



**Written Testimony of Jena Jones on Behalf of
The Maine Council on Aging
To Joint Standing Committee on Labor and Housing**

**In Favor of LD 1964 – An Act to Implement the
Recommendations of the Commission to Develop a Paid Family
and Medical Leave Benefits Program**

Testimony Provided on May 25, 2023

Good afternoon, Senator Tipping, Representative Roeder and members of the Joint Standing Committee on Labor and Housing:

My name is Jena Jones, and I am the Director of Policy and Advocacy at the Maine Council on Aging (MCOA). The MCOA is a broad, multidisciplinary network of more than 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 writing in support of LD 1964.

The benefits and supports offered in a Paid Family & Medical Leave program are good for working family caregivers who provide care to older family members, for older people, and for direct care and support professionals who often earn low wages and have no paid time off to handle family emergencies. It enables everyone who is working, including older adults, to take care of themselves and their families without the stress and worry of losing wages or a job.

Caring for a loved one can be challenging, particularly when you're working full-time. A family caregiver may need to take time off from work to take a parent to a medical appointment or to stay at home when a homecare worker isn't available that day. The same caregiver may have to take several weeks off if a loved one falls and has a serious injury that requires in-home rehab and care. From a public policy standpoint, we want family members to step up and provide this informal care, but we never want that to be at a cost to their job.

This is especially true as the informal family caregiver burden is not equally shared. Women are almost 3 times more likely to be impacted by family caregiving obligations than men. A recent Maine report finds that 3 in every 5 caregivers are women, and that 38% of caregivers experience a negative financial impact because of the caregiving.¹ Specifically, if a family caregiver is forced to leave the workforce, she no longer pays into social security nor a retirement savings account. She's likely to be challenged to re-enter the workforce, and may not be able to have the same earnings over her lifetime if she was absent for several years.

¹ 2021. Snow, Gattine, MacKinnon. The Economic Security of Older Women in Maine.

Ultimately, this impacts the financial security of women later in life, as they earn less social security and have fewer retirement benefits.

Supporting family caregivers is one of our top priorities and with good reason. Informal family caregivers are the backbone of our long-term supports and services system – without them, our system of caring for older adults would collapse. It's estimated that Maine would have to spend \$2.8 billion annually to provide the same level of care. The care informal caregivers provide reduces needed home care hours, keeps people healthy and out of hospitals, and delays entry into assisted living and nursing home care. This remarkable collective contribution is fueled by our shared value that we take care of our own.

We want to encourage family members to take responsibility for caring for older relatives who can no longer live independently. We also want to make sure that Maine's working caregivers remain active in our shrinking workforce. Workers need to know that they can take the time they need to support a loved one with a serious health condition without jeopardizing their jobs or plunging themselves into financial insecurity.

We also support LD 1964 because our professional caregiver workforce is woefully insufficient to meet the current demand for care. Thousands of older people who are entitled to care through state and federally funded programs are not getting care because of this workforce shortage. We cannot afford for these workers to leave the workforce because they cannot get paid time off to care for themselves or their family members. Paid family and medical leave can help these critical workers stay in the workforce, providing essential care to those who need it.

While we fully support this bill, we urge an amendment. As mentioned above, we have a severe and pervasive direct care worker shortage in Maine causing tens of thousands of older people, people with disabilities, including intellectual disabilities, and people with behavioral health challenges go without care and support every single day. The workforce shortage is partially due to the undervaluing of this workforce over many decades. We live in a market-driven economy. When government pays less than market rates for services, this puts businesses that rely on government contracts at a competitive disadvantage. Currently, care providers are serving all of the people they can with the funding being provided. If this bill passes and MaineCare rates are not increased to compensate providers for the employer premium they will have to pay, they will have to reduce pay to workers, and the workforce will continue to shrink, not grow.

We urge an amendment to amend Sec. 3. 22 MRS § 7402(2) to require that, as of July 1, 2025, the reimbursement rate must also include an amount necessary to reimburse the provider for 50 percent of the total premium contribution as required in the Paid Family and Medical Leave Program. Without this language, much of the good this bill attempts to do will cause actual harm to an entire sector of providers.

With the amendments we suggest, we urge you to vote in favor of LD 1964. Thank you.