

**Testimony in Support of LD 1932 “An Act to Support Essential Support Workers and Enhance Workforce Development”**

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Good afternoon Senator Ingwersen, Representative Meyer, and members of the Joint Standing Committee on Health and Human Services. My name is James Myall and I’m a policy analyst at the Maine Center for Economic Policy. I’m testifying today in support of LD 1932, “An Act to Support Essential Support Workers and Enhance Workforce Development” because MECEP knows a strong care workforce is critical to Maine’s economic future.

LD 1932 represents a long overdue investment in Maine’s direct care workers. These Mainers underpin much of the wider economy. By providing essential care services to older Mainers and Mainers with disabilities they not only allow the people they care for to live lives with dignity; they also allow tens of thousands of other Mainers the freedom to participate in the labor force. Through increasing wages and reimbursement rates, LD 1932 will help recruit and retain workers in this industry today. In establishing a requirement to estimate the size of the care gap and the necessary funding in future years, the bill will help us plan properly for tomorrow.

In recent years, MECEP has conducted research on Maine’s direct care workforce and our findings are echoed in this legislation:<sup>1</sup>

- We know that the new reimbursement rate of 140% of the state’s minimum wage is necessary to ensure that direct care jobs remain competitive with other service work. (MECEP would recommend tying this rate to the local minimum wage if it is higher, so that care workers in Portland are not at a disadvantage).
- The provisions to estimate and report out future care needs are critical. MECEP has estimated that there are tens of thousands of hours of unmet care needs requiring thousands more workers in this sector. But even these figures don’t fully capture the current situation as there are many more people not even on waitlists for care – and the need will continue to grow as Maine’s older population expands in coming years.

The status quo is unsustainable. In a state where there are more open jobs than unemployed workers, the lack of available care options means that 8,000 Mainers aren’t able to work due to care obligations for an older Mainer.<sup>2</sup> Even more are unable to work

because they're looking after someone else who needs care but can't find or afford it. This leads to \$1 billion in lost economic activity every year.<sup>3</sup>

At the same time that care is unattainable for many Mainers, the essential workers who provide it are underpaid. One in five direct care workers are need food assistance through the Supplemental Nutrition Assistance Program (SNAP) – more than three times the rate of other workers<sup>4</sup> and are twice as likely to be living in poverty than other Maine workers.<sup>5</sup> One third of home health aides suffer from food insecurity.<sup>6</sup>

I think it's worth remembering that the state is not meeting its current obligation to fund the labor portion of reimbursement rates for MaineCare at 125% of the statewide minimum wage. Even with the partial reversal of the Governor's cuts last year, the state is still tens of millions of dollars short of meeting its current obligations. LD 1932 will help the legislature understand the size of care needs, but future governors and legislatures will still need to act on the recommendations and provide necessary funding.<sup>7</sup>

Nonetheless, LD 1932 helps to address our current care shortage and gives us tools to plan for the future. It strengthens our workforce and the economy as a whole and I urge you to vote "ought to pass."

Thank you, I'll be happy to take any questions.

## Notes

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<sup>1</sup> Arthur Phillips, "Closing the Gap: Maine's Direct Care Shortage and Solutions to Fix It" *Maine Center for Economic Policy*, June 17, 2024. <https://www.mecap.org/jobs-and-income/closing-the-gap-maines-direct-care-shortage-and-solutions-to-fix-it/>

<sup>2</sup> MECEP calculation based on US Census Bureau, Household Pulse Survey data covering February 2022-February 2023.

<sup>3</sup> MECEP calculation based on 2022 employment and GDP levels. Assumes average lost GDP of \$129,000 for each of the 8,459 workers missing from the labor force due to care needs.

<sup>4</sup> Analysis of US Census Bureau, American Community Survey, 2020-2024 data via the Integrated Public Use Microdata System (IPUMS). 22.4% of employed home health aides, personal care aides and nursing assistants were in households receiving SNAP, compared to 6.6% of other employed Mainers

<sup>5</sup> Analysis of US Census Bureau, American Community Survey, 2020-2024 data via the Integrated Public Use Microdata System (IPUMS). 9.0% of employed home health aides, personal care aides and nursing assistants were living below the poverty level, compared to 4.0% of other employed Mainers.

<sup>6</sup> "Everyone at the Table: Maine Roadmap to End Hunger by 2030" p18.

<https://www.maine.gov/future/sites/maine.gov/future/files/2023-06/maines-roadmap-to-end-hunger.pdf>

<sup>7</sup> Arthur Phillips, "LD 1932: Maine direct care bill could raise pay, improve services." *Maine Center for Economic Policy*, Aug 20, 2025. <https://www.mecap.org/blog/ld-1932-maine-direct-care-bill-could-raise-pay-improve-services/>