



**LEGAL SERVICES  
FOR MAINE ELDERS**

LD 210 – An Act Making Unified Appropriations and Allocations from the General Fund and Other Funds for the Expenditures of State Government and Changing Certain Provisions of the Law Necessary to the Proper Operations of State Government for the Fiscal Years Ending June 30, 2025, June 30, 2026 and June 30, 2027

Various Provisions Within Health and Human Services

Testimony of John Brautigam, Esq. for Legal Services for Maine Elders  
Joint Standing Committee on Appropriations and Financial Affairs

February 14, 2025

Good afternoon, Senator Rotundo, Representative Gattine, and members of the Joint Standing Committee on Appropriations and Financial Affairs, Senator Ingwersen and Representative Meyer and members of the Joint Standing Committee on Health and Human Services:

My name is John Brautigam, and I am here today on behalf of Legal Services for Maine Elders. LSE provides free legal help for Mainers aged 60 and older when their basic human needs are at stake.

This testimony combines comments on items scheduled on various days of the AFA public hearing agenda.

We are grateful for the governor's support for a variety of programs that provide much needed assistance and relief for Mainers on a fixed income, including thousands who are clients of LSE or in the same demographic.

However, older Mainers continue to struggle with a variety of challenges. We see continued evictions and folks having great difficulty finding suitable housing. We see our neighbors and family members struggling with the consequences of fraud and financial abuse. We see gaps in access to health care and prescription drug coverage. And we see many older folks simply living on the margins of poverty. We are worried about the potential impact of federal budgetary and policy decisions in the year ahead.

With this context, any rollback in existing programs will have real world consequences in the lives of our fellow Mainers. And although older Mainers are a strong and resilient

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bunch, there is just so much they can do to stretch their household budget and make ends meet.

All of the programs and funding priorities in Maine law are only as good as the quality of their implementation in the real world. Without faithful application of the law, every word in the budget and in Maine statute is just black letters on a page. In many real world cases, the tangible impact of your votes in this room depends on the results of further actions and decisions that occur after you adjourn – administrative prioritization, rulemaking, interpretive choices, human behavioral reaction, and often litigation and judicial decisions. Mainers on the margin can't eat lines in the budget, and policy pronouncements don't forestall evictions. The end of your work isn't the end of the process.

So, this is my little reminder of the importance of the work of Legal Services for Maine Elders and many other organizations for each and every item you hear about today. After you all go home, it is our task to ensure that legislative determinations hold up to the pressures of the real world. It is our privilege to serve – in a way – as your partners in that process, as an essential bridge between the hard policy work in this building, and the unyielding realities of the real world outside. And we can only do as much as our resources allow.

With that, I will submit my written testimony for your consideration. Thank you.

### **MaineCare Funding (A-353 and other lines)**

LSE strongly supports the budget lines to fund MaineCare including payments to providers. These programs provide essential healthcare coverage to many low-income individuals, including children, seniors, and people with disabilities. MaineCare reduces health disparities by ensuring access to preventive care, long-term services, and critical treatments that improve quality of life. Additionally, MaineCare strengthens local economies by supporting hospitals, clinics, and healthcare jobs, especially in underserved communities. Most of LSE's clients benefit from MaineCare.

We are mindful that MaineCare funding at the federal level may be entering a period of uncertainty. It is therefore of the utmost importance that Maine continue to invest in these proven programs. We commend the Department of Health and Human Services for their ongoing efforts to squeeze every possible benefit out of this combined state-federal program on behalf of Maine people and communities.

### **Maine Rx (A-347)**

We support the Maine Rx Plus program. Though modest in size, it has proven a useful means of supplementing other efforts to ensure that Mainers of all ages can access prescription drugs at reduced cost. The budget line is the administrative cost for

administering a private rebate-driven discount available to many people who are not income-qualified for other public programs.

### **Low Cost Drugs for the Elderly and Disabled (DEL) (A-339)**

The Low Cost Drugs for the Elderly and Disabled (DEL) program assists adults 62 or older or younger disabled adults with paying for prescription drugs. The benefit is limited to those at or less than 185% of the federal poverty level, though eligibility is expanded for anyone who spends 40% of income on prescription drugs. The DEL program works hand-in-hand with the Medicare Savings Program to squeeze every possible benefit out of the combined state and federal funds available, helping with co-pays, deductibles, premiums and co-insurance for Medicare health insurance benefits. This combination of assistance has allowed a significant number of Maine's older residents to receive the medical care and treatment necessary to maintain their best physical and mental health. We appreciate that their funding continues in the current budget.

### **Office of Aging and Disability Services (A-337, A-372)**

We also wish to lend our support in general to those line items supporting the Department of Health and Human Services Office of Aging and Disability Services. We work with OADS frequently and interact with a variety of their programs, especially those supporting long term care and adult protective services. Initiatives put forward by OADS are generally well founded and necessary. This work is critically important to the population we serve.

### **Rate Reform for Nursing Facilities (A-366)**

Care and services funded by scarce public dollars should always be informed by rational, data-driven program design. Unfortunately, we usually see a significant time lag between the emergency of a consensus on best practices, and their actual implementation. Too often, funding decisions are determined by less rational factors. Thoughtful approaches to funding and reimbursement can be used to minimize the time lag and promote efficient, effective, and humane care.

We are encouraged to see progress in the effort to reform nursing home compensation so that it incentivizes practices that align with the appropriate goals of person-centered care. Following a thorough stakeholder process, the budget now includes approximately \$10 million in state and federal funding to reward facilities that focus on proven approaches such as comprehensive assessments, non-pharmacological interventions, staff training and support, family engagement, and environmental modifications. We support rate reform including the funding provided, and hope that more can be done in upcoming budget cycles.

In addition, LSE supports all parts of the long term care system including not just nursing facilities, but funding for residential care and assisted housing options that ensure the most appropriate, humane and supportive care for those who make these facilities their home.

### **Cost of Living Adjustment for Direct Care Workers (COLA) (Language Part UU)**

You have heard a great deal of testimony on the importance of the COLA and of the legitimate expectations of everyone involved that the COLA would be implemented as required by law. We join that testimony and share our concern about the impact on those most vulnerable if the COLA is not restored. We emphasize that direct care workers bring a double benefit. Their care allows people to remain in their homes, saving the cost of nursing care or admission to other types of facilities. Their care also allows family members to return to the workforce where they contribute to the economy and earn a living, paying taxes and contributing to their community. We ask that you reconsider Part UU and restore the COLA approved last session.

### **Home Based Care**

LSE strongly supports each item in the DHHS budget that maximizes the opportunities for home-based care. Funding for home-based care is vital to help individuals receive necessary medical and personal support in the comfort and familiar setting of their homes, promoting independence and dignity. It also reduces healthcare costs by preventing unnecessary hospitalizations and nursing home placements. Our investment in home based care is a small price to pay for the benefits in healthy aging, autonomy, and avoiding unnecessary relocation to a group home setting. In addition, as others have pointed out, home care allows thousands of Mainers to return to the workforce, contributing to the Maine economy while their loved one receives appropriate care and support in the home.

### **General Assistance**

The Committee should understand that a 90-day cap on General Assistance will have consequences for some of the most destitute fellow members of our communities. Given the unrelenting housing crisis, there will inevitably be many who simply cannot identify a housing option within their means as quickly as we might hope. Whether the recipient is struggling with property taxes, foreclosure, or eviction – GA can be a temporary godsend. We ask the Committee to reconsider the 90-day cap on GA.

### **Fund for a Healthy Maine**

The Fund for a Healthy Maine was designed to ensure that receipts from the tobacco settlement were dedicated to public health purposes and not used to supplant general fund monies. Tobacco settlement revenues have been decreasing, causing concern for the

sustainability of programs that are funded through FHM. In addition, FHM has not always been protected from fiscal pressures seeking to tap these resources for other purposes. We hope to see FHM sustained so that this resource can be directed to do the most good, including supporting health care access and prescription drug benefit programs.

### **Meals on Wheels**

Meals on Wheels is a very helpful part of Maine's overall effort to ensure that seniors and individuals with disabilities receive nutritious meals, helping them maintain their health and independence. The program also provides regular safety checks and social interaction, reducing isolation and improving overall well-being. Investment in Meals on Wheels also helps to lower healthcare costs by preventing malnutrition, hospitalizations, and premature nursing home placements. Unfortunately, funds are limited, and Meals on Wheels has long waiting lists. We appreciate any resources that can be dedicated to this very positive program

### **Opposition to SNAP and TANF Cuts (Language Part VV)**

Maine's existing hardship exception allows certain people to obtain SNAP and TANF benefits despite facing technically disqualifying factors. The proposed budget removes those exceptions, thereby curtailing access to SNAP and TANF benefits. We encourage you to restore the exception so that beneficiaries – many of whom are facing extremely difficult circumstances – may receive this support.

### **Maine Service Fellows Program (Language page 27)**

We appreciate the creation of the Maine Service Fellows Program and hope that it is a success. Many young Mainers may find this a rewarding entry into careers where they can find professional satisfaction while working with other members of their community who require support. We hope that this will grow into a program that nurtures inter-generational arrangements that will enrich not only this young cohort, but older Mainers such as LSE clients and their families.