

**Written Testimony of the
Acquired Brain Injury Advisory Council of Maine
February 14, 2025**

Neither for nor Against

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"

Good afternoon, Senator Rotundo, Senator Ingwersen, Representative Gattine, Representative Meyer, and esteemed members of both the Appropriations and Financial Affairs and Health and Human Services Committees:

On behalf of the Acquired Brain Injury Advisory Council (ABIAC), thank you for the opportunity to submit testimony regarding the biennial budget. Formed in 2002 to support a grant and later established in statute, the ABIAC has been in existence to provide recommendations to the Department of Health and Human Services and the Legislature for over 20 years.

Generally, we are in support of including brain injury services and funding in the biennial budget. We thank you for recognizing brain injury as an important health issue for Mainers. Approximately 20% of Mainers—that's 279,144 individuals¹—have experienced a traumatic brain injury, which is a significant portion of the population. This statistic does not include the anoxic and hypoxic injuries associated with drug overdoses, so the actual prevalence is likely much higher. Brain injury exists in every county across the state. Funding for brain injury care is vital to address this public health issue, and timely intervention and evidence-based treatment can have the benefit of preventing high-cost early entry into skilled nursing care or the criminal justice system.

Ensuring access to services and recognizing barriers to access, including workforce, has long been a published priority of the Council. Toward that end, the Council wishes to honor and acknowledge the past work of the Maine Legislature to establish annual COLAs and ensure that the labor component of MaineCare rates reached 125% of the minimum wage. These were essential steps in workforce stabilization and preventing additional group home closures during the 131st Legislature, and we applaud those earlier efforts.

Given that important infrastructure work, we are greatly concerned about omissions in the brain injury budget, and we ask for the Legislature's support in remedying the situation. First, the biennial budget

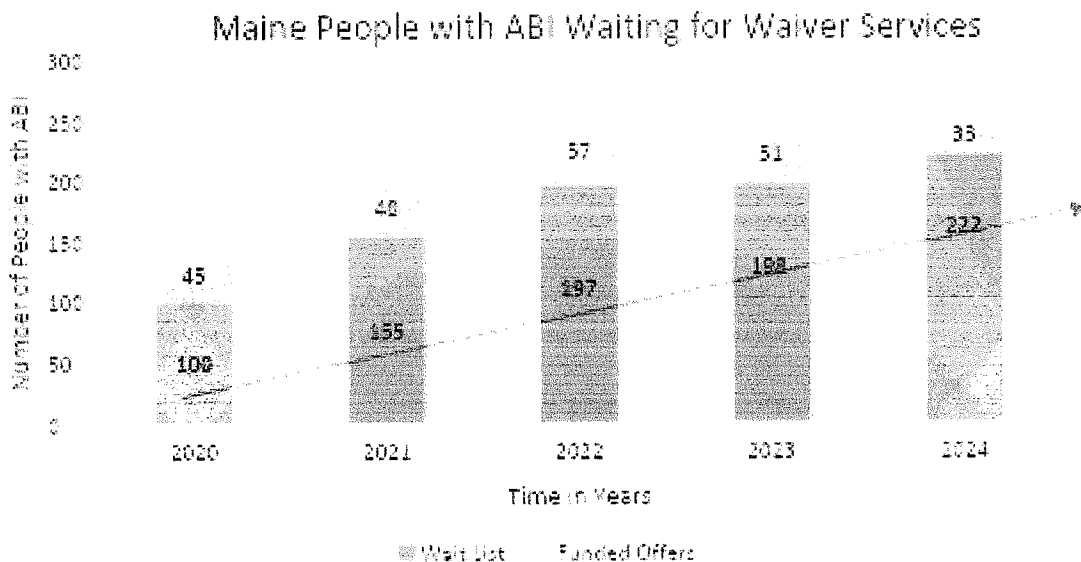
¹ US Census estimate July 1, 2023

does not include funding for annual cost of living adjustments or COLAs. These adjustments are absolutely critical to the stabilization of Maine’s direct care workforce. And two, there do not appear to be anticipated appropriations to account for the recent rate determination reviews for MaineCare Section 18, Home and Community Services for Adults with Brain Injury, and MaineCare 102, Rehabilitative Services.

Also of concern, the language in Part "UU" consolidates statutory language that relates to the adjustment of MaineCare reimbursement into the MaineCare rate reform statute under 22 M.R.S.A. 3173-J and stipulates that such adjustments are “**subject to available appropriations.**” Another two years without a rate adjustment or ensuring that direct care workers, care coordinators, and others have livable wages will have a detrimental impact on existing care and likely adversely affect provider capacity.

It is relevant to note here brain injury survivors and their families are the ones who will shoulder the burden of Maine’s dwindling workforce, a workforce that will be further depleted if there is no hope for wage adjustments in the next few years. The waitlist for people waiting for MaineCare Section 18 brain injury waiver services now exceeds the 217 people actually served by the waiver. There are 222 on the waitlist, plus another 33 people with funded offers who have not been able to secure community placement (December figures).

A person on the wait list will wait for services for an estimated 3.6 years. Statewide, care coordination is a service that needs investment to attend to Mainers with funded offers and ensure utilization of all waiver slots. For providers, the primary barrier to having the capacity necessary to support those unused waiver slots is the workforce. Competitive wages are essential to providers’ ability to hire and retain care coordinators and direct care workers to start working down the waitlist. Having predictable annual cost of living adjustments as well as rates that support the wages consistent with the market are critical to that endeavor.



The Council requests your support to restore and allocate the funding needed for annual COLAs for the fiscal years ending June 30, 2025, June 30, 2026, and June 30, 2027. We respectfully ask the Legislature to reject language changes that result in rate system reviews being variable and unpredictable. In

addition, we ask that the inclusion of funds for the rate reviews affecting brain injury and other sections of MaineCare be upheld according to the rate reform statute passed two years ago.

In short, we are asking the 132nd Legislature to prioritize workforce stabilization as a means to attending to Maine's most vulnerable citizens. Thank you for your time and consideration of our testimony. Please do not hesitate to contact us with questions.

Respectfully submitted,

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