

Testimony of Coralie Giles, RN
President, Maine State Nurses Association
Vice-President, National Nurses United

**IN SUPPORT OF LD 575 and OPPOSITION TO LD 406, 539, 1273, 1712, 1333, 1249, 1400, 952,
1169, 1307, 1712, 1221**

Before the Joint Standing Committee on Labor
Hearing: April 23, 2025 at 1:00 p.m.

Dear Chair Tipping, Chair Roeder, and distinguished members of the Committee on Labor,

On behalf of more than 4,000 registered nurses and health care professionals providing patient care in our state, the **Maine State Nurses Association/National Nurses Organizing Committee/National Nurses United (MSNA) urges the Committee to reject attempts to repeal Maine's Paid Family Medical Leave (PFML) program, create harmful carve-outs, or lower premiums and penalties for employers. We testify in opposition to LDs 406, 539, 1273, 1712, 1333, 1249, 1400, 952, 1169, 1307, 1712, 1221. We testify in support of LD 575 to remove the illogical employer hardship exemption.**

Paid family and medical leave are essential for all workers. No one should have to lose their job or financial stability to recover from illness or violence, bond with a child, or care for an ill family member. As members of a female-dominated caregiving profession, nurses know how important paid leave is for women's ability to stay in the workforce. Paid leave benefits workers, their family members, and society as a whole. Maine's PFML program was carefully structured to be functional and financially sustainable. We urge you to reject all bills undermining the integrity of that system through carve-outs, delays, and solvency risks.

To ensure all workers can afford to use the paid leave they are entitled to, we urge you to reject LD 1712's reduction of wage replacement for low- and moderate-income Mainers. A 65% wage replacement rate for low- and moderate-income Mainers is not sufficient to allow them to use the program. As explained further in testimony from the Maine AFL-CIO, even the current law's threshold is not sufficient for all Mainers to take the leave they are entitled to. LD 1712's wage replacement change would mean only high-income earners could realistically take the leave that all workers are entitled to.

We support LD 575 to remove the hardship exception and oppose LD 1712's expansion of the exception. Allowing broad determinations of undue hardship by an employer stops employees from using the leave they need and pay premiums for. Employers should not get unreviewable veto power over employee use of paid family and medical leave. While the hardship exemption is only supposed to apply to

leave scheduling absent an emergency, it is hard to imagine the qualifying reason for leave that is not urgent for the worker. Forcing workers, particularly women, out of the workforce because they cannot keep their jobs and perform their caregiving responsibilities, will cause more hardship than inconvenient leave.

LD 1712's conception of hardship is incredibly expansive and explicitly not reviewable by the department or subject to appeal. An employer can deny leave under the guise of scheduling to prevent undue hardship at any time if they have fewer than 15 employees, for all summer if they claim a labor shortage, for the entirety of a 5-month busy period, and when other employees are on leave, plus additional conditions entirely determined by the employer. In our profession, if nurses are not allowed to take leave any time their employers claim that there is a labor shortage, they will never be allowed leave. The nursing staffing crisis is caused by employers creating untenable working conditions for nurses.¹ Letting those same employers turn around and deny leave because workers leave the profession due to bad conditions will just make the problem worse.

As a labor union, we also object to LD 1712's provision in Section 7 attacking collective bargaining rights. Employers can deduct up to 50% of premiums under the program from employee wages or can pay up to 100% of the employee's premium amount. The percentage of premiums for insurance programs that is deducted from employee wages or paid by the employer is a standard and important subject of collective bargaining that impacts an employee's take-home wages. Statutorily removing collective bargaining subjects may run afoul of federal law and is an attack on the right for workers to collectively bargain with employers for a fair deal.

We strongly urge you to reject all bills undermining or eliminating Maine's Paid Family and Medical Leave program, including LD 406, 539, 1273, 1712, 1333, 1249, 1400, 952, 1169, 1307, 1712, 1221, and to support LD 575.

Sincerely,



Coralie (Cokie) Giles, RN
President, Maine State Nurses Association
Vice-President, National Nurses United

¹ See National Nurses United, *Protecting Our Front Line Ending the Shortage of Good Nursing Jobs and the Industry-created Unsafe Staffing Crisis* (Dec 2021), https://www.nationalnursesunited.org/sites/default/files/nnu/documents/1121_StaffingCrisis_ProtectingOurFrontLine_Report_FINAL.pdf.