
John Hale's statement on LD 327

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Statement of John Hale of North Monmouth on LD 327

To the Maine Legislature's Joint Committee on Health and Human Services

Greetings, Senate Chairman Ingersen, House Chairman Meyers and members of the Health and Human Services Committee.

My name is John Hale. From 1986 to 1997, I was State House bureau chief for the Bangor Daily News. It is good to be back at the State House, to see some old friends and see the many changes that have taken place.

Unfortunately, in retirement, I was hospitalized mostly at St. Mary's rehab center, D'Youville Pavilion in Lewiston for 11 weeks in 2018, the last year the Red Sox won the World Series. And I was hospitalized again last year for 5 weeks after having my left knee replaced, also at Central Maine Medical Center, after which I was housed at a rehab facility called Marshwood Rehabilitation Center in Lewiston. During these long hospital stays, I observed a major gap in Maine's postsurgical home health care for seniors and that is what this bill is intended correct.

One area that is completely lacking, but is very important is overnight care at home for seniors who live alone who return home after major surgeries, such as joint replacements which have become very common in Maine. MaineCare doesn't pay for this critical benefit for the most part so patients are expected to pay for a nighttime companion and caregiver out of their own pockets. The patient also is expected to find someone, a neighbor perhaps, who is willing to stay all night near the patient's sleeping area. I found it's very hard to find anybody who's willing to stay for even one night, much less the 2-3 weeks that we believe is necessary for a safe recovery.

Why is this nonexistent benefit so important? It's because the person returning home from the hospital is weak and disoriented and prone to nighttime falls that can seriously injure them or even end their life. According to recent research done for the Maine DHHS, Maine is now the No. 1 "grayest" state in the nation, with the highest percentage of people age 65 and older. There are more than 300,000 seniors living in Maine and the study estimates that well over 100,000 of them live alone. Just think of an older couple you may know in their 80s or 90s who have been happily married for 60 years or more. They have a

full, happy life until one of them falls and dies. Then the other previously independent partner languishes and either dies or goes from living at home to living at an expensive nursing home.

Here are a few cases:

- A man I met at Marshwood, a Boston native who had seen Bobby Orr play hockey, was 94 years old and he had suffered broken ribs and a punctured lung from a bad fall. Only 6 days earlier, the man's wife who was 96 years old had fallen down, cracked her skull and died. They had been happily married for 67 years.
 - One of my best older friends was Don Tuttle of Augusta, a natural-born comedian and raconteur who lived well into his 90s. He had been a tail gunner on a B-24 bomber that flew missions from southern Italy, over the Austrian Alps and into Germany. On one of these missions, Don's plane was shot down behind enemy lines. He and some crewmates were rescued by British airmen who returned them to their American air base. Don refused to go into one of the regional Maine veterans' homes, choosing instead to live on his own at home. This worked for awhile, but after his wife died, he really went downhill and died.
 - The older you are in Maine, the greater the risk of injury from falling. The DHHS study tells us that an average of 136 seniors die from falls in Maine each year, but more than 17,000 older adults each year go to emergency rooms and hospitals after falling. The point of LD 327 is to provide a capable and attentive companion for the patient so that they don't fall, and they don't feel lonely.
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- I have had a number of falls that were either difficult or impossible to get up from without assistance. Fortunately, I began wearing a fall location monitor about a year ago and I have used that to alert EMTs to come get me off the floor a couple of time. This is what it sounds like (show monitor).
 - In 2018, after I came home from 11 weeks in the hospital and then was left alone for the night, I took a bad fall. I was sleeping on a single bed in the living room because my normal bedroom is up a steep flight of stairs that I knew I wasn't going to be able to tackle right away. Everything seemed cozy and safe. Home-health aides had set up an efficient little Potty toilet beside my bed. But when I woke up about midnight, I forgot about that. I was woozy and disoriented. I knew I was in my own home, which was better than being in the hospital, but everything seemed strange and it seemed like my living room was underwater. I sat up, stood up and pointed my feet toward the bathroom. I took one step and fell flat on my face. It took me an hour to get off the floor that time and a tremendous amount of energy.
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Everybody knows someone, a friend or relative, who has done well with a good life until an unattended fall ruins everything, they brake a hip or a pelvis and wind up dying in a nursing home or hospital, sometimes very quickly.

LD 327 would make homebound seniors' lives much happier by providing a friendly caregiver nearby who could watch a favorite TV show with the patient, serve a bedtime snack, listen to music or play a game and be ready to call for help if the patient needs medical attention. Please consider this bill seriously.

Percent age 65+

- 16.3 - 18.2
- 18.3 - 20.0
- 20.1 - 22.3
- 22.4 - 25.8

Highest: Lincoln (25.8%)
Lowest: Androscoggin (16.3%)

Mainers 65 or older say
their health is fair to poor.⁴

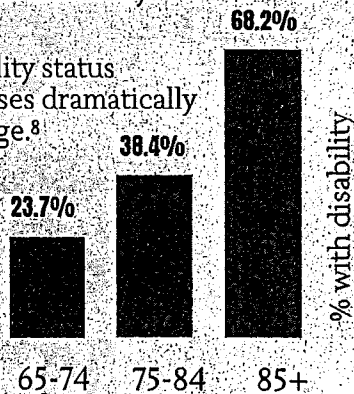
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Disability

1 in 3

adults age 65+ have at least one disability.⁸

Disability status increases dramatically with age.⁸



19% have an ambulatory difficulty.²

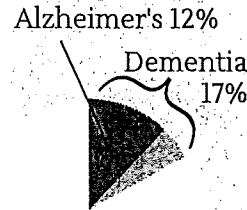


13% are deaf or have serious difficulty hearing.⁴

Cognitive and Mental Health

Dementia

An estimated 17% of Maine adults age 65+ have any dementia; 12% have Alzheimer's Disease.⁹



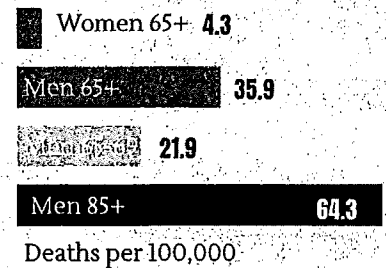
Oral Health

15.2% of Maine adults age 65+ have had all their teeth removed.¹¹

Maine ranks 31st among all 50 states in full teeth extractions. The best state (#1) is Hawaii with 5.6%.¹¹

Suicide Deaths

The rate of suicide is highest among men age 85 or older.¹⁰

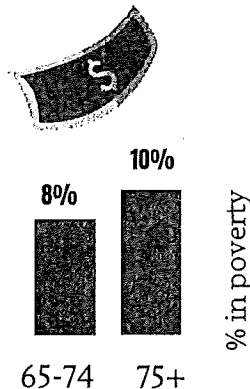


Maine adults 65+ face challenges getting needed services

Poverty and Income

Many older adults live on fixed incomes and struggle to pay for needed care, food, or transportation.²

The likelihood of living in poverty increases with age. Females age 65+ are more likely to live in poverty compared to males (11% vs 7%).²



Care Providers

Geriatricians specialize in care for the elderly. Based on Maine's population or older adults, only 41% of the need for geriatricians is currently met.¹¹

In the past five years, home health care workers increased 46% from 106 to 155 aids per 1,000 adults aged 75+.¹¹

1 in 4

Mainers are caregivers for friends or family.⁶ An estimated 80% of U.S. caregivers provide care to someone 50 years or older.¹³



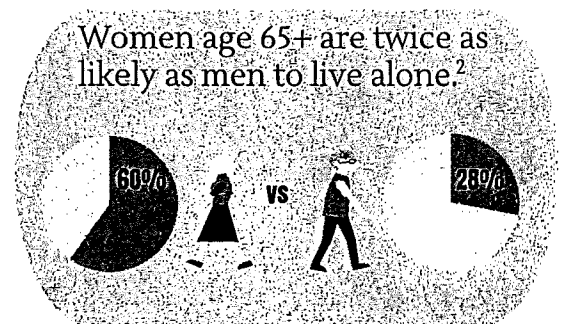
Vehicle Access and Living Alone

1 in 10 Mainers age 65+ live in a household without access to a vehicle.²



Older adults who own their own home, are 7X more likely to have access to a vehicle than those who rent.²

Women age 65+ are twice as likely as men to live alone.²



- Sources:
1. U.S. Census Bureau. 2017 American Community Survey 1-Year Estimates.
 2. U.S. Census Bureau. 2013-2017 American Community Survey 5-Year Estimates.
 3. Maine Department of Health and Human Services. Maine's State Plan on Aging, 2016-2020.
 4. Behavioral Risk Factor Surveillance System (BRFSS), 2016.
 5. Maine Center of Disease Control and Prevention, 2013-2014 Injury Databook.
 6. Behavioral Risk Factor Surveillance System (BRFSS), 2015.
 7. Centers for Disease Control and Prevention; National Center for Health Statistics. Underlying Cause of Death 2015-2017 on CDC WONDER Online Database, released December, 2018.
 8. U.S. Census Bureau. A Snapshot of the Fast-Growing U.S. Older Population.
 9. Maine Department of Health and Human Services. Dementia in Maine, 2013.
 10. Maine Center for Disease Control and Prevention. Lifespan Suicide and Self-Inflicted Injury Surveillance Databook, 2016.
 11. United Health Foundation. America's Health Rankings: Senior Report 2018.
 12. KFF.org. Dental Care Health Professional Shortage Areas (HPSAs).
 13. AARP Public Policy Institute. Caregiving in the U.S. 2015.

Icon Credits: Falling Person: Andrew Doane from the Noun Project; Dentures: Isabel Martínez Isabel from the Noun Project.

