support workers providing services reimbursed by the department under the
2 MaineCare program or another state-funded program must be paid at least 125% of the
3 minimum wage established in Title 26, section 664, subsection 1.

4 **Sec. 5. 26 MRSA §3802, sub-§2**, as enacted by PL 2021, c. 688, §2 and reallocated
5 by RR 2021, c. 2, Pt. A, §98, is amended to read:

6 **2. Membership.** The advisory committee consists of ~~14~~ 16 members, appointed as
7 follows:

8 A. One member of the Senate, appointed by the President of the Senate;

9 B. One member of the House of Representatives, appointed by the Speaker of the
10 House;

11 C. The Commissioner of Health and Human Services or the commissioner's designee;

12 D. The Commissioner of Labor or the commissioner's designee;

13 E. One member representing an organization providing services to persons with
14 intellectual disabilities and autism who is a member of a statewide association of
15 providers of services to persons with intellectual disabilities and autism, appointed by
16 the President of the Senate;

17 F. One member representing a facility-based long-term care provider who is a member
18 of a statewide association of facility-based long-term care providers, appointed by the
19 President of the Senate;

20 G. One member representing a service coordination agency for people receiving home-
21 based and community-based long-term care, appointed by the President of the Senate;

22 H. One member representing an organization providing statewide homemaker services
23 through a state-funded, independent, support service program, appointed by the
24 President of the Senate;

25 I. One member representing an institution of higher education engaged in workforce
26 development, appointed by the President of the Senate;

27 J. One member representing a career and technical education center or region,
28 appointed by the Speaker of the House;

29 K. One member representing an organization promoting independent living for
30 persons with disabilities, appointed by the Speaker of the House;

31 L. One member who is an essential support worker, appointed by the Speaker of the
32 House;

33 M. One member representing a statewide advocacy association that broadly advocates
34 for people who are entitled to receive essential support worker services, appointed by
35 the Speaker of the House; ~~and~~

36 N. One member representing an organization providing services to persons with
37 behavioral health challenges who is a member of a statewide association of providers
38 of services to persons with behavioral health challenges, appointed by the Speaker of
39 the House;

40 O. One member representing an organization providing personal care services in a
41 home setting, appointed by the Speaker of the House; and

1 P. One member representing the long-term care ombudsman program established
2 under Title 22, section 5106, subsection 11-C and Title 22, section 5107-A.

3 **Sec. 6. Biennial funding report.** The report required by the Maine Revised
4 Statutes, Title 5, section 282, subsection 12 must include services provided under the
5 MaineCare program or state-funded programs in the Department of Health and Human
6 Services rule Chapter 101: MaineCare Benefits Manual, Chapter II, Sections 12, 13, 17,
7 18, 19, 20, 21, 23, 28, 29, 50, 65, 67, 92, 96 and 97 and the Department of Health and
8 Human Services, Office of Aging and Disability Services rule Chapter 5: Office of Aging
9 and Disability Services Policy Manual, Sections 63 and 69.

10 **Sec. 7. Maine Health Data Organization data inventory development.** The
11 Maine Health Data Organization established in the Maine Revised Statutes, Title 22,
12 chapter 1683, referred to in this section as "the organization," shall consult with the
13 Essential Support Workforce Advisory Committee established in Title 26, section 3802 and
14 the Department of Health and Human Services to develop a methodology for establishing
15 a baseline report on the care gap for MaineCare and state-funded services. The
16 organization shall identify the currently available data sources and the data gaps that are
17 barriers to creating a uniform data collection and reporting system along with options for
18 methods to gather the missing data and the associated costs. For the purposes of this
19 section, "care gap" is defined as the difference between the number of individuals who are
20 approved for services under the MaineCare program or state funded programs in the
21 department's rule Chapter 101: MaineCare Benefits Manual, Chapter II, Sections 12, 13,
22 17, 18, 19, 20, 21, 23, 28, 29, 50, 65, 67, 92, 96 and 97 and the department's Office of
23 Aging and Disability Services rule Chapter 5: Office of Aging and Disability Services
24 Policy Manual, Sections 63 and 69 but who are not receiving care because of the State's
25 direct care workforce shortage. No later than January 15, 2026, the organization shall
26 submit a report to the joint standing committee of the Legislature having jurisdiction over
27 health and human services matters with its findings and recommendations relating to
28 available data sources and potential solutions for existing data gaps along with associated
29 costs to create a report that would establish a baseline care gap that could be used for
30 ongoing data collection, tracking and reporting. The joint standing committee of the
31 Legislature having jurisdiction over health and human services matters is authorized to
32 report out legislation relating to the report to the Second Regular Session of the 132nd
33 Legislature.

34 **Sec. 8. Innovations in Care and Support Technology Plan.** The Department
35 of Health and Human Services shall convene a stakeholder group to develop the
36 Innovations in Care and Support Technology Plan, referred to in this section as "the plan,"
37 no later than October 15, 2026. The plan must be developed to advance the use of
38 technology to reduce the number of unstaffed essential support worker hours due to staffing
39 shortages. The department shall identify a current staff person within the department as
40 the lead for the stakeholder group.

41 **1. Membership.** The stakeholder group must include, but is not limited to, the
42 following:

43 A. Members of the Essential Support Workforce Advisory Committee established in
44 the Maine Revised Statutes, Title 26, section 3802;

45 B. Representatives from provider agencies;

- 1 C. Family caregivers;
- 2 D. Clients receiving essential support worker services funded by the MaineCare
- 3 program or other state-funded programs;
- 4 E. Representatives with expertise in digital health and assistive technology; and
- 5 F. Representatives of the department within the Office of Aging and Disability
- 6 Services, the Office of MaineCare Services and the Office of Behavioral Health.

7 **2. Plan requirements.** The plan must include the following:

- 8 A. An inventory of current available and effective technologies, the results of Maine's
- 9 innovation grant projects, promising initiatives being tested and implemented in other
- 10 states and a review of available federal and private resources and policies;
- 11 B. The development of a set of empirical and achievable goals to promote the use of
- 12 supportive technologies to assist the existing essential support worker workforce, to expand
- 13 assistive technology and to manage the health and well-being of individuals who are not
- 14 receiving all the hours of assistance for which they are approved;
- 15 C. An implementation map with a timeline and milestones; and
- 16 D. Identification of any necessary legislation, rulemaking or funding for the plan.

17 **3. Report.** The Department of Health and Human Services shall submit a copy of the

18 plan to the joint standing committee of the Legislature having jurisdiction over health and

19 human services matters.

20 **Sec. 9. Credentialing and training redesign.** The Department of Health and

21 Human Services shall create a stakeholder group to assist the department in developing a

22 5-year plan, referred to in this section as "the plan," to expand its worker portability and

23 advancement initiative. The purpose of the plan is to establish a standardized curricula and

24 training program for all essential support workers as defined in the Maine Revised Statutes,

25 Title 22, section 7401, subsection 3, including college credit courses, stackable credentials

26 and alignment with certifications and MaineCare reimbursement rates in a manner that

27 builds on the department's worker portability and advancement initiative. The plan must

28 also include a structure for ongoing evaluation and improvement of established curricula

29 and training programs.

30 **1. Membership.** The stakeholder group must include, but is not limited to:

- 31 A. Representatives from the Office of Aging and Disability Services, the Office of
- 32 MaineCare Services and the Division of Licensing and Certification;
- 33 B. A representative from the State Board of Nursing;
- 34 C. A representative from the Department of Labor;
- 35 D. Representatives from institutions of higher education including the University of
- 36 New England, College of Osteopathic Medicine, AgingME Geriatrics Workforce
- 37 Enhancement Program, 2nd round; the University of Southern Maine, Muskie School
- 38 of Public Service; and the Maine Community College System, Harold Alfond Center
- 39 for the Advancement of Maine's Workforce;

1 E. Members of Maine's Essential Care and Support Workforce Partnership who
2 represent or are affiliated with employers of essential support workers as defined in
3 Title 22, section 7401, subsection 3;

4 F. Members of the Direct Care and Support Professional Advisory Council, within the
5 long-term care ombudsman program under Title 22, section 5107-A; and

6 G. Clients, or guardians or family members of clients, receiving essential support
7 worker services funded by the MaineCare program or state-funded programs.

8 **2. Plan requirements.** The plan must include:

9 A. The development of a set of empirical and achievable steps to implement the plan;

10 B. An inventory of current and planned curricula and training initiatives targeting
11 essential support workers;

12 C. An implementation map with a timeline and milestones; and

13 D. Identification of any necessary legislation, rulemaking and funding required to
14 implement the plan.

15 **3. Report.** No later than October 15, 2026, the department shall submit a report with
16 the plan to the joint standing committee of the Legislature having jurisdiction over health
17 and human services matters and the Essential Support Workforce Advisory Committee
18 established in Title 26, section 3802. The joint standing committee of the Legislature
19 having jurisdiction over health and human services matters is authorized to report out
20 legislation to the 133rd Legislature in 2027.

21 **Sec. 10. Effective date.** That section of this Act that amends the Maine Revised
22 Statutes, Title 22, section 7402 takes effect January 1, 2026.

23 SUMMARY

24 This bill increases the rate for the labor portion of reimbursement for services provided
25 by essential support workers from 125% of the minimum wage to 140%. This requirement
26 is effective January 1, 2026.

27 The bill requires that essential support workers whose services are reimbursed under
28 the MaineCare program or a state-funded program must be paid no less than 125% of the
29 minimum wage.

30 The bill requires the Maine Health Data Organization, in consultation with the
31 Essential Support Workforce Advisory Committee and the Department of Health and
32 Human Services, to develop a methodology for establishing a baseline report in order to be
33 able to examine the care gap in essential support worker services paid by the MaineCare
34 program or a similar state-funded program. The care gap is defined as the difference
35 between approved services and the hours of services actually provided.

36 The bill requires the Department of Administrative and Financial Services to provide
37 a biennial report to the joint standing committee of the Legislature having jurisdiction over
38 health and human services matters that estimates the actual cost to the State of providing
39 all long-term care services and forecasts costs in the future.

1 The bill changes the membership of the Essential Support Workforce Advisory
2 Committee to include a representative of the long-term care ombudsman program and a
3 representative of an organization that provides personal care services in the home.

4 The bill requires the Department of Health and Human Services to convene a
5 stakeholder group to develop the Innovations in Care and Support Technology Plan to be
6 submitted by October 15, 2026. The purpose of the plan is to advance the use of technology
7 to reduce the number of approved but unstaffed essential support worker hours.

8 The bill requires the Department of Health and Human Services to create a stakeholder
9 group to assist the department in developing a 5-year plan to expand the department's
10 worker portability and advancement initiative to establish a standardized curriculum and
11 training program for essential support workers.