

Nathan Brown
North Berwick
LD 451

My name is Nathan Brown, and from 1977-2014 my family owned and operated Nursing Facilities in Patten, Milbridge, Belfast and Lubec, Maine.

Two of those facilities—the most rural—in Patten and Lubec are now out of business.

My father Larry sat on the Appropriations and HHS Committees in Augusta—among other ones, and stole a closely contested “Sweetheart of the Senate” award from Senator Baldacci’s older brother many moons ago.

I appreciate the data-gathering proposal presented by Senator Baldacci in LD451, as well as the increased license fees.

I understand gathering information is necessary to make proper decisions.

I don’t mean to insult—but LD451 is entirely toothless in its nature.

No problems will be solved—only confirmed months after the opportunity to correct has passed.

By the time this proposal (if passed) reveals the extent of the damage Staffing Agencies have caused to the entire system in the past two years—more facilities will have folded.

I have been absent Long Term Care since 12/31/2019, so when I arrived in North Berwick Maine March 6th I was shocked to find how critical our “Nursing Staffing Shortage” is:

Not from a lack of resources or available staff—the care is beyond adequate—it’s admirable. The concern is that rather than inherit a staff comprised of staff members—I find that over 50% of the Nursing Staff here are Agency Staff.

25 contracted Staff members to provide the necessary care for Residents.

Of those 25—five are from out of State. 80% of our contracted staff are from Maine. 3 from Washington County.

Great people—Maine people--the kind you’d love to have permanently.

Lured from the typical roles by wages far in excess of what a Hospital, Home Health Agency or Nursing Home could bear.

About 250% higher than the prevailing wages. Plus better health insurance, meal stipends, housing stipends...

Like putting LeBron James out against a bunch of 3rd graders. Apples and Oranges.

A wage and benefit package that are impossible to compete with when you are paid the way State and Federal government pays people.

They charge based on what the market will bear—leaving the health care providers of the State bankrupting themselves vying for coverage as a Mercenary Army delivers for the highest bidder.

Action really needs to be taken now—not investigation.

11/50 States are enacting limits on Nursing Agency charges right now. Doing what they can to fix it. Right Now.

Save this system before it crumbles under this weight.

Please amend LD 451 to cap agency charges at 133-150% of cost reported costs from Nursing Facilities, Residential Cares, Hospitals, HHA’s—use data you have.

I’m all for a free market—but risking the public health system is not the place for it.

Thanks for your time and attention.

Nathan Brown, Administrator